DOCTOR'S CROSSING
CARPE DIEM PODCAST
BY HEATHER FORK, MD, MCC

TRANSCRIPT

EPISODE #256 - Behind the Scenes of Nonclinical Hiring

With guest Dr. Erik Lamberth

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EL (00:00.736)

They're really just trying to get to know you. A lot of what they're trying to figure out is can you play well in the sandbox with others? Who are you? Why do you want to make this switch? Have you thought through carefully what you're going to do?

HF (00:21.088)

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Hey there and welcome to the Doctor's Crossing Carpe Diem Podcast. I'm your host, Dr. Heather Fork, and you're listening to episode number 256. When you apply for a nonclinical job, it can feel like everyone else knows the rules, but no one has explained them to you. Should you apply directly, or do you really need an internal referral? How important is that first recruiter call anyway? And what are interviewers actually trying to assess during the more formal rounds?

And once you're in the process, when should you follow up? And when is it better to wait? Here to give us an insider's view is pediatrician Dr. Erik Lamberth. After eighteen years in clinical practice, academia, and research, Erik transitioned into the pharmaceutical industry where he worked in vaccine development, led major programs, participated in physician hiring, and mentored many doctors pursuing nonclinical careers.

Although Erik's experience is in pharma, much of what we'll discuss applies broadly across the nonclinical job market. Today, we'll walk through the hiring process from application to recruiter screening to the formal interview rounds and follow-up. We'll also look at what employers are really trying to understand about you beyond your credentials and how you can move through the process with more clarity and confidence. It is my true honor and pleasure to welcome Dr. Erik Lamberth to the podcast. Hello, Erik, and welcome.

EL (02:14.712)

Hi Heather, thank you so much for having me here today.

HF (02:17.866)

It is a pleasure and I have to put in another plug for LinkedIn and that's how I found you. I put a post on LinkedIn actually looking for physicians who had the kind of experience that you have being on the inside to help us on the podcast. And you were the first one who reached out. So thank you.

EL (02:38.525)

You're very welcome. And I'm so glad you reached out. I think this is gonna be a lot of fun today.

HF (02:43.476)

Absolutely. I'd love to begin with your story, Erik. Tell us a little bit about how you got into medicine and then where the path took you into pharma.

EL (02:54.584)

So as you mentioned, I'm a pediatrician by training. I actually never really thought I would go to medical school. I actually went to music school after college and realized that it was more an avocation for me than an occupation. And decided to go into

research. And while in research in graduate school, really ended up falling in love with clinical medicine.

And ended up pursuing a clinical career. I did a mix of academia, private practice, and was also an investigator for dozens and dozens of vaccine studies while I was in practice. And then, much to my surprise, I ended up pivoting to industry. I had a problem with a hip replacement, which made it really impractical for me to continue to practice, and ended up looking for a job in industry. And as it turns out, Pfizer remembered me from all the clinical trials that we had done and offered me a job working on their pneumococcal program. I spent the last nine years in their vaccine research and development group.

HF (04:09.08)

So you hadn't really intended to leave clinical practice, but this hip replacement led to you needing to do something other than clinical work?

EL (04:19.318)

Exactly. It was, as I said, very much a surprise for me. But also what I really found out once I realized I wasn't gonna continue to practice clinical medicine is that the skills I had obtained with the MD and in practice really were transferable to a variety of other areas and things actually worked out very well for me in industry.

HF (04:42.414)

Well, I'm glad to hear that. And I'm sorry about the hip replacement having some issues with it. But I'm glad you're here and I'm glad you're able to find something that really was a good fit for you, and as we're starting into this topic of applying and navigating this whole process, which can be very confusing because so many physicians tell me, I didn't even have to interview to get my clinical job or we just chatted and then I was hired and this is a completely different landscape. Do you have any way you'd like to frame up this process before we launch into the details, like how to think about it?

EL (05:24.738)

Yeah. So in my experience, the company is looking for physicians that are going to integrate well into the culture. So that's going to be a lot of what the interview process is about. So you may find yourself going through multiple interviews and multiple rounds of interviews as the company kind of looks and decides is this going to be a good fit for what they're looking for at that time. So don't be surprised if that ends up happening.

HF (05:53.816)

Right, 'cause we're often very much focused on, I don't know if I have the transferable skills. And they're often looking at, as you said before we recorded, is this person gonna play well in the sandbox?

EL (06:08.222)

Exactly, exactly, and you do have transferable skills. They may not be in the ways that you're thinking of right now, but they're incredibly important. And some of the roles actually require a physician who has practiced independently for a few years in order to even legally be able to do some of the jobs. So that's not the issue generally. It's more going into a more corporate culture and being able to make that transition, which we can talk about.

HF (06:40.568)

Perfect. Well, let's begin with a physician who has decided they know what kind of job they want to apply for. And again, yes, this could be pharma, but it could be a health insurance job, being a physician advisor, being a medical writer, all of these things really are applicable. When thinking about it, do they need to try to find an internal referral? Or can they apply just on a website and cross their fingers? What are the pros and cons of these approaches?

EL (07:09.112)

Right. So both ways can work. Although if it's possible to find somebody inside, I think it works better. So when I applied, I didn't have any internal contacts. I applied to

companies and a number of companies were interested and did get back to me. I do have one colleague of mine that we ended up hiring who I ran into at a conference.

And she mentioned to me, you know, I've been trying to apply to your company, but I haven't heard anything for six months. And I thought, wow, that's interesting. You have such incredible skills and you have a background that would be incredibly desirable. Why, why have we not done that? So I ended up putting her resume in front of people who can make the decision. And next thing you knew, there were several groups within the company who were very interested in talking to her and ultimately ended up hiring her. So sometimes the screening process can be imperfect. And sometimes you just need to be able to get your resume in front of someone, a real person who can go ahead and look at it and then make a decision. So if you have a contact, could be perhaps from where you went to medical school, residency, college, even these soft contacts can be incredibly valuable so that the hiring manager, a real person, actually sees your resume.

HF (08:39.475)

I agree a hundred percent with you. It can work both ways. I've seen that happen with all my clients. Absolutely. The internal referral does help, but it's not necessary for a lot of cases. Now, if someone is thinking, Well, how do I actually approach someone? Say for example, they're looking on LinkedIn, they find someone who works for the company that they are applying for, how do they logistically reach out? And is that putting that physician who's the employed physician in a bad position by asking?

EL (09:12.44)

Right. Yeah. I would just go ahead and reach out, mention the connection that you happen to have, perhaps it's somebody you already know. It could be an old friend from college from years or decades before. And you're actually not putting them in a bad position. It actually is beneficial for people at a company to recommend somebody. And sometimes they actually even get a referral bonus for these types of things. That's not uncommon. So asking for that is pretty common. It's the way things are done and it's okay. So don't feel shy about reaching out to these people.

HF (09:47.086)

That's right. And I'm so glad you said that because it can be a real win, a win win. I mean, sometimes it's a thousand dollars they get, sometimes it's ten thousand, but a lot of physicians will say it's not about the money. They say, We wanna get good people on our team, we want good people in our company and their company also appreciates them bringing good people to the table.

EL (10:07.626)

Exactly. Exactly. So it ends up being beneficial for everyone in multiple ways.

HF (10:14.646)

One important thing to talk about is timing, because if someone has already applied for the position, the internal person can't use their referral. You know, that's a good point to bring out.

EL (10:29.08)

Yeah. That's a great point. So if someone is gonna get a referral bonus, they need to be the first person who brings this individual forward. So for example, if I apply to a company and then reach out to you, Heather, who happens to work for that company and say, Can you refer me? You would not be able to get that bonus generally because I had already applied for the position. So reaching out earlier is good for the person who works for the company, but it's good for you too, because it gets your resume in front of somebody quickly.

HF (11:04.738)

Right, exactly. All right, so let's talk about a few things that help get your application noticed. Yes, someone can help put it in front of the nose of the hiring manager, but when they actually look at it, what are they looking for?

EL (11:20.536)

Well, they're gonna look for a few different things. They're gonna make sure that you have the qualifications that are required for the position. They're also gonna think about who they're looking for. Sometimes they might be looking for a physician who's been out of residency for a short period of time. I've seen instances where they're looking for individuals who've had long careers and have had a lot of experience working with and actually leading other physicians. So it's gonna depend a little bit on the company.

But I wouldn't shy away from applying even to some of these entry level positions at larger companies just because you've been out of residency, you know, twenty, twenty-five years. That's still pretty common for individuals to make that type of shift.

HF (12:09.496)

How important is it to have a resume versus a CV? And what's the difference? First let's talk about what is the difference between these two?

EL (12:18.996)

Often those words get used interchangeably. For industry, it's generally two pages. Sometimes you can go to three. One page is okay. When we think about our CV, oftentimes it's going to have everything that has been done, especially if we're in academia. You can have dozens or hundreds of publications. And I've seen CVs that are 140, 150 pages. I would not submit that because they're only going to look at the first one or two pages and then really not go beyond that. So a corporate type CV is going to be much shorter, much more succinct to the point. And frankly, the hiring manager is going to look to make sure you have the qualifications to talk to you. And they don't have time to read through 140 pages trying to search for those.

HF (13:08.662)

And then what does the resume do that's helpful for someone looking at it? How is it different from the CV?

EL (13:17.582)

The resume is really gonna hit the high points. In other words, what's your educational background? What did you train in? What's your specialty? What have you been doing since residency? What positions of leadership have you had? Do you have experience working with other individuals, highly accomplished professionals that may be physicians or other types of professionals? And do you have a track record of working together with them towards a common goal where you can go ahead and assume a leadership role?

HF (13:52.128)

And to just broaden this out to any nonclinical job, the resume is often customized to that particular job you're applying for. So say for example, it was a medical writing job and you had written some publications or done other types of writing, those would be highlighted on that resume, whereas they might not be if you're applying to say a health insurance job. So it gets customized with whatever experience is relevant for that job.

EL (14:22.19)

Exactly. I was looking primarily for vaccine R&D jobs. So therefore I highlighted experience I had as a site investigator and practicing pediatrician who administered vaccines.

HF (14:34.774)

Right, exactly. Because if they're gonna spend seven seconds, as they say, looking at your document, you want the most relevant things right there on that first or second page. All right, excellent. And then one thing to talk about for a minute here is the approach. Should you be one of these people who throw spaghetti? You know, where you just throw a bunch of applications out there, see what sticks, cross your fingers. Some people say they've sent out hundreds and hundreds, versus really looking at the job descriptions, being very strategic and maybe not applying to ones that could be a stretch.

EL (15:14.048)

I would look at the job descriptions and probably be more on the strategic side. Look at the qualifications. Okay. If they say they want five or ten years or fifteen years of experience, that's probably not going to be a good fit. And also if you're applying to ten jobs, twenty jobs at the same company, a wide number of them where you don't have the qualifications, that's not gonna work in your favor.

So you want to look and see what those different qualifications are and also spend some time learning what the different roles and possibilities are within the company so that you can say, This is something I think I may want to pursue versus another type of job. And that's where talking to your network or other people on LinkedIn can really be helpful.

HF (16:06.124)

Right, exactly. And I would say, if they're looking for one to three years pharma experience or whatever it is you're applying for, that's not a deal breaker. 'Cause a lot of physicians will think I need to actually meet the job requirements, but usually the job requirements are their wish list and you can actually have no experience even if it says one to three years and still be a candidate. That's what I've often seen.

EL (16:29.582)

Absolutely. Absolutely. On the flip side, if they want fifteen years of demonstrated experience and you have none, then that's probably not gonna be a successful route for you.

HF (16:44.872)

Exactly. And one thing that I've seen happen sometimes people apply for something that they're not qualified for and then the company will come back and say, Well, we have this other position that you could be a fit for.

EL (16:56.534)

Correct. Correct. And it can get you in the system because positions will come up periodically. And so they may remember you for future positions as well.

HF (17:05.876)

Exactly. So no right or wrong here, just different approaches. You can decide. Now let's move on to the next phase where you are lucky enough to have gotten a call or an email from that recruiter and it can happen really fast. So we want you to be prepared. So talk to us, Erik, about that first recruiter screening interview.

EL (17:30.03)

So, what they're doing is really looking to see is this someone that I can move on to talk with the hiring manager or other members of the hiring team. So that's really their question. Do I move this person on or not? And that's really the bifurcation there. So the question is going to be: do they have the basic qualifications? In other words, if you have to have practiced independently for two years after your internship year to legally be qualified with the FDA to do medical monitoring, you have to have that qualification. And then beyond that, do they seem to know what they're applying for? Do they know something about the company? Are they respectful? Do they seem like they're gonna be able to work well with others and get along in a team environment?

I think those are the things that they're really looking for. If they get the sense that that's not gonna work, then that's gonna be problematic. Pretty much everything is done in teams. So being able to work with a team is absolutely critical.

HF (18:40.556)

And should you take this seriously or is this something you could just be more casual about and not really prepare for?

EL (18:48.12)

I think it's good to have done your homework so you know about the company. It's not an especially formal interview. It tends to be fairly informal. However, you always want to come prepared, be professional. Everything is part of the evaluation for you. And you want that recruiter to go back and say, Hey, I think I found somebody for this job. That's what they want.

They're hoping you are that person. So, you know, give that to them as much as possible.

HF (19:21.88)

Should you be prepared to answer the question of what kind of salary expectations do you have? What kind of compensation are you looking for?

EL (19:32.066)

Right. They may ask that. And that's something to think about. There are a couple of different ways to approach that. Generally, if you are an experienced neurosurgeon going into an entry-level position, they're probably not going to be able to match your current salary. If you are in primary care and going into that role, they're probably going to be able to match or possibly exceed your salary, you know, off the bat.

There may be signing bonuses with that. One technique that has worked effectively for some individuals is to say “I'm really looking for the right fit, but also want to make sure that I'm compensated fairly for what I'm providing so that this can be a long term lasting career move for me”. That's something I've seen people use and it's been effective. They will have a pay band or pay range that they have in mind. And you can always ask them, what is the pay range for this? Are we in the right range here? And that's not a bad idea to try to establish right away.

I think it’s disheartening to go all the way through an interview process and realize that your expectations and their expectations are mismatched and it never was going to move forward.

HF (20:55.884)

No, that's a fantastic point. I think we often can feel shy about asking or feeling like, we don't want to make it all about the money. But I think it's something to get out there, it's logistical. We all know that this is gonna be part of it. And to get it out there in the beginning, I think that's an excellent point. Okay. So now let's say the recruiter went to the hiring manager and said, I love this doctor. I think they're a great fit. Let's move them on. What happens next with the formal interviews?

EL (21:22.678)

So at that point, generally you may find there will be multiple interviews and they can take a variety of forms. So there may be sequential interviews that are one-on-one. They could be phone, they could be video, they could be in person. I have seen group interviews where you as a single candidate may be interviewed by two, three, four people. Generally, it's not going to be one person interviewing you and multiple other candidates together in the same session, but more the other way around.

So all of those things may end up happening. And generally it will be several rounds of interviews, certainly with the hiring manager, but then there also may be other people, key members of the team or colleagues that you may end up working with that are going to want to talk to you and interview you so that the whole team also feels comfortable with bringing you on board.

HF (22:23.032)

And I know in pharma sometimes you are asked to do a presentation. I usually don't see that so much in other areas, some physicians might do a writing sample or some kind of case review, but that is something they might need to do, like a talk on a drug or something, if it is pharma.

EL (22:44.33)

Occasionally I've seen that. However, oftentimes if you're just breaking into pharma, I think that's less common. When I've seen people give presentations, it's for higher level positions where they're looking to see how you think, how you think strategically, and are you going to be able to lead, you know, large teams or programs.

HF (23:09.816)

And do you have any insight or tips for physicians when they're in this interview process?

EL (23:15.69)

They're really just trying to get to know you. Be relaxed. Remember, it is obviously a formal interview. So you want to go ahead and talk with them in a formal manner. But a lot of what they're trying to figure out is are you, as you mentioned before, can you play well in the sandbox with others? Who are you? Why do you want to make this switch? Have you thought through carefully what you're going to do? Because the role can be very rewarding and really contribute, but it is a very different role than patient care. So they want to make sure that it is something you've thought about carefully and have a good possibility that you're going to say, yes, I want to stay in this role. They're not looking for someone who gets in and three months in decides, no, this is not for me. I'm going to go back to practice. Because then they're starting all over from the beginning. So they are looking for someone who feels fairly committed to going ahead and making the transition.

HF (24:16.322)

What would you say when a physician is wondering how much do I say about my reasons for wanting to leave medicine? Because that's a common question. A lot of them feel like they can't say anything negative. And that doesn't mean like they're whining, but they're often afraid to even say, I'm burned out, or it's not as satisfying or meaningful as it used to be. But the company often wants to really understand. So how do you recommend addressing this, Erik?

EL (24:48.654)

I think you can say that, but you want to be very careful. I wouldn't badmouth your employer or your practice. That kind of negativity is not going to work in someone's favor. But remember, all the physicians in pharma likely pivoted at some point, right? So the ones that you talk to that are physicians, they've made that transition themselves for a wide variety of reasons.

So saying you know, I've done this for a long time. I'm looking for something different. I've always thought this is something I can do. I'm excited to take on new and different challenges. I want to work in different ways. In my practice, I feel like I've sort of seen as much as I'm gonna see in my, pick a number, nine, eighteen, twenty, twenty-five years. You know, I would prefer to move on to something else and just see what's out there.

All those things are very valid and can get the message across without being overtly negative. Trashing an employer or a group that you're with is going to make them wonder, hmm, if they leave, are they going to now start saying really bad things about us too? And we don't know the situation. So being professional in that way is always a good idea.

HF (26:13.314)

Yes, those are excellent points. And you're really speaking to something we hear a lot, which is we don't want to look like we're running away from something, but running towards something, that there's something we're actually wanting and it's the company and the job, not just to get out of medicine. Just like dating. Someone doesn't want you to just say you're lonely. You know, they want you to say that you're looking for that specific person rather than just an escape or something.

EL (26:48.302)

Right. And being honest is fine. I was perfectly honest about my hip issues and some of my mobility disability when I was interviewing and did not feel that hurt me or was a hindrance in any way, shape or form.

HF (27:03.382)

No, to the contrary, I actually think that's very helpful. And I talk to my clients a lot about this, is the more they understand your why and when it's framed in positive and understandable language, then they're not sitting there wondering what's the real truth? You know. So you tell your real reasons and it can even be that the risk of patient care isn't working for you.

Like it creates too much anxiety and you didn't realize it was gonna be that way till you started. When you're honest, they're like, okay, I really understand this person, they're not a flight risk because they gave me valid reasons.

EL (27:42.848)

Right. And they're being honest too. They're also looking for honesty, 'cause that's gonna be something that is very, very important when working in, especially in such a highly regulated environment.

HF (27:54.624)

Absolutely. Know, like, and trust. That's part of the process. I need to know you, like you, and trust you. Okay, so now going on with this scenario, this physician did the rounds of interviews. Now they're waiting. They got a sense that they have done well, positive feedback, and the recruiter may have said, the team is really happy with you. They're gonna get back to you next week. Next week comes and goes. Next week comes and goes. Like, what do you do now? When do you follow up? What do you say?

EL (28:26.296)

So certainly I think it's a good idea to send a thank you afterwards. Remember, you're interviewing them, not just them interviewing you, because you're trying to get to know these people and think, is this a group I think I want to work with? Is this a place where I want to be? So if you are still interested, sending a follow-up saying that you're interested and really excited about the position is I think a very good thing to do.

You're gonna have to give it some time and be patient and this is a difficult thing to do. This process often takes longer than you think, longer than you think is reasonable, and will often take longer than they think, because a key person in the hiring team or process, because there's always gonna be a formal process, may be on vacation, maybe somebody's sick, maybe something came up that the team needed to get ready for and really took a lot of time and the timing just happened to be when they were gonna be discussing you and they didn't get a chance to discuss you as quickly as they first thought. Be patient with that. Certainly if a week goes by and you don't hear

anything, I would give a little bit more time and then after that you could send an email or something saying, just wanna reiterate, I'm very excited about the process. You know, do we have any updates on our timetable? Something along those lines.

HF (30:00.62)

And what would be a reasonable time frame? We always like practical advice, like is two weeks, what would you say?

EL (30:08.57)

Yeah, after a couple of weeks, it's certainly good to circle back and see where they are with things. If after a couple of weeks they're not getting back to you, then it's possible that there's some delays, but it's also possible that they're still in the process of looking at other candidates. They may have scheduling difficulties with other candidates. So sometimes this may go on for more than a couple of weeks. It could go on for a month or more.

It could be that you may not be the top choice, but an acceptable choice. And there's a lot of people that oftentimes end up being a second or third choice that end up working out great. So don't get entirely discouraged by that.

HF (30:50.402)

No, you're absolutely right. We don't know. All these things can be happening behind the scenes. And if they do have an internal candidate that's their first choice, they may be waiting to see if they take it, or it could be an external candidate. And sometimes it even takes a couple months. I've seen some physicians wait months. Sometimes they don't even ever hear back, which is terrible, the ghosting. But yes, respectfully following up after a few weeks and inquiring. There's nothing wrong with that. And it's important to do to kind of remind them, Hey, I'm here.

EL (31:21.718)

Exactly. Exactly.

HF (31:23.486)

All right, perfect. So now that we've really talked about the process and hopefully this physician is getting their offer, then there's the negotiating process. We're not really going to talk about that here because I'm gonna do an upcoming podcast specifically on negotiating. But is there anything quick that you wanna just say about negotiating an offer?

EL (31:48.618)

In terms of negotiating the offer, the key here is going to be negotiating your base, the base salary. The base is going to be king, because everything else comes off of that. So compensation packages frequently include a bonus, which will be a percentage of your base. It may include stock or stock options, which is going to be a percentage of your base. So the higher you get that base, the better off you're going to be. And also remember merit increases and year to year cost of living increases are all based on the base.

So every time you start to multiply off of that base, you're going to find yourself better off. Even if it's only say two, three percent a year, after ten years, that can really add up, especially if you move into a higher position with a higher percentage bonus and a higher percentage for stock or stock options.

HF (32:45.772)

And in general, would you say, whatever they give you, why not ask for a bit more?

EL (32:52.3)

Absolutely. They assume you're gonna negotiate. So ask for more in one way or another. If you can find out what the pay band is, there's always gonna be a formal pay band. There's gonna be a minimum and a maximum. And they can't go outside that pay band. They're not gonna be allowed to. But finding out where is the middle of that pay band, if you can ask where do people typically come in, because there often may be a sense of equity. We've hired, you know, our last six hires have been at the middle of the pay band.

Why are we now going to be paying more? And how can we justify that to the company? And maybe there is some justification. Maybe that's just where it ends up being. You can negotiate your vacation time. If you have more vacation right now, say in a private practice than what the company is offering, that is negotiable. Asking for more is assumed and it's going to be built into the offer. So you probably will get more.

I wouldn't be thinking they're gonna increase your salary by fifty or eighty or a hundred percent, but there probably is likely some room to move.

HF (34:02.292)

Excellent advice. I love that. All right. And kind of thinking about this whole process, Erik, and you've done a really good job of describing things from the insider perspective. Do you have any final words of advice for this phase of the journey?

EL (34:17.688)

Sure. When you're interviewing, have some good follow-up questions. Remember, you're interviewing them as well. Is this someplace that you're going to want to go and spend a significant amount of time? Also, even if you didn't get the position, follow up with them and ask, is there something that kept me from landing this position? Is there something I can do to strengthen an application for a future position?

Especially if it's a company you really want to work for, let them know that. They're excited to have people who are excited to work for them.

HF (34:53.399)

That is excellent advice. Yes. We are interviewing them as well. And that's so important. Like at those interviews, when they say, Do you have any questions for us? You never want to say, no, I'm fine. Never. Excellent. So I'm sure some of the listeners would like to get in touch with you. Can you tell them the best way to contact you, Erik, and anything that you're offering right now?

EL (35:19.608)

Sure. So the best way to get in touch with me is through my website, Clearpointsadvisory.com. If you navigate to the physician career advisory page, you're gonna be able to then see the things that I have to offer and be able to get in touch with me. So right now I offer career strategy sessions where people can decide is pharma right for me and what roles in pharma may be there.

I offer interview packages where we do mock interviews where you can really practice and see what these interviews may be like. There's transitioning packages where we can discuss compensation, onboarding, and follow-up once you get there. And then I also offer executive advisory packages for individuals who are already in pharma who are looking to make a change, a career move, how do I get promoted? Why am I not getting promoted? That sort of thing.

HF (36:19.562)

Those sound like excellent resources. So again, I'm speaking with Dr. Erik with a K, Dr. Erik Lamberth, and your company is Clear Points Advisory. And we will have the link to your website in the show notes as well as your LinkedIn profile. People can reach out to you. And I just want to thank you again so much for coming on the podcast.

And to let listeners know that the next episode, I'm gonna have you on and we're gonna be talking about once you get that job, what's the onboarding process like and the first year?

EL (36:54.456)

Sounds great. It's been a pleasure. Thank you, Heather.

HF (36:56.928)

You're so welcome. So, my dear listeners, I just wanted to let you know about some resources. If you go to the Doctor's Crossing website, doctorscrossing.com, and at the

top of the page there's a freebie tab. There are lots of different freebies in there, but there are some freebies on doing your LinkedIn profile, creating your resume, interviewing with recruiters, using AI, all sorts of different things that you can avail yourself of and they're all free. So that's at doctorscrossing.com under the freebie tab. And please share this podcast if you want to with someone tonight before the sun sets because you help us out, you help other physicians out, and all this engagement really helps and it's so appreciated. And thank you to all of you who are already sharing the podcast. And as always, don't forget to carpe that diem and I'll see you in the next episode. Bye for now.