New Member Symposium

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Why is this profession so difficult?! 

• It is hard to get into a graduate program! 
• It is even more difficult to get into a PhD program!! 
• It is almost impossible to get into a residency program!!! 
• And if you get that far, good jobs are really hard to find!!!! 
• And there seem to be so many certified physicists out there looking for jobs!!!! 
• What is HAPPENING?!!!!!!

Why is this profession so difficult?!
Due to his grammar mistake, Wilbur found a position. It just wasn't the one he wanted.
When was the big demand?
• Beginning in 2012, in order to take the ABR Part 1 Examination in Radiologic Physics, candidates must be enrolled in or have graduated from a CAMPEP accredited education program (MS, PhD, residency)

• Beginning in 2014, in order to take the ABR Part 1 Examination in Radiologic Physics, candidates must be enrolled in or have completed a CAMPEP accredited residency.

• Detailed requirements are found at: http://theabr.org/ic-rp-req
Passing TRP/TMP ABR Certification
Projected ABR TMPs through 2020
2020—If we graduate 100 TMPs
2020—If we graduate 125 TMPs
2020–If we graduate 150 TMPs
2020—If we graduate 200 TMPs
How many physicists must we train?

- Current number of CAMPEP Residents must increase from 60 to a minimum of 125 per year by 2020; 100 will not work!
- A more comfortable number would be 150; 200 would balance supply and demand
- If we are unable to make enough TMPs:
  - Will more medical physicists retire or leave the profession?
  - Will this impact safety and quality assurance?
  - Will this impact patient care negatively?
Supply & Demand, QMD versus QMP
• There is an oversupply of certified physicists looking for jobs
• Many jobs are not being advertised
• Many are being filled by networking and word of mouth
• Many times the job posting is administratively required and those that control the position have already made a decision
• People are not leaving their current positions for better ones because they cannot sell their houses
• Profitable and growing centers with new positions are the only real growth in the industry

So why are good jobs so hard to find?
"It's simple. My nurse blindfolds me, I spin around a few times, and then I try to reattach your tail."
• Why and how is radiation oncology profitable?

• The profitability of radiation oncology is largely based off of one, single procedure – the Medicare IMRT code 77418

• In 2003, one fraction of IMRT was equal to 1/7th the reimbursement of a liver transplant and 1/3rd of an aortic valve replacement

• One IMRT fraction was equivalent to a rib removal or bunion surgery

• The beauty of IMRT is that while most people have only a finite number of livers, aortic valves, ribs, and bunions, each cancer patient treated with IMRT typically gets 30-40 treatments

• So a course of IMRT cancer therapy costs the system as much as transplanting 5 livers, and removing 30 bunions

• CMS made an attempt to cut IMRT by ~ 38% in 2009 as a result of a review of broader imaging codes – ASTRO stopped the cuts

• This year, 2012, CMS is proposing to cut IMRT reimbursement to physician owned freestanding centers by ~ 40%
MS Medical Physicists accepted to CAMPEP Residency Programs
PhD Medical Physicists accepted to CAMPEP Residency Programs

- Accepted
  - ****************************
  - ****************************
  - ****************************
  - ****************************

- Not Accepted
  - ****************************
• 1 Network – Get on Linked-In and Facebook
  • Actively seek to link to medical physicists that control positions
  • Let them know you are looking for a position
  • Set up a webpage with your CV information
  • Log how your job search is going
• 2 Seek experiences that are out of the ordinary
  • Protons
  • Cyberknife
  • TomoTherapy
  • GammaKnife
• 3 Apply to every position you would even remotely consider accepting
• 4 Make arrangements to shadow at an institution for a day or a week. Do this especially if they offer an experience you have not had.

Oh @#$% So what do I do?!?!?
• Radiation oncology is not profitable because of physics procedures – these do well to break even
• Radiation oncology profits depend almost entirely on 77418 – IMRT treatment delivery; this code is under attack
• If radiation oncology fails to remain profitable, all the supply and demand models and all the workforce assessments may be meaningless because no one will want to provide the services
• It is not ethical for highly successful MS students to be denied the opportunity to take the ABR Certification examinations because we mismanaged the educational process
• We must make residency opportunities available for our MS students now

Summary and Conclusions