

## INTRODUCTION

As we scan the internet eking out information that may be of value to physicians and healthcare workers new to locum tenens, we are continually amazed by the infiltration of corporate recruiting into the medical world.

There are multiple articles on “How to Do Locum Tenens.” Nearly always, these are written by the recruiters and agencies beating the bushes for new worker bees... you and us.

The attitude by these authors frequently is:

*You need us.*

*You cannot possibly do anything quite this difficult without our assistance.*

*We do all the hard paperwork that you doctors hate.*

*You just be the simple-minded worker bee and make that honey as fast as we know you can.*

Healthcare professionals, doctors, physician assistants, and other extenders are notorious for being poor business people. But, do we need to allow people with generally limited or no medical experience to navigate us through our own world, and pocket large amounts of money for doing so?

Large fees are retained for simple tasks that agencies try to obfuscate into complex chores that we do not want to do.

*They make the maze appear so complicated.*



**DON'T BELIEVE IT!**  
**You can do everything yourself and remarkably easily, with less  
aggravation.**

This book is written from ten years experience by two of us, a husband-and-wife team, composed of a physician assistant and a nephrology physician.

Who is it for?

- Physicians
- Physician Assistants
- Dentists
- Pharmacists
- Hospital Administrators
- Dietitians
- Any healthcare professional who is required to fill in for maternity leaves, vacations or illnesses.

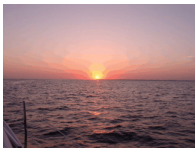
All of you can manage the medical maze better than anyone, and learn what it takes to succeed in private and independent locums.

Do you need to read this entire book before you embark on a locum tenens career? NO.

Would it help? Of course it would, or we would not bother to share our experiences and knowledge with you.

All you really need to start is:

1. A telephone to make your contacts.
2. A computer for ads, contracts, personal and medical information, and for your portable medical library. We recommend a laptop.
3. Business cards with a catchy, easy to remember name containing necessary business information.
4. Formation of a Corporation that may be done online or in person.
5. A business plan with an entrance and exit strategy. Where do you want to be ten years from now?
6. Lastly and perhaps most importantly:
  - Motivation
  - Enthusiasm
  - Flexibility
  - A positive attitude
  - A desire to pursue new adventures again and again and
  - A willingness to learn the rest along the way.



**Today is the 1st day of the BEST of your life.**

## FORWARD

How did a nice couple like us end up in a business like this?

### PLANNING, PLANNING, PLANNING AND SETTING SIMPLE GOALS

Dorothy and I had been working with a large clinic for about seven years. During the last two years we were there, we found ourselves so entrenched in the political dynamics and well, just involved. As we became more involved, we also became more frustrated.

**If you are miserable in life and make no attempts to change things, you deserve to be miserable.**

~ Katherine Margaret Vidakovich Nemeč

As our clinic grew to corporate size, our input was less recognized. It seemed that the more experience we had to offer, the less it was acknowledged or accepted.

We found ourselves becoming more aggravated by corporate medicine and governmental regulations changing our style of medicine, which we thought was quite good.

One week Dorothy would come home irritated, but I would be fine. The next week, I would be irritated and she would be fine. The final year before leaving, we both were coming home regularly annoyed.

We found ourselves spending more time discussing our unhappiness, than enjoying our time off. This was greatly out of character for both of us.

Things had to change... before we did.

During the times of aggravation and irritation, we did a lot of talking about what actually was the *problem du jour*.

What did we want out of life?  
What would be the best way to get there?

For several years, we had been posting all our expenses into Quicken. We analyzed our spending habits over the previous two years to see what it would take to live—without a job. Wisconsin is a high tax state. My entire salary plus \$6,000 to \$8,000 were required to pay all our taxes. Did we want to even stay there?

We eventually made the decision to start our own locum tenens business. Dorothy had experience with locums in 1988 and seemed more optimistic than me.

**HAVING CONTROL OF OUR LIVES IS A GREAT GIFT.**

We started by planning and setting simple goals for the future. Once they were scribed onto paper, they seemed more real and happened just as we had written them:

1. We will be incorporated by September 1996.
2. We will save one full year of salary before starting business.
3. We will move to a state that is warm and has less state income tax, by January 1997.
4. We will be happy and in control of our lives.
5. If we are NOT happy, we will identify the problem and change it.

We figured the worst that would happen, is that MDPA LOCUMS, INC. would be a dreadful flop. We would have to go back to regular jobs... after a year off. Could we live with that? Yes!

Private locums turned out to be one of the best decisions we have made, as far as our professional careers. Our only regret is that we did not do this sooner.

Now, if we get annoyed and irritated, it is because of a decision **we** have made. We are forced to sit down with a nice bottle of wine, have a corporate dinner meeting, and correct the problem together. (*Larry*)

## THE FUTURE OF LOCUM TENENS

According to Barry Asin, (executive vice president and chief analyst, Staffing Industry Analysts, Inc.), “Locum tenens easily has been the fastest growing segment of the healthcare staffing industry over the past couple years. And there is no sign of slowing. The projections that we see estimate 12 % annual growth over the next few years.” *LocumLife* November 2005. We agree.

The practice of medicine has changed dramatically in a relatively short period of time. The time of being THE provider for a stable group of patients, that we grow to know well, has all but disappeared.

We are no longer doctors, physician assistants or pharmacists. We have become a commodity provided for profit to large corporations and managed care systems, as “healthcare providers.”

The corporate medical system has its large administrative body that is maintained and supported by the “worker bees” (i.e. providers of care). If the worker bees either do not meet the production quotas of administration and accounting or God forbid, disagree with the philosophy of production line medicine, they will be discarded. A new bee will be sought who will not disrupt the production line.



The business is quantity. Quality is left to suffer. A provider who does poor to mediocre work, but meets or exceeds the quotas, is rewarded. The one who sees lesser numbers due to the time required to do high quality work, is chastised. These are the things that will increase the demand for locum tenens providers.

**During the time that a provider is let go or leaves, and the time a new provider can be recruited, licensed, credentialed and fit into the practice, someone will be needed to fill the void.**

As locums, you step into the practice for the period of time you are needed. You are not fully incorporated into the system, so you do not tend to get involved in the politics of the practice, or the numbers game required of permanent employees.

This gives you the time and flexibility to do your job well and practice the kind of medicine you have always wanted to. It also allows you to place yourself in good stead with the hiring organization. When the need arises (and it will), they will think of you as a known entity and will ask you back again and again.

## **THE LAST GREAT PRIVATE PRACTICE**

The Director of Education and Career Development for the American College of Physicians recently wrote in an excellent article that locum tenens is “not exactly a career alternative in itself...(it) is often an excellent way to begin a career in medicine.” <http://www.acponline.org/counseling/locumtenens.htm>

We beg to differ. Locum tenens can be a great way to begin, middle, and end your medical career.

We have found career locum tenens to be one of the few viable and flourishing forms of a dying term “private practice.” We are in control of both our lives and our business. We are the ones to decide the terms of employment, the hours, the pay, the vacation. We have the luxury of working directly with our partners as colleagues.

You can make your practice as complicated or simple as you wish. Overhead is minimal. You do not pay nursing, billing or other ancillary personnel.

In this private practice, we are always in the honeymoon phase. People love to see us come to work, as we are easing their burdens and invariably getting them out of that tight spot. They generally hate to see us leave, and can't wait for us to come back.