

MJA *Careers*

THE MEDICAL JOURNAL OF AUSTRALIA

Big income gap defies explanation



IF A FEMALE general practitioner in Tasmania was disappointed with her income, perhaps a “career move” to consider would be to become the trophy wife of an orthopaedic surgeon in Queensland — provided he lives in a good area and does plenty of on-call clinical work — or she could consider retraining as one herself.

If that strategy is neither palatable nor practical, or Queensland doesn't have any available single orthopods, then new research might be helpful in working out ways to optimise income. The findings show that female GPs earn about 25% less than their male counterparts, and GPs in Tasmania earn about 15% less than those on the mainland.

The report, *What factors influence the earnings of GPs and medical specialists in Australia? Evidence from the MABEL Survey*, has uncovered some important anomalies in earning capacity within medicine. And women are among the biggest losers financially, a discrepancy that cannot be easily explained.

The report's principal investigator, Professor Tony Scott, Professorial Research Fellow at the Melbourne Institute of Applied Economic and Social Research, says the gender income gap for GPs is even greater than for the workforce overall, where the average total earnings for women are 20.7% lower than men, according to the Australian Bureau of Statistics.

“This is something of a mystery. While such differences persist in other occupations, this is particularly difficult to understand in an occupation where men and women have the same high level of education,” Prof Scott says.

The survey, released by the Melbourne Institute at the University of Melbourne, also shows a considerable gap between the earnings of male and female specialists working in the same field, with females earning about 17% less.

The analysis is based on data collected from the national longitudinal survey of doctors called *Medicine in Australia: balancing employment and life (MABEL)*, in which doctors self-report their incomes. Higher earning doctors in more affluent areas were less likely to declare their incomes, so the gap is likely to be even greater.

Based on the report's findings, the average annual pre-tax personal earnings for GPs are \$177 883, and for specialists \$316 570. This is based on responses from 2619 GPs and 3018 specialists in the latter half of 2008.

And for those disgruntled Tasmanian women GPs, for whom fanciful solutions are perhaps worth pondering, diagnostic radiographers, obstetricians and gynaecologists, orthopaedic and other surgeons and intensive care specialists are among the top earners.

Heading for the sun may also be worth

considering, with specialists in Queensland earning on average 15% more than those in New South Wales. Those in Western Australia may still be a good catch, earning 7% more, while self-employed specialists earn 27% more than those in salaried hospital-based positions.

Psychiatrists, paediatricians and thoracic medicine specialists are among the lowest earners but, overall, specialists receive a greater proportional increase to their income from on-call and after-hours work than GPs.

There is more grim news for GPs. The report also suggests that earnings are not proportional to hours worked, so for every 1% increase in hours worked, earnings increased by just 0.44%. The report found GPs and specialists worked an average of 39 hours and 45 hours a week respectively, and both worked on average 51.6 weeks per year. GPs who completed their basic medical degree in Australia also earned on average 4.7% less than those who completed their degree overseas.

However, factors that do contribute to a higher income include working for a bigger practice, in a place with a lower GP density, and in a regional or rural area where average earnings are 11% higher. Self-employed GPs also earned on average 28% more than those who are salaried or on contracts, reflecting their managerial responsibilities and capital investments into the practice.

Linda Drake

C1

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North west NSW	From 18/10/10	To 22/10/10	\$2,000 p/d
North west NSW	From 8/12/10	To 17/12/10	\$2,000 p/d
Country NSW	From 14/8/10	To 23/08/10	\$2,000 p/d
Country NSW	From 27/8/10	To Ongoing	\$2,000 p/d
Rural NSW	From 6/9/10	To 12/09/10	\$1,800 p/d
Coastal QLD	From 2/8/10	To 09/08/10	\$2,000 p/d
Coastal QLD	From 2/10/10	To 04/10/10	\$2,000 p/d
North Coast NSW	From 21/8/10	To 22/08/10	\$2,200 p/d

GENERAL MEDICINE VMO

Country NSW	From 30/8/10	To 06/09/10	\$2,000 p/d
Coastal QLD	From 16/8/10	To 12/09/10	\$2,000 p/d
North Coast NSW	From 26/8/10	To 30/08/10	\$2,000 p/d
Coastal QLD	From 11/9/10	To 30/10/10	\$2,000 p/d

GENERAL SURGERY VMO

Central West QLD	From 30/8/10	To 30/10/10	\$Neg
Coastal QLD	From 20/9/10	To 04/10/10	\$2,200 p/d
Mid North Coast QLD	From ASAP	To Ongoing	\$1,980 p/d

O&G VMO

South Western NSW	From 15/09/10	To 18/08/10	\$2,500 p/d
North West NSW	From 16/08/10	To 23/08/10	\$2,000 p/d
Coastal QLD	From 30/08/10	To 17/09/10	\$2,200 p/d

FACEM

South Western NSW	From 16/08/10	To 22/08/10	\$165 p/h
North East TAS	From August	To October	\$250 p/h
Central Coast NSW	From 24/08/10	To 26/08/10	\$250 p/d

ORTHOPAEDIC VMO

Northern NSW	From 30/08/10	To 03/09/10	\$2,000 p/d
North West NSW	From 09/08/10	To 15/08/10	\$2,000 p/d
Mid North Coast QLD	From ASAP	To October	\$1,980 p/d

GP

Country NSW	From ASAP	To Ongoing	\$1,500 p/d
North West NSW	From 09/08/10	To 16/08/10	\$1,600 p/d
Tasmania	From ASAP	To Ongoing	\$1,000 p/d

Military medicine makes its mark

LIEUTENANT COMMANDER Alison

Thomas has never been seasick, which is a useful thing when you are a doctor in the Navy. But she has seen plenty of people with motion sickness – in the backs of helicopters, in fixed wing aircraft, on ships large and small.

And even when the ship has “been like a giant surfboard” her lunch stayed down.

L Cdr Thomas is a general practitioner with an FRACGP and a diploma in aviation medicine, who now works in Canberra in Joint Health Command across all three defence services in the Directorate of Military Medicine for the Department of Defence. And she loves her job.

With no military background in L Cdr Thomas's family, her father was among those who wondered just what his daughter was thinking when she first considered joining the Navy.

“It was a succession of small events that led to the decision rather than a light bulb moment,” she said.

L Cdr Thomas kept bumping into “military” people on holidays and socially who seemed to have interesting careers.

For the then medical student at Monash University, the thought of financial support while studying was incredibly attractive.

What started as a vague idea gradually took form.

“In 1992, having \$18 000 a year meant I was a wealthy woman.”

The financial incentives were strong right from the start. Although there was a service obligation attached to training, L Cdr Thomas felt it was not onerous compared with the monetary and other rewards, and she gladly stayed on longer than required.

The Navy paid for L Cdr Thomas's last two years at medical school, two years of postgraduate training, and it was in her third year out that she joined the Navy full-time, moving to its main training base, HMAS Cerberus on the Mornington Peninsula for her first posting. She then moved to HMAS Albatross, Nowra, south of Sydney, to practise aviation medicine with the fleet air arm. Part of her training included a stint in the United Kingdom for 6 months.

L Cdr Thomas says being a doctor at sea is a lot like remote and rural practice.

“You're miles and miles from anywhere, in charge of the health and wellbeing of about 200 people on board, although there are no children and old ladies.

“You're a GP, psychologist, physiotherapist,

and at times even a dentist. You're a jack-of-all-trades.”

Professional support came from sailors who had trained as medics, and did similar tasks to physician assistants, with additional help from others with advanced first aid training.

She has been to Thailand, Hong Kong, Singapore, South Korea, Japan and the Philippines, but says she has not travelled as much as some in the military. L Cdr Thomas was also deployed to the Middle East in the lead up to the second Gulf conflict where, as senior doctor on HMAS Melbourne, there was great responsibility in a pressured environment of “hypervigilance” for all those on board.



However, in 2003, L Cdr Thomas felt it was time to try life on the other side — as a civilian. She completed her FRACGP, worked in Brisbane in general practice, then moved to Sydney. But she missed her old life.

“I needed to try the other system too, and it certainly broadened my outlook.”

However, the flexibility offered by the Navy was just hard to beat, she says.

“Now I have a flexible workplace arrangement. Although I'm based in Canberra, I can take my work to Brisbane on a laptop when it's a policy-based project.”

L Cdr Thomas said it had never been an issue being a woman at sea, nor was being surrounded by men, day in, day out, when on deployment.

“Men say what they think, it was not a complicated environment, and I never felt gender was a concern. And when you're all dressed in grey overalls, everyone looks the same anyway.”

What can the defence forces offer medical students and graduates?

Plenty, according to Lieutenant Commander Matt Keogh, whose job it is to fill Medical Officer positions for the Air Force, Navy and Army as head of the health specialist recruiting team.

“A lot of medical students have heard of our program and, while they know of it, Chinese

whispers about what it entails mean we have to set out to demystify it,” he says.

The armed forces take on medical students who are at any stage of their 4-year postgraduate medical degree, or who have demonstrated strong academic performance in their undergraduate medical degree, with an obligation to remain in the service for the number of years they are sponsored, plus one.

For example, in exchange for 3 years' financial support, 4 years' service upon graduation is required.

“We have to have a return on our investment,” L Cdr Keogh says.

Medical Officers complete their degree, before undertaking a normal hospital internship and then 1 year as a registrar.

Only then do they find themselves in uniform for the first time when they join the Navy, Army or Air Force full-time.

Although there is often interest from overseas-trained doctors and foreign students, the defence forces only accept Australian citizens.

As part of the sponsorship scheme, medical students will be reimbursed all reasonable costs relating to gaining admission to their course, including the student contribution charge, fees, books and reasonable travel expenses for thesis work and compulsory residentials within Australia.

How much do students and graduates earn?

(as at 1 August 2010)

- First year \$1947 per fortnight (\$50 754 a year)
- Second year \$2016 per fortnight (\$52 560 a year)
- Third year \$2088 per fortnight (\$54 446 a year)
- Fourth year \$2162 per fortnight (\$56 362 a year)
- Year of internship \$2314 per fortnight (\$60 330 a year)

On completion of hospital residency, salary (excluding allowances) on appointment at Competency level 1 is \$2613 a fortnight (\$68 116 a year)

Pay increases are expected later this year.

Dual careers

It's not just graduates and medical students the defence forces are interested in. Doctors can join at any stage, and can also work with the defence force reserves.

“Almost all our military surgeons are drawn from the reserve pool,” says Lt Cdr Keogh.

That's because there's not enough work for



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As a Medical Officer in the Navy, Army or Air Force, you'll have opportunities that you won't get in the private sector. Such as leading a team of highly skilled professionals and providing humanitarian aid. Then there's the chance to specialise in primary care, occupational medicine, aviation, underwater, sports, trauma or tropical medicine. You'll have the opportunity to further your career, specialise and progress into senior roles. Along with adventure, you'll enjoy job security and excellent working conditions. You'll also receive a favourable salary with subsidised accommodation and free medical & dental care. If you're a qualified Medical Practitioner and would like further information call **13 19 01** or visit www.defencejobs.gov.au/graduate

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full-time surgeons, but the benefits of the reserve-based system work both ways.

“If we want someone to go overseas, perhaps for 2 weeks, or 2 months, we approach a surgeon to see if he or she is available. But if they have other commitments at the time, we just move on to ask the next one.”

Compensation payments are made to the employer so a locum can be employed, and many employers are supportive, regarding the experience as positive for the doctors, who come back with a fresh take on their work.

Lt Cdr Keogh says there are about 200 doctors of all kinds in the reserves, and the scheme has proved popular, particularly with doctors who are interested in humanitarian work, who tend to join later in their careers when they are financially stable and keen to “give something back”.

For those who are unsure about a career in the defence forces, it's also an option to “try before you buy”, according to Lt Cdr Keogh.

The big picture

Major General Paul Alexander is the Surgeon General for the Australian Defence Force, responsible for health service delivery to the 70 000 people.

He is the first to acknowledge the defence

forces have a problem attracting doctors, partly because the culture is misunderstood. And like so many medical careers based outside big cities, they are also struggling to retain those who have fulfilled their return of service obligations.

But in the next 6 to 12 months, new programs will be implemented, with important changes to career opportunities. Expanded career paths, training and greater flexibility are part of the strategy to make it more viable for young doctors to stay on, who now find they must leave if they want to specialise or undertake training that is not available within the existing career framework.

However, Maj Gen Alexander believes that many aspects of working within the defence forces suit the fundamental character of doctors, where strong ethics, teamwork, courage and initiative are integral.

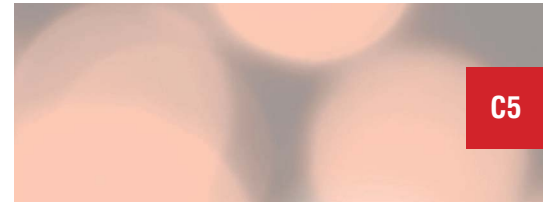
Doctors who are willing to voice opinions, who see their role as one beyond narrow patient care, and who are willing to become involved in broader matters, while still being perceptive, capable of responding to challenges and able to react thoughtfully at short notice are valued within the defence force.

It is also important to be able to work independently, and accept that sometimes

working conditions might not be comfortable – such as on board a pitching and rolling ship – or roughing it in the scrub with soldiers.

For Maj Gen Alexander, his Army medical career has suited him well when, as an indecisive undergraduate at Melbourne University in the mid 70s, he thought it was worth investigating. The Army appeared to offer a medical career with the opportunity to travel and interesting life experiences, which have since included working with the Special Air Service (SAS) Regiment, and seeing how well people can perform and care for others in times of adversity.

Until 2001, Maj Gen Alexander worked full-time with the Army, before deciding to go into private general practice as a partner in Queensland. But 2 years ago, he was asked to return to the defence forces, a pull he couldn't resist, with the brief to oversee integrated health reform.



C5



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The Psychiatric Services Division (PSD) of South West Healthcare has an established reputation for providing innovative approaches to community based and client centred service delivery. The Division is also well known for its model of care based on working closely with the families and carers of consumers. The PSD provides extensive services across all age groups.

The South Western Region of Victoria serviced by PSD covers approximately 23,000 square kilometres, with a population exceeding 110,000. This region is characterised by a major population centre in the City of Warrnambool, larger provincial centres, and numerous smaller townships. A large part of the region is rural and remote agricultural land that sustains a mixture of farming activities.

Warrnambool is a vibrant, growing coastal regional centre, located 262 km from Melbourne, a popular choice for those opting for a 'seachange' in life. Culturally the area is typified by English speaking residents predominantly of English, Irish, and Scottish ancestral background with concentrations of persons with Dutch and German ancestral backgrounds. The region also has a significant population of persons who identify with the indigenous Koori groups of Gunditjmarra, Winda Mara, Kirrae and Dhurrod Warrong.

Working in partnership with the Director Psychiatric Services (DPS), the Director Clinical Services – Psychiatry will primarily provide clinical leadership, and further develop evidence based clinical standards and practices. Additionally, fulfilling the responsibilities of the Authorised Psychiatrist, according to the Mental Health Act (1986), supervising a team of psychiatrists, and some medical student teaching.

An attractive salary and benefits package is available; the successful applicant requires registration as a Medical Practitioner in the state of Victoria, with a FRANZCP or possesses specialist qualifications in psychiatry acceptable to NSQAC.

Enquiries about the position should be directed to **Ms. Caroline Byrne (Director, Psychiatric Services)** on **03 5561 9100** or via email: **cbyrne@swh.net.au**. The successful applicant will be required to consent to and undergo a police record check and Working With Children check.

Written applications stating full personal particulars, qualifications and experience: together with the names of three (3) referees: should be lodged with the Human Resources department and either forwarded to the address below or via email to **humanresources@swh.net.au**

Q&A

MJA Careers profiles interesting and important jobs and the people who do them



Name Christobel Saunders

Job title Professor Surgical Oncology

Time in position 8 years

What aspect of this job appealed to you most when you applied or were appointed? And now?

I was keen to have a career in academic surgery, including research and teaching, but with the independence of an academic position. A clinical position was created over the two main teaching hospitals in Perth, giving me a wide view of cancer services. There was no previous surgical oncology research hub in Perth so it was a challenge to set up.

Now, I still get a huge buzz from research and teaching, and enjoy the university atmosphere. I find the clinical work of managing mainly breast cancer and some melanoma patients very fulfilling. Also, being able to slowly build up a fantastic research unit, and the opportunity to influence cancer care both at a state and national level.

Career highlights? Any lowlights/disappointments you'd like to share?

Highlights include the huge satisfaction that comes from patient care. Also, seeing young surgeons and students develop, and trying to provide them with a role model.

Research highlights include receiving a Medicare item no. for breast MRI for high-risk women, publishing the TARGIT intraoperative radiotherapy trial in *The Lancet* this year, and seeing the clinical benefits of other treatments I have helped to research.

Also receiving the National Breast Cancer Foundation's Research Achievement Award this year, and the launch of my book *Breast cancer: the facts* (OUP), with an accompanying art exhibition. Additionally, it's a highlight to realise my policy work – whether as President of the Cancer Council Western Australia, or on the board of Cancer Australia or the National Breast and Ovarian Cancer Centre — means more Australians can access better cancer treatment, which probably saves more lives than any individual treatments we undertake as clinicians.

Developing the first WA Framework for Cancer Services and starting the Cancer Network in 2005 were also important because they started to change the face of cancer care in this state.

Lowlights: Trying to carry on (and in fact overcompensate) with work after the sudden death of my husband, while trying to be a good mother to my son who was 10 at the time. Most other things pale in comparison and are not worth worrying about.

Professor Christobel Saunders helps treat cancer patients directly through her work as a surgeon and indirectly through her academic, research and committee roles.

But it hasn't been a one-way street – her patients have also helped her through some difficult personal times, giving her a fresh perspective and driving her passion for improving cancer outcomes.

What have been the biggest surprises in your working life?

Being able to achieve almost anything you dream about. Moving to Australia – I did not have hugely high hopes about it but have fallen in love with the country, especially the wide red land and blue sea of WA.

What do you hope to be doing — or have achieved — in five years' time?

We hope to finish building our holiday house in Gingin. Work-wise I hope to still be leading a dynamic research team, which has found some novel and effective treatments for breast cancer. And I hope I am still operating and loving it.

The person/people who have had the greatest influence on your career — mentors, sources of inspiration or unexpected opportunities

Professor Mike Baum from London – without a doubt the most influential mentor and inspiration – a giant among clinical researchers and a man of profound humanity. Otherwise I have been inspired by many of the women with cancer I care for, and who have actually cared about me at some difficult times of my life. It drives my passion to improve cancer outcomes and care.

What interests do you have outside public health?

Travelling – especially in the remote bits of the world. I love walking, hiking, a bit of climbing and scuba diving. Then there's cooking, and getting away to our shed in the country

Any career tips or suggestions for young doctors or others interested in this field?

Try to develop a passion for an area, find a mentor, and work hard at it to achieve your dreams. I would love to see more young doctors considering a career in academia. Work-life balance is so important.

What was your first paid job?

As a nursing assistant at London's West Middlesex Hospital, to pay my way through A-Levels.

Greatest indulgence during working hours?

Occasional lunch with my partner, an academic architect, who works just down the road; also, gossiping with the nurses and registrars in theatre.

What are you reading now, for business and pleasure?

For pleasure – *In our time: speeches that shaped the modern world* – by Hywel Williams.
For work – cancer journals (lots of them).

If I could change one thing in the world of medicine or research it would be ...

Access for all to fully funded, best quality cancer care, with the rapid integration of research findings into clinical care.

One Day

WHAT do doctors do all day? One Day gives a glimpse into the hectic whirl of one doctor's life:



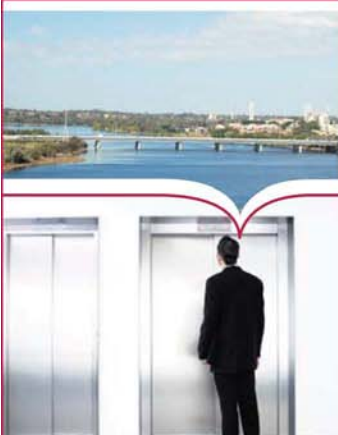
Christobel Saunders

- | | |
|-------|--|
| 6.00 | Wake up, make a cup of tea and retire to bed for a brief cuddle with partner, children and dogs, while opening emails and trying to answer a few of the 60 or so that come in each day. Then bang around in kitchen moaning that no one else washes up. (They do, sort of). |
| 7.30 | On theatre days arrive just before 7.30 am and run around making sure all is sorted for the list, including checking patients are ready, wheeling patients into theatre and helping (or maybe hindering?) the nurses as they set up.

If it's not a theatre day, often start with a 7.30 am meeting – which could be clinical, multidisciplinary, cancer network related, or a teleconference. |
| 8.00 | Clinic days start at 8 am and finish about 20 cancer patients later. |
| 10.00 | Operating lists last all morning though, with up to five cases in a session. |

- | | |
|-------|--|
| 11.00 | Some days, have an hour teaching medical students. |
| 12.00 | Multidisciplinary breast meeting – about 20 cases discussed and treatment plans made. |
| 13.00 | Back to office at the other hospital and catch up on emails, helped by a welcome cup of tea from my lovely personal assistant Jacquie. |
| 14.00 | Meet with research staff – about 20 research projects are on the go which range from local studies, such as looking at optical coherence tomography in breast cancer diagnosis, occupational causes of breast cancer, survivorship and shared care, to international trials, such as those of intraoperative radiotherapy or chemoprevention of breast cancer. |
| 15.00 | Try to get a bit of writing in for an hour – with at least four papers on the go at any one time. |
| 16.00 | Chair a Cancer Council Board meeting after seeing the chief executive for half an hour to go over the day-to-day business of the council. |
| 18.00 | May have an evening educational meeting for other health professionals – often as chair. Otherwise try to go to the gym where my personal trainer makes me sweat and groan for an hour. |
| 19.30 | Home – usually to my wonderful partner who has cooked a gourmet dinner to ruin the good effects of the gym. |
| 20.00 | Mindless TV for an hour on our huge sofa – with children and dogs. |
| 21.00 | Last catch up on emails. |

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or email him at gengland@mercy.com.au for further information.

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GP LOCUM

NSW AHS (ref: 20113)
Aug – Sept 10
\$1000 – \$1200 per day
Call **Sara 02 8353 9045**

EMERGENCY RMO

NSW (ref: NG120210-1)
1 Sept – January 2011
\$115.00 per hour worked
Call **Carole 02 8353 9017**

GEN MED PHYSICIAN

WA (ref: 19892)
Various dates 30 Aug – 31 Oct
\$2000 p/day + travel & accom
Call **Claudine 02 8353 9020**

PSYCHIATRIST – GEN ADULT

QLD (ref: 21511)
August 2010 – min 2 months
\$2000 per day + benefits
Call **Rebecca 02 8353 9042**

GP LOCUM

NSW Hosp (ref: 18727)
various shifts available
FRACGP \$182.20/hour
Call **Sara 02 8353 9045**

MEDICAL/ED RMO

NT (ref: JS030610-1)
ASAP – January 2011
\$100.00 per hour worked
Call **Carole 02 8353 9017**

ANAESTHETIST

WA (ref: 20080)
28 Aug – ongoing
\$2500 p/day + travel & accom
Call **Claudine 02 8353 9020**

PSYCHIATRIST – GEN ADULT

NSW (ref: 20741)
2-3 days per week for 12 weeks
NSW VMO rate \$200.60 p/hr
Call **Rebecca 02 8353 9042**

GP LOCUM

QLD AHS (ref: 21527)
From 20 Sept ongoing
\$1200/day, no on call!
Call **Sarah 02 8353 9046**

SURGICAL RMO

QLD (ref: ML120710-5)
3 Sept – 19 Sept 2010
\$Negotiable rates
Call **Carole 02 8353 9017**

ANAESTHETIST

NSW (ref: 21101)
3 Sept – 6 Sept
\$2000 p/day + travel & accom
Call **Claudine 02 8353 9020**

PHYSICIAN

North Island, NZ (ref: 20593)
ASAP – ongoing
NZD\$1500 per day + benefits
Call **Rebecca 02 8353 9042**

MEDICAL REGISTRAR

QLD (ref: MP120710-1)
ASAP – 21 December 2010
\$1400 p/d worked (Inc super)
Call **Lisa 02 8353 9034**

FACEM CONSULTANT

NSW (ref: 21306)
Fri – Sundays ongoing basis
\$2000 per working day
Call **Amber 02 8353 9011**

GASTROENTEROLOGIST

VIC (ref: 21385)
Oct – Jan
\$2000 p/day + travel & accom
Call **Carly 02 8353 9016**

GENERAL SURGEON

SA (ref: 21380)
1 – 30 Sept or 1-3 wk intervals
\$2000 p/day + benefits
Call **Nicole 02 8353 9012**

PSYCHIATRY CMO

NSW (ref: ME080710-1)
ASAP – 22 October 2010
\$Negotiable rates
Call **Lisa 02 8353 9034**

PAEDIATRICIAN

QLD (ref: 21509)
30 August 2010 – 28 Jan 2011
\$2000 per working day
Call **Amber 02 8353 9011**

ONCOLOGIST

VIC (ref: 21491)
31 Jan 11 – 15 May 11
\$2000 p/day + travel & accom
Call **Carly 02 8353 9016**

GENERAL SURGEON

VIC (ref: 21427)
1 – 31 Aug10 or 1-3 wk intervals
\$2000 p/day + benefits
Call **Nicole 02 8353 9012**

SURGICAL REGISTRAR

QLD (ref: KR010710-1)
6 – 17 December 2010
\$120 per hour worked
Call **Lisa 02 8353 9034**

ED CONSULTANT

QLD (ref: 20956)
ASAP until Sept 30th 2010
\$2000 per working day
Call **Amber 02 8353 9011**

ED CONSULTANT

South Island, NZ (ref: 20951)
ASAP – Ongoing
NZD\$ Neg + accom/travel
Call **Carly 02 8353 9016**

GENERAL RADIOLOGIST

QLD (ref: 21322)
Contract length negotiable
\$3000 per day worked
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On Call Locums is a leading specialist medical recruitment company providing a professional and personalised service Australia wide. We have been assisting doctors, hospitals and practices with medical placements since 1988. A selection of some of our current positions are listed below:

ANAESTHETIST**REF**

Start 5 Sep to 10 Sep 10	\$2500pd	Southern NSW	125636
Start 19 Sep to 4 Oct 10	\$2000pd	WA	125700
Start 24 Sep to 1 Oct 10	\$2500pd	Southern NSW	125686
Start 25 Sep to 5 Oct 10	\$2500pd	Regional NSW	125637
Start 3 Oct to 30 Jan 11	\$2000pd	NSW	125514
Start 18 Oct to 22 Oct 10	\$2000pd	NW NSW	125581

O&G CONSULTANT**REF**

Start 30 Aug to 5 Sep 10	\$2000pd	Western NSW	125671
Start 3 Sep to 6 Sep 10	\$2000pd	NSW	125602
Start 4 Sep to 11 Sep 10	\$2000pd	Regional NSW	125553
Start 15 Sep to 24 Sep 10	\$2000pd	Queensland	125613
Start 7 Oct to 12 Oct 10	\$2000pd	NSW	125654
Start 23 Oct to 3 Dec 10	\$2200pd	Queensland	125605

GENERAL SURGEON**REF**

Start 30 Aug to 5 Sep 10	\$1800pd	NSW	125691
Start 1 Sep to 4 Sep 10	\$1800pd	Victoria	125673
Start 6 Sep to 13 Sep 10	\$2000pd	NSW	125723

Start 10 Sep to 12 Sep 10

\$2500pd

Southern NSW 125670

Start 20 Sep to 4 Oct 10

\$2200pd

Queensland 125669

PAEDIATRICIAN**REF**

Start 1 Sep to 9 Sep 10	\$2000pd	Northern NSW	125593
Start 3 Nov to 10 Nov 10	\$2500pd	WA	125703
Start 30 Dec to 22 Jan 11	\$2500pd	WA	125704

PHYSICIAN**REF**

Start 25 Aug to 16 Sep 10	\$2000pd	Hunter Valley NSW	125618
Start 6 Sep to 13 Sep 10	\$2500pd	Regional NSW	124975
Start 11 Sep to 30 Oct 10	\$2000pd	SE QLD	125611
Start 13 Sep to 24 Sep 10	\$1800pd	Western NSW	125698
Start 13 Sep to 27 Sep 10	\$1800pd	Tasmania	125561
Start 18 Oct to 1 Nov 10	\$1800pd	Tasmania	125486

ORTHOPAEDIC SURGEON**REF**

Start 9 Sep to 13 Sep 10	\$2000pd	Northern NSW	125546
Start 12 Oct to 18 Oct 10	\$2500pd	WA	125713
Start 14 Nov to 22 Nov 10	\$2500pd	WA	125715

For further details on these positions and other opportunities available to you please call us:

Phone: 02 9363 5300 ext 4 Free call: 1800 256 286

Or visit our website: www.ocl.com.au

PO BOX K351 Haymarket NSW 1240 Email: info@ocl.com.au Fax: 02 9363 3484

On Call 
LOCUMS

HOSPITAL APPOINTMENTS

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Could you use some assistance? Wulff Medical Consulting offers comprehensive professional services for the recruitment and administration of International Medical Graduates. We take care of your applicants from start to finish, right up to the day they commence duties with your health service. For more information about our services, visit our website today

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OVERSEAS APPOINTMENTS

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MJA Advertising 02 9562 6666



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C10

GP OPPORTUNITIES

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\$3000 REWARD

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The AMA in Western Australia is seeking suitably qualified GPs for permanent and contract positions in various locations throughout Australia. You can help by simply referring the GP to us and we'll do the rest. If the GP commences in an approved position we'll send you \$3,000 with our thanks.



For additional information, terms and conditions or if you wish to refer a GP who may qualify, visit the website:

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NOTICE BOARD

Seeking a caring medical family
for Simon 16 y for one year in Sydney.

Simon, French teenager, 16 yo, is seeking a Very caring family in Sydney AU, for one year, in Bondi beach area. Starting Sept 2010. Two aims 1. To become fluent English speaker 2. To spend one semester from Jan 2011, in an Australian senior High School, y 11. Possibility: spend one year in Paris, FR on an exchange basis.

Waiting for your Quick proposals. Best French regards.

Dr JM Laurent-Vo +33608052936 Simon.Sydney2010@gmail.com

GP PRACTICE

GP PRACTICE WANTED

No visits, obstetrics Surgery.

Contact: Dr R. Ritchie,
Box 3053 Durban
South Africa 4000

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#50 (1747sqm) and #52 (1196sqm) Carrington Parade with a combined total street frontage of 41.1m. On separate titles.

Elevated site with views over Newcastle and Pacific Ocean. Cul-de-sac.

One of the best locations in Newcastle.

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Phone owner for further information on 0407-506-380 or 02-4957-1009.

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MJA Careers & Marketplace

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For more information phone: (02) 9562 6666

email: advertising@mja.com.au

MJA Classifieds has had a makeover.

It is now bigger and brighter, has a new name, and includes interesting stories related to careers in medicine (and also the non-medical careers that some doctors have on the side). It's still in the centre pages of the Journal.

MJA Careers includes:

- Permanent and temporary (locums) employment opportunities for doctors
- Specialist, Hospital, University and Overseas Appointments

MJA Marketplace offers an economical approach to promote events, CME, conferences, investment opportunities, medical equipment, grants and lifestyle.