



■ Chicago: Enjoy the Windy City

■ What Recruiters Look for in a Candidate

■ PracticeUpdate Oncology: Expert Opinion Interviews

Career Guide

ONCOLOGY

American Society of Clinical Oncology (ASCO) Annual Meeting
June 2 - June 6, 2017 - Chicago, IL



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- Board Certified in Internal Medicine & Hematology/Oncology
- Applicants should possess excellent clinical skills, communication skills, and a strong commitment to providing excellent care that is team oriented
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New York's Capital Region offers all the amenities of a larger urban area in a scenic, and affordable setting. A burgeoning Tech Valley, key employers and industries in the region include government, health care, technology, clean energy, life sciences, and advanced manufacturing.

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mark.gallucci@sphp.com

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Chicago: Enjoy The Windy City

There's so much to see and just as much to do in Chicago.

Chicago is one of the largest US cities and an international hub for finance, commerce, industry, technology, telecommunications, and transportation. The city is also famously called the “Windy City” for its frigid breezes blowing off Lake Michigan where it is situated. Despite the weather, tens of millions of tourists a year enjoy the bold architecture, sports arenas, jazz clubs and museums of this populous city that made the deep-dish pizza famous. Below is a “What to do in Chicago” guide so you can enjoy the local flavor:

What To See

Adler Planetarium

Adler Planetarium is a public museum dedicated to astronomy and astrophysics. Founded in 1930 by Chicago businessman Max Adler, the museum is America's first planetarium and is part of Chicago's Museum Campus (comprised of the Planetarium, John G. Shedd Aquarium and The Field Museum). It became a National Historic Landmark in 1987.

Adler Planetarium has three full-sized theaters with featured shows; space science exhibits including their most recent Chasing Eclipses, and the interactive workshop Community Design Lab; and the Doane Observatory, a lakeside observatory that is one of the only public, research-active observatories. The planetarium also has a collection of print materials and antique scientific instruments on display. Visit Adler's Store to make a purchase that supports research and STEM (Science, Technology, Engineering and Math) throughout the Midwest, or Galileo's Café for a freshly prepared bite to eat.

Adler Planetarium is open 9:30am-4pm daily. Visit their website for ticket prices and show information.

1300 S Lake Shore Drive

Chicago IL 60605

adlerplanetarium.org

Chicago Riverwalk

Chicago Riverwalk is a pedestrian waterfront along the Chicago River. In 2016, it was expanded an additional 9 blocks and revamped into a series of six distinct civic spaces or “rooms” with names like Marina (food vendors and waterfront seating), the Cove (kayaking and boat rentals) and the River Theater (amphitheater seating). The Riverwalk provides an escape from the concrete, steel and glass of the city.

Enjoy floating gardens during your Riverwalk visit. Water Taxis and Boat Charters are available to enjoy viewing and learning about the city.

Beginning May 1st, City Winery Chicago offers River Domes to shield patrons from inclement weather while offering city views of the skyline and river.

Visit the website for more information about all the activities, attractions and events scheduled during your stay.

chicagoriverwalk.us

Museum of Contemporary Art

Museum of Contemporary Art (MCA) is one of the world's largest contemporary art venues. It is near Water Tower Place in downtown Chicago and was established in 1967. The museum is operated gallery style, with individual exhibits curated throughout the year. Exhibits can consist of temporary loans, permanent collection pieces, or some combination of temporary and permanent exhibits.



Tens of millions of tourists a year enjoy the bold architecture, jazz clubs and museums of Chicago.

The museum's collections include the work of Alexander Calder, Jasper Johns, Cindy Sherman, Kara Walker and Andy Warhol. Notable past exhibits include the record-breaking *David Bowie Is* exhibit, with almost 200,000 attendees. MCA, also contains historical surrealism, pop art minimalism and postmodernism along with contemporary painting sculpture, photograph, video and installation.

Featured exhibitions during June 2017 will include Little Lower Layer, Chicago Works: Chris Bradley, and Takashi Murakami: The Octopus Eats Its Own Legs. At press time, the MCA café is under construction; every Tuesday from 11:30am to 1:30pm, however, the museum hosts a pop-up restaurant in the area.

Visit Museum of Contemporary Art's website for event, performance and ticket information.

220 East Chicago Avenue
Chicago, IL 60611
mcachicago.org

The Second City

The Second City is the first ever improvisational theater troupe. This improvisation comedy enterprise began in 1959 and is one of the most influential and prolific comedy theaters in the world. Their name came from the title of an article in The New Yorker about Chicago. Second City counts Dan Aykroyd, Gilda Radner, John Candy, Joan Rivers, Tina Fey, Steve Carell, Stephen Colbert, Jane Lynch and Mike Meyers among the long

list of alumni who have cut teeth on their stage. There are also theaters in Toronto and Los Angeles in case you can't make it to a Chicago show.

The Second City Chicago has three sketch and improv comedy shows in rotation at Chicago Mainstage: "The Best of Second City Shows" (Saturdays & Sundays at 4pm, Mondays at 8pm); "The Second City Improv All-Stars" (Mondays at 7pm); and, "The Winner... Of Our Discontent" (Tuesdays to Sundays 8pm and 11pm).

Visit the website for ticket purchases and to learn more about The Second City.

1616 North Wells Street
Chicago, IL 60614
secondcity.com

Where To Shop

The Magnificent Mile

No stay in Chicago would be complete without a trip to The Magnificent Mile on Downtown Michigan Avenue. It is currently Chicago's largest shopping district with 460 retailers featuring mid-range to high-end shopping opportunities. Magnificent Mile is also the location of some of the US's tallest buildings such as the John Hancock Center and landmarks such as Wrigley Building.

Shops range in category from apparel or cosmetics to pet boutiques or toys. You'll find names such as Chanel, Gucci, Kiehl's, Hugo Boss, and Crate & Barrel along The Mag Mile. Take a break from shopping so you can dine at one of the Magnificent Mile's 275 award-winning restaurants.

Visit the website for a complete list of retailers, restaurants and events happening during your stay.

themagnificentmile.com

Where To Dine

Andy's Jazz Club

Andy's Jazz Club offers the full jazz club experience with tasty dining and mixed drinks. This low-key, intimate club attracts a mature crowd with nightly jazz performances and an American menu. Perfect for the after-work crowd or for tourists looking to immerse themselves in Andy's soulful jazz vibe minus the cigarette smoke. There's a two-hour table maximum, but it's not always strictly enforced. Be prepared for a crowded room as hot performances take the stage twice a night.

11 East Hubbard Street, Suite 1

Chicago, IL 60611

312-642-6805

andysjazzclub.com

Tortoise Supper Club

Tortoise Supper Club offers the full jazz club experience with tasty dining and mixes an upscale supper club with dark mahogany and leather finishes that give it a throwback vibe. American menu favorites like seafood and steaks are served by friendly wait staff and the specialty cocktails are impressive. Live jazz shows are on weekends only, but if you want to entertain clients or impress the father-in-law, this is the place to do it.

650 North Street

Chicago, IL 60654

312-755-1700

tortoiseclub.com

Bandera Restaurant

Bandera Restaurant on Magnificent Mile does American cuisine with southwestern flair. Their specialties include barbecue ribs, rotisserie chicken and cornbread served in a skillet, but they are also a crowd favorite because they're one of the few restaurants in town that offers delicious veggie burgers. They've made "USA Today's Best 10" list for restaurants; but nightly live jazz music doesn't hurt either. Window seats with a view are in high demand at Bandera's, so don't be surprised if you don't get one.

535 N Michigan Avenue

Chicago, IL 60611

312-644-3524

Banderarestaurants.com ■



The Faculty of Medicine of the University of Geneva announces the opening of a position for a

ASSOCIATE or FULL PROFESSOR in the field of translational research in oncology

CHARGE: This is a full-time position which includes translational oncology teaching at the bachelor, master and post-graduate levels, as well as the management of master's and doctoral thesis.

The candidate will be called upon to develop translational research in the fields of oncology within his area of specialization (breast or prostate cancer) in collaboration with the Clinical Research Center, and to obtain external funding.

He will also have to assume tasks within the Department of Internal Medicine Specialties of the Medical Faculty, and the Department of Oncology of the University Hospitals of Geneva.

He will need to demonstrate his capacity to network with related groups and units as part of a transversal mission.

TITLE AND EXPERIENCE REQUIRED:

Doctorate (MD and / or PhD) or equivalent title. In case of clinical competence, a part time hospital charge may be considered.

Experience in research and teaching.

Only candidates with a profile in innovative research of high scientific level will be considered. Publications in international journals

Start of the appointment: October 1st 2017 or by agreement

Instructions for submitting the application can be obtained from sylvia.deraemy@unige.ch

Mandatory online registration before July 20th 2017 at: <http://www.unige.ch/academ>

In a gender perspective, the University encourages the application of female candidates

Park Nicollet Clinic Oncologist/Hematologist

The Cancer Program at Park Nicollet is seeking an experienced BC/BE medical oncologist or hematologist-oncologist to join our well-respected group. Our team includes physicians, advanced practice clinicians, certified oncology nurses, pharmacists, nutritionists, chaplains, music therapists, integrated therapy specialists, palliative care, social workers, oncology psychotherapists, and a genetics counselor. The position will be based at the Frauenshuh Cancer Center in St Louis Park, and other clinic sites depending on growth.

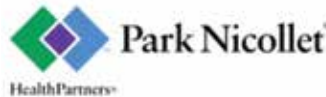
Accredited with commendations by the Commission on Cancer, our comprehensive cancer program offers a full complement of preventive, diagnostic, treatment and support services. We also maintain active membership in a free-standing CCOP, affiliated with ECOG.

We believe outstanding health care is delivered when we merge the science and intellect of medicine with the compassion, spirit and humanity of our hearts. We refer to this as "Head + Heart, Together," and it exists to inspire constant improvement and lasting success. We achieve this by partnering with patients and families in everything from care decisions to service and facility design. As we work together as a unified team, we engage patients, families and the community, and put them at the center of everything we do.

Park Nicollet Health Services, which includes Park Nicollet Clinic and Methodist Hospital, has been repeatedly recognized nationally for quality improvement and care activities. Park Nicollet Clinic is one of the largest multispecialty clinics in the United States, with over 800 clinicians providing care in 45 medical/surgical specialties and subspecialties. The Twin Cities are vibrant communities with excellent schools, parks, lakes, theater, professional sports and an international airport.

For immediate consideration, please email CV to Stasi Johnson, Clinician Recruitment, Park Nicollet Health Services, Stasi.Johnson@parknicollet.com. For more information call (952) 993-2703.

We are an Equal Opportunity Employer and do not discriminate against any employee or applicant for employment because of race, color, sex, age, national origin, religion, sexual orientation, gender identity, status as a veteran, and basis of disability or any other federal, state or local protected class.



CUTTING-EDGE ONCOLOGY OPPORTUNITIES

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We are recruiting BC/BE Medical Oncologists and Hematologists to serve as Medical Officers in the dynamic, challenging and innovative sphere of drug development at the intersection of law, research and medicine. Our work involves novel biotechnology-based therapies for malignant disease including:

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www.fda.gov

What Recruiters Look For In a Candidate



The physician recruitment scene is changing. By 2025, millennials will account for about 70% of the workforce. And with many physicians rapidly nearing retirement, the healthcare industry is preparing itself for a major shift in its recruitment ideology.

With 70 million baby boomers preparing to exit the workforce or moving into leadership roles, the industry is facing an impending shortage of mid-career level practitioners. In fact, new data from the [Association of American Medical Colleges](#) (AAMC) shows that the United States is expected to experience a deficit of 40,800 to 104,900 doctors by 2030. This means that experienced, sophisticated job-seekers are in demand, prompting recruiters to rethink their approach from the ground up.

Recruiters have recognized that the industry is on the precipice of profound change and have amended their tactics. To get the best candidates from the available pool of mid-career physicians, recruiters now look for the following desirable traits to inform their recruitment efforts.

Communication Skills

The days of patients relying solely on the advice of their physicians are gone. Patients are more informed and involved in their care than ever (thanks in part to Google and WebMD) and recruiters want candidates who can engage candidly without being dismissive or unreceptive. Recruiters value candidates who show that they can communicate clearly, listen, and are truly invested in the health of their patients. For hospitals, it is paramount that doctors can explain ailments, treatments, and drug options without the use of medical jargon to encourage a more participatory healthcare experience.

Electronic Health Records Knowledge

Many facilities will train new physicians on their Electronic Health Records (EHRs), but it is a plus if a candidate is already EHR-savvy or at least has working knowledge of any of the available platforms.

Empathy, Respect, and Collaborative


Studies show that patients whose physicians were trusted and showed empathy were more likely to experience positive clinical outcomes. This is in large part because patients tend to stick with a course of treatment if they have trust in their doctors. Recruiters consider a candidate's capacity for compassion a top priority, as it contributes heavily to a physician's presumed clinical capabilities.

Doctors, more than other professions, rely heavily on teamwork and collaboration. It is especially imperative in large hospitals and practices where physicians rely on a network of staff, nurses, and assistants. Physicians who show a willingness to share ideas and work as a team are desirable to recruiters.

Adaptability and Flexibility

In an industry that thrives on innovation and efficiency, hospitals and medical offices find it critical to implement new policies and systems often. It is imperative that physicians are highly adaptable and not averse to changes in their environments.

While work-life balance wasn't a consideration when the baby boomers joined the workforce, candidates today place a high-priority on their ability to have a well-rounded life outside of their profession. Recruiters understand this new generation of



Experienced, sophisticated job-seekers are in demand, prompting recruiters to rethink their approach from the ground up.

job seekers and respect candidates who are upfront and flexible about their scheduling expectations. Employers too, prefer recruiting those who show a willingness to compromise, and are learning to reward them with other incentives like non-traditional shifts, more casual work environments, and signing bonuses.

[Straightforwardness](#)

Doctors, often tasked with delivering life-changing news, should be straightforward and forthright in their communication. A patient is more likely to be receptive to a physician who is honest and direct about the facts.

[Cultural Fit](#)

Because healthcare depends on how well a medical team works together, it is crucial that new recruits can adjust easily to their new environment. The industry, however, is a bit behind the curve in considering how well a candidate might fit into an organization. Recruiters, however, taking a cue from other service industries, now look to a candidate's interpersonal skills, attitude towards change, and overall personal affinities to steer hiring decisions.

[Consistency and Passion](#)

Recruiters are wary of physicians who are inconsistent in their experience or who hop from job to job. Unexplained gaps or dramatic shifts in practice that don't match a candidate's educational background raise red flags. Drastic changes on a CV could indicate to a recruiter that a candidate is trying to conceal malpractice claims or other unflattering details from previous employers.

Also, nothing is more disheartening, or unsettling to a patient, than a physician who does not seem to care about his/her practice. A study by the [National Institutes of Health's National Library of Medicine](#) (NIH/NLM) concludes that patient-physician relationships are built on trust, and patients' trust in their providers is derived largely from the passion with which they perform their work. Recruiters will ask questions to gauge a candidate's sincerity and passion for healthcare, and will often pursue the more genuine candidate.

[Good References](#)

Recruiters depend on references not only to verify a candidate's work history, but to get a better feel for how they work in a team environment. These conversations are often revelatory and can seriously hinder or boost a recruits' chances for a job. If a recruiter cannot reach a reference or receives an unfavorable review, they may seek more information from the physician before making a decision.

Healthcare recruiters are often the last line of defense between a patient and a less than stellar physician. Organizations depend on the reputation and commitment of their teams, and as a number of seasoned physicians begin to exit the workforce, they strive to maintain the level of service and professionalism of past generations of physicians, while embracing the needs and challenges of emerging opportunities. Candidates who embody both will remain in high demand for years to come. ■

Contributor: Melanie Grano

Sources
[BLS.gov](#); [ASPR.org](#)

Leading the future of health care.



Stop by and see us at the:
ASCO Career Fair - Booth CF5
June 3rd – June 5th, 2017
McCormick Place - Chicago, Illinois

The Permanente Medical Group, Inc. is one of the largest medical groups in the nation with over 9,000 physicians, 22 medical centers, numerous clinics throughout Northern and Central California and a 70-year tradition of providing quality medical care.

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For the **Modesto Opportunity**, please contact **Harjit Singh** at Harjit.X.Singh@kp.org or call (510) 625-5963.

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CAPE FEAR VALLEY HEALTH



Join Our Established Team of Medical Oncologists in Beautiful North Carolina!

Cape Fear Valley Cancer Center is seeking to add additional BE/BC providers to established group with multiple locations. We are expanding to meet the growing demand for local services while making it easier for our patients. System has dedicated resources and support of outreach opportunities in the surrounding communities.

This is a comprehensive cancer program that includes radiation oncology including Cyberknife, medical oncology, and full support services. Center is ACOS accredited and QOPI Certified. Clinic hours are Monday – Friday from 9-5 with weekday and weekend call. Call rotates within the provider group.

We offer competitive compensation plus generous benefits including Paid Malpractice, CME Time and Allowance, Accrued Paid Time Off, 403b and 457b Match, Health, Dental, and other desirable benefits.

Cape Fear Valley Health is located in the thriving and diverse community of Fayetteville, NC which consists of more than 319,000 residents. Fayetteville has received the prestigious All-America City Award three times from the National Civic League and has been recognized for cultural diversity and municipal excellence by the National League of Cities.

Fayetteville is known for its many golf courses with Pinehurst located only 30 minutes from our city. Our central location provides easy access to some of the most beautiful beaches in the country to our east and to the majestic Blue Ridge Mountains to our west. In addition to our central location, our mild climate, low cost of living and patriotic spirit makes it an ideal city for rising healthcare professionals and families. As the sixth largest city in North Carolina – and growing – both Fayetteville and Cape Fear Valley Health's healthcare needs are on the rise.

Please contact Physician Services at (910) 615-1891 or jrodriguez@capefearvalley.com for more details.

Expert Opinion/Interview

Selections from PracticeUpdate's 2017 Oncology Conference Coverage

HR+ Breast Cancer: Current Concepts From the Miami Breast Cancer Conference

Interview with Reshma L. Mahtani, DO Interview by Ana Sandoval, MD

Dr. Sandoval: What would you consider to be the major highlights in hormone-positive metastatic breast cancer at this year's MBCC?

Dr. Mahtani: A general theme we have heard a lot about over the last several years involves identifying pathways that mediate endocrine resistance. This year at MBCC we heard a lot of discussion about CDK4/6 inhibitors, which have really been a major addition to the armamentarium for ER+ metastatic breast cancer. Palbociclib has demonstrated impressive improvements in progression-free survival for patients treated in the first-line setting in combination with a nonsteroidal aromatase inhibitor (NSAI). It is also indicated for those who developed recurrent disease while on adjuvant hormonal therapy, or after progression on an NSAI for metastatic disease, in combination with fulvestrant. We also heard about other CDK4/6 inhibitors, including ribociclib, which was approved the day after the conference ended. Any differences in efficacy or toxicity remain to be seen. We also heard about abemaciclib, which is unique in that it has demonstrated single-agent activity in a heavily pretreated population. Finally, we heard about other novel therapies including mTOR inhibitors and PI3K inhibitors.

Dr. Sandoval: What is your approach in the treatment of hormone-positive metastatic breast cancer?

Dr. Mahtani: First and foremost, my approach is to recognize that, unfortunately, ER+ metastatic breast cancer is not usually a curable illness, and we have to be quite cognizant of treatment-related toxicities and how they impact a patient's quality of life. As such, I always try to exhaust hormonal therapies prior to moving to chemotherapy, if I feel this is appropriate based on disease burden and the patient's symptoms. When making treatment decisions, I try to maximize the benefit of treatments by sequencing therapies such that patients get the most time possible on a particular treatment.

Dr. Sandoval: In what way do you sequence the available therapy for hormone-positive metastatic disease?

Dr. Mahtani: Many patients are now receiving AIs in the adjuvant setting. For a patient who has developed recurrent disease more than 1 year post completion of an AI in the adjuvant setting, my standard approach is to start with letrozole and palbociclib, based on the PALOMA-1 and -2 data. For patients who progressed while on an adjuvant AI, I usually start with fulvestrant and palbociclib. I really don't understand the concept of "saving" this effective therapy for later, as the majority of patients do very well from a toxicity perspective and it's clearly an effective therapy. In later lines of therapy, I consider other agents such as fulvestrant monotherapy (in patients who received letrozole and palbociclib first line) or exemestane and everolimus. Of course, we can't forget some of our other hormonal therapy options such as tamoxifen, high-dose estrogen therapy, and even megestrol. Some of these are older treatments but can still be very effective. Finally, we always keep clinical trial options in mind.

Dr. Sandoval: Dr. Hope Rugo mentioned steroid mouthwash to prevent everolimus toxicity. Do you have any advice to manage this toxicity?

Dr. Mahtani: The SWISH trial was a study that evaluated the efficacy of a steroid-based mouthwash in a preventative fashion to ameliorate one of the major toxicities of everolimus, which is stomatitis. We know this toxicity can be severe and it happens early on. It can be associated with significant weight loss and even dehydration and hospitalization. I think the important point about this toxicity is it highlights the need for us to educate our patients about how to use the mouthwash and when to hold the drug. The goal of many of our targeted therapy combinations is to delay the use of chemotherapy. Therefore, we need to learn to manage the toxicities associated with some of these therapies, so as to not take away the benefit of hormonal therapy.

Dr. Sandoval: Where do you think PI3K inhibitors will likely fit into the treatment for hormone-positive metastatic breast cancer?

Dr. Mahtani: The PI3K pathway is an important pathway in cancer metabolism and growth. Mutations in this pathway are common in breast cancer, with some data demonstrating PI3K is implicated in causing resistance to HER2-targeted therapies, and hormonal therapies as well. Some of the agents that have been studied are considered pan-PI3K inhibitors and have shown relatively small benefits in an unselected population. When looking at PI3K-mutant breast cancers, the magnitude of benefit is greater in certain series. However, a major concern with this class of therapy is toxicity, as many of these pan-inhibitors are associated with significant side effects such as psychiatric issues, abnormalities on liver function tests, and hyperglycemia. We will likely use these agents further down the line for ER+ metastatic disease, but hopefully we will see improved side-effect profiles with the more alpha-specific inhibitors that are also under investigation.

RCC Highlights From ASCO GU 2017

Interview with Bradley G. Somer, MD Interview by Farzanna S. Haffizulla, MD, FACP, FAMWA

Dr. Farzanna Haffizulla: Welcome to this PracticeUpdate. I'm Dr. Farzanna Haffizulla. Joining me today is Dr. Bradley Somer, Assistant Professor in Hematology and Oncology at the University of Tennessee Health Science Center, and Senior Partner of the West Cancer Clinic in Memphis, Tennessee. Dr. Somer, excellent to have you here today.

Dr. Bradley Somer: Thank you for having me.

Dr. Farzanna Haffizulla: I would love for you to highlight the most important presentations or some of the important presentations with new data here at ASCO GU 2017.

Dr. Bradley Somer: So, we'll talk through a couple of the highlighted renal cell data that I found interesting. The first one, Dave McDermott's abstract of atezolizumab plus or minus bevacizumab versus sunitinib in front line, so I thought that that had some interesting data in that it's a novel combination, looking at a novel combination, and it looked like there was some...in the PD-L1 positive patients there was some interesting efficacy data and with potentially less toxicity. So, he hasn't yet presented the data, but it looks like it's something to watch in phase 3, and I think that that's something that we'll be keeping an eye on.

I think that there was some very interesting data from Alam Ridwan with the registry data from looking at small renal masses. So, in that study there was about 600 patients that had small renal masses, under 4 cm, and the question is, is how to best manage those patients. So, whether to do primary intervention, either ablation or some other additional intervention, surgical resection, or just watchful waiting or active surveillance. So it was interesting, of those patients in that registry of multiple institutions, it was about evenly separated between those that got active surveillance and those that got some kind of primary intervention.

And the interesting thing of it was that whether or not you had an intervention or you didn't, it seemed that the cancer-specific survival was the same. So, lending potential credence to the notion of not really intervening, so we oftentimes talk about, well, when do you intervene, but now there's...and I think that there's a lot of other presentations here at ASCO GU where we're asking the

question, well, when should we not intervene or take an active surveillance strategy. So, I thought that that was an interesting presentation, too.

Dr. Bradley Somer: Monty Pal, we all know Monty.

Dr. Farzanna Haffizulla: Yes.

Dr. Bradley Somer: So he's got a very interesting presentation where he has looked at circulating tumor cell DNA and looking at genomic alterations between first-line and second-line therapy where, very interesting, there's change in circulating-tumor cell DNA. There's a change in the number of alterations where it seems to be that there's increasing alterations going from first-line to second-line therapy. And the types of alterations are also somewhat interesting, in that there was an increase in p53 mutations or sometimes alterations in the mTOR pathway that might give us a little bit of insight into where and how we may treat going into the second line. So, I think as these biomarkers develop, I think that there's potential for real utilization of this technology in terms of how we might treat going into second line.

Dr. Farzanna Haffizulla: Sure.

Dr. Bradley Somer: There's also...there was interesting data - you know, the question of dual combination, dual therapy with immunotherapy, is something that's been of interest. Initially with melanoma, the combination of nivolumab and ipilimumab seemed to be a very active combination when compared to nivolumab alone. The question is in renal cell, and we saw some early data at ESMO with the nivolumab/ipilimumab combination. At ASCO GU there was a small study with pembrolizumab with low-dose ipilimumab by Toni Choueiri.

Dr. Farzanna Haffizulla: Yes.

Dr. Bradley Somer: Small study, but it gives a little bit of a taste in terms of what this might look like, and I think that everybody's kind of asking the question how's this going to develop in renal cell, so I thought that that kind of gives us a little additional insight into that. The toxicity was as you might expect, and there was a 20% response, 50% disease control rate, long duration of response as you might expect with immunotherapy, so I think that it's something, again, that we should be watching for, for future developments.

I thought some of the...another very interesting study, I thought, was Nick Vogelzang. He did an economic analysis, a comparative effectiveness analysis, using Medicare claims data looking at front-line therapy in metastatic renal cell carcinoma, comparing Votrient or pazopanib to sunitinib. Looking not only at, as many people do, just looking at the pharmacy data, but also looking at costs of care, total cost of care, including office visits, hospitalization, length of stay in the hospitalization, total cost of hospitalization, which basically can add up.

And basically looking...coming up with the conclusion that pazopanib seemed to be a less expensive option, and I think...it was a good exercise. I think we're going to see more of these kinds of studies as we go into value-based programs. All through the United States that seems to be the big theme, so I think the more we study these kinds of things, the better that we'll get at this in the future.

Dr. Farzanna Haffizulla: So, a lot of excellent information coming out of ASCO GU 2017 here at this meeting. If you can boil it down, from all the data that was presented at this particular meeting, can you extract data that's ready to be translated into clinical practice? Quick highlights for our viewership.

Dr. Bradley Somer: So, I don't think at this ASCO GU there's like really earth shattering changes. I mean, I think, one of the things that I may take into practice would be looking at the data from David Bimatti in Italy. Where there's a cohort of active surveillance, patients with metastatic renal cell carcinoma tend to be the patients that are in the more favorable category or lower tumor burden and the question of whether you initiate therapy. The patients that got active surveillance and didn't even start therapy at all, you could just actively surveil them and then, on average, it took about 20 months to initiate therapy, and the patients seemed to be doing just as well.

To me, that's an area that I may take from this ASCO GU into my practice where maybe we can identify a patient that we can do active surveillance with metastatic renal cell carcinoma and delay targeted therapy for some time. Where they won't get as much quality of life related issues and side effects and cost obviously for some time, and without probably affecting outcome at all.

Dr. Farzana Haffizulla: Well, that is extraordinarily important information, and we really appreciate your perspective. For sharing your insight into this meeting and what might be coming down the pipeline, and what other results we expect to see in the future. So, I want to thank you very much for joining us for this PracticeUpdate.

Dr. Bradley Somer: Thank you. ■



The University of Vermont
LARNER COLLEGE OF MEDICINE

University of Vermont College of Medicine/University of Vermont
Medical Center

Department of Obstetrics, Gynecology and Reproductive Sciences

Gynecologic Oncology Faculty Position

The Department of Obstetrics, Gynecology and Reproductive Sciences is seeking to identify a new faculty member for our Gynecologic Oncology Division. We are looking for an individual at the Assistant or Associate Professor rank who is Board eligible/certified in Obstetrics and Gynecology as well as Gynecologic Oncology. The appointment effort is targeted at 0.8 FTE. The ideal candidate would be eligible for a clinical scholar pathway appointment. A committed academic interest in either educational programming or research productivity is desirable. The Oncology division within the department is an active, growing enterprise that currently includes 2 full-time physicians and a dedicated physician's assistant. The department has research expertise and activity in clinical outcomes research and clinical trials and is a member of NRG Oncology and GOG Foundation/Partners. Basic science investigations are ongoing in vascular physiology and reproductive immunology. The University of Vermont Medical Center is a Top 20 clinical quality hospital based on Vizient performance metrics. Academic rank, salary and benefits will be competitive and consistent with experience.

Review of applications will begin immediately and continue until the position is filled.

The University is especially interested in candidates who can contribute to the diversity and excellence of the academic community through their research, teaching, and/or service. Applicants are requested to include in their cover letter information about how they will further this goal.

The University of Vermont is an Equal Opportunity/ Affirmative Action Employer. Applications from women, veterans, individuals with disabilities and people from diverse racial, ethnic, and cultural backgrounds are encouraged.

Interested individuals should apply online at <http://www.uvmjobs.com/postings/24308>

Inquiries may be directed to **Cheung Wong M.D., Search Committee Chair** at cheung.wong@uvmhealth.org

GI and Thoracic Oncology Faculty Positions

UConn HEALTH

The **Carole and Ray Neag Comprehensive Cancer Center** and the Division of Hematology Oncology at **UConn Health** seek two oncologists with demonstrated expertise in the care of patients with solid tumors in the areas of **Thoracic** and **Gastrointestinal**. The successful candidate will have interest in clinical or translational research. In addition to clinical practice, leadership roles exist as **Director, Palliative Care** and **Medical Director, Clinical Trials Office** for interested candidates. Appointment at the Assistant or Associate Professor level commensurate with experience.

The Carole and Ray Neag Comprehensive Cancer Center has strong Divisions of Medical Oncology, Surgical Oncology, Radiation Oncology and Gynecological Oncology. We also have strong research programs in cancer immunotherapy, cancer prevention, cancer genomics and cancer cell biology. The Jackson Laboratory for Genomic Medicine, located on our campus, is a partner institution.

UConn Health is composed of the schools of Medicine and Dental Medicine, Graduate Programs in Biomedical Sciences, Public Health and Clinical Translational Research, the John Dempsey Hospital, and the faculty practice. Our clinic, hospital and research facilities are in new or newly renovated state of the art facilities. We offer a competitive benefits and salary package.

The **Farmington Valley** is a wonderful place to raise a family and has many outstanding schools and neighborhoods. The area was recently named one of the 10 Best Places To Live in the United States by Kiplinger's magazine. It has a four season climate and is within two hours of Boston and New York City.

UConn Health is an affirmative action employer, in addition to an EEO and M/F/V/PWD/PV employer.

Interested candidates please contact:

Kelly Ashmore

314-236-4582

kashmore@cejkasearch.com



Radiation Oncologist Position Assistant Professor of Clinical Radiation Medicine

The **Department of Radiation Medicine** (www.ohsu.edu/radmedicine) at **Oregon Health & Science University's Knight Cancer Institute** is seeking an outstanding and highly interactive radiation oncologist for a full-time, clinically oriented Assistant Professor Faculty position. Applicants must have an MD or MD/PhD, licensed to practice in Oregon, and Board certification (or Board eligibility) is required. The ideal candidate would have demonstrated excellence in clinical care, practice building, and education.

This position will primarily be in clinical practice in **Beaverton, Oregon**. The Beaverton Cancer Center is located on the same square mile block as the Nike World Headquarters and within close proximity to Intel. The appointee shall provide services as assigned by the Department Chair and Vice Chair in furtherance of the mission, goals and objectives of OHSU, the Knight Cancer Institute, Radiation Oncology and the School of Medicine, which include research, patient care, outreach and public service. This position will be made up of the following components: clinical, teaching, and academic responsibilities in the community setting.

The duties of this position include serving as the primary attending physician at the Beaverton Radiation Medicine Clinic and providing back-up coverage at other OHSU locations, including Marquam Hill, Portland Veterans Administration Medical Center, and the Tuality OHSU Cancer Center. As well as developing and maintaining a robust clinical program in Radiation Medicine, the care of patients requiring radiation treatment in the community setting, participating with other faculty on disease specific provider teams, attendance at tumor boards, establishing and maintaining a program of scholarly activity directed toward improved understanding of the causes, detection and treatment of hematologic and oncologic disease. Other duties may include Participating in administrative committees and councils of OHSU as approved by the Chair, engaging in public service through consultative activities with non-university groups with knowledge and consent of the Chair. This position is required to maintain in good standing a license to practice medicine in the State of Oregon and any other jurisdiction where licensure is necessary in order to perform professional services and to maintain medical staff privileges at OHSU.

Preference will be given to candidates with a strong experience in clinical care and program building. **OHSU Knight Cancer Institute's Department of Radiation Medicine** is one of the largest treating practices in the Pacific Northwest. Our treatment sites include Varian, Elekta and TomoTherapy technology and utilize a variety of treatment planning systems in caring for our patients. Additionally, we have an active intraoperative program that includes Mobetron and IntraBeam. Our centers are integrated with medical oncology and radiology services at all sites.

The **OHSU Knight Cancer Institute** is an international leader in cancer research and precision treatment. The OHSU is the only **National Cancer Institute (NCI)**-designated Cancer Center between Sacramento and Seattle. Additionally the **Knight Cancer Institute** is the headquarters for the NCI's SWOG collaborative, a cancer research cooperative group that designs and conducts multidisciplinary clinical trials to improve the practice of medicine in preventing, detecting and treating cancer and enhancing quality of life for cancer survivors.

To be considered for this exciting opportunity with the **Knight Cancer Institute and the OHSU Department of Radiation Medicine**, interested candidates should forward the following: (1) a cover letter outlining relevance of clinical and practice-building activities, (2) a current curriculum vita, and (3) the names and contact information of three references to and apply on the link below.

Bridgett Sparkman, Clinical Operations Supervisor
Department of Radiation Medicine
sparkmab@ohsu.edu

OHSU is an Equal Opportunity, Affirmative Action Employer of all protected classes, including veterans and individuals with disabilities. Women and minorities are encouraged to apply. Hiring is contingent upon eligibility to work in the United States.



Help us change the delivery of healthcare.

The Medical Oncology opportunity of a lifetime is waiting for you at AtlantiCare.

AtlantiCare, a Malcolm Baldrige National Quality Award recipient and the leading health system in southeastern New Jersey, is seeking experienced BC/BE Medical Oncology physicians with a strong patient-first focus. We are seeking an experienced and visionary leader to serve as the Director of Medical Oncology. We are also looking for a full-time Medical Oncologist to join our clinical staff in this rapidly growing program.

Here you will have access to clinical trials, oncology nurse navigation, and psychosocial support and wellness services for your patients. You will work alongside experienced physicians, APNs, oncology-certified nurses and a dedicated breast-health coordinator. At AtlantiCare, we've invested heavily in our cancer-care services, with state-of-the-art equipment, technology and facility updates at our two locations — in Egg Harbor Township and Cape May Court House.

Successful candidates will be board-certified/board-eligible in medical oncology or hematology/oncology and possess strong clinical, communication and consultation skills, as well as a patient-first focus. You will join AtlantiCare Physician Group, the health system's expanding multidisciplinary group, with the Director of Medical Oncology reporting to the health system's Chief Medical Officer.

Come join the region's healthcare leader — an organization known for medical innovation and performance excellence. You'll have it all, here in beautiful southeastern New Jersey, with its pristine beaches and welcoming neighborhoods — plus an abundance of history, culture, arts, entertainment and recreation. Best of all, you'll be backed by a health system that values your opinions and contributions, and respects your need for work-life balance and your desire to make a difference.

Join AtlantiCare. And make a contribution that could change healthcare.

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Oregon Health and Science University Department of Radiation Medicine

Radiation Oncologist Position Assistant/Associate Professor of Clinical Radiation Medicine

The **Department of Radiation Medicine** (www.ohsu.edu/radmedicine) at **Oregon Health & Science University's Knight Cancer Institute** is seeking an outstanding and highly interactive radiation oncologist for a full-time, clinical Assistant or Associate Professor faculty position. Rank will be commensurate with experience and applicants must have an MD or equivalent degree, Board certification (or Board eligibility) is required. The ideal candidate would have demonstrated excellence in clinical care, practice building, research and education.

This position will primarily be in clinical practice in **picturesque Astoria, Oregon**. Astoria is a small scenic town on the North Coast of Oregon, 96 miles west of Portland, nestled between the mountains and the mouth of the mighty Columbia River with a service area of 60,000. Although it is the oldest settlement west of the Mississippi, Astoria is a family-oriented community that boasts an eclectic mixture of restaurants on the river, coffee shops, bakeries, micro-breweries and locally owned boutiques. We enjoy a thriving local arts scene and numerous festivals throughout the year. Opportunities for outdoor activities abound and include hiking, camping, fishing, kiteboarding and surfing; for those who enjoy winter sports, there are four ski resorts within a 3-hour drive. Learn more at <http://www.astoriaoregon.com/>.

Preference will be given to candidates with a strong experience in clinical care and program building. The primary responsibilities are to develop and direct the newly formed radiation oncology program at the new **Columbia Memorial Hospital / OHSU Cancer Center** in Astoria. The successful candidate will rotate at the main Portland campus quarterly and have the opportunity to build educational and/or research interests in a highly collegial and supportive environment. **OHSU Knight Cancer Institute's Department of Radiation Medicine** is one of the largest treating practices in the Pacific Northwest. Our treatment sites include Varian, Elekta and TomoTherapy technology and utilize a variety of treatment planning systems in caring for our patients. Additionally, we have an active intraoperative program that includes Mobetron and IntraBeam. Our centers are integrated with medical oncology and radiology services at all sites.

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Bridgett Sparkman, Executive Assistant to the Chair
Department of Radiation Medicine
sparkmab@ohsu.edu

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Medical Oncologist/Hematologist Hibbing and Grand Rapids, MN

University of Minnesota Health - Cancer Care is seeking a Medical Oncologist/Hematologist for a practice at Fairview Range Health Services in Hibbing, MN and new location at Grand Itasca Clinic and Hospital in Grand Rapids, MN.

- *Affiliated with the University of Minnesota, our 8 community clinics provide exceptional, patient-centered care and patient access to leading-edge clinical trials.*
- *We welcome physicians who would like to develop a practice as a general hematologist/oncologist and maintain an area of special interest.*
- *4 day clinical work week. (2 days in Hibbing and 2 days in Grand Rapids).*
- *Initial market competitive salary guarantee with ability to exceed on production compensation program. Comprehensive benefits package to also include generous time off, annual CME allowance, malpractice insurance, a retirement plan, and much more.*
- *This is a unique opportunity to join an academic affiliated practice and live in scenic Northern MN, 3 hours from the Twin Cities.*

University of Minnesota Health - Cancer Care is a specialized team of doctors, nurses and health care professionals committed to providing life-saving care to people with cancer. Our oncologists bring personalized treatment and leading-edge clinical trials from the University of Minnesota to patients in the growing, active communities that Fairview serves. The vision of this partnership is to be recognized as a national leader in patient-centered cancer treatment and cancer research.

*Emily Scholtes
800-842-6469
recruit1@fairview.org
physicianjobs.fairview.org*

It's More Than a Career, It's a Mission.

Sarah Cannon Center for Blood Cancer at TriStar Centennial Medical Center

Sarah Cannon Center for Blood Cancer at TriStar Centennial Medical Center in Nashville, Tennessee is part of the Sarah Cannon Blood Cancer Network, one of the world's largest providers of blood and marrow transplants. Our FACT accredited program offers more than 10 years' experience performing autologous and allogeneic transplants including related and unrelated blood and marrow transplants as well as peripheral stem cell and haploidentical. In 2016, our program performed 123 transplants.

Our multi-disciplinary, comprehensive transplant team of six physicians (4 Adult and 2 Pediatric) is seeking an additional BMT physician.

- Comprehensive transplant support team comprised of clinical psychologists, fertility specialists, oncology nurses, oncology dietitians, oncology clinical pharmacists, case managers, art therapists and oncology social workers
- Dedicated 25-bed inpatient hem/onc BMT unit
- New, state-of-the-art 12,000 square foot combined outpatient provider clinic and infusion clinic with expected completion December 2017.
- Participate in clinical trials and research through our partnership with the Sarah Cannon Research Institute (a clinical trial leader in the majority of approved cancer therapies in the last 10 years)
- Competitive compensation package with full benefits including Sign-On Bonus
- Certification by the Hematology/Oncology Board required
- Fellowship training in BMT required

The Middle Tennessee Region

The Middle Tennessee region is home to more than 1.8 million people and more than 40,000 businesses. More than 250 healthcare companies are headquartered in the Nashville region, making healthcare the #1 industry! Home to corporate headquarter giants including Nissan North America, Bridgestone Americas, Dollar General, and HCA. Tennessee has the second lowest state and local tax burden per capita, and NO state income tax! Nashville is rated by both *Frommer's* and *Travel and Leisure* as one of "The Best Places to go in 2017". Home to the Tennessee Titans, Nashville Predators and Nashville Sounds. For more community information, visit www.VisitMusicCity.com and www.NashvilleChamber.com

For a CONFIDENTIAL conversation, please contact:

Denise Zusack

Denise.Zusack@SarahCannon.com

321.287.6373

Visit our booth at ASCO #3079



The Children's Hospital of Richmond and the NCI-designated Massey Cancer Center at Virginia Commonwealth University are seeking two exceptional pediatric physicians.

Director, Pediatric Stem Cell Transplant and Cellular Engineering



The Children's Hospital of Richmond provides the largest and most academic program for children and adolescents with cancer and blood diseases in Virginia. Begun in the 1980s, the pediatric hematology-oncology fellowship program has 100% pass rate, with all of its graduates in active university-based programs. A state-of-the-art 640,000 sq. ft. Children's Pavilion opened April 2016, and construction is planned for a new Women and Children's Hospital (that will house both pediatric and adult transplant units).

The Stem Cell Transplant program closely interacts with the adult Stem Cell Transplant program, under the direction of Dr. John McCarty, which performs ~200 transplants/year. The program is FAHCT-accredited. The program contains a GMP facility equipped for cellular therapy and cell processing. Our center participates in national transplant clinical trial consortia and is recognized as a COG and NMDP transplant center.



The director will have previous experience as a faculty member in an established pediatric stem cell transplant program. The appointment will be at the Associate or Full Professor level. He/she will be expected to develop innovative clinical and research programs, recruit additional providers and scientists, and deepen our collaborations with our regional and national partners. He/she will have laboratory and/or clinical interests in one of the following areas: cellular engineering, immunology, or stem cell biology. A generous start-up package with an endowed research fund will be provided.

The candidate will join an expanding academic division of 12 other faculty and five advanced practice providers, clinical research associates, in-patient chemotherapy nurses, pharmacists, and a psychosocial team of social workers, psychologists, child life specialists, and chaplain.

Program Leader in Pediatric Neuro-Oncology

The Program Leader will provide leadership in clinical and translational research and will have additional responsibilities in clinical care and teaching. Currently, the division is the only facility providing pediatric stem cell transplantation in Virginia. The Pediatric Neuro-oncology section includes an outstanding team of neurosurgeons and neuroradiology expertise, and the Program Leader will work closely with the adult neuro-oncology program headed by Dr. Mark Malkin. The division boasts cutting edge research facilities including the newly developed center for zebrafish modeling of human diseases and well-funded laboratories including those studying sphingolipid biochemistry, chromatin remodeling, and developmental therapeutics. Additionally, the division offers a Pediatric Hematology-Oncology fellowship with support for a fourth year.

The preferred applicant will be a clinical investigator with academic accomplishments in the areas of early phase trials for pediatric brain tumors, brain tumor metabolism, or brain tumor stem cell culture. However, we will consider applicants with all levels of experience and the interest to become a clinical investigator. All applicants should have strong clinical skills and the ability to work in a multidisciplinary environment. Rank, salary, and research support will be commensurate with experience.

Virginia Commonwealth University is located in revitalized, downtown Richmond. Richmond provides superb, affordable quality of life. One can bike, kayak, and hike on the same day. Local restaurants have recently won national awards. Richmond boasts a thriving arts scene with the renowned Virginia Museum of Fine Arts and soon the Institute of Contemporary Art. Central Virginia is home to some of the country's best vineyards and microbreweries. Washington, D.C., the Blue Ridge Mountains, and the Atlantic Ocean are within short driving distance.

Interested candidates can visit www.vcujobs.com for more information or to apply.

- **Director, Pediatric Stem Cell Transplant and Cellular Engineering:** <https://www.vcujobs.com/postings/61720>
- **Pediatric Neuro Oncology:** <https://www.vcujobs.com/postings/54952>