

Post Title: Career Question.

Post Content: Hi all, I am currently deciding whether to enter a CAMPEP MS program in medical physics. I was wondering if medical physics has been a fulfilling career? Would you do it again? Would you recommend it? What would you have done differently?

Comments:

This job is repetitive and boring, if you are not into groundhog measurements and QAs, then it would be better to find something else. Also, it is somehow biased and unfair, if you are not connected and have a good network you will end up working in a s* place regardless of your intelligence and skills.

>

^Found the locum!

I worked (from home) nearly all day today (Sunday). I have a hugely busy primary job, and I have two side gigs. I look forward to go to work every day. And I am rewarded handsomely for my hard work - which makes me feel overpaid because I really enjoy what I do. If you aren't into this for some reason though, I think that you will get weeded out over the long term.

I'm at home on a Sunday night and I look forward to work tomorrow. Before I went back to grad school to get my MS in medphys, I worked as an engineer. Sunday night was the worst because I would dread the next day. I've been a clinical physicist almost 4 years, plus 2 years residency, and I truly enjoy it. Switching careers was the best choice I ever made. And I also speak with high school physics classes about this career path, so I definitely recommend it!

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Wow!! I don't normally reply on these things but This is the same exact story as mine except that I'm still I grad school. Former engineer. Quit my job to pursue a medphys career and currently in my last semester of my MS. Enjoying what I am learning and I already see how I'm making at difference in the clinics. Looking forward to residency and eventually a paycheck ;)

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Awesome, glad to hear another story like mine! I have found the engineering background to serve me extremely well clinically, especially troubleshooting linac issues and identifying ways to improve QA workflows. I also believe residency programs really valued the fact that I had worked in "the real world" and wasn't an undergrad straight to grad student to residency. For some people working a proper 40+ hour week for the first time in their

life can be a real struggle, not the kind of risk a residency wants to take if they don't have to.

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Thank you for your input!

I'm finishing my residency this summer and will start my career as a faculty, primarily working in the clinic immediately after graduating. So far it's been fulfilling for me. I get to work with advanced technology and use it to treat patients, and often literally save their lives. I enjoy my team around me, which includes radiation oncologists, therapists, other medical physicists, dosimetrists and nurses, among others. Sure, a decent amount of the work is routine and repetitive, but that's just the reality of clinical medicine. I'd do it all the same again. I don't have any regrets about where I went to school or did residency. But that's just my personal experience. The question of "is med phys fulfilling to you" is of course, very personal and depends on what the person you're asking is looking for. I think the best question you need to ask yourself is if a career in med phys offers you most of the things you're looking for.

>

Thanks for your answer!

Post Title: Career Question: Women with a Family in Clinical Med Physics?

Post Content: I am interested in a career in clinical medical physics. However, I am woman and do hope to have a family. My significant other also works in healthcare and will work full-time normal hours as well. What are your experiences with raising children/having a family with a clinical career? When did you decide to have children? With the residency requirement, it is hard to decide when is best to do so.

Comments:

If you work in Canada, you'll get year-long maternity leaves (going to be 1.5 soon), and I know few of them who work significantly more than 40 hours/week unless they want to.

Hi, I agree with everyone else here. I had my first kid just after starting my first job, and my second kid 2 years after. I use conventional daycare/school with after school program, and take turns with my husband in drop offs and pick ups (we are pretty much equal in responsibilities). I still travel a few times a year. But like ericvt says, there are trade-offs, and we have to learn to accept them (not easy at times). Any time is as perfect as any other to have kids!

I'm a clinical diagnostic medical physicist. I have two children, who are currently ages 7 and 9. My son was born towards the beginning of my residency. My daughter was born almost a year after I finished my residency. I will say this: There is no perfect time to have a child, but there are ways to make it work while still having a fulfilling career. There have been times when my kids have come to work with me off-hours (they actually liked sitting in the front of the mobile mammography coach eating trail mix and watching TV while I tested the mammo unit in the back), and they have sat through some of my lectures. If you want to discuss more, I'm happy to share some of my experiences with you.

On average it's a 40-50 hour/wk job which is typical for any white collar profession. However, you can end up working longer if you don't carefully schedule things to work around clinical hours. Your happiness will depend on your organizational skills and your employer's expectation. Keep in mind I'm a guy, but I'd say it's doable.

I know plenty of people in the medical physics community who have young children and are raising them without issue. Some have full-time nannies that they've hired (you can comfortably afford this on a physicist's salary in the US), some have family that helps out, some use conventional daycare systems, some have part-time jobs instead of full-time...but there are plenty of them and they get the job done. It's doable, with trade offs on both sides: you will miss some child-related stuff because of inescapable work obligations, and you also may not be able to make progress on some clinical projects as fast because of course you want to be out of work at a reasonable time to be with your kids.

Post Title: [Training Tuesday] - Weekly thread for questions about grad school, residency, and general career topics 07/11/2023

Post Content: This is the place to ask questions about graduate school, training programs, or general basic career topics. If you are just learning about the field and want to know if it is something you should explore, this thread is probably the correct place for those first few questions on your mind. Examples: * "I majored in Surf Science and Technology in undergrad, is Medical Physics right for me?" * "I can't decide between Biomedical Engineering and Medical Physics..." * "Do Medical Physicists get free CT scans for life?" * "Masters vs. PhD" * "How do I prepare for Residency interviews?"

Comments:

As someone looking to get into grad school, I have concerns about the long term viability of becoming a radiotherapy medical physicist. I plan on doing a PhD and then residency. This will be

6+ years of training and I was wondering if people currently in the field think it will still be a viable career in 20 or 30 years? It is a lot of training to end up jobless in a decade or two.

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I don't understand where you (and presumably others) are getting information that suggests that MP will be extinct in 2-3 decades. Same goes for dosimetry.

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I got the idea that dosimetry will disappear faster than the role of a medical physicist from a medical physicist. Also, my main concern isn't that the job will disappear, but that a lot fewer will be necessary.

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That one person's view is not in line with the view of most dosimetrists: <https://pubs.medicaldosimetry.org/pub/6C754B84-E1AA-DDA9-1C85-2F6282AEA009> (page 9). Maybe the dosimetrist organization is a biased source but I think the idea that AI is going to take over is overblown. I'm also interested to see if that physicist you talked too also thinks MP will go the same way. Some people are just jaded (a few of the users in this sub included).

>

Do you think Cancer will be cured in 20-30 years? If your answer is yes, then we won't need medical physicists. If your answer is no, then we will need medical physicists.

I am graduated with a computer science degree with physics coursework up to modern physics. To get to the required three more upper level classes, is it advisable to get them at an accredited university (where I might need to go to in person class and have to miss work) or take an online course?

How math heavy is the content for a MS in medical physics? I see all the pre-reqs about modern and quantum physics and calculus. Are the courses very calculus/linear algebra heavy and how much do prereqs from undergrad help you in those classes?

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Not heavy compared to any other physics degree. Pretty much can get by with differentials. Linear algebra not necessary.

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I agree that general calc/ODE knowledge is sufficient for normal grad school. Linear algebra will definitely come up if you're doing research in imaging though (probably more for PhD than MS degrees). Understanding Fourier transforms will also be useful.

I'm currently on track to graduate with my BS in Physics Fall 24. Do any programs accept Spring semester or would it not be worth it being a semester behind? I have connections at my local hospital from shadowing so am considering reaching out to see if i could do spring summer as an MPA.

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OUHSC at Oklahoma City also accepts students in the Spring semester and they have a great program! Reach out if you have any questions.

>

Georgia Tech!

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thank you!

Hi all! Are there any possibilities to find a starting medical physicist position (like trainee or junior) in the USA with non-us medical physicist graduation (phd or master), but with a few years clinical experience in external beam planning and dosimetry? Btw there is no medical physicist certification in my country for now...

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<https://www.theabr.org/medical-physics/initial-certification/international-medical-graduates> Check this out.

Couple questions. At the moment, I'm only applying to MSc programs for next Fall. 1. Why do many CAMPEP programs have varying curriculums/pre-req's? 2. Is there a noticeable hierarchy among universities that might affect career options/pay after graduation? 3. Are certain specialties more competitive than others?

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CAMPEP only requires a handful of classes, the rest of the curriculum is mostly up to the program director. They're tasked with preparing you for success as a professional, many people think different things are important to that end. No notable hierarchy, but always check their residency match rates. Some programs have low match rates, I'd personally avoid those. Some big names are actually "bad" programs from that perspective. Don't go university name shopping, it's not like other careers. Therapy med phys is generally more "competitive" because it

generally pays the most, but imaging might be "more competitive" based on your odds of matching to an imaging residency because they may have less total slots available (idk the exact numbers, just speculation)

For hoping to get into residency from a Master's program: Is it better to do a thesis? Or would it increase my chances of getting in if I get published?

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Probably doesn't matter much either way with just a Master's. The programs that want publications are going to want PhD's and the programs that just want Masters residents don't care about your thesis or Publications. Thesis is good to prepare giving talks for resident interviews though. But so is a publication.

I have been looking to transition from engineering to medical physics for some time. My job will pay for a few *health physics* classes (Dosimetry, etc). 1. I know transferability of courses varies from school to school, but is a health physics background useful if one wants to pursue a career in medical physics? 2. Are there any special pathways for health physicists who wish to transition to medical physics?

>

1. There is certainly going to be a health physics/radiation protection class in a CAMPEP program, so it'll be useful there, but there's a lot more material aside from that which will be totally new too. 2. No, there are no special pathways in the sense of being able to "skip steps" if going from HP to MP.

Few questions here! 1. I notice there are some MS Programs that don't require GRE. Does the GRE make graduate students more competitive for residency training than those that do not? 2. Is PhD necessary for those that do not want to do research? 3. Does working in imaging typically require a PhD?

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PhD isn't required in imaging (or NM for that matter). As mentioned there are some residencies that will only accept PhDs. However, there are some jobs that can't/won't hire MS applicants. There are definitely jobs out there for MS. Unless you want to do research, I recommend thinking of a PhD as a way to open a few additional doors.

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1. No, nobody reports GRE scores to residencies. 2. No, PhD isn't necessary. 3. No, PhD isn't required to be in imaging. Some residencies require PhDs but that's true of therapy as well.

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Thank you for your response!

Post Title: [Training Tuesday] - Weekly thread for questions about grad school, residency, and general career topics 07/04/2023

Post Content: This is the place to ask questions about graduate school, training programs, or general basic career topics. If you are just learning about the field and want to know if it is something you should explore, this thread is probably the correct place for those first few questions on your mind. Examples: * "I majored in Surf Science and Technology in undergrad, is Medical Physics right for me?" * "I can't decide between Biomedical Engineering and Medical Physics..." * "Do Medical Physicists get free CT scans for life?" * "Masters vs. PhD" * "How do I prepare for Residency interviews?"

Comments:

Once again asking what am I qualified to do with my bullshit degree? I can't pass board exams, can't get a residency, can't survive on my pissy MPA salary. Considering the military, or maybe welding school.

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[<https://www.goarmy.com/careers-and-jobs/career-match/science-medicine/research/72a-nuclear-medical-science-officer.html>]
(<https://www.goarmy.com/careers-and-jobs/career-match/science-medicine/research/72a-nuclear-medical-science-officer.html>)
[https://cool.osd.mil/army/moc/index.html?moc=aoc_72a&tab=overview](https://cool.osd.mil/army/moc/index.html?moc=aoc_72a&tab=overview) This MOS is where Army medical physicists go, and there somewhat equivalent MOSs in the other branches as well ([https://hr.sao.texas.gov/Compensation/MilitaryCrosswalk/MOSC_MedicalandHealth.pdf])(https://hr.sao.texas.gov/Compensation/MilitaryCrosswalk/MOSC_MedicalandHealth.pdf) first row 4th page) , assuming you're serious about joining the military and not just taking the piss.

For those who have passed the degree stage (MS, PhD), would you mind explaining how difficult it was to get into residency and how difficult was it to find a job after residency? Would hospitals or companies reach out to you before you graduated residency for job positions? Also do you have any suggestions on how to increase my chances of getting into residency and landing a good job?

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I've been out of school 5+ years and no residency. It is very difficult. And if you don't get certified you're shit out of luck.

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The overall residency match rate is typically 50-60%. Generally clinical experience is a great way to land preliminary interviews. From then on, it's mostly evaluations of character and "fit". You do not necessarily need clinical experience beforehand (I didn't have any in '21), but the odds are significantly improved with even a little exposure. It also helps you get the most out of your first months of residency. Recruiting after residency is very active via email and LinkedIn. PDs frequently get calls from recruiters asking about their residents. I would always encourage residents to go to AAPM and drop your resume at the career services section between your first and second year. Any graduate of a CAMPEP-accredited residency is going to be a solid candidate for most positions, so putting your name out there will make you more accessible to recruiters. The AAPM job boards are always active and have positions open to graduating residents, so you will have your pick of opportunities.

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Thanks a lot for all the information and your help, I was going crazy thinking I would job hunt solo and that it would be difficult to find a job.

I have a question about the course requirements for the program. I graduated with a degree in radiology science instead of physics or engineering. How can I find out the specific courses I need to fulfill? And if I don't meet the course requirements, are there other options available? Do you have example of people who do not have degree in Physics or Engineering attending the program?

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The CAMPEP website might have your answer about specifics (I'm assuming you're in the US here), but in general, it shouldn't be a problem. I'm sure it depends on the program but where I graduated there were several people without physics or engineering, and they just took those classes in addition to the medical physics requirements.

If I wanted to become a board certified medical dosimetrist, do any and all of the programs that go through have to be through JRCERT? Whether I choose to just go straight into a school for radiation therapy or medical imaging, if not both. Is there another entity that would work for credentials in order to fit being able to become board certified? Truckee Meadows Community College is partnered with College of Southern Nevada who is accredited by Northwest Commission on Colleges and Universities (NWCCU)... would this accreditation still allow to apply or no because it's not JRCERT?

>

Currently MDCB says that US candidates need a bachelor's degree and graduation from a JRCERT program in order to become a certified dosimetrist. So the other accreditation is not enough for dosimetry. ARRT has its own list of approved programs for its certifications.

Hello! I am considering a career change to medical physics. I have a BS and MS in physics (concentration in experimental nuclear/particle physics). I did research during my grad school years - helped build particle detectors, was our experiment's radiation safety officer, and am an author on a couple of papers about the quark structure of the proton. However, I have been working out of physics for a little over twenty years now (I'm 45) working in finance and doing policy research. I miss it and want to return for the second half of my career. Medical physics seems like the intersection of all the fun things I'm interested in, and is the graduate school I would have gone to 20 years ago had I known it existed as a field. I'm not sure how long this career transition would take, what to do to make myself a competitive applicant, or what degree/certificate program I should start out with. I know I would eventually want to pursue a PhD. Any advice is appreciated!

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I also know a couple physicists who completed their PhDs during or after residency. It's uncommon and requires that you basically land a position at a clinical/academic site, but it is doable too

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You could consider working in industry, i.e. non-clinical. Could possibly start work and then work on your PhD.

>

It also depends on the country you're in - in some you don't even need a residency

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It depends what you want to do in medical physics. If you want to work in the clinic and become board certified you'll need to complete a CAMPEP accredited certificate or graduate program, graduate from a CAMPEP accredited residency. Certificate program: ~1-2 years MS program: ~2 years PHD program: 3-ish - infinity years. Residency: 2-3 years

Post Title: [Training Tuesday] - Weekly thread for questions about grad school, residency, and general career topics 03/29/2022

Post Content: This is the place to ask questions about graduate school, training programs, or general basic career topics. If you

are just learning about the field and want to know if it is something you should explore, this thread is probably the correct place for those first few questions on your mind. Examples: * "I majored in Surf Science and Technology in undergrad, is Medical Physics right for me?" * "I can't decide between Biomedical Engineering and Medical Physics..." * "Do Medical Physicists get free CT scans for life?" * "Masters vs. PhD" * "How do I prepare for Residency interviews?"

Comments:

Hi everyone, I've been accepted to Wisconsin and UTSW for a PhD in medical physics. My background is a Bachelor's in engineering physics. I'm a Canadian citizen and I plan to return to Canada for my career. Currently, both clinical and industry/engineering careers interest me (but not academia.) My understanding is that a PhD is essentially necessary to secure a residency in Canada should I want to go the clinical route, so hence I applied to PhD programs in the US. Some differences between UTSW vs. Wisconsin I've observed are: * My PI at Wisconsin works in MRI, whereas my PI at UTSW works in radiotherapy. * Wisconsin is a comprehensive university with undergrads, varsity sports, etc. whereas UTSW is like a hospital with a grad school attached to it. * The medical physics department at Wisconsin is much, much larger. * Wisconsin is a much older program and its alumni/industry network would be larger. * UTSW seems to guide students more towards clinical paths, whereas it seems some faculty at Wisconsin even slightly frown upon a clinical path as a "boring/non-innovative" choice. * The lab at UTSW has fewer grad students (2 vs. 5-6 at Wisconsin). * The lab at Wisconsin is more diverse (at least in the categories I can perceive it, ie. ethnicity and gender.) * The students at Wisconsin seem to pursue more non-academic hobbies. * Dallas is a much more car-centric city than Madison. * Dallas has more interesting things to do by virtue of being a large city. * Dallas is very hot compared to Canada. I'd have to give up snowboarding :(* UTSW is a Texas state agency and has recently been subject to political pressure on trans healthcare. The Texas political climate feels hostile to LGBTQ people like myself - but I'm less sure on whether urban Dallas would feel that way. Both schools offered me 5 years of guaranteed funding. Wisconsin's stipend is nominally lower (28k -> 32.5k upon reaching dissertator status vs. 35k at UTSW), but I haven't done a precise cost-of-living calculation. During the interviews, I communicated to the PIs at both schools that I'm looking to leverage my engineering background and pursue a more "engineer-y" project (as opposed to a fundamental physics/biology project.) It seems both labs would be able to provide this, but in different fields. Both schools seem to do excellent research. Wisconsin is the only school that dared to call themselves the "#1 medical physics program in the nation" during its open house, but UTSW claims the most NIH R01 grants in radiation oncology out of all US institutions. I'm not too sure what metrics are really worth paying attention to for evaluating schools and PIs. Should I care

about h-index or something else? Another piece of advice I've got is to look at whether the lab publishes in a variety of journals (ie. high impact and medium impact) so as to see if projects with less notable results still get published. Looking down the bulleted list, it seems that most of the differences point in Wisconsin's favor (in my opinion.) But I'm hesitating as I feel a UTSW education may be more directly relevant to a clinical career. Are there any other criteria I should consider? I'd welcome any and all input on my choice. Thanks for reading and thanks in advance for your help!

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I'm a current first year Medical Physics Doctorate student at UW-Madison. If you decided to go here please reach out, I would love to connect with you maybe play rocket league or go curling sometime.

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Since it seems like it's a concern, I would suggest UW. Here's why: Texas is not very LGBTQ+ Friendly (even in the big cities where it is more left leaning) UW is more diverse Not as big of a climate difference at UW. Both are great schools with great reputations, and UW is well known for its clinical program and is also fantastic at research. I say this as a set decision mostly because of the poor treatment of the LGBTQ+ community in most of Texas.

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[deleted]

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Ah my bad. I've just had bad experiences in Dallas and San Antonio. Diversity in Texas definitely makes sense compared to Wisconsin. I guess I also spoke a bit prematurely on the climate in Texas. Thank you for your corrections and apologies for my misleading information.

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While the program is important, the biggest factor for happiness and success of a PhD student is their advisor and lab. For most of your time, your advisor will be your direct boss and the lab's focus will determine what you do day-to-day. So, I suggest you look at the labs within each program and see which has more PIs who's work interests you. You mentioned a few indicators of a strong lab, but other important factors to consider when looking for PIs: their involvement in AAPM committees or journal editorial, the number / placement of their graduate students and how long their grants or funding will remain active.

>>

Thanks for the advice! At both schools, I would be admitted directly into a PI's lab (ie. no lab rotations) so I have already tried to scope out each PI's working style, personality, etc. via contacting their grad students. Both PIs seem to be able to offer the engineering-flavored experience I'm looking for. If I contact the students directly, do you think their comments will be candid, or is there an expectation/culture that one should speak positively about their PI?

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I would guess there is at least some pressure to speak positively unless they personally know you. This person is their mentor and they probably don't want to get caught saying bad stuff about them, even if they dislike them.

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Many different people that I have talked to have all told me that UW is cream of the crop. I believe that if you go to either one, then a clinical career is definitely a very viable option, but UW seems to open doors more easily. Again this is based off of people I have talked to (inc a residency PD).

I'll be joining as an MS Medical Physics student soon, but wanted to finish the Human Anatomy & Physiology requirements beforehand. Since I'm an international student, I'm looking for courses offered online that are compliant with CAMPEP. Would it be possible to suggest a few ONLINE courses if anyone has done them/ is aware of them?

>

I don't have an answer for you, but doesn't your MS program have that course in their curriculum? I'm obviously glossing over the possibility of there being another reason you want take it online anyway, but I was under the impression that CAMPEP programs *are required* to have all CAMPEP required courses to allow graduates to be ABR eligible.

>>

Apparently, the course (Part 1 and 2) offered is VERY exacting, and I have a few physics pre-requisites to take as well, which makes my schedule, tight. I thought I could get the Human Anatomy & Physiology requirements out of the way this summer.

Hi, I am currently working a job at a hospital as a medical physics assistant. I was wondering what some of the different paths of advancement career wise are from this position. MPA does not seem like a job with a lot of opportunities of advancement without going back to school to become a medical physicist.

>

At my place the assistants have some mobility into managerial roles (n=1) that are non-clinical but this may not be the case everywhere.

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What kind of managerial positions? The totem pole at my place kinda stops once you become a supervisor and they just mentor the other physics assistants and still have to QA from time to time.

>>>

One did that kind of supervisor you're talking about, another went into the IT side of things (non-clinical). Not my ideal path personally so I'm still going to try my best to get residency.

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Alright, thx for your response. Good luck with your residency when you get it!

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It may take some additional degrees--maybe not the medical physics side--but most radonc departments have a manager who may not be a doctor, physicist, therapist, etc. Usually they are in charge of the business side of things, but having someone with a lot of knowledge in Radiation Oncology would be huge because the departmental managers will usually deal with purchasing and negotiating of equipment and service contracts. You may need a business/administration degree (MBA, MHA, etc) but a lot of those can be taken online.

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Yes it does seem that way. I'm not sure if I want to tread down that path however. I just started my job as a MPA not that long ago so I'll chill out for a bit and weigh my options to see if I want to get into the business side of things. Thx for your response.

I'm an undergrad student studying physics at the University of Calgary, and plan to apply to a medical physics grad school program (MSc) when my BSc degree is complete. Anyone have tips for increasing my odds of being accepted into grad school. My grades are great, but from what I hear having research experience / knowing profs is a lot more important, can anyone speak on this?

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If you have a co-op program, and it's not too late, try to get into that. Try to get a summer research position in medical

physics. Reach out to other centres in Alberta too, for summer positions. If your program has an undergraduate thesis option, take that and find a med phys project. Look at prerequisites for the grad courses and grad school and make sure you take them. If the med phys courses are cross listed with undergrad, see if you can take one. Keep in mind grad courses are more work than undergraduate.

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Research, especially relevant research (if possible), is a big plus. I did somewhat relevant research in the field of Biophysics and in my interviews for Medical Physics programs, that seemed to give me a little more certainty about the direction of the conversation. It also shows what I'm about and how serious I am. Now, of course this research experience is more applicable to PhD applicants, but it also shows you're a hard worker and shows you can commit yourself to the extra work it requires. If you can get relevant research especially, it shows commitment to the field of Medical Physics. Other things I'd suggest is getting to know faculty and make sure they can say a lot of good and ****unique**** (it's important to be memorable) things about you to make your letters of recommendation stand out. Also, shadowing a medical physicist or getting a summer internship helps show that you know what Medical Physics is about and are serious about it. Another thing that some schools like is taking an anatomy course or series. This is mostly because it is a requirement for some schools. To summarize, the most important things in my opinion are going to be: Good Letters of Recommendation Medical Physics Shadowing/Internship and Research experience. For a Master's program I'd prioritize in that order. For a PhD I'd say research is tied for the most important. A possibly helpful bonus (but it might not make much of a difference in your application) is an anatomy course or series.

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Thanks for the response, lots of helpful information!

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Hi! I just graduated from physics at UCalgary, and I'm going into medical physics in the fall. Feel free to send me a message!

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Awesome, I sent you a pm! :)

Hi, For the Post-Match Process (scrambling), I wonder whether or not unmatched applicants should contact unmatched programs before 12 pm (noon)?

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Are the emails being sent out now? That's what I read from match website "Match Results Day: Results of the MedPhys Match are released to applicants and Program Directors. The Post-Match Process begins at 12:00 p.m. noon Eastern Time. No action to fill positions remaining unfilled is to be taken prior to 12:00 p.m. noon Eastern Time. Unmatched applicants are permitted to seek positions and programs are permitted to fill positions that remain available independently of the MedPhys Match." <https://natmatch.com/medphys/schedule.html> I think it never hurts to reach out as early as possible.

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No result email yet!

Hi, I'm a sophomore physics and applied mathematics major taking an intro to medical imaging class (covering Price and Links textbook on Signals and Systems including CT, Nuclear Medicine, Ultrasound, and MRI). I find the course and field to be really interesting, but I am not going to end up taking any chem or bio classes during undergrad. I could theoretically take a chem sequence, but that would be difficult on top of Quantum Mechanics/Electrodynamics (1&2), Complex Analysis/ODE/Basic Algebra, and Stat Mech/2 required history courses (slashes are three quarter "sequences" I've lined up). Is it important to take chem or bio classes for graduate programs? Is medical school usually a prerequisite to securing a job? Should I try to take chem or a major bio sequence? Thanks for any feedback!

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Grad programs are usually looking for at least a physics minor, so you should be fine. As far as chem or bio courses, I think anatomy and physiology would be a good one to take (some programs require one). I do not think that taking a bunch of chem or bio beyond that is going to increase your chances of acceptance, but take them if you are interested and have time. I am a little confused by your question about medical school. I have never heard of someone going to medical physics grad school after graduating medical school. Assuming you are in the US that is a wholly different career path so no, it is not a prerequisite to getting a job.

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Just a side note: I've heard of one person who did exactly that, was a physics major who went to medschool, didn't like it and left to enter medical physics. It's extremely rare, for obvious reasons lol

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A physicist I work with knows one person who went from med physics PhD to medical school but yeah these kinds of career transitions seem to be rare.

I've been accepted to two separate programs, one is in a public university with partial funding for a MS in medical physics, lots of clinical training, and in my hometown. The other program is at an Ivy League school but with no funding and I'll need to move across the country. Would it be worth it for a master's to pick the Ivy but also incur lots of debt?

>

I was in a similar situation to you for my MS. I was accepted to an Ivy (had to pay six figures), and a fully-funded state university MS. While both were far from me (I didn't live in the mainland US at the time), both programs are very strong didactically, clinically, and in research, so it was a very difficult choice to make. I ended up going to the Ivy for a few important reasons: 1) I knew I'd like the area more, which was immensely important to me during gradschool (though for some they find a way anyways) 2) The Ivy simply offered something (in terms of clinical experience and access to certain researchers) closer to what I was looking for. It'd important to make sure wherever you go has what you're looking for (want to do research? want more clinical experience? want a balance of the two? etc) I don't think I would have regretted going to the state school. They had a strong program. While the Ivy name can be helpful in our field to a degree, this is not as pronounced in our field compared to others. You'll find that many well-respected programs (even some top programs) aren't based out of Ivy league universities. And there's obviously the big detail in the room: the money. Each person has their own financial circumstances, but funded MS programs in our field are rare, so do with that what you will.

[deleted]

>

Never heard of it but the testimonies are 7-10yrs old.

Hi, I would like to ask regarding some career path advice as I am planning to take a degree in Physics with Medical Physics. With this degree, what should I continue on if I want to be a Medical Physicist. On another scenario, if I would rather be a radiation oncologist is it still possible with this degree?

>

No you have to go to med school for that, which is a wholly separate thing.

I need help making a decision regarding career. Do I have to ask here or make a post about it. I am new here.

>

Here is a great spot for all things regarding education, training, and the path to get there. I would post in this thread!

>>

I need help deciding on a career option. I am an international student and interested in a medical physics career. As o now, I got admission to two different universities that I am considering. One is Ph.D. in Physics where there is a research option in biophysics, and the other one is the Ms program in Medical Physics. I want to get a Ph.D. and get a GC afterward. Also, I have to consider financial options as well and the Ph.D. program is in a cheap place compared to the university that offers MS. What to do now? I want to get maximum options for a medical physics career. Can chat separately if you want to know the specifics. Also, I want to know If any university offers financial aid to international students in a Graduate Certificate.

>>>

I'd personally suggest getting the MS and then getting into a PhD program after that in Medical Physics. You'll have a more direct education on the thing you want to do, it won't take as long, and you could possibly try to get funded in the MS if that's an option where you got accepted. The certificate, as far as I know, you would have to pay for anyway.

>>>>

I got a fellowship for the MS. But I am concerned whether I would get employment easily after that.

>>>>>

Right out to MS to work in industry/research it would be tough, I would suggest PhD. If you want to work clinically go to residency and you should be set. Don't believe on all the "hard to get residency with just a MS", you can be a very competitive master and match just fine.

>>>>>

You can always apply to PhDs after that! But yeah employment with just a master's in medical physics can be hard I hear.

>>>

If you prefer getting a PhD and doing a certificate afterwards, then it sounds like you already have that open to you. I would just make sure that the program you're accepted to has good funding and advisors. If by financial aid for certificate students you mean stipends and the such, no I haven't heard of

anyone getting those. I believe that most people use their own money or take loans for certificates, but I could be wrong.

>>>>

I looked into a few certificate programs and found no financial assistantships are available for certificate programs. On the other hand, if I go through the MS in medical physics first and then a Ph.D. in it, there wouldn't be a need to go through a certificate. On top of that, availing of funding for a Ph.D. in medical physics after MS is possible. However, if I choose to do a Ph.D. and then try to get funds for a certificate program, there are no options as far as I have looked.

>>>>>

[deleted]

>>>>>>

I am assuming by your name that you are in fact a Ph.D. Would you consider MS in medical Physics easy than an MS in just Physics? I mean what difficulty should I expect in MS medical physics? considering that I am an International and not familiar with the US education system other than the online lecture videos. Edit: I am assuming medical physics to be a practical hands-on demonstration of theory, which I am good at.

>>>>>>>

How hands on a program is varies wildly between programs. You can ask ahead of time what kind of clinical experiences students get if that is what you are looking for.

>>>>>>

Luckily enough I got a funded MS. What are the employment chances after a successful MS in the US?

>>>>>>>

Do MS then. It's increasingly more and more difficult to get into a residency with non-CAMPEP PhD, whereas CAMPEP-accredited MS should be good enough for a great many residencies. You can do F1-OPT after MS which will get you through a residency and give you one more year to work while still in F1 status, and then you can easily switch to H1B, which is a dual-intent visa. As medical physicists are currently in short supply, you should be able to negotiate with your hospital that they don't wait all 6 years on H1B to start your GC application process, but apply for it, for example, after one year of you working there.

>>>>>>>>

You definitely cleared the process. Thank you!

Only one more day to go!

>

Finally!!!!!!

Post Title: [Training Tuesday] - Weekly thread for questions about grad school, residency, and general career topics 04/05/2022

Post Content: This is the place to ask questions about graduate school, training programs, or general basic career topics. If you are just learning about the field and want to know if it is something you should explore, this thread is probably the correct place for those first few questions on your mind. Examples: * "I majored in Surf Science and Technology in undergrad, is Medical Physics right for me?" * "I can't decide between Biomedical Engineering and Medical Physics..." * "Do Medical Physicists get free CT scans for life?" * "Masters vs. PhD" * "How do I prepare for Residency interviews?"

Comments:

Does having an anxiety diagnosis affect your ability to becoming a medical physicist?

Do medical physics residents get to defer their loans in residency, or is loan deferment in residency primarily for physicians?

>

Answered here: [https://www.reddit.com/r/MedicalPhysics/comments/th614e/student_loan_repayment/](https://www.reddit.com/r/MedicalPhysics/comments/th614e/student_loan_repayment/)

Hi! Has anyone else accepted UCLA's offer for PBM? If so, please message me- trying to get a 2022 cohort group chat going!

What are some jobs that are more peripherally related to medical physics? I finished my master's degree in medical physics in 2018 but haven't gotten a residency because my grades were terrible (C+ on my thesis). I tried to get a technician or assistant position instead but those roles are very rare in the country I live in.

>

What country is that?

>>

New Zealand. Unless I'm just terrible at finding them. I'm happy to take suggestions if that's the case.

What are examples of homework problems done in graduate programs? How does the level of difficulty compare with undergraduate physics homework? Is it a lot theoretical work, or is most of it practical?

>

I agree, the homework (when it is assigned) is harder than undergrad and it's pretty focused on med phys practice. One exception I had was the radiation physics class in my program (GT) which was shared with nuc eng students so the HW/exams were more geared towards their material vs MP material, but it was still for the most part relevant to MP (radiation interactions especially). This may be program dependent though.

>

About the same level, I'd say, more practically-oriented problems.

What are the best CAMPEP residencies? Or does the place of your residency really matter?

>

It is hard to define "best" since different people have different career goals. What are you looking to get into (clinical/academic), do you have geographic preferences, are there red flags etc. are all questions that you have to answer for yourself.

>

Do you want A job or THE job? The place of residency doesn't matter if you just want a stable job with good prospects, but it does if you want to work in a big academic center in an attractive location.

UNLV's DMP program's accreditation expired in 2021. The program director said they have applied for renewal but that is isn't 100% certain it'll be renewed. Should I accept an offer from here, or should I accept an offer from another school whose accreditation won't expire for a long time?

>

What degree is your other offer for?

>>

MS where residency match rate is 98%. Highly respected program and university.

>>>

Honestly it sounds like the MS would be a great choice then. Any reason why you would want UNLV instead? With the DMP, you have to pay for residency, so I personally think a Master's program with good matching is a better choice.

>>>>

Yeah consensus on this sub seems to be against DMP. Nothing against DMP holders but it seems that the tuition isn't worth. Especially if the other place has near 100% match rate.

A thread about a month ago about rural positions has me wondering - would a residency applicant's desire to work in a more rural clinic benefit them in any way, all things being equal? I'm finishing up a CAMPEP MS and hope to move back to the rural Midwest area I grew up in whenever a position opens up. It's the "match program is terrifying" time of year again, though, so the worry of not finding a residency has definitely pushed its way to the front of my brain.

>

Are you talking about residency applications or job applications? For residency I imagine that it doesn't matter much. For employers, like rural clinics who are struggling to attract talent then I assume that your desire to practice in that setting would be a plus in their eyes.

I'm planning to live/work in the ****UK or maybe Europe**** in the future, so I'm not sure if anyone can answer my questions under this umbrella. As suggested above, I can't decide between biomedical engineering and medical physics. I'm currently a physics student. I love physics and don't want to drift completely away from it in my grad studies. I also care about the salaries and career options. I also don't know if a Ph.D. makes a big difference in job opportunities and salaries.

>

If you love physics like I do, stick with medical physics. The main difference with physics programs as compared to engineering programs is that the focus is more geared toward a ground up, fundamental understanding of how things work, whereas engineering takes a top down approach. This means most engineering programs look at the bigger picture and zoom in, usually skipping over some fundamental understanding you might not need to make things work. This is a bit of an oversimplification, but the point is that the approaches to learning are much different in each field. You will probably feel more at home in Physics. Edit: I know I didn't directly answer your question, but I am willing to bet in the UK at least that Medical Physicists are paid well. I can't speak for engineering however.

How much better, if at all, is Brown's Master's program compared to Georgia Tech? I've been accepted to both, and while I have not seen my financial aid package for either the deadline to make my decision is approaching. I've reached out to both schools and I'm awaiting a response. So, I asked my original question since right now it looks like Brown will be significantly more expensive than GTech. I suppose I forgot to mention that expenses would be a fairly large factor in my decision. With that being said I would take the financial burden if Brown's program is worth it. Side note: I also have meetings with a professor and current clinical medical physicist to discuss fellowship options.

>

Just FYI GT is modifying their curriculum effective next fall. Notably the summer clinical rotation at Emory is no longer going to be offered. If clinical experience is really important to your expectations of a master's program, definitely keep that in mind. That being said, I don't think that GT is a bad program for doing this. The Emory rotation sounded nice but it was pretty short, and you should be able to arrange a more substantial clinical experience on your own if that's something you're serious about, either through shadowing or doing a clinically oriented thesis. I am currently a master's student in GT's distance learning program, just my 2 cents.

>>

Thank you for the info, I did not know about the change occurring with Emory. Could you expand a little more on your personal opinion/experience of the program? If yes, feel free to pm if that would be preferable. Thanks again for the info you've already provided!

>>>

Here was a good thread about GT, albeit about the remote program [https://www.reddit.com/r/MedicalPhysics/comments/s3ws9b/an_honest_review_gt_medical_physics_program_remote/] (https://www.reddit.com/r/MedicalPhysics/comments/s3ws9b/an_honest_review_gt_medical_physics_program_remote/). We take the same exact classes though so the material is the same. Good info in the comments too.

>>>>

Thanks again!

[deleted]

>

Don't know how much this can help, but I know of a resident who had an MBA who told me that it didn't really help him a lot day-

to-day but it did kinda help him get promoted to chief resident in his second year.

If you're board certified or board eligible, do employers care if you have a masters as compared to a PhD? For instance, am I able to stand a good chance of finding employment if I complete the University of Kentucky's masters level medical physics program and complete a CAMPEP-accredited residency afterwards?

>

UK has a reputation as a good clinical program. But wherever you go as long as you complete a CAMPEP residency you should be pretty good at securing a job.

>

I haven't heard of anyone completing residency struggling to find a job afterwards; most have a job offer in hand >3mo before their residency ends. That being said, some places (academic centers) are hiring for a faculty physicist rather than a staff physicist that is expected to have a PhD and do research on top of clinical duties. Those types of positions are likely not open to MS holders but 1) you would want to do lots of research and work even longer hours anyways and 2) they don't typically make that much more money to compensate imo.

Hello, I had an interview for a PhD program a week and a half ago (Friday March 25th) and haven't heard back from the program. I was told to expect to hear back within about a week and have currently heard nothing. I understand they can be running behind, so my question is: When is it appropriate to reach out to them to see when I could expect a decision (if ever)? I have been accepted to a couple other schools and deadlines are beginning to approach for me to make a decision, but this school I just interviewed at would be my top choice if I get in. I think the interview went really well and don't want to screw things up by reaching out if it isn't appropriate though. Let me know what you all think. Thank you in advance!

>

[deleted]

>>

Again, thank you for the advice. That email was definitely the right move. They specifically thanked me for reaching out and expressing that I'm still interested and offered me admission!

>>

Okay, thank you!!!

Post Title: [Training Tuesday] - Weekly thread for questions about grad school, residency, and general career topics 01/04/2022

Post Content: This is the place to ask questions about graduate school, training programs, or general basic career topics. If you are just learning about the field and want to know if it is something you should explore, this thread is probably the correct place for those first few questions on your mind. Examples: * "I majored in Surf Science and Technology in undergrad, is Medical Physics right for me?" * "I can't decide between Biomedical Engineering and Medical Physics..." * "Do Medical Physicists get free CT scans for life?" * "Masters vs. PhD" * "How do I prepare for Residency interviews?"

Comments:

I'm taking ABR part 1 this week, and recently took the practice exam/technical check on the online interface. Where is the list of constants that were supposed to be provided? Does anyone know?

>

There should be a link to a practice exam through the abr login thingy. It helps you see where everything is and how to move between questions and such. The actual questions are for medical students, but the interface is the same

>

You will easily be able to locate it when you are in the interface for your actual exam.

>>

Thanks!

>

That exam is also more related to the radiologist sections, it's doesn't relate too much to medphys, its really just to get to know the interface. For medphys sample questions you can find on the ABR website.

>

On the ABR website under medical physics > initial certification there is a "constants and physical values" link on the left hand side

>>

Sorry, I meant in the exam interface itself.

I'm currently enrolled in [B.Sc](<https://B.Sc>) in Medical Physics course (with Co-op) in Canada. Before even getting Masters, do I have a chance of getting a job (part time/full time) ? Would working part time while studying for Masters be feasible ?

>

You have so much to learn before anyone risks you harming a patient in the clinic that you have no chance of getting a physics job before you are fully trained. This might help <https://comp-ocpm.ca/english/career-education/career-resources/career-resources.html>

>>

Thanks for the answer

Is there a spreadsheet floating around anywhere that is tracking interviews from residency programs? I know there was one for matches, which I'd also appreciate the link to!

>

[Here you go.](https://docs.google.com/spreadsheets/d/1hnH_EhopdAqZ0DTg9eyX66E4_g5uCCsH5uwIxmKfZ0k/edit#gid=1588096695)

What to expect on ABR part 1 exams? Lots of equations and calculations or mostly conceptual knowledge of physics and devices? On the clinical part, how much pathology should I know? I'm confident about my anatomy, but aside from tumors and other more commonly seen pathologies, I'm not the best at.

>

Definitely know your basic equations (e.g. the Compton energy formula, radioactive decay, exponential attenuation, inverse square). However, nothing overly math heavy involved should appear on there. Definitely be sound on conceptual knowledge of med phys. You should know the dependencies of different photon interactions, such as how does the likelihood of a photoelectric interaction vary with Z, stuff like that. Definitely know your statistics, Poisson and just general statistics. I would recommend reviewing basic imaging stuff (all modalities, no need to dive in super heavy to radon transforms or imaging equations and such). But have a general idea of what affects image quality, etc. As far as the clinical portion goes, basic imaging anatomy is important. Pathology is kind of a crap shoot, it is definitely most important to know different tumor types and locations. Other stuff you can kind of reason through using process of elimination action. My advice is that medical terminology can get you a long way on the clinical portion (i.e., root words). Hope this helps a little and good luck!

Does anyone have experience with a job after their B.S in physics that is related to the medical field or radiation safety? This would be before pursuing med phys grad school. Do you mind saying what that job was? How did this help with pursuing further education in the medical field, ect?

>

Radiation safety is a big part of health physics. You can start looking that up if that is something you're interested in.

>>

Okay, thank you!

How do you prepare for residency interviews? Do people usually ask behavioral or technical questions? I have my first one coming up in a few days and I would really appreciate any specific advice. Thanks!

>

In my recent preliminary interview, I was asked these questions: Tell me about yourself? What have you found most difficult in your graduate program? Why did you choose this residency program? Hope this helps.

>>

Thank you. Mine ended up being somewhat similar.

>

The phone interview I just had asked me very basic questions. Why are you interested in medical physics? Why are interested in diagnostic imaging or therapy? What does a medical physicist do? They will want you to ask questions during the interview (at appropriate times) look for some good questions. Also a lot of places are interested in learning if you are a normal interesting person that they want to share a workplace with. You can do mock interviews with other grad students, or with professors, check your student resources too. Have your friends or SO ask you questions.

>>

Thank you. I'll prep for those sorts of questions. My interview is in a few hours

>

85% behavioral/fit questions, 15% technical. I used the career services office at my graduate institution to practice those "fit" questions and to practice my elevator pitches. I still had my notes from when I took the ABR part 1, and used those just to

brush up on any technical areas. The majority of the "technical" questions were workflow specific questions (what would you do if x/y/z happened in your clinic). I didn't have a ton of clinical experience from my PhD so those were a little tougher.

>>

Thank you. That makes sense.

>

I ask technical questions but I don't expect the candidate to know a lot of them. They are very basic but a lot of grad schools expect you to learn these things in a residency. I don't know what you mean by behavioral questions, but sometimes I may ask something like, "If a QA fails what would you do?" Good questions to ask your interviewer: 1) What is your favorite responsibility in the clinic? 2) Where are the best places to eat in the city? 3) What meme from r/MedicalPhysicsMemes made you lol hardest?

>>

Thanks you so much for responding. What sorta technical questions do you like to ask? As in what materials should I review haha? Behavioral questions as in, tell me about a time you overcame a challenge working in a team, etc. Do people ask HR questions like that too?

>>>

Some places may. I don't. I ask questions about clinical physics. Nothing you need to study for. If they know it, good, if not, then they will learn it. I don't care if they know the answer. Just want to see how they answer because about 1 year after the residency ends they're going to be on the butcher block in front of the ABR getting blasted and they better do a damn good job because that reflects on me and I want to boast to all my friends that my resident was better than theirs then go get hammered at their DABR celebration party.

>>>>

Oh I love that feeling. In my grad program they had us seniors students teach the new students how to do PSQA, and then they would be evaluated for competency to allow them to run it alone. I took immense pride in getting my peers to pass competency and be really independent.

>>>>

Wow, that explains so much!

[deleted]

>

I think the deadline to submit the application for the Match was December 12th. You can always look at off cycle residencies that don't participate in the match.

>

You are very late. However, if you can manage to find a few places in which you have missed the deadlines, and email the residency director, they may add you into their list if they haven't cut it down already. You will still need to apply through MPRAP but they will have to go in and get your application manually instead of the usual way of getting all the applications after their deadline has passed.

>

The recommendation letters don't need to be on file when you click apply by the way. I don't know how worse of a chance you'd have without them but you can always email the programs when your recommendations are in. They are able to download the most updated application materials.

>

Yes, you are late

>

It seems you are a bit late, you can always try but there's only 13 therapy and 7 diagnostic openings right now (there were around 90 total a month ago). Also, there's only 14 programs that accept Masters (idk if PhD only programs would accept you as you are still working on it.) You can always try, but you have less than 3 days to submit an application with 3 letters of rec, so idk if that's even possible.

>>

Thanks for the insight. Where do you see the available residencies at?

>>>

mp-rap, which is where you apply for the majority of residencies

>>>

You're def too late. Unless you have 3 recommendation letters from good sources on hand.

[deleted]

>

The only case I can imagine is if you start a CAMPEP master program and apply to transfer to a new university before you graduate. The PhD university may require you to redo some course, but probably only because its weird you left a university before graduating. If you graduate with a CAMPEP degree, you have completed all those requirements. The PhD program would only ask you to take relevant course work for your dissertation and research.

>

This will vary by institution, but I think that most if not all of your CAMPEP core courses will transfer over, so you won't have to do 2 years of classes all over again. Check with specific programs to see what they will take.

>>

Be aware that some programs require a more advanced anatomy & physiology course for PhD students than for masters. That seems like the most likely course difference.

I'm still a LONG time from being in the field of medical physics myself, but I had a question concerning the field. I'm seeing everywhere that healthcare places and hospitals are collapsing because the nurses and paid poorly and treated like shit, and that it's leading to a super high turnover for nurses and more just keep coming in, et cetera. There are also a lot of strikes (and good, because so many nurses are severely underpaid and this pandemic has been fucking brutal for them). What is the future of medical physics looking like, in 10 years or so? And if healthcare starts to collapse or reform, how will it change?

>

I wouldn't be too worried about the future of physics. Truthfully most of us (therapy physics) work in an outpatient setting, so grueling work conditions are not the norm (most clinics are 8-5 sort of gigs). As someone who just landed a job, physics pay has remained reasonably good. As far as culture goes, perhaps I've been in a fortunate position. Our clinic only lost a couple therapists due to the institution's vaccine mandate, but that and new masking/cleaning procedures are the most notable hurdles we've faced. In the grand scheme of things, if there is large-scale health reform, it'll likely lead us to do more short-course treatments to increase patient throughput, which would need strong physics support. So I'd say we're in good shape on the radiation therapy side.

>>

I see, thank you very much for the response! I'm current an astrophysics undergrad and I can't really find any information about the field of medical physics outside of this subreddit haha

>>>

start with https://w3.aapm.org/medical_physicist/index.php

Post Title: [Training Tuesday] - Weekly thread for questions about grad school, residency, and general career topics 01/18/2022

Post Content: This is the place to ask questions about graduate school, training programs, or general basic career topics. If you are just learning about the field and want to know if it is something you should explore, this thread is probably the correct place for those first few questions on your mind. Examples: * "I majored in Surf Science and Technology in undergrad, is Medical Physics right for me?" * "I can't decide between Biomedical Engineering and Medical Physics..." * "Do Medical Physicists get free CT scans for life?" * "Masters vs. PhD" * "How do I prepare for Residency interviews?"

Comments:

I applied to about 25 residency programs. I was trying to check and see which places have sent out emails and mark them off my list. Does anyone remember what institution "*Residency in Therapeutic Medical Physics, Department of Radiation Oncology**" I applied on Dec-15th but that might not have been their deadline. I was using the google sheet too. https://docs.google.com/spreadsheets/d/1hnH_EhopdAqZ0DTg9eyX66E4_g5uCCsH5uwIxmKfZ0k/edit#gid=683124263**

>

I believe one of the Ohio ones was listed like that... Case Western or Cleveland Clinic?

Does anyone know when Duke usually releases admissions decisions for PhD applicants?

>

Congrats on getting the interview! May I send you a PM to ask about the interview details?

>>

sure!

>

[deleted]

>>

That interview on gradcafe was me actually! I meant to ask during my interview when decisions are released but was so nervous and forgot

>>>

[deleted]

>>>>

I got the same email too! Curious what it means.

>>>

[deleted]

>>>>

Thank you very much! I hope grad admissions season is going well for you!!

>>>>>

[deleted]

>>>>>>

yes I'm so nervous for results! we got this tho!!

I got a master's degree in medical physics, but it had a C+ grade (on a scale where a D is a fail). I got turned down for a registrar role (three years on the job training, I think it's equivalent to a residency) because I would struggle too much on the role. I'm told that even students with high marks struggle. But I'm told it's not too late to become a medical physicist. I need to seek employment in a medical physics role with less responsibility than a registrar would have, and build up my skills there. But I can't even find those kinds of jobs. Where do I need to start looking?

>

You had an overall grade of C+ or just C+ on one course? If you didn't get a residency/registrar position you should look for assistant jobs on your region... email hospital/clinics/consulting groups and see if you get lucky.

>>

An overall C+ grade for my thesis. Would you have any further advice to that? I've been emailing hospitals about technician/assistant positions for years now with no success. (There are only 6 hospitals with a medical physics department in my country though so maybe that's the main reason.)

I've submitted applications for residency through the MPRAP about 3~4 weeks ago in December of 2021. I've been since extremely busy with my current work and forgot to check up on the applications. And I just noticed that one of the reference letters wasn't received yet. Are the deadlines for 3 reference letters the same as applications (thus my applications are invalid), or is it acceptable to submit the letters (one letter in this case) somewhat late? Thank you.

>

You could try to contact the institutes you applied to. Many institutes would download the applicants' profiles after deadlines, right before they start the screening sessions. So hurry up, you may still squeeze in some of them.

>

Try checking the FAQ for MP-RAP, I know you can submit your application without having the references, but I don't know the deadline of the references... You should ask this questions to MP-RAP directly by email. Also contact your missing reference and have him/her submit it NOW!

I am in the residency application process and I was wondering if anybody knows if application review is on a rolling process? I have talked to colleagues that are also in this position and there are programs that have gotten back to them, both for an interview and rejection, but I have yet to hear anything from said programs. Could not hearing back mean a rejection, or could it mean that they simply have not reviewed my application yet? Thank you in advance.

>

Maybe not super helpful, but have you checked your spam folder? One of the places I applied to sent an interview invite but it got flagged by my email for some reason.

>

Here are the most common responses I had when applying to residencies years back from most common to least common. I applied to as many as I was eligible to apply to given my MS so this is a decent number of programs worth of data. 1. Ghosted - No response or acknowledgment of application. We all used the common application process so I knew they received the application 2. Generic response - Something like "We received significantly more applications than any other year and will be going through them soon." These either followed up with a rejection email or interview invite. 3. Rejection generic response - Like #2 but with no thread of hope. 4. Interview invite - The least common of responses but definitely the best! This includes either phone or on site. I guess its mostly Zoom

interviews now? I would say around 40-50% of programs just ghosted in my year. I got interviews at 20-25% of programs I applied to. I heard from all but one of the programs that I interviewed at between mid December and end of January with most of my on-site interviews in February. There was a program that contacted me for an interview late February and were clearly rushing their interview process which was not a good sign. Keep in mind, this was before covid so I'm not sure how the timelines may have changed for these programs. I think match day is similar around March 20ish.

>

This spreadsheet is out there and helps keeping track of a lot of the programs https://docs.google.com/spreadsheets/d/1hnH_EhopdAqZ0DTg9eyX66E4_g5uCCsH5uwIxmKfZ0k/edit#gid=683124263

>

Based on my program, there are a couple of possibilities. Sometimes we've met to discuss candidates only to discover that one or more of us hadn't finished reviewing files, so we've postponed discussing those candidates for a week or two, and I could imagine it could be longer, under unusual circumstances (illness, death in the family, etc.). The other possibility is that some candidates were clearly not going to be invited for an interview, some who clearly were going to be invited for an interview, and others we wanted to have another meeting to discuss more. Or is it possible that one of your letters arrived late, so review of your file was postponed? Possibly some programs plan to interview a specific number of candidates, so once they get responses back from their first invitations, then they know how many more invitations to send out.

I just got my BS in physics last may and started a Physics PhD program but I want to switch to medical Physics. What should I know before switching over to a masters in medical physics program? Do any of them come with fellowships or do you have to take out loans for most of them? Any recommendations on part time or online programs? Is it better to take a 2 year full time MS over a part time MS? Any recommendations on jobs to take up while working on a part time MS that make you more attractive for jobs later down the line?

>

Just wanted to add that LSU does provide a stipend for their MS students. It's a 3-year program and you work as a TA or RA. The stipend isn't much, but it was a huge plus for me to not need more student loans.

>

I don't know many masters programs that have significant funding. I (and most everyone I know) took out pretty substantial loans to attend our programs. There is a recent post on this subreddit reviewing the GT online program you might be interested in. I don't know of any part time programs but that doesn't mean they don't exist. Depending on the program, you may not have much time to even work part time or you would need a pretty flexible schedule due to clinic tasks and labs that occur afterhours. Honestly, I don't know much about working during a MS program since we were discouraged to do so. Some of the very clinical programs will pay their grad students for clinic work like QAs and such which seems like the ideal situation. This is only some and not all.

>>

So it makes sense that you have to take out loans for the education but how do you afford to live during a two-year education program without any form of income? I'm located in Baltimore currently and I see JHU has a MS in Medical Physics program and it costs 58K/year for tuition and then there are other costs such as insurance, transportation, etc. Do most people take out cost of living loans?

>>>

Are you sure JHU is CAMPEP accredited? If you want to work in the US, you should try to find a CAMPEP-accredited program. There is sometimes lag between when a new program is approved and when it appears on the list: <https://www.campep.org/campeplstgrad.asp>

>>>>

Is CAMPEP mostly for those who want to go into residency? If I want to just stop at the Masters level would I need it to be accredited?

>>>>>

If you don't plan to become board certified, then you don't need a residency. But your job options without board certified will be limited.

>>>>>>

Got it, I just checked a job listing in my area and I didn't notice that it required board certification. So that means I would have to go to only the schools on this list: <https://www.campep.org/campeplstgrad.asp>

>>>>>>>

Almost all job listings will want board certification or board eligible with a contingency of you completing within a year or two of hire. The only non ABR certified positions I can think of

would be physics assistants but those don't even need a specialized degree and it pays significantly less. Or a non-clinical position may not require certification but most of those people I've worked with over the years are certified and spent years in the clinic before branching out.

>>>

Thats pretty steep. Is that in state or out of state? For me, I went to an out of state program, took out the max federal loans I could, and kept the extra for living expenses, food, etc. I was pretty young and right out of undergrad (lots of loans there too) with no savings or income but I was very accustomed to living a broke life. I can see how this could be much more challenging if you had a family or other responsibilities. I certainly do not recommend that method, but its what I chose to do and it worked out for me in the end. If I had to do it over, I would go to an in-state program which cost around 35% of what I paid for out of state, and I would have worked harder in undergrad to go in with a savings of some sort.

>>>>

So Johns Hopkins is a private institution. I live in Maryland and oddly enough that is the only place that even offers a MS in Medical Physics. University of Maryland has a residency program but that relies on you already having the MS.

>>>>>

It is very difficult to be able to do all training and get a job in a single location. Most people entering this field end up in different locations for school, residency, and first job. This is a very competitive field with limited accredited positions relative to the number of applicants. You should be applying almost everywhere you can if you want a good chance of getting accepted somewhere. For non CAMPEP accredited programs, it may be worth reaching out to see if they are seeking accreditation and where they are in the process. If you are a student when they become accredited, you completed an accredited program and are eligible for residency and boards.

>>>>>>

OHSU is pretty well known for wanting to keep their top students forever.

What advice can you give going into graduate school interviews, especially those over Zoom? What are some common questions that are asked?

>

I think the best preparation you can do is to come up with questions for the interviewers. They can be questions about research, ways the program might change, where graduates end up, the geographic area, or pretty much anything else. Asking specifics about the program shows that you're interested, in addition to you getting info that you want.

>

When I applied for my masters program I was asked about things like Why medical physics? Tell me about yourself. Hobbies Strengths and weaknesses My undergrad research

[deleted]

>

CAMPEP requirement is most important if ABR is your end goal (which it probably is if in US). Another top priority is making sure the program offers the type of education you are most interested in. Clinical vs. academic, for example. If going the clinical route, check into what their curriculum looks like and how much hands on experience you actually get. The rest of my list is pretty much the same as u/Gotterdam so I won't waste space repeating. Adding to his 5th point, school prestige is a bit different in our field. MD Anderson and Wisconsin are known for their research programs while Kentucky, Oklahoma, and LSU are known for their clinical programs. I didn't know this before I was in the field and wished I knew earlier!

>

1. Is the program CAMPEP? 2. What are their statistics for matching students to residency? 3. What level of funding do students get, and what work do students have to do to get this funding (TA, RA)? 4. Are the faculty that will be looking for students doing research you are interested in? 5. How prestigious is the institution. Note: this is not as important as it would be for "normal physics" but going to a place like Wisconsin or MD Anderson will get you so many connections that will be very valuable to you.

Post Title: [Training Tuesday] - Weekly thread for questions about grad school, residency, and general career topics 01/11/2022

Post Content: This is the place to ask questions about graduate school, training programs, or general basic career topics. If you are just learning about the field and want to know if it is something you should explore, this thread is probably the correct place for those first few questions on your mind. Examples: * "I majored in Surf Science and Technology in undergrad, is Medical Physics right for me?" * "I can't decide between Biomedical

Engineering and Medical Physics..." * "Do Medical Physicists get free CT scans for life?" * "Masters vs. PhD" * "How do I prepare for Residency interviews?"

Comments:

I would probably email the program director and ask. I learnt that I got rejected from UCLA that way (not saying that you too are rejected if not interviewed)

>

[deleted]

>>

Yeah, I meant this year

>>>

[deleted]

>>>>

Don't worry about it too much even if you were rejected! I am sure you'll have better opportunities come your way!!

[deleted]

>

Depends on the program. Some accept on application alone, no interview. Some do just a phone interview. Some normally have in-person interviews but that will likely be virtual do to Covid. I know UW-Madison hasn't done interviews yet. Its still plenty early to have optimism.

Is it recommended to send a thank you email after a first round residency pre-interview?

>

Depends on the program. Some places don't recommend it, like Wisconsin and UCSD (iirc).

Is failing ABR part 1 a deal-breaker for getting a residency? I think I'm an overall good applicant but idk how well I did on this trivia filled exam.

>

No, and the application form doesn't technically require that you disclose that you failed (unless it's recently been changed). So the only way they'll know is to ask you directly.

>

No

What is the MEMP program at MIT like? Is it good for a career in medical physics in general?

>

That program is not CAMPEP accredited, so if you want to continue onto a clinical medical physics career, then you will be required to take a year long certificate course after finishing your PhD which will be on your own dime. The list of CAMPEP accredited graduate programs is here: <https://www.campep.org/campeplstgrad.asp>. Of course you may not want to be a clinical physicist, so that may not be a problem for you, just make sure you know what you want to do next.

[deleted]

>

I also received an invitation! I would treat it as competitively as you would treat any other part of your application. They almost certainly invited more people than they have spots for. Good luck!!

>

Usually an invitation to interview means they're interviewing several people more than the number of positions they have.

>

Imaging or therapy?

>

Had the same question haha!!

>>

[deleted]

>>>

Honestly I am just hoping to get an acceptance under my belt so that I can relax a little!

[deleted]

>

A lot of us have good life-work balance although it can vary by clinic. Some physicists work 60 hours per week. Some work around

40. I typically put in 43ish and twice a year have a long weekend where I'm working on the machines.

>

<https://www.aapm.org/students/prospective.asp>

When should we be expecting residency programs to have reached out to most candidates by? I applied to a little over 20 programs and have yet to hear back from any whatsoever. From what I saw on the sheet floating around, the interviews are starting in the next couple of weeks. I'm just wondering if it's still too soon to panic or not. I'd appreciate any input.

>

It is not the time to panic quite yet, specially because a lot of programs are only now going through the applications. Some programs only call a few applicants for the quick screening interview, others call everybody. But I suggest everybody to look at the spreadsheet that has been shared. There is a good sense of collaboration going on there, and there is a lot of updates being posted as the applicants get emails, phone calls or smoke signals about the interviews process. That should give you some closure from some of the programs and hope for others.

>

I applied to 43 programs, 3 outside the match. I've had only 2 invites from my match applications. Both interviews are set for February. Feels a bit odd for sure. Plus 2/40 seems hilariously low.

>

I don't know if you applied for therapy or imaging. I'm on imaging and got some interviews next week, I know some therapy friends who got like 1 or 2 contacts so far. There's still plenty of time, there's a lot of applicants for Therapy so takes a while to go over, give it another week or 2

>

here you can find out what is happening https://docs.google.com/spreadsheets/d/1hnH\EhopdAqZ0DTg9eyX66E4_g5uCCsH5uwIxmKfZ0k/edit#gid=683124263

>

I'm in a very similar situation and don't know if I should be panicking.

Does anyone here attend UCLA's PBM PhD program or has attended their Candidates' Weekend? I got an invite and was hoping to see what other people's past experiences were. Thanks!

>

Hello, have you heard from UCLA again after they sent the interview invitation? I got the invitation as well, but haven't received any new info about the interview time or schedule, so I am wondering whether anyone has an idea.

>>

Hi! The program director said he'd get back to us around tomorrow because they haven't decided whether the Candidates' Weekend would be conducted in-person. That's what the original email said at least

>>>

Oh I see, thanks for the information! I am an international applicant, and the mail I got said there are going to be remote interviews and poster sessions and that the interviews will not start until the end of this month or even February.

>>>>

Ah I see. I'm a domestic applicant, so maybe my email was a little different. He only mentioned that the Candidates' Weekend was originally planned in-person for February 25-26 and that the admissions committee was hoping to know by January 21 (today) whether in-person interviews would be safe. Nothing about posters

>

Hi! I'm currently a student in the UCLA program and am happy to answer any questions you've got!

>>

Thank you! Do you mind if I contact over DM?

>>>

Sure, I'm a student rep for our program so ask anything you'd like!

Post Title: [Training Tuesday] - Weekly thread for questions about grad school, residency, and general career topics 12/28/2021

Post Content: This is the place to ask questions about graduate school, training programs, or general basic career topics. If you are just learning about the field and want to know if it is something you should explore, this thread is probably the correct place for those first few questions on your mind. Examples: * "I majored in Surf Science and Technology in undergrad, is Medical Physics right for me?" * "I can't decide between Biomedical

Engineering and Medical Physics..." * "Do Medical Physicists get free CT scans for life?" * "Masters vs. PhD" * "How do I prepare for Residency interviews?"

Comments:

Hello all, I have been wondering about other options for medical physics masters students who graduate from a CAMPEP accredited program and don't immediately land a residency or realize they don't want to do clinical work as a career. What other options and jobs are available for graduates in these situations? Thank you!

>

Industry is a common alternative path.

As per instruction of the moderator, I hope to move my post into this thread. Hello all. I am a Master student in one of CAMPEP programs in Canada, who seeks Ph.D. studies in the US after successfully completion of my Master studies. Having experienced the academic life in Canada, I felt that the time for my research is not enough to make some meaningful contribution in my field (e.g., publication of research paper in MP or PMB journal); this is because we/I have to do both TA and RA simultaneously, which maybe one of big differences from the US programs. And, also, regarding the coursework, I felt and saw that many instructors did not hesitate to give us grades below B even F..., which means the coursework load is pretty rigorous. So, my point is that there are too many things to take up my time so that I have a sense that my time for research would not be enough to achieve my goal (e.g., publication in one of top journals). In this circumstance, I feel that not to follow CAMPEP track might be a possible solution; if I follow the CAMPEP track, I have to take 5 more courses, but if not, there is no course to take further. So, by not to follow the CAMPEP track, securing more time for research would be a better option than just following CAMPEP track? when considering my future Ph.D. applications to the US programs (particularly, I hope to ultimately get in the MD Anderson or Univ. of Chicago). Could you give some advice/comments on this? Thanks in advance! (I heard that many science & engineering Ph.D. programs usually place a high value on research fit (e.g., publication/experience in the field the potential advisor has a interest in), but GPA especially Master GPA is not seriously considered unless the GPA is not below 3.5/4.0. However, when considering the fact that there are only roughly 50 CAMPEP-accredited programs in the world, completion of CAMPEP track itself might be valuable and give some advantage on Ph.D. application. Also, I get a sense that the two programs would not put high value on research fit that much....so I am very curious about the admission criterions for their programs.)

>

No CAMPEP grad program means no CAMPEP residency which means no ABR eligibility which probably means no clinical career in the US. You really only need a CAMPEP program and residency if you want to sit for the ABR exams. See flow chart in <http://www.sdampp.org/documents/SDAMPPStudentGuideToAMedicalPhysicsCareer.pdf>

>>

They said they are already in a CAMPEP masters.

>>>

Interesting situation. Can you get a CAMPEP masters, then get a non- CAMPEP PhD, and get into a CAMPEP residency? I would think so. .

>>>>

Most of all, thank you all for your valuable comments and question. Yes! At least to my understanding, a key of the board eligibility is getting a CAMPEP degree. So, the degree does not need to be a Ph.D. degree.; This is why I am also considering non-CAMPEP Ph.D. programs too. Of course, my top priority is the two CAMPEP programs above though.

>

Are you looking for a clinical career or an academic one? It sounds like you really want to publish in prestigious journals, which is fine, but it is not necessary to have a productive clinical career. For an academic career, it would be extremely important, however it would only be one step along an extremely long road. That being said, your post says that you are already going to be completing a CAMPEP master's, so I don't feel like you have to go out of your way to seek out a CAMPEP PhD track, but I think that it is likely that any PhD program that gives you the most access to the top medical physics investigators are likely already CAMPEP track. PhD grads from CAMPEP programs match at like >95% each year for what it's worth [(link to CAMPEP data)](<https://www.campep.org/PublicDisclosure.asp>). It sounds like you are very worried about being given enough time to focus on research and not TA'ing, which is a very valid point. I would go to the websites of the programs you are interested in and look very closely at their descriptions of their funding. Some places like Duke give a guaranteed stipend to their grad students that (to my knowledge, double check this) is not contingent on TA'ing any classes. Ideally, you should attend a program that gives you a centrally funded stipend that isn't dependent on any professor's grants or being a TA, so you can focus full time on your research (which sounds like what you want). Applying for grants on your own is of course a perfectly good thing to do, but it's best if it's a bonus rather than have your continued existence depend on grant success. What gives you the sense that

the two programs do not consider research fit? Research fit is pretty important, personal fit with the PI is waaaay more important. Different schools will have somewhat different admissions procedures but I highly suggest reading this excellent [post from r/gradadmissions](https://www.reddit.com/r/gradadmissions/comments/ayzqqj/i_was_the_chair_of_the_admissions_committee_heres/). Hope this helps.

Hello everyone, I'm studying a Bachelor's degree in Medical Physics and Bioengineering in Dublin, Ireland, and I'm starting a work placement at a major private hospital in the city come January 2022, in a Diagnostic Radiology department. As such the hospital has requested a dress code of "smart business attire". I find this description very vague and was wondering the sorts of expected dress codes at your places of work. Thanks for the help!

>

Dress shirt, tie, slacks, belt, dress shoes is what I do for my workplace which calls for "business casual". Also my colors are fairly neutral (the loudest thing I have is a pale pink shirt). Although this probably depends on the department's culture, mine is fairly conservative. If anything else, wear a full suit to the first day (you might take a badge picture then) and gauge the attire of others then adjust accordingly for subsequent days.

[deleted]

>

I know 2 other languages (from family and studying), it's something I put on my CV and get asked on sometimes, but nothing I really used at all in my undergrad. It might be useful to maybe know Spanish in some places in the US, or even some French in Canada, but not by far required, as interaction with patient is a bit limited for the field (shouldn't be)

>

Are you asking if your foreign language skills will be used in day to day practice in the US? If so, the answer is almost certainly no.

Hello, I am a graduate student and I will be glad if I could get any suggestions of areas I might find useful in my thesis proposal especially in the fields of nuclear medicine and external beam radiotherapy. Thank you very much.

>

I would suggest asking your faculty advisor about this as they would be much better equipped to give advice about your specific thesis proposal than random redditors.

>>

Agreed, and also it's good to see if any of their ideas peaks your interest. Then you'd be working on something they enjoy and will help you as well.

>>

Thanks very much for this.

I'm a long time from having to apply to graduate school, but I'm supposed to transfer to UCSC for astrophysics bachelor program soon (finishing my prereqs at a community college first). So what happens if I simply don't get into a grad school?

>

See <https://www.aapm.org/students/prospective.asp>

>

If your plan is to become a clinical physicist, then yes you will have to get into a grad program sooner or later. If you don't get in on the first try you can always try to work in something related like being a physics assistant, but those positions are very limited in number.

>>

I see, thank you! And yes, I would want to go into radiation oncology or something, as I've recently learned the field of astrophysics, especially academia, is completely miserable. Is it normal to not get into grad school first try?

>>>

I wouldn't worry about not getting in on your first try, as long as your GPA and LORs are good. Although when you said "or something" that makes it sound like you don't have a very solid idea of what medical physics is like day to day. Shadowing a physicist (if you can) for a day or two should help you a lot with that.

>>>>

Im trying my best to look around for someone to shadow, but It seems opportunities are more slim since covid. What is a strong undergrad gpa if Im applying to grad school, may I ask? I have a 3.6 atm and I'm about halfway through my undergrad

>>>>>

That should be fine, just try to keep it there.

>>>>>>

I'm doing my best haha, thank you for the responses!

It seems like grad schools received more (about double) the number of applications for 2022: https://www.reddit.com/r/gradadmissions/comments/rkkadq/grad_schools_receiving_double_the_applications/ I applied to several programs on the MPRAP website. So far, I have heard back from three programs saying something along the lines of, "...We had a large and competitive applicant pool this year for a very limited number of interview slots, and unfortunately, your application has not been selected for a screening interview...." Are there more applications to residencies this year, and is the pool extra competitive for 2022?

>

The post that you mentioned that says they received double the number of apps is not in MP, so I am not sure that it's reasonable to infer that MPs grad programs (let alone residencies) received more apps than usual as well. I applied to many PhD programs and received an email from one of them (general email to all applicants) detailing some steps about the review process and they mentioned that they received much more applicants this cycle than last year. I really don't think it's a good idea tho to focus too much on how many other applicants are there. Just do your best in the apps and chill :D. I know it's easier said than done, but we can always try!

In general, how long do most masters programs get back to you after you send out your application?? Sending mine out in a few days

>

It depends. Some seem to have formal application processes - wait until the deadline, then have the admissions team review all applications, etc, etc. Others may review applications as they come in even before the deadline. One program I applied to had a video interview invite within a couple of days of my application and an admissions offer the day after the interview even though they were still taking applications. I had been in contact with that program, had submitted my transcripts and letters of recommendation and visited them, so they already kinda knew me before I finally clicked submit and paid the fee, so that might have factored in the quick turn around. The program I ended up attending had a more formal process of application review, interview invites a few weeks after that and then decisions a few weeks after that.

Post Title: [Training Tuesday] - Weekly thread for questions about grad school, residency, and general career topics 06/13/2023

Post Content: This is the place to ask questions about graduate school, training programs, or general basic career topics. If you are just learning about the field and want to know if it is something you should explore, this thread is probably the correct place for those first few questions on your mind. Examples: * "I majored in Surf Science and Technology in undergrad, is Medical Physics right for me?" * "I can't decide between Biomedical Engineering and Medical Physics..." * "Do Medical Physicists get free CT scans for life?" * "Masters vs. PhD" * "How do I prepare for Residency interviews?"

Comments:

Would not taking part 1 put me at a big disadvantage in residency applications? I will not be able to take it this August because I will be missing the whole year of coursework in my 2 year masters degree. Since ABR now offers part 1 only in August, are residency committees expecting most applicants to not have part 1 under their belt?

>

It'll work against you at many institutions. Just the truth. Some might not care but probably any academic residency won't bother.

>

When I reviewed residency applications, having passed part 1 was a plus. However, I didn't hold it against MS or certificate applicants if they hadn't passed yet. On the other hand, I expect PhDs to have passed part 1 prior to residency applications.

I am getting ready to take the ABR part 1 exam, and I've found out that I can optionally take one part of the exam this august (general or clinical), and postpone the other part to another examination period. I've been studying hard and feel ok about the test, but studying for both portions at once is a challenge so I was wondering what do people think about splitting part 1 between two years?

>

I don't think that would be worth the headache. Part 1 clinical is a much smaller task than part 1 general, so might as well get it over with in one go.

>>

Dope, I appreciate you

As a second year master's student, what should I do to prepare for my first annual conference next month? For the residency fair, is there anything I need to have prepared? What kind of clothing should I wear? I am already signed up for all the student activities.

>

Nothing to prepare except questions for the programs. Don't bother trying to sweet talk programs at the conference unless you're an actual superstar (very few of these). Use the experience to learn about different residencies. They won't remember you. Find the residencies that want to educate you instead of use you for cheap labor. If you're doing qa a lot, you're cheap labor. You don't learn anything from qa after a couple runs. There are programs, despite what you'll hear here, where education is the focus and not cheap labor to let faculty/staff get away from monthly and annual qa.

>>

How can you tell the difference between a residency looking to educate vs a residency looking for cheap labor?

>>>

Ask how often you have to do patient specific qa, monthly qa, and annual qa. If faculty don't do any of it, there's your answer. If you're doing hours of QA every night, or more than one monthly every month, or more than maybe 2 annuals, there's your answer. Once you've done a few of these QAs you don't learn anything new. So ask yourself why you're doing more than that. Is it to share the burden or to be cheap labor?

>>>>

Gotcha! Currently working as an MPA, so I'm familiar with the cheap labor tasks and look forward to moving past them being my primary job. I appreciate the advice!

>

>what should I do to prepare for my first annual conference next month? Wear comfortable shoes. Be prepared to learn a lot of things. Don't be afraid to ask questions or talk to people.

>

Attire at the whole conference is business casual.

Do you know any Medical Physicists in the US that studied in Italy? We have a specialization school (3 years, after a master's degree in physics) here, do you think someone with this curriculum could find a job in the US?

>

Would have to enroll in a 2 year MS program or certificate program and complete a 2 or 3 year residency.

>

Real hard, because this curriculum still not CAMPEP accredited, so no board certification. Sounds like it isn't a PhD also, so no certificate can be done. In my view, this specialization school would be great for getting into a CAMPEP program here, but that would mean another 2yr master or PhD before getting a residency and then board certified.

What is something you wish that you would have been more prepared for as a student in terms of preparing for residency or interviews etc.

>

For residency interviews, understand that, while most programs ask technical questions and try to gauge your knowledge based on things you've been exposed to in graduate school, the majority of places are really just trying to find out if you are the type of person that they want to spend the next two years working with. I would say in my interviews the distribution of questions was 75% personal/general questions about who you are and what your career aspirations are, and 25% were technical questions that were mostly related to things that everyone should know after a MS or PhD program completion, or things related to experiences on my CV. A great attitude and personality in an interview can make up for a lack of technical knowledge (to an extent) but for most places I doubt the inverse is true. Best of luck!

Post Title: [Training Tuesday] - Weekly thread for questions about grad school, residency, and general career topics 06/27/2023

Post Content: This is the place to ask questions about graduate school, training programs, or general basic career topics. If you are just learning about the field and want to know if it is something you should explore, this thread is probably the correct place for those first few questions on your mind. Examples: * "I majored in Surf Science and Technology in undergrad, is Medical Physics right for me?" * "I can't decide between Biomedical Engineering and Medical Physics..." * "Do Medical Physicists get free CT scans for life?" * "Masters vs. PhD" * "How do I prepare for Residency interviews?"

Comments:

I have a BSc in Computer Science interested in MS in medical physics. I have taken the basic calculus based physics sequence

as well as the math prereqs for physics majors and intro to modern physics. I have no research experience. What are the next steps I should take to have a strong application? And is it possible to get into a CAMPEP in my current situation?

>

The campep graduate standards state that an applicant with a non-physics major should have the equivalent of a minor in physics. What constitutes a minor in physics is up to the specific graduate program, however, the example campep gives is at least three upper level physics courses. It appears that you probably have the course requirements to take those upper level physics courses, but I think the next steps you should take to increase your likelihood of acceptance is to take courses offered through the physics department that meet the upper level physics requirement. Not sure what your specific institution offers, but at mine these were courses like Quantum, Optics, and Biophysics. However, you should reach out to the graduate program directors at the programs you are interested in as they could give you more personalized advice.

Hi, Nice to meet you guys. I'm from South Korea and have bachelor's degree in Physics. I will apply and study in medical physics graduate school in US which is accredited by CAMPEP for taking the ABR exams and becoming a medical physicist in US. Here's my questions. 1. Can I take the ABR exams regardless of non-citizen of US after I graduated at the medical physics graduate school in US as an international student? 2. I wonder and am super concerned about getting a VISA. Is it hard to get a resident job in US as a foreigner? I need a Job VISA while I'm working at hospital, so I want to know in same situation like my case. Thank you-all for all the supports.

>

I believe ABR is international-friendly. Not sure if the process is any different but I have a few international friends who have passed their exams. The visa process is always tough. It seems the worst for residency as many CAMPEP-accredited residencies do not want to go through the process of supporting visas. Many academic centers will support and sponsor visas, but you most likely need a PhD to land those spots. Few sites accepting MS graduates are willing to sponsor visas. Outside of residency, more opportunities open up. Places will generally be more willing to support you as a full staff member than a resident.

I have a BSc in comp sci from a US university, what would I need to do to get into a CAMPEP medical physics program? For context, I have taken the basic calculus based physics sequences, the math course prereqs for physics majors and intro to modern physics. I have no research/professional experience in physics. Is it viable to have a competitive application to get into a medical physics program at this time? If not, what next steps should I take?

Hi, i am finishing my master's in Physics specialising in medical physics. I study in Europe and I'm interested in the clinical training. I have some queries regarding the next steps. Please let me know if I can reach out to you to clarify my questions, if you're based in Europe. Thank you!

With a lackluster undergrad in physics and a 4.0 ms ai + ml, do you think it would be worth perusing a PhD in medical physics? My masters is basically a glorified compsci degree so I imagine my bachelors would be more relevant despite being <3.0.

>

Depends. Do you wanna do a glorified CompSci PhD in Medical Physics? Plenty of labs out there that would be interested in your AI/DL background if you're knowledgeable, especially if you have any publications. You may struggle to match to any other type of lab (just my subjective opinion) if your physics fundamentals are lacking. If you're incredibly passionate about it, you could retake some classes you did poorly on. There are too many well qualified applicants to take that kind of risk as a PI, I think.

>

Have you rectified what caused your lackluster undergraduate performance? Can you convincingly explain it to an interviewer? It certainly doesn't hurt to apply if it's something you're genuinely interested in. An easier pathway for you might be to get a medical physics masters and then applying for Ph.D. after you do well in your core classes. At that point people won't care about your undergraduate grades if you do well in all your masters classes.

Post Title: [Training Tuesday] - Weekly thread for questions about grad school, residency, and general career topics 06/20/2023

Post Content: This is the place to ask questions about graduate school, training programs, or general basic career topics. If you are just learning about the field and want to know if it is something you should explore, this thread is probably the correct place for those first few questions on your mind. Examples: * "I majored in Surf Science and Technology in undergrad, is Medical Physics right for me?" * "I can't decide between Biomedical Engineering and Medical Physics..." * "Do Medical Physicists get free CT scans for life?" * "Masters vs. PhD" * "How do I prepare for Residency interviews?"

Comments:

I'm currently applying for a NIH F31. Does anyone have any experience/tips/advice with this? Do residencies ever

significantly factor in your history of research funding when evaluating applicants?

[removed]

>

Any pre-graduate research experience is good experience. All of my undergrad experience was in a psychiatry lab and it worked out fine for me.

I have a bachelors in physics that i finished last year in a french system university (in a francophone country)with good academic standing, is there a chance i can make it into a phd program in a us university? I come from a poor family so getting into a phd instead of a masters is my only chance at continuing my education, and i'm really interested in medical physics as a field, especially that it is an applied physics field which interests me more than theoretical stuff. Any insights/advice is appreciated.

>

Your Reddit history indicates you are likely from Lebanon. There are some good physics faculty at Lebanese universities. They should be able to point you to something and be of some help, even if not specifically for medical physics. Some of them earned PhDs at top schools in Europe or elsewhere, so it is possible. That also means they know faculty in European, US, etc., universities quite well. If you know what exactly you want to do, that will help. Identifying people you want to work with will help. The PhD is a research degree, and research experience will help with your application. So doing some research locally or abroad would help. The closer to the subfield you are interested in, the better. But any research experience that is meaningful is useful for a PhD application. Whatever research or clinical work you can do would help. I know the situation in Lebanon is not good right now and might make the gaining of research and clinical experience very difficult.

>>

Thank you! That clears some things up

>

I just went through the process over the last few years, and while the admission numbers for getting into a Ph.D. program can be intimidating, it is not impossible to get in from a bachelor's. The two main factors that make or break an application are previous experience in Medical Physics and how well you can speak about your experiences. If you have no experience in the field of Medical Physics/Nuclear Physics/Biomedical Engineering, it may be an uphill battle to prove to

admissions committees that you are committed to the field. There are ways to gain experience, I would definitely reach out to a local hospital for shadowing opportunities if possible. Medical Physics Assistant roles are available here in the US, but I am not sure if that is the case in France. You also need to make sure you know what end goal you have in mind as a Medical Physicist. Do you want to work clinically in the US? Then you must go to a CAMPEP-accredited program. If you would rather work in academia, your options are much more broad. I would definitely try to reach out to a physicist locally to see if you can shadow or even ask questions, because (at least in the US) if you want to work clinically you must do a 2-year residency after you graduate from a graduate program.

>>

Thanks a lot! I prefer going into the clinical part of the field, that's why i was thinking about US programs, because a campep accredited program would open up a whole lot of opportunities.

I know ABR gives a topic list for ABR 2 (5 main areas), my question is...do all topics carry equal weight in the exam or can you expect one topic heavier than the others?

Post Title: [Training Tuesday] - Weekly thread for questions about grad school, residency, and general career topics 05/30/2023

Post Content: This is the place to ask questions about graduate school, training programs, or general basic career topics. If you are just learning about the field and want to know if it is something you should explore, this thread is probably the correct place for those first few questions on your mind. Examples: * "I majored in Surf Science and Technology in undergrad, is Medical Physics right for me?" * "I can't decide between Biomedical Engineering and Medical Physics..." * "Do Medical Physicists get free CT scans for life?" * "Masters vs. PhD" * "How do I prepare for Residency interviews?"

Comments:

I'm few years into a PhD program in Medical Physics, graduated with my MS a few years ago, passed part 1, have two first authorships and a few co-authorships, and have a few years of work experience with physics and dosimetry at a decent hospital near me. However, I think it's unlikely that I'll be able to finish my dissertation by this time next year so that I can be a PhD applicant rather than just an MS applicant. I was initially planning on finishing, but I've run into some issues with my work and think it's unlikely that I finish in time. I also don't really think I can mentally put myself through an additional year of school. All that said, how large of a detriment to the rest of

my application would it be to have started a PhD. but not finished?

>

This sounds like a unique circumstance. IMO, quitting now would be a major regret. You'll never be able to just pick up where you left off, so you're essentially terminating any chance of significant career growth for life unless you go back for a new degree or restart the MP PhD. Furthermore, it'll impact the recommendation of your advisor(s) and affiliated staff for the rest of your life. While I can't speak for every department, I suspect that terminating your PhD progress would look bad in residency apps as well - there's a societal stigma against those who quit something, your recommendations are weaker, and you're going to be locked out of a few places just by virtue of lacking the PhD. All that being said, you can justify/sweet talk your way out of anything if phrased properly... so if it's critical to your mental well-being that you drop out, don't let anyone dissuade you. Try to be objective, maybe consult with a mental health professional if you feel comfortable with that, especially before a big change - your grad school should have something.

>>

Thank you for that. I think the negatives associated with it far outweigh the benefits of starting a residency at most a year sooner. I'll try to bite the bullet and consider other possibilities, including what nutrap mentioned.

>

Not a great look but not end of the world. It would hurt you in some regards. However, it would probably help your career in Medical Physics to continue on for your PhD. Monetarily it will eventually even out, but the opportunities you'll have will be much greater with a PhD. Additionally, if you just miss out on the application, and get your PhD a few months later, you may not have to wait a whole year for a residency if you can find one that is outside the match. Or you may be able to do a short post doc. Or just work as a MPA and get paid and get extra experience and really solidify your chances in the match. If it's just a year or two I would try and find some hint of motivation to finish. Three years or more...then it might be time to consider just a Masters if you're really struggling.

>>

Unfortunate to hear, but thank you. Sometimes, it feels incredibly difficult to push through. I have who just got into residency, are in residency, or have already finished, but I'll be fortunate to get to start next year. Regarding those outside the match, do you know of a comprehensive list? I occasionally stumble upon such programs, but it's much harder to find them.

>>>

There will be a job posting either on the aapm or indeed or something. You can always put a message out here too saying you are looking.

>>>>

That's reassuring, thank you!

I am getting my bachelors in electrical engineering and want to pursue medical physics. If anyone became a medical physicist with a non physics background, information on how you did so would be greatly appreciated!

>

Electrical engineering is close enough that you'll understand the core concepts, very normal in our field. You'll just need to learn some very elementary biology during your grad courses. This isn't as unique of a situation as it may seem, so my recommendation is generic: Complete all of the pre-requisite classes (CAMPEP requirements), do well on the GRE and gain research experience (preferably in med phys) before you graduate.

>>

Thank you for your response. I am not sure if I will be able to complete the CAMPEP required courses and still graduate on time so I was looking at the option of getting a masters and PhD in nuclear engineering, because I plan to get a doctorate anyways, then getting a CAMPEP certificate. Do you know if it is easier to transfer over once one has a doctorate.

>>>

In my opinion, this path limits your options because there are less certificate programs than there are graduate programs. There's absolutely nothing wrong with this path from an educational perspective, but it's inefficient. You wouldn't use much of your nuclear engineering experience, and you'd have completed an entire PhD in an unrelated field... that's a lot of work for something that you may not even *want* to end up doing! How many required courses are you missing? I'd generally not recommend this to others, but given your major, you can try contacting & applying to MP programs and ask them if they'd allow you to take the missing classes during graduate school. This is allowed per CAMPEP policy, but it's a lot of work to juggle. Still better than the alternative, at least to me.

I just got accepted & will be starting grad school at Brown in the fall. I'll be getting a masters but their PhD program will be starting when I graduate that I'm hoping to transition into. Does

having a masters vs PhD make a difference in the job market? Is there anything you wish you knew prior to starting grad school?

>

> Does having a masters vs PhD make a difference in the job market? Is there anything you wish you knew prior to starting grad school? Yes, you need a PhD for a select few jobs, so theoretically the job market is better with a PhD. It's also beneficial for securing a promotion and/or residency.... but, would you really want to return to school for an additional 4-6 years just for marginally better career prospects? I've met a lot of people with MS in Medical Physics who still had to do a full 5 years of PhD, so don't anticipate a "waiver" of 2 years or anything like that. If you're lucky, it trims off one year, but far from assumed. tl;dr IMO only do a PhD if you prefer academia over clinical work, or if it's an absolute must for you to be chief physicist of a top ranking university RadOnc/MedPhys department.

>>

Brown is supposed to open a PhD program as I'm finishing so I won't have to do the first 2 years if I attend there. I'm not 100% certain if I want to stay in academia or not but I'm leaning towards not. It sounds like academia is the main selling point.

>>>

Ah I see, that's relatively rare so I'm not familiar with any kind of in-house workings like that. It could be a good situation. You should also consider the financial implications. If you need to pay for 2 years of MS tuition, then still plan to do a PhD, that puts you at a significant financial disadvantage. If you don't have an offer for a PhD program and need time to feel out your future, then it sounds like this can be a great opportunity for you.

>

Congrats! Not what you asked, but can I ask what your stats were? Gpa, letters of Rec, research, gre, et cetera?

>>

Thank you! I transferred to UC Berkeley (BA, Physics) from a community college (associates in math, physics, & econ). I'm not sure exactly what my overall GPA is but it's around 3.5 and my Berkeley GPA is 3.12. I had internships with NASA & Lawrence Livermore National Lab & have experience in the military. My letters of rec were from 2 scientists at Livermore & 1 professor in the nuclear engineering department at Berkeley. I was also really involved in the department when it came to mentoring &

helping with the new transfers the year after me. My GRE was pretty average in both math & english.

>>>

Ahh that's fair. Your application is super impressive lol. Thanks for the response, hope all goes well at Brown!

>>>>

Thank you! I think I kind of got lucky with everything falling into place. I liked how Brown only required a personal statement as my statement of purpose wasn't as strong. My grades aren't super great so I think having a really strong essay and great letters of rec is what made my application stand out!

Question: I'm a college student going into my sophomore year who is majoring in physics. I really enjoy it and I think that medical physics is a very attractive prospective career field. Besides maintaining a high GPA and getting involved with lab and research opportunities when I can, what is the best way to set myself up for a competitive application to grad school?

>

Honestly that sounds about right. GRE can be studied for in a short time, and the pGRE isn't necessary. Top off with good LORs and an intelligently written statement of purpose and you should have at least some acceptances. The SOP is pretty hard though so definitely spend time on that.

>>

Hey! Just for clarification, the SOP refers to the Statement of Purpose in the context of Medical Physics, right?

>>>

Yes. For PhD admissions this is super important because this tells the faculty exactly what kind of research you want to do which will impact if they can actually accommodate you or not.

My program is aimed at radiation therapy physics and such, so now i'm wondering. What do diagnostic medical physicists do? Is there anyway for international medical physics students to get certified? (Example: my country has no certification system for M.physicists) What are the latest hot topics of research in therapeutic medial physics?

>

Diagnostic medical physicists works on optimizing image protocols, performing acceptance/annual testings of radiological imaging units (CT, MRI, ultrasound...) and many other things in the realms of radiology and patient dose. For certification in

the US (ABR) you need to have a CAMPEP degree or get CAMPEP certification (takes 1yr I think) and then a Residency in a CAMPEP institution. So in your case, as an international student getting a degree outside of the US, you would have to do a certification and then residency. Can't answer last one as I am an Diagnostic MedPhys.

General question - how is the job market as of late? I live and plan to stay in the Detroit metro area thanks!

>

take a browse through the AAPM Career Services job board <https://careers.aapm.org/>

>>

There was one job in my state *nervous laugh*

>>>

Something to note is that the AAPM job boards are pretty expensive to post to so hospitals usually only leave jobs up there for a short time. If you go to Indeed you'll see there are currently 12 therapy physicist jobs and 1 diagnostic physicist job open in Michigan.

>>>>

Yea. That's not bad. You have to take into account there aren't many positions but also not many candidates to fill the position. If you're looking to stay in a very small radius (less than 30 miles) it may be challenging to find a position unless you live in a very big city (maybe even bigger than Detroit). But if you open it up to the state level or even surrounding states it's probably easy to find a job. It may not be available right away but typically within a two year span one will come up. Right now though the market is hot for candidates. Jobs stay open for 6 months to 2 years.

>>>>>

Thanks for the info this is the kinda thing I was looking to learn more about, I appreciate that

How family-friendly is medical physics as a career, generally speaking? I'm interested in the field, but apprehensive of the kind of hours I see doctors working- I want to prioritize my family. If this is a serious concern for me, is it better to be a self-employed contractor, or to have set hours as a medical center employee?

>

All of the physicists in my group (hospital based) have families, and equally importantly have the time to spend with them.

>

It really depends on where you end up. As far as radiation therapy: - In general, the hours are poor because much of your work is done after the clinic stops treating patients. All clinics I've worked at treat 8-5, so the physics QA work doesn't even get started until after hours. - Flexibility is mediocre. Most sites will require you be there for special procedures. If you're at a busy clinic, that can make it extremely difficult to get away. Also, since you're not an MD, patients don't really get scheduled around your schedule - you schedule around the MD. - I saw a workforce survey that showed physicists are the only RadOnc employees with a higher workload than physicians. In my experience, that's very true. - Depending on staffing, you may be on call 24/7. I have friends that are solo physicists. They get calls at 6:30AM when the machine breaks down and they're working on the machine with the engineer at 11PM. Now all that being said, there are some really nice positions available. I know people working 8-4:15PM with a lunch, others working remotely and some physicists working 4 day weeks, so it is definitely possible. They're just really hard to find.

>

It's as flexible as most white collar jobs - pretty good if you wanna be a run-of-the-mill average guy. Standard 40 hours/week, varies based on the clinic, might need to come in for a weekend QA every now and then but many places will comp you the hours back. If you wanna push the boundaries of the field or work at a "prestigious" location, you might be working longer hours. If you're vital to leadership/administration, it doesn't matter what your career is, it'll generally be hard to take time off.

>

It's great for working hours. Normal 8-5 usually, no on-call, no weekends. Most doctor specialties do have long hours or call, but in that respect, radiation oncology seems pretty easy on hours for the docs too. One in a group might be on call. But an emergency case is extremely rare. I've only seen weekend emergency treatments for something like a cord compression about once a year. The treatment given for that is so straightforward that a physicist doesn't usually even get called for it.

Post Title: [Training Tuesday] - Weekly thread for questions about grad school, residency, and general career topics 05/23/2023

Post Content: This is the place to ask questions about graduate school, training programs, or general basic career topics. If you

are just learning about the field and want to know if it is something you should explore, this thread is probably the correct place for those first few questions on your mind. Examples: * "I majored in Surf Science and Technology in undergrad, is Medical Physics right for me?" * "I can't decide between Biomedical Engineering and Medical Physics..." * "Do Medical Physicists get free CT scans for life?" * "Masters vs. PhD" * "How do I prepare for Residency interviews?"

Comments:

I am currently in my second year at the 5 year long medical physics program in Sweden. My goal is to some day work clinically in the US, but the process seems a lot more complicated there than over here. In Sweden we get our license from the national board of social affairs and health after 5 years at university, which also applies to any other EU country. However, in the US it seems you need to do residency and a test to receive a license. Would I have to do all that when I already will be a licensed medical physicist in the EU?

Is there any intersection between organic chemistry and medical physics? I'm pursuing a physics degree, but I've enjoyed organic chemistry before, so I was wondering if there are career options involving organic chemistry.

Is an undergrad med physics degree useful since we have to get a masters degree anyway ? Or can I study something related to physics for my undergraduate and then do a med physics masters degree?

>

I have never seen an undergrad major for medical physics in the US. The vast majority of MPs major in something like physics or engineering. A minor in physics is the minimum for entry into MP grad programs.

Hello! I am in undergrad, currently considering Medical Physics as a post-grad career. I've heard a lot about the job from various sources and have shadowed, but there are some questions I would like to crowd-source! Thanks in advance! 1. I am currently earning my undergraduate Bachelor's of Science in Physics. I've heard that with Medical Physics, you can either go to grad school for two years to get a Master's, or in some cases, you can do an "apprenticeship" with an established medical physicist and then take the board exam. What advice/feedback can anyone give me regarding both paths? 2. What grad programs are good and cost-effective? 3. Is it better to seek employment with a hospital or is it better to self-employ and do consulting work? 4. Is consulting work in demand? (I mean, will I be able to eat?) 5. What non-obvious places need consulting and safety certification? Doctor's offices, dentist offices, imaging centers? 6. With employment from a hospital, are hours flexible, or is it a pretty

set 9-to-5? Are most employers flexible with part-time work? 7. The medical physicist I shadowed had his own consulting business, but mostly worked at a cancer treatment branch of a local hospital, checking the machines and confirming the radiation source returned to the machine after treatment. Is this a typical employment arrangement, or are most medical physicists directly employed by a hospital/health care system? 8. How much of a standard undergraduate Physics curriculum is employed on a daily basis? (Are you deriving the three-dimensional Schrodinger equation between patients?) 9. If I have the choice in my Physics electives, is it better to take more nuclear focused courses, more solid-state courses, more theoretical courses, etc? What sorts of classes are the most practical for the career? 10. This last question is a bit more personal, and I realize it depends on the person. At my school, the assumption is that most physics major will go on to do graduate research, and eventually end up in industry or academia. I'm really not interested in either of those options, but I don't want to waste my degree. It can be hard to feel like slogging through my difficult classes is worth it, especially when I don't have a clear career path articulated by my professors, like many of my peers. So I guess my question is, is medical physics worth it? Is it a career where you can go to sleep at night satisfied with the work you've done? Is it worth the difficulty of undergrad? Thank you so much! I realize I have a lot of questions, and if it's not possible to answer all of them, I would be happy to have any answers to any of them. Have a wonderful day!

>

Just a point about your first question: that "apprenticeship" may be referring to foreign trained medical physicists who move to the US. <https://www.theabr.org/medical-physics/initial-certification/international-medical-graduates>. If you are US based right now then this will not be an option for you. Look at the link in the sidebar for the options for training.

Hello! I've been outside the field for a couple of years now, I'm aiming to pursue a PhD program hopefully next year, meanwhile I'm looking for a research opportunity but I've been emailing professors with no luck yet, any advices ?? Should I do a masters instead ? To ease my way back to the field ? I would appreciate some advice

>

What is your current profession and previous educational background? What is your primary motivation?

>>

BS Physics, post BS medical imaging, currently I'm doing most public policy work. I have always wanted to go back to school and continue with my education, life happened and drove me in a different direction, I've been off the field for almost 5 years now. I try to keep myself updated with bibliography

>>>

You have a very strong background for Medical Physics if your GPA and references are good. Direct application to PhD is not unreasonable. If you have meaningful research experience or published anything in your current position, I think you have a good chance of acceptance with at least one program. In your circumstance, I don't see any reason to do a masters first as you already have a strong background in a related field. You would just be wasting a lot of time and money if would still do a PhD afterwards. Your most important priority, which it seems you've already identified, is to prove you're interested in research/academia in some form. Cold e-mailing professors is difficult, I know for my university a lot of external emails go straight to spam. They may also have no reason to trust you, and have a list of dozens of other things to do or people to collaborate with. Try emailing faculty from smaller or less established PhD programs. If that doesn't work, think about doing something non-traditional to prove your academic interest - maybe your current job has some kind of opportunity, like teaching or creating an academic-style blog.

>>>>

Thanks for the advice, I will Definitely apply directly, exploring the best options always. If you heard about any research opportunity I will appreciate the share. I truly want to work on my research skills meanwhile.

What is an "average age" to finally be a mp? I'm ~6 years out of my master's and barely make enough to keep a roof over my head. I really regret going into this field

>

[deleted]

>>

Mp assistant, not certified can't get a residency to save my life

>>>

If you're uncomfortable in your current position and you haven't been able to secure a residency for 6 years, I'm sure you've heard every possible trope already. "Figure out what you're missing, do some self reflection, etc". If all that has failed and nothing is changing, I personally believe it's well justified

to change careers. If you want to stay within MP, maybe look towards dosimetry or RTT. A little schooling required, but you don't waste your life's efforts and can earn a very comfortable salary.

>>>>

I've seen how badly my clinic treats therapists and don't see that as an option. I've considered dosimetry and it may still be on the table.

>>>>>

Yeah, RTT life isn't perfect. Like all careers, it'll depend where you work. I get the impression that their work-life balance can very consistent (usually easier to "punch in and out" as RTT than dosimetrist or physicist), but there are tradeoffs. Is there any reason you haven't gone for dosimetry yet? You have a masters degree in MP, so that gives you a slight leg up for any future promotions to a senior/chief dosimetrist. Your path would be uncommon as most do it in the reverse order (ex: I've heard of dosimetrists going on to do medical physics graduate programs and then failing to match), but this would work very well in your circumstance.

>>>>>>

I was ready to jump ship a while back but several people advised me to keep trying so here we are...

>

Are you board certified? Are you residency trained? If you follow a "traditional" therapy mp path of undergrad (4years) -> grad school (masters, 2 years) -> residency (2 years) -> job and then board certification you should be mid-late 20's/early 30's. AAPM salary survey puts fresh residency grads at \$100,000+. I know medical physics assistants making a very comfortable wage. Also, you don't just become an mp, you have to work at it. Based off of username... ♂

>>

Yup I'm aware of the process. I've been trying to get a residency for 6 years. I'm a mpa and my salary isn't comfortable

>>>

Have you gotten honest feedback from your grad school advisors and current supervisors? I don't think that this sub can give you better advice than they can.

>>>>

My grad school was a joke and a scam. I didn't have an advisor. I did some research work for some narcissist who liked to verbally abuse me on a regular basis. But that was about it.

>>>>>

You've bashed ECU multiple times on this sub so I won't get into that, even though there are many ECU alumni that go on to residency. However, you still haven't answered the other half of my question, which is whether there is anyone who you work with right now (presumably DABRs) as an MPA that can give you frank advice about your CV or your application. This is harsh, but the fact that you haven't gotten residency (and maybe pass pt1, correct me if I'm wrong) in so many years, I have a feeling that you have one or more red flags that cause PDs to believe you cannot safely practice medical physics independently. You need to figure out what those red flags are and address them before you jump ship because those will be relevant in other industries as well.

>>>>>

I know each year is different, but only one person in my class got into residency. So yeah, I'll bash ECU any time someone makes a post about them. They should have their accreditation revoked. Yeah I've had a lot of advice from someone where I work. I think my CV is fine, could be better, but not terrible. People generally don't like me. I think I'm autistic. My boss promoted someone with less experience over me because they just like them more. And yeah I struggle with standardized tests.

>>>>>>

>People generally don't like me. Your bitterness definitely comes through in your reddit comments: not sure what your attitude is like at work, but my question is *what are you doing to address this?* Your own supervisor not liking you and you not interviewing successfully probably have the same root cause which has nothing to do with your grad program. There are definitely neurodiverse people who are successful in MP and other careers.

>>>>>>>

Hell yeah I'm bitter. I worked very hard to get gatekept out of being able to make a living. I'm fine at work. Never been anything but nice. I just do my work and go home. I don't bend over backwards to be social with my boss like my coworker does. I'm never going to. I think it should be enough that I come here, be nice/easy enough to deal with, do what is expected of me, then leave.

>>>>>>>>

As someone who's been accused of being too social and bending over backwards to be social (when in reality I would just make a concerted effort once every couple of days to check in on Dosimetry to make sure they're not freaking out, and check in with the linacs to make sure they haven't forgotten to tell me something), I think it's worth pointing out that a good, desirable medical physicist can require being social, unfortunately. There are academic departments where medical physicists can isolate, do research, and focus on their stuff, but for a lot of smaller departments, medical physicists can be a lynch-pin in the cohesion of the dept. In some of my positions, our physicists were the only people who could talk top to bottom (from admin, directors, MDs all the way to patient transport, RTTs, Service Engineers) with a genuine appreciation of the issues at hand, and how they can affect the other members of the team, because it's our job to understand how a lot of this stuff works and the resultant causes/effects of issues. It's difficult to didactically train this skill up, but when I was hiring physicists, one of my primary concerns was "Will my therapists feel comfortable approaching this person if there's an issue? Or will they feel compelled to wait until I'm back from vacation/satellite coverage/lunch because they don't want to be brushed off, sarcastically dismissed, or made to feel "not as important." I feel bad for you that you are doing all the things you're supposed to be doing and that you're having issue breaking through the residency barrier. But unless you're a PhD student, getting into an academic position where you can silo yourself from work that's "not yours" is gonna be rough. It does sound like you have ample clinical experience as an MPA, which might lend you well to a job in industry, so I'd echo that recommendation. The competition might not be as stiff, too, because they typically pay less than a clinical position, but still pay very well. Have you looked into what Varian, Elekta, Sun Nuclear, etc. have listed for openings?

>>>>>>>>>

I don't have a problem talking to people and checking on work related stuff. I just honestly don't care to take an interest in my boss's personal life. He doesn't care about mine. If there was a shred of reciprocity I'd be more talkative. But yeah I had a great job I was applying for at sun nuclear. Then they ghosted me, stopped returning emails, phone calls, etc. They wouldn't give any feedback at all. I feel like I nailed that interview though. But I guess I should keep looking.

>>>>>>>>>

That sucks. I was ghosted so many times during my interview processes, too. You going to AAPM? I'd approach some of the smaller vendors there. From what I gather, they would kill to get someone with clinical physics experience. I heard of one vendor who had been touting electron monte carlo calculation

compatibility for years, and eventually had to pull a physicist aside one day and ask them what electron monte carlo even was.

>>>>>>>>>>

If my work foots the bill I'll go. Otherwise can't swing it. But your input does make me feel better about looking more at industry stuff

>>>>>>>>

The majority of successful mpa's (at least that I have met and personally worked with) who wanted to get into residency did far more than just show up, do work, leave. They got involved in as many projects as possible, reviewed the newest tg/Mppg reports to stay current, volunteered to work on monthlys/annuals, participated in special procedures, etc. This is the drive and ambition that people see which can lead to promotions and probably more importantly for you, strong letters of recommendation.

>>>>>>>>>

Volunteer to do machine qa? That's part of my regular job. I've helped with about 4-ish research projects and have done in vivo dosimetry a couple times. I don't consider that extra or free work. That directly benefits my CV.

>>>>>>>>>>

Maybe time to look for a jump into an industry position. Likely will pay better. Use contacts you know in the field for Varian or Elekta or Accuray. Also Raysearch and Phillips and all these other companies will hire physicists to do field training. It won't be exactly what you want but it doesn't seem like you're getting what you feel like your valued right now and staying in your current position won't help.

>>>>>>>>>>

I want to go this route but haven't been successful so far. I feel like I crushed an interview with Sun Nuclear (literally the only time I've ever felt good about an interview). Then they straight up ghosted me. Wouldn't return emails, phone calls, idk what I did wrong there.

Post Title: [Training Tuesday] - Weekly thread for questions about grad school, residency, and general career topics 05/16/2023

Post Content: This is the place to ask questions about graduate school, training programs, or general basic career topics. If you are just learning about the field and want to know if it is something you should explore, this thread is probably the correct

place for those first few questions on your mind. Examples: * "I majored in Surf Science and Technology in undergrad, is Medical Physics right for me?" * "I can't decide between Biomedical Engineering and Medical Physics..." * "Do Medical Physicists get free CT scans for life?" * "Masters vs. PhD" * "How do I prepare for Residency interviews?"

Comments:

I'm about to start applying to therapy residencies for 2024 - what are the things I should be looking for when I apply to them (I have only done my masters).

>

If it helps, here is how I ranked programs. I did it based on how they scored in my priority list, which was, in descending order: 1. Resident support from staff/overall fit 2. Education structure 3. Location 4. Reputation 5. Modalities 6. Senior residents (whether or not I'd be happy to work with them) 7. ABR Preparedness 8. Overall work/life balance Of course, your list may be different from mine, and I saw that you're an international student as well, but when I was given the opportunity to ask questions, I always made sure to ask at least one related to each of my priorities in an interview. I also recommend attending the residency fair at AAPM if you will be there, and/or the virtual residency fair offered in early fall. Both are great ways to help programs know your name and face before applications even start, and will help you grow familiarity with programs and residency in general. Programs will write down the names of people who attend their sessions, so it's a good foot in the door!

Hello, I have a couple of questions. 1. Do you actually need a residency? Could I be certified with work experience? 2. Does a campep program count as professional experience? 3. How are people matched with residency programs? I am geographically bound to South Dakota. Are these types of things factored? Thank you!

>

1) To do clinical work yes, you cannot get ABR certification without residency. Work experience would help you get a residency though. 2) The program itself, no. But if you do work, research while attending it then those counts, of course. 3) Somewhat same as MDs do, but there are some off-match residencies, which are more like job positions. For the match, you apply to all places you want and then do interviews with the ones that are interested in you. After that you do a ranking process, where you rank programs on how much you want to go there. If you are geographically bound to SD it diminishes your chances by a lot, as there's probably just a couple of residencies positions there. If you want a residency, which are competitive, you might want to consider moving for a couple of years.

Hello, I have a couple of questions. 1. Do you actually need a residency? Could I be certified with work experience? 2. Does a campep program count as professional experience? 3. How are people matched with residency programs? I am geographically bound to South Dakota. Are these types of things factored? Thank you!

>

\> Do you actually need a residency? Could I be certified with work experience? Requirements for taking the ABR board certification exam can be found at <https://www.theabr.org/medical-physics/initial-certification/part-1-exam/requirements-application> \> How are people matched with residency programs? I am geographically bound to South Dakota. Are these types of things factored? For most programs, you go through the Medical Physics matching program, similar to how MDs get matched to residency programs. In a nutshell: * select several residency programs you'd like to attend * apply * interview * rank the programs The programs you interview with will also rank the applicants they interviewed. All of that goes into the match algorithm and theoretically each is paired with their top (or nearly top) ranked applicant/program. There are also a few residency programs that don't participate in the match program. For those, you apply to them individually as you would with a normal job. I don't know of any residency programs in SD, but you can find the list of CAMPEP residencies at <https://campep.org/campeplstres.asp>

What do I need to be a qualified as medical physics assistant MPA? Do I need BS physics or I need to get clinical experience?

>

BS in Physics is all it takes where I work.

>

BS is sufficient at my place, but all of our current MPAs have MS.

>

I'm enrolled in a medphys MS and the hospital in at required a MS to be an MPA

Would public posts (e.g. on Blogspot, Gettr, LinkedIn, Mastodon, newspaper letters to the editor, Reddit, Substack, TruthSocial, Twitter) using our real name about political or controversial topics hurt our hiring ability (for university or private practice position), for example if we disagree with LGBT philosophy, or if we promote ownership of firearms, or more generally if we disagree with any aspect of the Democratic Party platform? It appears to me that a majority of the AAPM is

Democrat Party as demonstrated by the "we should boycott Texas annual meeting after Roe v Wade" posts to the AAPM bulletin board and the public statement the AAPM published to appease those people. Consequently it seems to me speaking publicly contrary to their Party positions would be detrimental to one's career, because there is a general trend of intolerance for dissent among Democrats. What are your thoughts? Do you think it is true that a majority of medical physicists frown upon those who don't agree with Democrat Party politics? Would it hurt hiring probability insofar as opposing LGBT is conflated with "opposing diversity" by HR? To what extent should we engage in public discourse anyway for the sake of arriving at what is true and beneficial for society?

>

Hurt hiring ability...Probably. In many states in the US you can be legally fired for pretty much any reason outside race, religion, or sexuality. Same goes for hiring although it's probably really hard to prove that someone was not hired for one of the three reasons above. So pretty much if you are vocal about something, and the hiring party doesn't agree, they don't have to hire you no matter how good you are at doing electron hand calcs. Is it fair? Who knows. On the flip side, if you find that your views agree with hiring physicists they might favor that more. But if you are in the minority it would be harder to find. As to your last point, and I'm sure you may know what I'm talking about, I recall a particular meme on the meme page that may be the most downvoted MedPhysMeme of all time. It has since been deleted by the OP (albeit recently) but it was basically opposing boycotting the AAPM in Texas by saying no physicists cared. Based off the number of upvotes (or lack thereof) it seemed like many physicists cared (at least in the Meme Page). Now Reddit is not an accurate representation of the political spectrum of America so do not base all your decisions off of that. Also you don't have to post this question in the career thread. I'm sure more physicists will read it on the main sub.

>>

Are you a moderator? I asked here because the Sidebar Rule 3 says, > 3) Questions about the field [...] or careers should be posted in the weekly thread It does say 'should', not 'must' or 'can only' or 'shall', though. What is the justification for posting it in the 'main board'?

>>>

He is a mod, as am I. Rule 3 is targeted towards the very repetitive questions that we get like "how do I become a medical physicist?". More specific and/or infrequent questions about the medical physics field are welcome to be their own post. Examples include the one from a couple days ago asking about in-house imaging physicists' hours. We can clarify the wording of Rule 3

to help newer posters if the current wording is insufficient to make our intent clear. Thanks for pointing this out!

>>>>

Thanks. Also "KERMA the frog" great name xD lol!

To people that have entered clinical jobs, how much of the theory you did on your masters was useful? I'm doing some modules that I can say 'I see where that will be useful' but then there's others that look like they were put in for the sake of it or to make up credits.

>

My Masters degree provided a general foundation upon which everything was built -- it was all important in that sense.

>>

Thank you!

Hi everyone, apologies if this is not the type of questions/too much for what you want on these threads! I am based in Melbourne and nearly finished with a PhD in particle physics and am having a bit of a ~~crisis~~ think about what I want to do post PhD. As much as I love particle physics, I feel like I want to end up doing something more immediately helpful to other people, whether that is moving into renewable energy, medical physics, etc. My subfield is in detectors/instrumentation which from what I understand has some significant overlaps with some parts of the medical physics field (radiation detection etc). So I guess I am seeing if anyone has any experience in this type of career shift. If it helps too, I also have an electrical engineering degree from before my PhD. \- Has anyone here made the transition to medical physics before from particle physics? Or any experience transitioning after finishing a PhD in a non-medical field? \- Has anyone shifted their postdoc research to something more applicable to medical physics? I am not entirely sure I want to stay in the academic system for the rest of my career but perhaps a shift in research applications could be nice! \- Am I better off looking into biomedical engineering pathways too? \- I don't know if anyone here is from Australia and has any specific advice too? Again, sorry for the long post/if this too much, I am extremely appreciative of any advice or suggestions!

>

I went from Nuclear Physics (which was heavy in particle physics) to Medical Physics. I was doing a research for a project at Fermilab as a grad student and I realized that it wasn't for me. I spent 2 years in grad school for physics before making the jump though so I wasn't close to my PhD. I'm in the US, but if I were to go anywhere international, Australia would be it for Medical

Physicists. In the US you can get your PhD in another field and take a 1 year certificate course in Medical Physics (from a certified University) and be eligible to take your board exams. This is a route that many people do. Some PhDs are better than others, and in my opinion, Particle Physics is about as close as you can possibly get. I would recommend following a medical physicist nearby around for a few days and learn about their job before applying. Make sure it is something you want to do. It was the right call for me personally but a few of my colleagues from the Nuclear days just weren't interested in Medical Physics as much as I was.

>>

Im glad to hear you are happy with your switch! Don't get me wrong, I still love particle physics, I just don't think I'd be fulfilled with spending so much of my time on it in the long run. Yeah I figure I should get in contact with some people locally to chat including medical physics people in my physics school and people I know working at the local hospital and see what options there are. And the shadowing for a day sounds like a great idea! Thanks for your response, I really appreciate it!

What PhD and MS programs/departments are best for persuing diagnostic imaging? I know it is less common than therapy so I want to know what programs to look into.

>

MD Anderson, Wisconsin, Duke are kind of the general top programs for MP but they are strong in imaging as well. Not quite sure about MS level programs that are well known for imaging.

>>

I'll second this. As a therapy physicist these are the top that come to mind for Imaging.

>

Go to campep.org for a list of accredited programs and look at them all. They are not that many. Canadian programs are more rigorous in terms of pure physics, but Canadians are coming to the USA due to lack of positions in Canada (at least for therapy; dunno if true for diagnostic). The decision might come down to where you want to live (research the city and its politics and quality of life).

Does anyone have campep grad school acceptance stats? As in how many applied for the grad program, how many were accepted, how many attended, how many of those got a residency, et cetera? I think I saw something a while ago showing just that but I can't seem to find it now

>

<https://www.campep.org/PublicDisclosure.asp> I wish CAMPEP would update this. Individual programs are required to publish their stats on their websites as well, so I'd look there for more recent data.

>>

Shame it's not updated, but this is exactly what I was looking for. Thank you!

>

<https://www.ucd.ie/cphm/mscinmedicalphysics/campepaccreditation/>
This information is specific to the course I'm doing in Dublin. It's a little bit vague but might give you an idea.

>

SDAMPP publishes [reports](<https://www.sdampp.org/resources.php>) that covers most of those stats although for specific institutions I think you will need to refer to that graduate program's admissions page.

Post Title: [Training Tuesday] - Weekly thread for questions about grad school, residency, and general career topics 05/02/2023

Post Content: This is the place to ask questions about graduate school, training programs, or general basic career topics. If you are just learning about the field and want to know if it is something you should explore, this thread is probably the correct place for those first few questions on your mind. Examples: * "I majored in Surf Science and Technology in undergrad, is Medical Physics right for me?" * "I can't decide between Biomedical Engineering and Medical Physics..." * "Do Medical Physicists get free CT scans for life?" * "Masters vs. PhD" * "How do I prepare for Residency interviews?"

Comments:

What are Residency Programs that they focus on Brachytherapy to their students?

Can I persue the course online I mean medical physics courses

Nuc Med Tech to Med Physicist Just as the title says. I'm a nuc med tech looking to become a medical physicist. Upon researching schools, the problem is the lack of physics degree. I have my degree in nuclear med and one in psychology. Looking for insight or schooling options to transition.

>

I would contact some of the CAMPEP accredited medical physics graduate programs that you might want to go to and talk to them about their prerequisites. With your background, one of them might be willing to admit you and let you make up some courses you're missing

>>

Thank you for your response. I have been using the CAMPEP website to look into programs. Looks like I'm on the right track and I'll be sending out emails to prospective schools.

I'm in my mid-20s and considering a career change. I'm wondering whether medical physics might be a good fit for me. I have a master's in mathematics, but no physics background beyond 100-level courses. I really enjoy numerical methods, both from a theory perspective and a programming perspective. I also love the rigour of mathematics, and this lack of rigour is actually what turned me off of my introductory physics courses. I recently stumbled across r/radiology and was just blown away by the images, and I think it would be really cool to work in this area. I especially like the idea of doing something more applied than just pure mathematics. I know that to become a medical physicist I'd have to go back and do a whole bunch of physics courses before really getting started on a PhD, which may take a while. Given what I've said about my interests, do you think that this is a reasonable goal? Would you recommend anything else? Additionally, do you think that someone with my background would have a hard time with the physics?

>

I think this could be a good fit for you if you are interested in doing academic medical physics research, i.e. getting a Ph.D, becoming a tenure track professor, advising grad students etc. or becoming a research scientist in some capacity. There is a lot of overlap in these fields so you could probably get a Ph.D. in something like biomedical engineering too. As long as you find a lab and advisor that align with your research interests, it doesn't really matter what the department name on the Ph.D. certificate is if you're going down this path. I'm guessing there's a reason you didn't go for a Ph.D. in math though so if academia is not for you and you were wondering about clinical medical physics, then no, I don't think medical physics would be a good fit for you. Day-to-day clinical medical physics is not more rigorous than pure physics, quite the opposite actually. It requires having some niche knowledge and things like attention to detail and being able to critically think on the fly. As for your other question, you wouldn't have to do a *whole bunch* of physics courses prior to starting a Ph.D. in medical physics. The typical requirement is essentially 3 upper level physics courses or equivalent but you can check the website or reach out the advisor for any department you're interested for their exact

requirements. Some will allow you to take those courses while you're in the program.

>>

Thank you for your thoughtful reply! I didn't continue with the PhD mainly because I wasn't in love with the field, and I had a hard time finding other options due to covid. I *love* the academic lifestyle, but I fear it's a bit risky, especially for someone entering a few years late. Being able to work in industry or in a clinical setting appeals to me because there are (relatively) more jobs. As for the rigour, I might actually take that back. I don't mind dropping some rigour, and I recognize that it's in some sense necessary for doing applied work, right? I mean, it seems fairly rare that applied work in general is hyper focused on rigour, no? (I don't mean this in a disparaging way. I just mean that it's not worth hyper-focusing on the details most of the time, when there is actual experimental work to be done.) Would you say that the challenging parts of the job are mainly conceptual, like learning some new physics concept, or technical, like figuring out the best way to run some piece of code or calibrate a machine? I get the sense that it's the latter, which actually does appeal to me quite a bit.

>>>

[deleted]

>>>>

Thanks for the input! It's funny, the older I get, the easier I find courses to be. I really agree that there is something to the idea of maturity making learning easier.

>>>

Since you mentioned you were interested in imaging, I'll let my diagnostic colleagues comment on what's the most challenging part of their job since that'll probably be a better guide for you. I will say for me *personally* and at the stage that I'm at in my career (a newbie) I think the most challenging parts of the job in therapy are the problem solving and decision making. It's on you to figure out if the QA is outside of tolerance because of something real or you made an error somewhere. And if it is real, what is the cause and how are you going to fix it? For those items that don't have strict tolerances, at what point is it worth chasing down or letting it slide because it's good enough and not worth the rabbit hole? This is just an example, but I think in general having to solve problems that can be challenging and have a time limit (better be ready to treat by morning) and having to be the one to make decisions that impact patients and colleagues are the toughest parts of the job, although they get easier with knowledge (physics and technical) and experience.

>>>>

Agreed! In a clinical environment, it is up to you as the physicist to analyze any situation, make a quick decision/rule-of-thumb calc/recommendation to the physician, and move forward. QA is one thing, but when the patient is on the couch about to be treated and something weird comes up, I think that's where good medical physicists tend to come into their own. There is an interesting constant grapple between by-the book rigor and practical decision-making that makes experience and critical thinking so valuable in this field. (Coming from therapy background)

>>>>>

Thanks for your comment. Can you give an example of the kind of "weird" thing that might come up? It's hard for me to imagine such a scenario in a clinical setting.

>>>>>>

One that can happen quite often is when you have a patient set on the table ready to treat and their anatomy on the CT taken on the machine doesn't quite match the reference CT (image we align to for image-guided therapy). We have to evaluate the severity of the problem, narrow potential issues that could be causing the misalignment, and weigh if it's worth it to chase the problem. A "by the book" answer would be to chase any problem that arises and try to get perfect alignment. Practically, it's not always feasible or beneficial for the patient to do so. The longer it takes to reach a solution, the less likely a patient is to stay still. It is good in these cases to have rule-of-thumb estimations offhand to determine how these errors would affect treatment and whether they should be addressed at that time. You can pretty much come up with a weird situation for anything we do, though. Just when we think we've seen it all, something a little crazier happens. Such is life.

>>>>

I really appreciate the information. Thank you and wishing you all the best in your career :)

What do I need to do to pass part 1?

>

It's worth noting part 1 overlaps therapy, imaging, and nuc med. There are elements of all of them in your exam. In past exams, there used to be a lot of general physics (block on a ramp, etc), but that seems to not be the case anymore. There is a list of topics on the ABR site that can help guide your studying. Sites like ABR Physics Help and WePassed are pretty popular. Quick

review books like Khan's Lectures and Huda's Radiological Physics were huge for me along with an anatomy & physiology handbook.

>

Know the interactions of particles. Know your radbio and just basic anatomy and physiology. Part 1 is more physics and less medical physics. Someone probably has good study material. Ask classmates.

How long are people preparing for part two? How many hours do you study a day?

>

I don't think I studied for part 2 until...oh shit nvm it's already May. I spent like 3-4 hours a week in May and slowly ramped it up to like 10 in July.

>>

Thank you. It looks like i am on the same road lol. I started in april with my last rotation oral exam and now I am putting some 3 hours daily. I imagine between the end of residency and the exam, i ll be studying full time.

What does the CAMPEP accreditation timeline look like? If my two-year residency has, say, their accreditation through the end of 2024 (without renewal) but I start there in mid-2024, will I be grandfathered in or do you have to graduate before the accreditation times out?

>

My understanding is that as long as the program is accredited when u start, you are grandfathered in. However, if you are nervous that the program won't get their renewal, I wouldn't apply there. Most program work their asses off to keep their accreditation though. Sometime to ask during residency fair.

>>

Great, thanks!

I am planning on being a radiation therapist. However, I am looking into medical physics. If in the future, I get a bachelors in imaging, while also getting a minor in physics, with a bunch of calculus and high-level physics classes, would I still be considered a viable candidate in medical physics programs?

>

One of my classmates was a therapist prior to joining the physics group. He basically did that as well.

>

Sure! Check the schools requirements for physics classes and if you fulfill it it should be fine. Is there a reason why you want to that do and not a physics major undergrad with a imaging minor? I'm certain most programs would like that better!

How are the industry job options for MRI physics? Thinking of getting into Computational Physics major with a minor in Imaging physics. For context I finished my bachelor in Physics and did my thesis and an internship in Radiotherapy

>

I'm not in industry but know some people in it, that are not medical physicists, I can speak to what they do Pulse Sequence Programming/research: I have a friend at a major vender (and I dabbled a bit on it in grad school) but it is HARD! A lot of MR knowledge and programming to optimize/create new pulse sequences. Research new sequences for faster acquisition with good SNR/contrast and all that. Recon Programming: Creating new codes to perform recon on existing or new sequences, making recon faster/'real-time' (real-time recon is much needed for radiotherapy). Again, it goes well with the first one, as if you create a new sequence, you might as well know how to create a code to recon that data. Sometimes the codes are very crude, so people with high MR knowledge on this field can optimize the recons.

>>

Thanks for the reply! Do you know anything about the demand for this area? Seems like these are pretty specific roles and with so few companies building MRI's it seems like it would be a pretty quickly saturated field

Post Title: [Training Tuesday] - Weekly thread for questions about grad school, residency, and general career topics 05/09/2023

Post Content: This is the place to ask questions about graduate school, training programs, or general basic career topics. If you are just learning about the field and want to know if it is something you should explore, this thread is probably the correct place for those first few questions on your mind. Examples: * "I majored in Surf Science and Technology in undergrad, is Medical Physics right for me?" * "I can't decide between Biomedical Engineering and Medical Physics..." * "Do Medical Physicists get free CT scans for life?" * "Masters vs. PhD" * "How do I prepare for Residency interviews?"

Comments:

Plan on doing dosimetry in Florida. Does any know any medical dosimetry that are in Florida besides from university of Miami ?

>

Are you looking for schools or work? Have you looked into any remote dosimetry schools/positions?

Did anyone here do research as a DMP student? I am curious if it is possible and would allow someone to get a MS during the DMP program. Also, I am going to UNLV in the fall for the DMP program and was wondering if anyone here went and how it was going there. Thanks!

>

Research is not required for an MS. As far as I know, it is not possible to earn an MS while in a DMP program.

Saw this question asked previously, wanted insight from the community into which courses should I take to fulfill. I have a nuc med degree, already have nuclear physics course. A two-semester calculus-based introductory physics course Three advanced physics courses

>

You've had two semesters of college chemistry? One semester of anatomy and physiology? Typically, any course required in CAMPEP-accredited programs ****can't count**** either as an advanced undergraduate course OR be accepted for credit in a CAMPEP-accredited program. At least under the original CAMPEP requirements, which, as far as I know, are still the requirements. There might be exceptions, but I would guess that few, if any, nuc med degree courses count. A nuclear physics course could be an advanced undergrad physics course IF the calc-based intro physics series is a prerequisite. A nuclear medical physics course will not count as an advanced undergraduate course. Are your three advanced physics courses non-medical-physics oriented and require the calculus-based intro physics as prerequisites? Examples of "upper level" physics courses that are ****not what's intended,**** ****and not generally accepted**** as upper-level physics courses: astronomy, instructional physical science, math methods of physics, computational methods of physics, electronics, optics, biomedical physics, medical physics, biophysics, radiological physics, diagnostic physics, \[insert modality\] physics, radiation therapy physics, radiation biology, nuclear medicine physics, radiation protection, radiation detection, etc. There ****might**** be CAMPEP graduate programs that might accept some of these, but be aware that ****not every residency program will****. Note that while optics doesn't count, a

course called optics & wave phenomena likely will, if it's based in differential equations.

>>

Thank you for your response but this was a big read and I got really lost. These are CAMPEP requirements for GA Tech graduate program I'm only asking for insight into courses that fit these specific requirements. For example does general physics with calculus I and II meet the "calculus based introductory physics course requirement"

>>>

Any gen phys I and II that require calc I and II as prerequisites do count as calculus-based intro physics. The rest of the undergrad requirements will require gen phys II (with calc) as a prerequisite. Most commonly, the other undergrad courses will be: 1) modern physics (aka relativity & quantum physics) usually sophomore or junior level; 2) classical mechanics (aka dynamics) usually junior or senior level; 3) electricity & magnetism (aka electromagnetic theory) usually junior or senior level; 4) quantum mechanics usually senior level.

>>>>

This is what I was looking for!! Thank you so much for your reply!!! This helps a lot

>>>>>

I was on the same boat from nuc med. This was years ago but here is what I took: calc i and ii (to understand the following list), physics i and ii with calculus, optics, electronics lab, quantum/modern physics and electricity and magnetism. The electricity and magnetism for me was at the senior/masters level. You got this! Edit: by the way, your nuc med physics course doesnt count. It is nice to have a base to understand everything else in the masters degree.

>>>>>>

I was hoping to find a fellow nuc med person here!! Thank you kindly for this information very helpful!!

>>>>>>>

Feel free to PM me

>>>>>>>>

Thank you!! Will do

>>>>>>>>>

>Thank you!! Will do You're welcome!

Post Title: [Training Tuesday] - Weekly thread for questions about grad school, residency, and general career topics 04/11/2023

Post Content: This is the place to ask questions about graduate school, training programs, or general basic career topics. If you are just learning about the field and want to know if it is something you should explore, this thread is probably the correct place for those first few questions on your mind. Examples: * "I majored in Surf Science and Technology in undergrad, is Medical Physics right for me?" * "I can't decide between Biomedical Engineering and Medical Physics..." * "Do Medical Physicists get free CT scans for life?" * "Masters vs. PhD" * "How do I prepare for Residency interviews?"

Comments:

For "ReligusPotato78" and "pasandwall," who replied to my original post here on r/MedicalPhysics: thank you! Got your replies - the mod stopped further comments. Great. And yeah, I also resonate with the fact that Med Phys seems to be a great intersection of wonderful sciences. And, I still have never gotten a research offer from a professor.. to stay over, etc. Guys, please also tell me if any of you had Community College experience!

You Might Wanna Answer This Hey guys! I am a now ex-premedical student who had completed his undergraduate degree and has now decided to pursue Medical Physics as a career. Hence, I would love feedback on my queries: - How is the job of a Medical Physicist like? In clinic, and depending on specialty. Like, what do Radiation Therapy specialists do differently from Diagnostic Imaging specialists, etc.; and how is a day-in-the-life like? Do you interact with patients, craft a plan with the Physician and Dosimetrist, etc.? - How was the undergraduate-level Physics coursework like? Courses like Classical Mechanics, Electricity & Magnetism, Mathematical Physics; how were they like and generally how hard? I am just a bit concerned about keeping a good GPA for grad/Doctorate school. Lol. - What is the scope for DMPs in the future? - What type of CME credit can you take, as a Medical Physicist? Like, can you learn about diseases about any body part? - How many times do you have to retake your boards, once you become board-certified for the first time? Thank you. Awaiting replies and guidance!

Hi! So I was previously on a pre-med pathway as a Biology major getting decent grades, when I started researching proton therapy and thought it was super cool. I transferred from community college and I am now attending a university and majoring in Biophysics. I kind of had no idea what to expect in Biophysics so I just took the leap and started heading in that direction and

boy, this semester is kicking my butt. Calc 3 and Modern Physics is hard :(. I'm not going to give up though because I know when I get more into my actual major classes i'll stick it out. I don't want to pursue pre-med anymore and I am now considering something different like dosimetry. It seems interesting. So basically you just pursue a 2 year Masters and take a Dosimetry exam? From what I've researched in the era of telemedicine and Covid are dosimetrists commonly remote? If so, that's pretty cool! What is the day in the life of a dosimetrist. Is it typically a 9-5 type deal, on-call, or is it more flexible? Any advice??

Are these salaries considered entry level? If not, what's the average salary for those with a few years experience? Also, how much more do the therapy phycisists get than their phycisist counterparts?

Hi everyone! So I am currently on track to get my PhD in electrical engineering and my work is on RF heating in SEEG electrodes and DBS during an MRI scan. Obviously, since I am doing EE, my program is not accredited. What would be my next step to be able to do a residency and do MR physics? To add some context my research has kinda been split, I do my classes and am a student at one university but do my actual MRI research at a hospital/med school since they have no engineers. My advisor at the university I attend did her PhD in MRI and my advisor at the hospital is a neurosurgeon.

>

If you're super sure you want to go into MP you'll need to do a certificate program: [<http://www.campep.org/campeplstcert.asp>]
(<http://www.campep.org/campeplstcert.asp>)

hi everyone! i'm a second year undergrad, hoping to go into medical physics in the future! i'm hoping to get some advice on applying to grad school and if there is anything i can start reading/learning about! i was a cs + physics major but got bored in cs classes and i just transferred to honours physics (it literally just got approved today!) i have taken all required phys and math courses for honours physics degree except an intro to stat mach course bc it conflicted with cs classes at the time. i have a research job this summer. im wondering if anyone who is going or has gone to grad school can give some advice on getting into grad school and what grad school admission is looking for specifically for med phys programs. i am SUPER interested in learning radiation therapy and medical imaging! i'm wondering if anyone has any recommendations on good textbooks or articles i can start reading as summer is about to start!!

>

They'll be looking for good grades in your major especially in upper division classes, good letters of recommendation, intelligently written personal statement about why you want to

become a medical physicist, preferably undergrad research experience too. If you're really interesting in imaging or therapy (or both!) I would actually not recommend just straight up reading textbooks especially over the summer. Instead look into REU's or just volunteering in labs working on those topics, however I understand that can be hard to come by.

>>

thank you so much!! i'll look into that for sure!

Apologies for the long post. Current first year in a Canadian university that offers a specialization in 'biophysics' with courses that prepare for campep (2.0 year 3 courses - EM1 QM1, intro to thermal and intro to optical) along with 4.0 credits in biophysics and a research project. My question is would this be a good foundation (compared to a physics specialization) if my goal is to pursue an accredited masters or PhD in schools like Duke or Columbia?¹ From what I know a PhD is a must in Canada because of the competition and it's easier in the states but would visa issues be a major problem in matching? Not trying to go straight to a PhD as this field is an interesting backup to medicine for now. ¹ I'm not sure if their general prestige translates well into medical physics so advice on programs to consider is also appreciated

>

Sounds like a good start, most of the time at least a minor's worth of upper div physics classes is required by grad programs, and I think most places would have mechanics in that list.

I have a couple questions: Can I become a medical physicist working in hospitals/clinics after a masters? Or should I be considering a phd? I am also in my first year of a biological and medical physics undergrad and I'm have a 70 in general physics but 90 in medical physics courses. Do my first year, or second year marks matter?

>

A Master's is fine. I only have a Master's and am currently in a residency program. Not sure how true it is, but I was told that having a PhD is better for getting residency positions, but a Master's is better for finding work after (because they can pay a little less). From the AAPM salary survey I don't feel like the pay difference was significant enough to warrant going for a PhD. I applied for my Master's several years after my undergrad, but on the application they only asked about grades from the last 2 years, so first and second year grades didn't matter at all.

>>

Do you have recommendations for good Master's programs?

>

Maybe. Depends on where in the world you're located

Anyone know how transferable across countries residency training is? For example, if I do a residency and become certified in the UK, does that carry over and I'd still be considered a "qualified" medical physicist in the US?

>

<https://www.theabr.org/medical-physics/initial-certification/international-medical-graduates>

What are some salary ranges as a medical physicist?

>

[From Glassdoor.](https://www.glassdoor.com/Salaries/medical-physicist-salary-SRCH_K00,17.htm)

If I get a masters in medical physics and and after residency am working in a clinic, am I still able to do research within the clinic or do only PhDs do research in a clinic? I'm finishing up a masters in physics where I will get 1, and possibly a 2nd, publishing in medical physics before starting the masters program, and love doing research. But I want to mainly work in a clinic and do some research on top of that, and was wondering if that's possible for a masters or if I need the PhD? Thanks for the help in advance!

>

MS physicists can do research, and some of PhD physicists are just clinical and don't do research regularly. It all depends on your institution/employer.

On average during your masters/PhD, how much were you shadowing/volunteering in the clinic while doing research/finishing your degree? Did you have continuous clinical practicum or just a semester or two of for-credit shadowing? My program is in the middle of implementing more clinical experiences for students and I'm curious to know how it's managed in other programs.

>

In my masters program, the fall and spring semester of the second year were dedicated to working in the clinic. The rest of the course work was completed in the fall, spring, and summer of the first year. During these "clinical rotations" we worked on dosimetry, patient qa, machine qa, weekly chart checks, and our thesis. In my opinion, pros of this program structure were that we had a great understanding of the clinical workflow, great hands on experience in the clinic, completed all of our didactic courses prior to taking abr part 1 in August, and, as a result of

everything previously stated, the program's students did well during residency interviews. The cons are that not all of the students adapted well to the heavily weighted front half course work (myself included). Additionally, working 40+ hours a week in the clinic during the second year of the program made pursuing extracurricular academic activities or part-time employment to compensate for living expenses a challenge. There's also the ethical dilemma of having students pay the university to work that much in the clinic. Ultimately, I feel that the clinical experience was valuable and helped solidify many of the concepts taught through the coursework, but not to the extent my graduate school implemented it.

[deleted]

>

>does the PhD have to be camp accredited as well? No

I'm currently taking Calculus 1 and aiming to get a B-. I messed up bad on my first exam and then did much better on the second one. Is it worth retaking this class for a better grade for grad school acceptance or should I move onto Calc 2/ physics courses?

>

Don't sweat a B; it's definitely not worth retaking a class over a B especially Calc 1. Just aim to improve for future classes and don't forget to have fun in college.

Post Title: [Training Tuesday] - Weekly thread for questions about grad school, residency, and general career topics 06/06/2023

Post Content: This is the place to ask questions about graduate school, training programs, or general basic career topics. If you are just learning about the field and want to know if it is something you should explore, this thread is probably the correct place for those first few questions on your mind. Examples: * "I majored in Surf Science and Technology in undergrad, is Medical Physics right for me?" * "I can't decide between Biomedical Engineering and Medical Physics..." * "Do Medical Physicists get free CT scans for life?" * "Masters vs. PhD" * "How do I prepare for Residency interviews?"

Comments:

What are the qualifications needed to be a medical physicist in the UK? I'm currently doing a BSc in physics but would I need to do masters?

Post Title: [Training Tuesday] - Weekly thread for questions about grad school, residency, and general career topics 04/04/2023

Post Content: This is the place to ask questions about graduate school, training programs, or general basic career topics. If you are just learning about the field and want to know if it is something you should explore, this thread is probably the correct place for those first few questions on your mind. Examples: * "I majored in Surf Science and Technology in undergrad, is Medical Physics right for me?" * "I can't decide between Biomedical Engineering and Medical Physics..." * "Do Medical Physicists get free CT scans for life?" * "Masters vs. PhD" * "How do I prepare for Residency interviews?"

Comments:

Hello everyone, I am one of applicants who has been accepted to Purdue's MS degree program(medical physics) for the fall. I wanted to get a general overview of what it likes to attend Purdue before I make a decision. As i'm currently conflicted on either going to UPenn for their master's program or Purdue. Context: I'm a little torn between the two because as for purdue: I was able to get a GEM schorlarship that would cover the tuition and fees. And purdue seems to provide a good amount of clinical exposure while doing research. Though I am a little iffy about their match rates for residency. Their website isn't that thorough about it. As for UPenn: I would have to take a wapping loan in hopes of paying for tuition and living expenses. Though there are scholarships I can apply to. On the other hand, they tend to have high match rates, plenty of clinical exposure right off the bat, and very unique opportunities/experiences. I'm just concerned about paying debt for a good chunk of my life and not being able to do anything else. Ideally, if i did go this route, I would like to get rid of those debts within the first two years of getting a job after residency. Seems like most students i've spoken with who go to UPenn are relying on their salary to pay back the loans. Anyway, that's the story. It would be really great to receive any kinds of information from you. (Also, if possible, any other aspects of Purdue program that I may need to consider)

>

I would recommend UPenn from what I've heard from others. I knew a UPenn grad who was very confident going right into the field. Also, Residency is where this field bottlenecks and you really need to maximize your odds of getting one. If UPenn has higher match rates, go there. I've heard their program is great. Haven't heard anything about Purdue. Remember the education is an investment in your career, and the payout is pretty nice if you make it into a clinical career. It's worth it imo.

For those of you who applied for residency as MS MP graduates with little/no experience and didn't match, took a few years to get a PhD and/or relevant clinical experience, and then reapplied, how were the residency interviews the second time around? I assume one would get many more interviews, but I'm looking to see how the interviews themselves went the second time around.

How do people use wepassed for part 1? Just the questions under the review section and exam? The lectures and stuff in the library looks more geared towards part 2 and 3.

>

I originally used the review section in wepassed but many of the questions were weird/outdated. It gets a good general idea of part 1 but had some topics that are no longer part of the exam. I ended up switching to Huda's radiological physics book for imaging and Khan's Lectures for therapy. A handbook of anatomy/physiology would have probably helped some too, but the Huda book definitely carried me through.

>>

I have huda, need to dig it out thanks

How does the day to day work life of an Imaging Physicist look like after residency? I am trying to decide accepting an imaging residency offer for January 2024 vs. waiting till July 2024 for Therapy Residency that I have more interest in? Considering how competitive residency is, should I jump on the imaging residency available for immediately after my graduation in December 2023? Or wait for therapy residency? Note: I assume there are less mathematical physics in therapy and assume it simpler. What do you think? Is that a correct basis for decision? In Diagnostic vs Therapy Physicist role, is there anything that sets Diagnostic apart or that makes it great compare to Therapy? Is double board certification for Imaging and Nuclear. Med worth the three years or it is better if I patiently wait for Therapy two years residency if the pay matters to me also?

>

I don't know which one is 'simpler', but I don't spend any time solving math problems. DX/NM has the biggest advantage (for me) over therapy in that you cast a wider net. I.e. you don't deal with the same machine every day like with a linac. One day might be CT, the next PET, the next angio, etc. Keeps things fresh. The pay is better for therapy. There are also more jobs. Pick what you think you'll be happier doing because you'll do it every day for a long a time.

>>

>DX/NM has the biggest advantage (for me) over therapy in that you cast a wider net. I.e. you don't deal with the same machine every day like with a linac. One day might be CT, the next PET, the next angio, etc. Keeps things fresh. > >The pay is better for therapy. There are also more jobs. Pick what you think you'll be happier doing because you'll do it every day for a long a time. Thank you so much the valuable insight.

>

My biased answer is that no, it is not simpler, and that it is far more interesting than therapy. There is no "correct" answer for what is the better field to get into, just what field is best for you.

>>

Thank you so much.

[deleted]

>

You'd probably need to take some extra courses to get the equivalent of a minor in Physics. For the best answer, contact a few programs you're interested in and find out what their prerequisites are.

>>

[deleted]

>>>

I second what others have said - check with programs you're interested in to see exactly what courses they require or recommend. Most programs are vague and just say physics minor or a equivalent. Some like [Duke](<https://medicalphysics.duke.edu/admissions/admissions-prerequisites/>) have more specific recommendations/requirements right on their web page. I'm only a 1st year resident. I was a physics major with a traditional course load that prep'd people for physics grad school, so there was definitely stuff I didn't need for an applied/professional degree like an MS in medical physics. If I had to pick just a few upper level courses, I'd like an intermediate/advanced E&M, a whole intro course for quantum and then at least a modern physics course that intros a lot of special relativity, nuclear, particle and solid state physics. You could also take more rigorous courses that just focus on each of those, but those go deeper than I think you need for the rad physics courses you take in med phys. If you want to get deep into the math and computational stuff, you can certainly can dive deep into that in medical physics, especially if you are academic, but for most of us considering clinical paths, a good understanding of where these

algorithms and models come from is probably good enough. On top of that, a lab course that's very hands on that lets you do experiments that take some time and care, make you understand a lot of instrumentation, data analysis, uncertainty analysis, etc. For example, most programs should have upper level courses where you do just a 3-4 experiments over a semester. An independent study/research project under a professor would also be good for that, too. Aside from that, I'd say at least 2 semesters of calculus, preferably three to get multivariable/vector calc. Linear algebra and a semester of differential equations also helps, more conceptually. I didn't have to do a ton of high level calculations or derivations in the required CAMPEP coursework, but it does help understand concepts and you could use your extra skills to extend into deeper projects. If your university offers less mathematically rigorous options for scientists/engineers, I'd opt for those. I took a 2 semester sequence in anatomy and physiology which helped a lot (and was fun), though you'll have to take an anatomy class for the med phys degree anyway.

>>>

What courses are required to be considered a Physics minor is probably going to vary from school to school. Best to check with the school you're at and/or the graduate program(s) you're considering to see what they're are looking for.

Does anyone have any advice when applying to grad school? Also if possible can anyone tell me their gpa, experience, etc when you applied to medical physics. I just want to get a better understanding of where I stand when it comes to getting accepted.

>

I also got my BS in physics in 2019. 2.9 GPA with no prior MP experience. Applied to a handful of CAMPEP masters programs but only got accepted to one program. Had strong letters of rec, which I was told was the main reason I was accepted. Looking back, I would have tried to shadow a clinical MP if I had stumbled upon the field earlier. Many MPs are surprisingly willing to have people shadow. We offer it at our site to people who ask. If you can find the contact info for a site in your area, it never hurts to shoot 'em an email!

>

Hi, I got my BS in physics in Dec 2019, I applied to grad schools around them (Dec-Jan) for the fall semester of 2020. Most Uni's starts on the Fall semesters and receive application until March-April, check the application window (when it starts and deadline) for places you want to apply and go from there. I had a 3.84 GPA and 2 years of MRI research experience.

>>

Thanks for the info.

What would be a good way to transition into health physics in the medical field? Currently I'm a HP tech at a lab but would like to eventually transition to working at hospitals and potential traveling around for it too. I'm not sure how to transition into medical physics without accepting a huge pay decrease either, if anyone has input on that.

>

Health physics or medical physics? There are health physicists who are in radiation safety for a university and its connected hospital. I don't know much about the training requirements for health physics, except that their board exam sounds very challenging to me. For medical physics, it depends on your background. I haven't looked into the training requirements for medical physicist assistants, so that might be the fastest way into the field. If you have a PhD in physics or closely related science, you could do a 1-year medical physics certificate program in a CAMPEP-accredited program. I know some people do this while continuing to work (part time?). Then a 2 year CAMPEP-accredited residency. I don't know anyone who held down another job at the same time as a residency. If you don't have a PhD, you will likely need to complete a CAMPEP-accredited master's degree program (2 years), and then a CAMPEP-accredited residency (2 years). I know people who've held part-time jobs during the master's degree. In order to get into any of the CAMPEP programs, you're supposed to have at least the equivalent of a minor in physics: calculus-based intro physics, modern physics, and at least 3 junior or senior level courses like classical mechanics, E&M, quantum mechanics, nuclear & particle physics, thermo & stat physics. Often undergraduate degrees in engineering or chemistry have enough courses that are similar enough for admission. The applied courses that might sound like they'd be the most relevant were and might still be specifically not allowed in the count of undergrad courses - courses like electronics, some optics classes, any course with medical physics in the name, etc.

>>

Thank you for replying with all the info! I have a B.S in physics and as far as medical or health physics goes, I'm not entirely sure. I haven't read too much on medical physics to know if it is a career path I'd like to commit to the next 6+ years yet. I figured by working health physics in the medical field there would be some overlap to see if that is what I wanted later for my career. I think looking into radiation safety at hospitals is great advise and I'll definitely check that out! Thanks again!

When should i start applying for phd programs(mainly scholarships) in medical physics I finish my 1st year in a month and will work on a thesis project after that. And is there some site that specializes in scholarships related to our field?

>

Majority of PhD programs waive tuition and pay you a stipend to attend so you wouldn't need scholarships for tuition purposes. The AAPM website does have some fellowships/grants available but I believe most of them are for current grad students rather than prospective. As for applying, most deadlines I've seen are typically the December-February before the fall semester you would start so if you are a first year undergraduate you have plenty of time.

Best free resources for ABR p1?

>

Oncology medical physics

Post Title: [Training Tuesday] - Weekly thread for questions about grad school, residency, and general career topics 04/25/2023

Post Content: This is the place to ask questions about graduate school, training programs, or general basic career topics. If you are just learning about the field and want to know if it is something you should explore, this thread is probably the correct place for those first few questions on your mind. Examples: * "I majored in Surf Science and Technology in undergrad, is Medical Physics right for me?" * "I can't decide between Biomedical Engineering and Medical Physics..." * "Do Medical Physicists get free CT scans for life?" * "Masters vs. PhD" * "How do I prepare for Residency interviews?"

Comments:

Hi. I'm currently in a BME masters program with an undergrad BME. I just recently found about this field and medical physics programs after taking an MRI specialization class this semester. I'm already deep in my research MS thesis, which focuses on deep learning and image processing in histology images, but I would like to transition over to medical physics and apply my deep learning skill set to diagnostic imaging instead at the research setting. I was just wondering what's the best way for me to make that transition. I'm looking to apply for PhD for fall 2024 and would like to apply to a medical physics PhD, but worried that I may not be the best candidate and want to know how I can improve my chances in the long run. I understand that there's the MSMP programs, but since I'm already doing a masters in BME, I don't want to do another MS program if I don't have to. If I knew about this a 1.5 year ago before applying to BME MS, it would be a different story. I was just wondering if my transition from a BME masters to a PhD in medical physics is one that can be achieved.

>

Your background sounds solid to me. Most programs require at least a minor in physics before applying, but depending on your transcript and their policies they can have some wiggle room on prerequisites. Some places let you take 1 or 2 prerequisites after admission in your first year.

Hello, I'm a biophysics major, and a computer science minor. I will be graduating this semester. I have taken many science classes ranging from bio, organic/ inorganic chemistry, and physics. I have not taken differential equations, since it was not part of my major, but I have taken calculus 1,2 and 3. I have above a 3.5 GPA, and good recommendations letters. Just wanted to know what are my chances of getting into a medical physics MS program? Currently am just applying to two universities.

>

Getting into an MS program is relatively easily. I had an 80%+ success rate and similar (slightly better) stats. I would encourage you to apply widely though as 2 schools is a really small sample although you could get into either. Focus on getting into a program w/ a strong history of placing their graduates into residencies

Hii, so i am currently doing a master degree in medical physics, but as i live in an underdeveloped country (Lebanon), no certifications or any thing of such sorts exists, there are only 2 medical physics programs in the country, one is more of imaging focused, while mine focuses more on radiation therapy. (We are already able to start internships at some certain hopsital and legal to work within the country after graduation) Does anyone have any sorts of advice to what i could do about getting a certification, or scoring an abroad certified phd program?

Post Title: [Training Tuesday] - Weekly thread for questions about grad school, residency, and general career topics 03/28/2023

Post Content: This is the place to ask questions about graduate school, training programs, or general basic career topics. If you are just learning about the field and want to know if it is something you should explore, this thread is probably the correct place for those first few questions on your mind. Examples: * "I majored in Surf Science and Technology in undergrad, is Medical Physics right for me?" * "I can't decide between Biomedical Engineering and Medical Physics..." * "Do Medical Physicists get free CT scans for life?" * "Masters vs. PhD" * "How do I prepare for Residency interviews?"

Comments:

For various reasons, I was unable to participate in the match this year, and I am planning to graduate with a master's this

May. I was wondering what course of action I should take in this type of situation.

>

Check the [AAPM Career Services](<https://careers.aapm.org/>) board for off-cycle residency programs and programs not participating in the match. Look for MP assistant positions

What are the time limits on taking all the ABR parts

>

[<https://www.theabr.org/medical-physics/initial-certification/certification-requirements/time-limits-and-board-eligibility>]
(<https://www.theabr.org/medical-physics/initial-certification/certification-requirements/time-limits-and-board-eligibility>)

>>

Follow up: what is "part 1 approval" and "part 2 approval"?

>>>

You need to apply to take part 1 or part 2. The ABR either approves or rejects your application to take the exam. That's what this is referring to, I think.

>>>>

I'm reading that I can apply to part 1 during or after residency, is this true? How many years can I wait to do residency?

>>>>>

No idea. I'm not ABR-certified. This looks relevant: [<https://www.theabr.org/medical-physics/initial-certification/certification-requirements/time-limits-and-board-eligibility>]
(<https://www.theabr.org/medical-physics/initial-certification/certification-requirements/time-limits-and-board-eligibility>)

>>>>>>

lmao that's the page I linked to.

>>>>>>>

I only realized after posting, then figured I'd leave it for *emphasis*.

I saw a post regarding the med phys discord. Does that still exist?

>

Yeah but it's kinda dead tbh <https://discord.gg/6xA7GvDH>

How does a particular lab/research activity or supervisor's field of research affect your residency program? For example, if I mainly work on deep learning, MRI, or PET-related research, projects, and studies during my Ph.D., also taking to account if the dissertation is limited to the imaging area, am I less eligible to apply for a therapy residency or vice versa?

>

I know some imaging PhDs who went into therapy residencies. Though your depth in imaging knowledge will be more than you need for therapy, it will help. You should show some good interest in therapy, clinical and/or research - depending on the resident you're looking at. You don't need to be at the PhD level of work to show therapy interest - remember most of us are just masters students who did a bit of clinical shadowing, QA, a bit of masters level research, etc.

>

You should be fine, specially now with MR-Linac and even PET_Linacs some day, having a good understanding of those imaging techniques will set you apart from competition

>

During my graduate program we had a talk from one of the people involved in hiring therapy residents and he said he prefers residents who did imaging in grad school because he likes having more well rounded residents.

>

I did imaging research at a PhD program known for its imaging, and ended up with my goal therapy residency. You are not limited in the slightest.

Post Title: [Training Tuesday] - Weekly thread for questions about grad school, residency, and general career topics 04/18/2023

Post Content: This is the place to ask questions about graduate school, training programs, or general basic career topics. If you are just learning about the field and want to know if it is something you should explore, this thread is probably the correct place for those first few questions on your mind. Examples: * "I majored in Surf Science and Technology in undergrad, is Medical Physics right for me?" * "I can't decide between Biomedical Engineering and Medical Physics..." * "Do Medical Physicists get free CT scans for life?" * "Masters vs. PhD" * "How do I prepare for Residency interviews?"

Comments:

What are the experiences in having residency in a consulting organization versus hospital? Why should one prefer one? or what are the expectations that are peculiar to either?

>

One of my cohort went into one of the bigger consulting (therapy) residencies, and I went into a hospital residency. I can't speak a lot about it since we don't talk to often, but from what he mentioned he felt pretty overworked in comparison to my other cohort and myself. He was working 60-70 hours a week and most weekends, apparently. At some point you begin to wonder if they're even interested in actually teaching. While I have had periods of time where I work similar hours due to things piling up (annuals and lots of special brachy procedures, for example), but it's rare and often times great learning experiences. I average 45-50 hours most weeks. I can't speak to anything beyond that, and its a sample size of one.

>>

Thank you so much

How hard is it to find a good paying job after Masters? Hello, I am a 3rd year medical physics student and I plan to pursue a masters degree but I'm just wonder how difficult it would be to find a well paying job? I mostly want to got into research but I would got into other fields if they have better potential pay and career progression opportunities. I'm in Canada for extra info

>

In lieu of a Canadian chiming in here (Im sure someone will eventually), as someone in the US who regularly interacts with Canadians, it seems to be difficult to pursue a *clinical* career without a PhD. If academia is similar in Canada, it can be difficult to get far research-wise without a PhD as well. Not impossible for either, just an uphill battle. Again, these are not my personal experience, so, grain of salt and all that. That said, I feel like this has been discussed previously here, have you tried searching for a related thread?

Post Title: [Training Tuesday] - Weekly thread for questions about grad school, residency, and general career topics 02/28/2023

Post Content: This is the place to ask questions about graduate school, training programs, or general basic career topics. If you are just learning about the field and want to know if it is something you should explore, this thread is probably the correct place for those first few questions on your mind. Examples: * "I

majoring in Surf Science and Technology in undergrad, is Medical Physics right for me?" * "I can't decide between Biomedical Engineering and Medical Physics..." * "Do Medical Physicists get free CT scans for life?" * "Masters vs. PhD" * "How do I prepare for Residency interviews?"

Comments:

What exactly is the issues with The University of Manitoba's MP program? People always shit on it here without elaborating so I don't understand what exactly makes it so bad.

Hey guys! Any one here from the DMP program at UT Health San Antonio? I'd really appreciate someone like that because I'd like to ask students from there, specific questions about the program, etc., as I'm genuinely interested in that specific program. Thank you. Please let me know.

Hey guys! Any one here from the DMP program at UT Health San Antonio? I'd really appreciate someone like that because I'd like to ask students from there, specific questions about the program, etc., as I'm genuinely interested in that specific program. Thank you. Please let me know.

What are medical physics residency programs that they are accepting international students visa F1?

>

For clarification, are you asking about the medical physics residency programs that do not accept F1 visa types?

>>

Yes, that what I mean

>>>

A lot of residency programs accept applicants with OPT F1 visa. It's just a handful that do not accept applicants with OPT F1 visas. Also you can check the residency websites and they might have informations about types of visas that will be accepted. You can also contact the program director

Are salaries on the rise in medical physics? I saw a post discussing how places are raising starting salaries due to desperation. Would love more enlightenment on that

>

Seems like it... demand and supply basics, there's a lot of demand for a short supply, prices are being inflated in all levels (entry or +)

Also, guys: Is anyone at UT Health Science Center San Antonio's DMP program or can connect me with someone there? I want to know more about it.

[My Post] Prospective Student Pondering Over Medical Physics: Hey guys! I am a student done with undergrad now. I was a pre-med but am now strongly considering Medical Physics as a career. I am especially interested in a "Doctorate of Medical Physics" which is at an institution near me. So, can someone please give me an overview of a career in Medical Physics? Is getting a Doctorate beneficial in all ways, over just a Master's? Also, how is the career lifestyle and salary outlook (e.g., how long can you expect to start hitting \$200K after graduating with your Doctorate, which included your residency)? Thank you. Awaiting your replies.

>

In my opinion, as a Master's level physicist, a DMP is no different from a Master's and a residency. That's because it is the exact same training except you have to pay for all 4 years for the DMP while the MS + Residency has you earning a salary as a resident. I would strongly suggest if you want to be called Dr. Ali_Perfectionist, to get a PhD. Your opportunities as a PhD medical physicist are limitless whereas a DMP only really gives you the advantage of confusing some HR person thinking it's anything different from a masters level physicist. All the people making the hiring decisions will know it's nothing special. There is a caveat however, being accepted into the DMP program does mean you won't have to do a residency which means you won't have to Match. If you at all worry about that, and the lack of pay isn't a concern, a DMP program is a huge relief. Many of the DMP programs offer a good clinical experience (from my knowledge of them) so you will get quality training there. I'm sure if you were to ask a MS physicist who didn't match for a couple years if they wish they would just have done a DMP instead I bet many would say yes. In summary: get a PhD if you like research and want all opportunities open for your career and are prepared to spend 5-7 years more in school. Get a Master's if you want to become a clinical medical physicist for the least cost and start earning a salary soonest but knowing you have to compete in the match. Go DMP route if you aren't worried about the cost for 4 years and don't want to worry about being matched.

>>

I would like to know more! I really wanna do a DMP due to job opportunities being easier, me wanting the highest-level degree in a field, and having a "Dr." in my name!

>>>

I will say job opportunities as a DMP will NOT be any different than a masters level. If you want easier job opportunities do a

PhD. If you want the highest-level degree in our field do a PhD. If you want people in our field to respect the Dr. in your name become an MD and be a radiation oncologist, or, at the very least, also get a PhD. If you want to impress your family and neighbors and don't want the commitment of getting a PhD or MD then go for the DMP. But if you go in thinking the DMP is the penultimate of medical physics degrees then you will realize soon after that it is not.

>>>>

Nice, nice. I get you. But I'm sure the DMP helps a lot as the Residency is already integrated and you don't have to compete for big stakes, no? I'm sure there are more pros to the DMP. Don't you think it has the better future and that Master's MP programs will become extinct because DMPs will become more valuable as the Doctoral degrees and guaranteed residencies + more money-making opportunities for educators?

>>>>>

A DMP is NOT a doctoral degree. Some programs created it specifically to make a ton of money during both the MS and residency, rather than having to pay residents. There are 5 programs with a DMP. I doubt there will be many more.

>>>>>>

Hmmm. But it's a "Doctorate" level degree. I totally understand the money part but isn't it still a very valuable degree?

>>>>>>>

I've only seen 1 DMP in my life. PhD and MS physicists? Dozens. If they were actually that valuable, then there would be a lot more DMPs, and the number of DMP programs would be increasing, rather than being stagnant like they are right now.

>>>>>>>>

Noted. Thank you!

>>>>>>>

As the fifth person to say this: DMP is basically a way for you to PAY to have a MASTERS degree plus a Residency. The Bonus: Not going through the Match. The price: Paying for residency, while non-DMP MASTERS students gets paid (~60k/yr). In the end of the DMP program you are gonna sit on the table with all the Masters student, you WILL NOT sit on the table with PhDs.

>>>>>>>>

Hmmm good. I know. I'm trying to understand more. So, by sitting on the table, you mean in terms of job opportunities, DMP grads

would be more similar to Master's peeps? Any other pros of DMP? Like, with board certification help, etc? And having a "Doctorate" in some field? Please, I'm only trying to discuss and learn more! Also, any podcasts/YouTube channels you'd recommend I listen to and watch, to gain more understanding of the Medical Physics field and the subject matter it covers, lifestyle, etc?

>>>>>>>>

Yes, DMPs are on the same level as a Master student that completed residency, only difference is that the DMP doesn't have to fight for a residency spot, while masters students have to go through the match (but get a salary). DMP with board certification equals a master with board certification. The real only PRO of DMP is that you have a guaranteed residency position. That's it. You go through 2 years of schooling (like masters students) and then 2 years of residency. In DMP you are paying for 4 years of school while Masters only pays for 2 years and then get a 60k/yr average salary during residency. The "Doctorate" name is really misleading, as it does not open ANY single door for you in the future. I believe it was more of a Marketing strategy by the programs, to not have to pay a salary for residents. SO even though it sounds better, it is not. I don't see any pros of doing DMP. I don't know of any podcast/youtube channels. I follow subreddit and talked with professionals in my institution about med phys and the different tracks.

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Thanks a lot. Got it. I am still researching and will keep on doing so.

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Hormesis podcast and and Out of the Gray podcast are the only two I am aware of. They are both radonc focused.

>>>>>>>>

Nice! Thanks! Do they have MPs talking too/do they talk about MP?

>>>>>>>>

You can always google them and find out yourself, fyi.

>>>>>>>>>>

Yeah but I prefer to talk to real ppl. I was trying to find the full part of the latest "MS vs DMP vs PhD" episode but couldn't..

>>>>>>

I think three people have already told you this, so I will just repeat it a fourth time so it's extra clear and there's no chance of confusion: A DMP is NOT considered a PhD-equivalent. It will

not give you the same opportunities as a PhD (principal investigator of a lab, professor title at an academic center, etc). As far as I understand, there are no expectations of a thesis defense, thesis publication, general publication, and overall academic research skill development.

>>>>>>>

Alr alr, I get you. I am trying to understand. Maybe not an equivalent, but still a "Doctorate" level degree which grants you better opportunities and prestige? But I guess it's the same as a Master's + Residency.. Still, what I like is the fact that I will have a Doctorate in something (FYI: MDs have "Doctorates" in Medicine"); so, at least I will have had the highest degree in a specific field. But I'd love to talk and learn more!

>>

Thank you so much for this. Can we talk more? Via chat or Insta?

>>>

You can DM me here if you want. Or feel free to respond. I'm an open book on this topic.

>>>>

Perfect. Tysm. I really want to meet more ppl in this field and discuss, as not many ppl are MPs. Good. Let's talk more.

I am 25 freshly graduated with a physics degree looking for a good career and think medical physics is a really awesome route. My partner of 7 years is worried (and me too) about the risks of going into MP(job location in a city we don't love or is unsafe, at least 4 year commitment to a very niche job, starting a family during studies and residency, ect.) and she'd be at more at ease if I could try to land a good tech job with more flexibility. I know at the end of the day it's my life and I can pursue my dream job if I want but she is the biggest part of my life so I want to do what's best for us. I am very open to advice on my situation because I need to make a choice sooner or later after I (hopefully) get accepted into a MS program for this fall. I know there is uncertainty with any career, I really just want more insight on the situation so I can make a better informed decision. \-Has anybody been with a partner and/or had a kid throughout their entire MP journey? If so how has that been? I'm guessing it is not easy lol \-If I do not match my first round after a MS what are my odds of getting in the next round of matching? \-What are my options if I do not match my first round? \-How hard are the board exams, where can I find the statistics of the pass/fail rates, do most pass first time after residency? \-I am hoping that down the line I can be in a good city (I obviously won't be too picky), do a lot of medical physicist end up in cities they are not that happy with? \-How does a city that

is not your favorite affect your overall life and happiness? \-Will most medical physicist stay at their first position in what ever city until they finally get hired in their dream city and then look to buy a home? If so how long does it take (on average) to get into a dream city? \-How secure is a MP job, if I land a job in my dream city can I buy a home confidently knowing I can stay at the hospital or institution for 20+ years? \-Do you get two weeks travel as a MP? \-Can you go on small weekend trips as a MP, or do you need to always be stationed incase of an emergency with a machine?

>

Some of your questions are pretty broad but I'll do my best to answer * I've been with my partner since starting my MP grad program 3 years ago (part time) while working full time. It's not easy but I think that is generally true for grad school. Of note, all of the female MPs (who are underrepresented in the field, obviously) that I have met have kids. * That depends on what you do between cycles. If you work on research or otherwise build your CV actively, then it should be higher. If not, probably lower since committees won't be impressed if wasted your time instead. * Obviously, you'd have to get a job to be able to feed yourself. Ideally, you'd land a job that is in medical physics (like physics assistant position), but these can be hard to find. Otherwise, get a job that utilizes skillsets that are broadly applicable to MP (software, etc). * [Part 1 data](<https://www.theabr.org/medical-physics/initial-certification/part-1-exam/part-1-exam-results>) [Part 2 data](<https://www.theabr.org/medical-physics/initial-certification/part-2-exam/part-2-exam-results>) [Part 3 data](<https://www.theabr.org/medical-physics/initial-certification/part-3-exam/exam-results>) * Too broad and personalized a question to answer imo. What works for you may not work for other people. Anecdotally right now is a good time for job applicants but if there is a specific city that you have in mind it isn't guaranteed that there is an opening there. * Again this is a personal question that I can't answer for you, per se. * Not at that point in my career, so I can't answer this either so I'll let others chime in. * MP is pretty secure, people I've heard that change jobs are changing because they wanted to rather than being fired etc. Some stay 20+ years like you mentioned. * Salaried MP jobs ought to have 2 weeks PTO minimum, and most likely probably more than that. I wouldn't work somewhere that doesn't offer it. I can't say if locums physicists get that, never worked with one. * Some places might have you on weekend call. If this is the case, it wouldn't be every weekend. Not sure if this is the case for physicists that are solo at a clinic, although a lot of places don't treat on weekends anyways. * This is a great resource regarding residency chances: <https://www.campep.org/PublicDisclosure.asp>

>>

Thank you for the info, you're right some of those questions are too vague but those are just some of the things I'm worrying about the most right now. What kind of program are you in and how is it working full time and school part time? I didn't know that was an option actually, do most schools give that kind of flexibility? I want to work part time during my MS but id be worried that my grades will suffer.

>>>

I'm finishing up the Georgia Tech MS program, it's the only CAMPEP MS that's offered fully* online. There are 2 weekends you have to come to campus (Atlanta) for labs. I started working as a medical physics assistant a couple years before applying. It's definitely tough working and doing classes afterwards, but I think it has worked out for me personally. If you have a job right now you might benefit from doing the GT program, but it sounds like you already applied to an in person program and are just waiting to hear back if I'm not mistaken.

>>>>

Oh that's super cool they do that, so can I live in another city and just fly down for labs? I'm applying next month to an instate school and want the cheaper tuition but I saw that the deadline for Georgia tech is May so I might apply but i think it's too late to apply for financial aid so might try next year if I don't get into the school I want. We'll see, thanks for sharing though, my fiancé would love it if I could work as well as school lol

What are the average weekly hours?

>

For grad school or residency? I'm going to guess both are regularly close to 40 hours a week, but there will be occasions when it's more, possibly much more.

>>

In residency, I find it depends *heavily* on the rotation and whatever is going in the clinic. Ive done everything from 45hrs to 60hrs (thinking weeks with lots of early-morning brachy cases with machine QA/PSQA responsibilities, among other things). Though the latter end of that spectrum is certainly not super common. Usually it's 45-50 hours. Physicists are usually less in my residency, but they do have some long days on occasion (especially when there's high patient load).

Is being a medical physicist draining? In relation to working hours

>

Sometimes, but any job can be like that. Just depends on your workplace and coworkers.

How often do former healthcare workers (radiology tech or nurse) pursue this path if they were just to take a couple of pre reqs before applying? Trying to balance the idea of if this is financially worth it

>

I knew a few back before the CAMPEP residency requirement. Now it seems to be more rare, I suppose because spending 4 years as a trainee is a higher bar than spending 2 years as a trainee.

>

In the US, if your goal is to be a board certified medical physicist, your path is going to be a CAMPEP accredited graduate degree (Master or PhD) followed by a CAMPEP accredited residency program. Acceptance criteria for graduate programs vary, but probably will require at least a Bachelor's degree in physics or some related field.

>

I'm sure some exist, but it's pretty rare. Most programs are going to require something like a BS in physics, and it's unlikely that a Rad Tech or nurse would have taken those necessary pre-reqs. Sorry if I didn't answer your question. I wasn't quite what it was asking.

>>

You can always take them after graduating. Thought about taking a couple of extra physics courses but chemistry was not my strong point

>>>

Yep, it's certainly possible. I've heard of dosimetrists becoming physicists, but there's no reason someone else from a different medical field couldn't too.

>>>>

I mean it didn't matter what field they were from. I was just interested in medical diagnostic imaging physics (rad background) and was willing to maybe see if I can be reimbursed for a couple of extra pre reqs but I'm not sure if I would even qualify for a program or if it's worth it to go into. Pay for physics is great but then I gotta take on debt/not work while I'm school

[deleted]

>

* Are you just applying to the 1 program? A 3.6 physics GPA is very good, especially from a program like Berkley. I'd say your chances are decent to get into a few places but you only mentioned the one program. If you are geographically tied to your hometown that will lower your chances somewhat. * The GRE is basically just a checkbox, no need to fret about it (if it is even asked for in the first place). I haven't seen any programs require the physics GRE (others please correct me if I'm wrong). * Add the research experience if you feel like you can meaningfully talk about what you learned from it, even if it just organization and lab skills. That's the *real* purpose of undergrad research imo. I don't know of many places that have research assistant positions in medical physics labs, but that's just because we're a bit of a niche field. * If you want to be successful, best to know why you want to apply to a medical physics grad program, and that requires that you know why you want to be a medical physicist. You said that you made the choice recently: what made you make the choice? Why choose it over the many fields you can take a physics bachelors in? Plenty of my classmates went straight to lucrative software jobs right out of college. Not trying to ask you pointed questions here to be an ass, it's just that you can only convince an admissions committee if you can first convince yourself. Shadowing should help you a lot with that answer.

>>

Thanks for this reply, definitely giving the field lots of thought. Actually just landed a research assistant role in MP, it's volunteer only unfortunately, but should help my CV.

I'm in my 2nd semester of my 1st year of grad school (Master's) in medical physics, coming from a physics background(Bachelor's in pure physics). Is it just me or am i right when i'm feeling like i'm not really taking any advanced or theoretical physics/mathematics, so things so far feel very applied, mathematically easy, and not really that complicated, is something wrong?

>

You're more likely to use more of your math and physics background in nuc med and diagnostic imaging, especially if you go into research. On the other hand, without the understanding you gained as an undergraduate of how things work in classical mechanics, E&M, etc., you would likely find the graduate coursework much harder. You're implicitly using what you learned in UG to understand and organize how to solve problems in grad school.

>>

To begin with, thanks for your insightful reply. Honestly i agree, physics did prepare me for more advanced problem solving skills. I think i'm going to be pursuing something related to

radiotherapy and treatment planning, as it is the main route available at the place i am currently, in addition to me really loving it. Which field would you think has better prospects for the future work wise?

>

[deleted]

>>

Yes exactly, most of the things/courses i studied and learned in physics seem mostly useless applied in the field, except some headlines here and there plus some nuclear physics. But all in all having a degree in physics makes you way more comfortable dealing with many aspects you face, only downside with physics is that you should totally read and study more anatomy and human biology on your own, it starts as a natural weak point with you.

>

Almost everyone I've talked with in graduate programs all agree that their graduate program material is much easier than their undergrad material. So I think how you feel seems to be very common.

>>

That is certainly the case, very reassuring to hear that. Undergrad material in some cases felt really harder.

>>>

Yes, I'm very encouraged by this as I am in my last semester of undergrad and start my masters in the fall.

>

No, it's ok. This field requires other skills to prioritize, like attention to details, concentration on routine details, communication skills .. If you are looking to be on first frontier of theoretical physics - wrong direction, for sure.

>>

Thanks for the insights! I love the field and major so far, things are really interesting and self rewarding. But i thought something was off from my own university, as it is a new and very rare field in my country.

Post Title: [Training Tuesday] - Weekly thread for questions about grad school, residency, and general career topics 03/07/2023

Post Content: This is the place to ask questions about graduate school, training programs, or general basic career topics. If you are just learning about the field and want to know if it is something you should explore, this thread is probably the correct place for those first few questions on your mind. Examples: * "I majored in Surf Science and Technology in undergrad, is Medical Physics right for me?" * "I can't decide between Biomedical Engineering and Medical Physics..." * "Do Medical Physicists get free CT scans for life?" * "Masters vs. PhD" * "How do I prepare for Residency interviews?"

Comments:

I asked this earlier but never got a reply, why exactly is Umanitoba's MP program considered bad for getting residencies?

Residency directors - do you care if an applicant says they plan on ranking you after interviews?

>

IANARD but I do work closely with one. Short Answer...Yes. Alternate answer: I wouldn't care personally but I know several residency directors that do and I don't think it hurts at all to send the email.

Hey everyone! I am urgently searching for someone who is currently a student at UT Health Science Center San Antonio's Doctorate of Medical Physics (DMP) program, or someone who graduated from that program. Please respond, students, or connect me with someone like that! Thank you.

>

I've seen you ask this question a couple times and it's very possible no one in this sub came from that program or knows anyone that did. I was just remarking to my friend at AAPM last year that I had never met a DMP in the wild and he agreed. It is a pretty rare degree.

>>

Yeah, man. I'm trying my luck bc it's rllly imp to talk to students from there, etc. Good.

>>>

You will probably have better luck reaching out to the program directly.

>>>>

Yeah man, I'm trying my luck in all ways lol.

>>>>>

I'm late to this but I applied to the program and know a few graduates from the program. One of my research advisors is on the admissions committee there and I've been pretty involved with the program there.

>>>>>>

Nice! Would love to talk more abt this.

I am unable to post a poll so is anyone up to make one that is about residency matching for MS holders that list: Matched 1st try (MS only) Matched 2nd, 3rd, or 4th try (MS only) Went into PhD after not matching Went into PhD without even trying for a residency Still trying to match, and/or in industry See results Or does anyone have data similar to this as far as matching goes with a masters? I still can't gauge of how risky it is going into MP with MS only. I've seen the stat that there is a 6 out of 7 chance for competitive applicants but thats for all MS applicants not only fresh grads. I also think a poll on what kind of industry positions MS holders have would be very informative.

>

<https://www.campep.org/2021AnnualGraduateReport.pdf> Page 17. You're worrying too much, and that's coming from me, a big worrier.

>>

That document doesn't break it down by applicants who were accepted on their first try. The same applies for CAMPEP and the MedPhys Match. Almost like they are hiding something... Also a poll is a bad idea and part of the unfounded optimism. Those who did not match and left the field are most likely not on this forum. (survivorship bias) I got my MSMP thinking it would be easy to get a residency. In my experience, none of my peers got a residency despite high GPAs and passing the ABR. Getting accepted into a PhD was much easier. Becoming a medical physics assistant to build experience is another path, but these are also competitive, can require a commitment before you know your match results, and are another 2 years of not making good money. If I were you, I would ask for the first time match rate at schools you are interested in. In addition, I would contact recent MS alumni to see what their experience was and what went right or wrong. Some universities like LSU and Kentucky guarantee residencies too. You're already smarter than me for asking this question, so maybe you have a shot.

>>>

Ya say that stat is only like 30% of first time applicants getting in, less people would enroll in the MS programs which would make the Universities less money. Just a theory, but ya I stress so much about this because I'm not a fresh grad who's only 21-22 years old who has there 20s to figure it out I'm 25 and want to pursue a secure field right now that can pay relatively soon and decent and this honestly might be too much of gamble. It's just one of those things where a decision needs to be made.

>>>>

The residency was designed, in large part, to limit the supply of new medical physicists and protect the high salaries. The attitude I would take is to assume you will need a PhD or additional training unless proven otherwise. I definitely did not get my MS knowing the odds of getting a residency the first time around would be approaching 0%. Again, there are programs which guarantee a residency, so consider focusing on those if time and finances are a priority.

>>>>>

Ya it might be best for me to work in the mean time right now and only pursue MP if I get into one of the reliable programs or just send the program in my hometown (if I get in) and hope for the best and have a good back up plan. Thanks for the insight though, it really is helping me with making decisions right now.

>>>>

Campep doesn't track how many times an applicant applied. You're right that some programs aren't as forthcoming about how successful their applicants are on the first try, but Campep still does require that they compile and publicize data as to where their applicants go each year. Those are here: <https://www.campep.org/PublicDisclosure.asp>. I still think you're stressing too much about this; I started my current MS program in my late 20s, am I too old for this in your opinion? Also, many PhD physicists are finishing their degrees and starting residency in their 30s, often with a child+spouse already as well. I think the anxiety you're feeling is coming from external sources rather than from the job market. I can only tell you about what I know about the field itself.

>>>>>

I am sorry if my anxiety is contagious, everyone can handle these things differently, it is most definitely due to my personal situation I have with my partner (she's a handful lol but I love her) that it feels extra stressful right now. I've never had a good job prior to applying so it seems like a bigger commitment

to me but is what it is, I have lots of hope things will be ok it's just trying to make the right decisions isn't easy.

>>>>>

Things that are really worth it in life (relationships, a good career, etc) are never easy; I don't think they're supposed to be, either. Best of luck to you regardless.

>>>>>>

Truth. You as well, good luck with your matching when it comes, eye of the tiger.

Is there a way/software to practice treatment planning at home? (I am not talking actual data of a patient, just any simulation of a ct etc.) Also could anyone suggest a detailed anatomy reference name for what we do, i found myself having a hard time during contouring to differentiate between the rectum and anal canal axially on ct. (The center i train in uses Monaco), as i come from a physics background.

>

There is a great website called econtour.org which helps me a lot with anatomical contouring. It's free and they have MRI and CT based cases.

>>

I can't actually thank you enough for this honestly.

hello guys, just to play it safely , i decided to study electrical engineering , can i after completing electrical engineering study medical physics (ill be self studying physics in the mean time) is that possible . are there any dis advs? thank u so much guys

>

Make sure you get the requisite courses that campep asks for.

>>

thank you for replying... to be honest i went to their website and i couldn't find the requisite courses, can you send me a link? thank you so much and i am so sorry to disturb you

>>>

<https://campep.org/GraduateStandards.pdf> You'll need to complete a graduate degree from a CAMPEP accredited program after whatever EE degree you're going to be getting.

>>>>

thank you so much i really appreciate it, do you recommend it though?

>>>>>

If you're set on going into medical physics, whether you get an undergrad degree in EE or Physics won't really matter. Either one should get you the qualifications to get accepted to a CAMPEP accredited medical physics graduate program. You'll need that for the next step of getting into a CAMPEP accredited residency. This of course all assumes you're in the US or Canada. If you're not, then CAMPEP doesn't matter.

>>>>>>

yup ill be traveling to Canada , but the problem is am not Canadian . notwithstanding the fact that i need TOFEL and those stuff as an international student, are there any other concerns, can i become a medical physicist given the fact that am international student who will study in a canadian university , thank u so much . i am really sorry if i am disturbing you

>>>>>>>

After looking at your post history, here's my advice: Go with EE or Physics. At this point, it doesn't matter a whole lot. Whichever undergrad degree you choose to go with, you've got 4 years to explore all the different fields, and summers to pursue research/internship opportunities in the areas you find interesting.

>>>

I hope someone can help out with this since i dont have them handy but a minor in physics should work.

Post Title: [Training Tuesday] - Weekly thread for questions about grad school, residency, and general career topics 03/14/2023

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Comments:

What would be the difference between MPA and QMP in the tasks of the clinic?

What Therapy Residencies will consider applicants from a non-CAMPEP PhD program? Including not having a certificate, but have taken most of the campep courses. I'm looking for a list of programs that will NOT filter out my application.

>

The responses you got on here saying "none" are simply uninformed. Reach out to the residency program at Thomas Jefferson University in Phillie, PA. If you come from a non-campep background, they would evaluate your application separately and look at the courses you have taken. Yes, it is possible to get into a campep-accredited residency with education from a non-campep program. If that was the case, no international student would be admitted into any residency program in the US.

>

>What Therapy Residencies will consider applicants from a non-CAMPEP PhD program? Including not having a certificate, but have taken most of the campep courses. I'm looking for a list of programs that will NOT filter out my application. CAMPEP accredited residency program? None. "residents must either Have graduated from a CAMPEP-accredited MS or PhD graduate program, or Possess a PhD in physics or related discipline and have completed a CAMPEP-accredited certificate program, or Possess a PhD in physics or related discipline and have satisfactorily completed courses equivalent to those in a CAMPEP-accredited certificate program, as determined by the CAMPEP Graduate Education Program Review Committee (GEPRC)." <https://campep.org/ProspectiveApplicants.asp>

>>

CAMPEP allows exceptions for PhD holders. [Up to two of the] (<https://www.campep.org/ResidencyStandards.pdf>) required (certificate) courses can be completed during a two-year residency. Three+-year residencies can allow a PhD holder to complete all required courses (i.e., complete a certificate) during the residency. I know of three that actively do this, and I believe some of the other 3+-year residency programs may do so as well. The three I know: Harvard Mayo MSK Not all of the 3+-year residencies allow this. Hopefully other people will chime in with their knowledge of other 3+-year residencies that actively support this path. The other option is to convince a residency that you have completed all but one or two of the required courses and can complete one or two during residency, to CAMPEP's satisfaction.

>>>

Very helpful thanks!

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Oohh, TIL. A tidbit to file away

I am considering doing a masters in medical physics after I finish my bachelor in physics. I would like to know, what is the daily work of a medical physicist like? What are their jobs and responsibilities? I have read some master's students who say that the physics and mathematics that they found in the master's degree is very simple. How involved is physics in the work you do every day?

I'm considering a career in medical physics (I'm taking a degree in physics). Is there any book, or online info that can give a good idea of what I will encounter?

>

[obligatory meme](https://www.reddit.com/r/MedicalPhysicsMemes/comments/nri88c/i_dont_even_teach_students_and_i_get_asked_this/?utm_source=share&utm_medium=ios_app&utm_name=iossmf) [book] (<https://www.amazon.com/Khans-Physics-Radiation-Therapy-Gibbons/dp/1496397525/ref=nodl?dplnkId=dde9b90f-c874-47f8-a621-6fad72498fc0>) Get an older edition for cheap.

>>

Thanks a lot!

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No problem

I just started working as junior medical physicist in a radiation oncology department and I want to be better at doing IMRT plan. Any book/journal reco?

>

I don't have any good journal or book recommendations but I'm sure they exist. But one thing I have asked in the past is getting training from whoever your vendor is for the TPS. Your department may have a built in deal with their service package for training days and this could be a great opportunity to learn your TPS and tips and tricks to help IMRT plans.

It is mind boggling to me that that once your 5 years is up on part 1 the ONLY option is to go back to school. No mentorship, hands on training (even residency), etc. will make you eligible to retake it. I can't afford to quit my job and go back to school. What do I do? Do I hope to get accepted by Georgia tech's

online program and try again? Do I accept defeat and start mowing lawns or digging graves for a living? I wish I would've went to welding school instead of medical physics.

>

Five years? I know once you take part one, you got ten years to finish the whole process. For me, I took abr i in 2014 and was approved for part ii this year without any problems.

>>

From approval to take part 1 you have 5 years to pass it or go back to school. No exceptions or leniency of any sort. Even considering one of the times I took it they messed up the scoring and then covid happened

>>>

Oh I see. I didnt know that.

I've been thinking about this for a decade or so now. When I completed my undergrad (BSEE) around 2010, every MP grad I knew of ended up working in a different field. Some became health physicists, but others ended up changing fields altogether. How is the outlook now? Do any of you recall any students in Medical Physics school who had families? How manageable is school + residency with a family?

>

I believe the outlook has generally improved but not greatly. Those with a Phd still have a higher likelihood of matching into a residency then those with an MS, and the options for those who do not match are still limited. Alternative career choices that I have seen or heard anecdotally include medical physicist assistants (more of these positions seem to become available each year), junior physicist position usually through a consulting company, or positions in industry. However, I think a decent number of people who are unsuccessful with finding a residency position still leave the field. It might be prudent to research the success rate of individual graduate programs in finding their students a position, whether that's in residency or in an alternative career choice. As for the second part of your question, there was discussion [here](https://www.reddit.com/r/MedicalPhysics/comments/sodlty/residents_with_family_dependents_how_are_you_doing/) somewhat recently that covered this topic. This was also subject on an Out of the Gray [podcast](<https://podcasts.google.com/feed/aHR0cHM6Ly9mZWVkcyc5ZaW1wbGVjYXN0LmNvbS9sWHhGXzg3eA/episode/MjY0OTA5MzUtYTkwMC00ZDdkLTlhMmQtNzM3Y2VkMzQzZWl3?sa=X&ved=0CAUQkfYCAhcKEwjw6f0YjN79AhUAAAAAHQAAAAAQBQ>) although the discussion expanded was more focused on career + family.

>>

>medical physicist assistants (more of these positions seem to become available each year) Many of these positions don't even need MP degrees, but I would imagine being an MP helps tremendously.

>>>

Yep, many people with graduate mp degrees use these positions to get more experience so that they are more competitive for next residency application cycle, but you are correct that this position can sometimes be filled by other individuals with an alternative background.

Post Title: [Training Tuesday] - Weekly thread for questions about grad school, residency, and general career topics 03/21/2023

Post Content: This is the place to ask questions about graduate school, training programs, or general basic career topics. If you are just learning about the field and want to know if it is something you should explore, this thread is probably the correct place for those first few questions on your mind. Examples: * "I majored in Surf Science and Technology in undergrad, is Medical Physics right for me?" * "I can't decide between Biomedical Engineering and Medical Physics..." * "Do Medical Physicists get free CT scans for life?" * "Masters vs. PhD" * "How do I prepare for Residency interviews?"

Comments:

Hi all I am a nuclear medicine tech currently. Recently I have been looking into career change possibilities, mainly due to the lack of progression/advancement in the field. I've been considering medical physics. I took basic calculus and physics courses in college but not any higher level courses. Do MS programs value experience in nuclear medicine? Of course I see many of them wanting physics or engineering degrees, but not sure how well I would translate to what these programs look for. I've always been interested in the radiation therapy side of MP. Any insight or tips are greatly appreciated!

>

> Do MS programs value experience in nuclear medicine? I doubt it will hurt your application at all. You'll probably need a BS degree if you don't already have one. Do some research into graduate programs (CAMPEP accredited if you're in the US or Canada) you'd be interested in attending, learn a bit about them and contact the faculty doing research you'd be interested in.

[deleted]

>

The minimum requirement for a Masters program is a minor equivalent of physics. Most applicants (such as myself) are physics undergrads. There are also people from nuclear and biomedical engineering programs as well as long as they have the equivalent of a physics minor. As a Physics PhD. student, I would argue you are way overqualified for a masters program, but you can definitely go that route. The certificate programs require a PhD. in physics, so you fit the prerequisites for those programs. As far as residency goes, you can look at the programs on the campeps website (only apply to programs that are accredited), and I would filter based on residency match rates. Places like Kentucky and LSU and Vanderbilt have very good stats. The masters Program in Kentucky has matched 98% of all masters graduates over the past 10 years or so. The one person who didn't match was an international student that returned to their home country. I can't speak to the specifics of other programs, but there are a few top-tier programs you should try to target. As far as the certificate route, i can only speak that the graduate student whom I assisted in undergrad was doing the certificate program. They took classes on the side while doing their Physics PhD. and ended up securing a residency at Mayo. So, I know this path is also a valid option. Either way, it'd be up to you. I would go whichever route is cheapest personally.

Any MS students that go to Creighton or graduates from the school? What was your experience like in the program?

Masters vs PhD? I've heard from some that the major difference for clinical practice is residency placement rates, a salary difference, and research ability. Can anyone expand on that? I'm mostly interested in clinical work

>

Salary difference is minimal (within \$10-20k, iirc) unless you start comparing leadership positions, from what Ive seen. Certainly not enough to make up for the opportunity cost of not working for and additional 3-4 years. Residency placement rates are definitely better for PhD candidates (almost guaranteed). But MS is certainly not awful, as someone who has an MS. Some places even prefer MS due to historical observations in their clinic showing MS applicants tend to be better equipped to start working clinically faster. Ultimately, its all about how strong your clinical experience is, and some PhD programs place very little emphasis on that (not all, obviously). You certainly can participate actively in research with an MS, I still do even during residency. It all depends on your clinic's availability for that in my experience. Will you head a lab? Unlikely. But you can still do research, particularly clinically-focused projects. Honestly, if your focus and interest is clinical work and research doesn't interest you, find an MS program with a strong clinical component (there are quite a few regularly brought up

here, off the top of my head: UPenn, LSU, U Kentucky) and you should be fine residency-wise. If you're still uncertain, CAMPEP requires programs to publish match rates every year for you to evaluate for yourself. Though the financial aspect of it is another factor to consider, any reputable PhD program will be funded, most MS programs are not (LSU is the one exception that comes to time, their program being 3 years). Hope this helps.

>>

I think this is a fair comparison, but it's worth mentioning that masters programs can get expensive. Alongside a salary bump a PhD program may also allow you graduate debt free (most, but not all, I've seen do waive tuition and pay a stipend). If you think you may want a PhD later in life either to head a lab, leave a clinic, or pursue admin positions, or if you're just still unsure of the pros and cons, it may be worth looking at PhD programs that let you earn an en route masters degree. That way you can push off the decision until you're a little bit more familiar with the field.

>>>

I think it is also good to note you can work as a Graduate Research Assistant (GRA) or Teaching Assistant (TA) while doing your Masters. For me, a 27k/yr Masters tuition got cut to 4k/yr, alongside a \$1600/month stipend for being a GRA (not adding all the MR experience I got). So Masters students can also get pretty much free college (at least be debt free) and a salary position, they would just have to look hard for it, specially if they want that work to be in the medical imaging field/therapy field.

>>>

As someone who originally got an (*expensive*) "ivy league" masters and is interested in pursuing a PhD post-residency, I couldn't agree more. I will say though, a PhD isn't a prerequisite for admin positions. My current clinical director is one of the best people Ive had the pleasure to work with and learn from, and he's an MS-level physicist. But yeah, I'm sure a PhD is significant help for that goal.

Post Title: [Training Tuesday] - Weekly thread for questions about grad school, residency, and general career topics 02/21/2023

Post Content: This is the place to ask questions about graduate school, training programs, or general basic career topics. If you are just learning about the field and want to know if it is something you should explore, this thread is probably the correct place for those first few questions on your mind. Examples: * "I majored in Surf Science and Technology in undergrad, is Medical Physics right for me?" * "I can't decide between Biomedical

Engineering and Medical Physics..." * "Do Medical Physicists get free CT scans for life?" * "Masters vs. PhD" * "How do I prepare for Residency interviews?"

Comments:

Hi, so I'm currently a physics undergrad considering a career in medical physics. I recently left my research lab in optical physics since I really did not enjoy it at all. I only worked in this lab for a few months (no publications). Assuming this would be the only experience-besides my senior thesis-that I would have when I graduate, how much of a hinderance would a lack of undergraduate research be for medphys admissions? I have no intention of pursuing a research career and definitely more interested in the clinical side. I'm also concerned about the chances of residency. After looking at stats, programs seem to only accept 1-2 people out of tens of applicants. My school offers a DMP. Would this be a safer and more worthwhile path? How about compared to just a masters?

>

It definitely depends on the graduate school, but many MS students successfully obtain a residency (many schools have a 100% historical match rate with MS students, even). A quality thesis project on top of academic success can go a long way. Fitting in extra clinical experience during your MS is often helpful as well. From my understanding, DMP programs are being phased out. If you are able to get into a strong graduate program (definitely CAMPEP accredited), I would recommend MS to residency over DMP, simply from a financial standpoint.

>

I can not answer your second question as I am not an American based physicist (though last I can recall DMP were being somewhat phased out), but I can say not having publications as an undergraduate should not be a hindrance, and in fact is the norm for undergraduates entering grad school.

Hi.. Can i apply for CAMPEP accredited graduate or certificate program now that i've completed my master's in medical physics in India ? If not please do tell my options to further study in abroad except Phd.

>

CAMPEP certificate programs are exclusively for PhD holders from Physics or closely related fields. You'll need to look at doing a second MS from a CAMPEP medical physics program.

>

Certificate CAMPEP programs are only for people who have a PhD in science or engineering. You very likely can apply to CAMPEP graduate programs. Assuming you've had calculus and physics (e.g., classical mechanics, E&M, quantum mechanics, or similar). Usually if American students are missing a class, it's two semesters of college chemistry and one of anatomy & physiology - I'm guessing you've had those. If you can arrange to shadow a medical physicist, that might look good on your application.

What are Medical physics assistant usually doing in the clinic, are they perform Machine QA, Treatment planning, Brachytherapy, and PSQA, or just some of assign works? What do I need to get MPA jobs, do I MS medical physics or I just need BS physics Thank you

>

They usually fall into one of two groups. 1. BS in science/engineering, and is a great job to get your feet wet and see if medical physics is for you. (I did this for a couple years before going into a CAMPEP MP program) 2. MS in Medical Physics, but did not get into residency. They usually stay in this job until they eventually match. For the work, it depends on the clinic's needs, the employee's background, and how comfortable the staff is with the MPA. It can range from: Daily/Monthly QA, patient QA, helping physicists with projects and research, helping the physicist with annual QA or commissioning, independent projects, procedure writing, organizing spreadsheets and data, migrating data between systems, re-organizing storage rooms, cleaning up block rooms, scripting and/or programming to help automate tasks or visualize data. Basically... stuff physicists may be too busy to do themselves.

>

A BS in a physical science/engineering is generally all that is required for mpas.

Hi all! I'm an international student, senior undergrad in physics applying to medical physics masters programs. I just received two rejection letters and haven't heard back from any of the other schools (complete silence, no interviews). So I'm wondering if I didn't get into any programs, what can I do over the next year to better prepare myself and reapply? I am thinking about applying to introductory jobs in the industry (companies like Varian, Elekta, etc) as it is hard to find a job in the hospitals for physics bachelors. Any suggestions or tips would be greatly appreciated!

>

It is possible you might be able to find a medical physicist assistant job. Working for vendors / manufacturers should be good. If you can shadow a medical physicist, you might be able to include specifics in your application letter. I assume you've

already researched to make sure the schools you're applying to accept international students, and that whatever prerequisite courses they require, you've had them.

>>

Thanks for the reply! I attended U.S. college for all four years of undergrad, so prereqs are pretty much fulfilled. I did shadowed a medical physicist at our university hospital last year. It was a one time experience but enough for me to confirm I want to pursue MedPhys and put it in my SOP. Getting a medical physics assistant job is definitely something I will look into. Again, thank you for the advice!

Post Title: [Training Tuesday] - Weekly thread for questions about grad school, residency, and general career topics 02/07/2023

Post Content: This is the place to ask questions about graduate school, training programs, or general basic career topics. If you are just learning about the field and want to know if it is something you should explore, this thread is probably the correct place for those first few questions on your mind. Examples: * "I majored in Surf Science and Technology in undergrad, is Medical Physics right for me?" * "I can't decide between Biomedical Engineering and Medical Physics..." * "Do Medical Physicists get free CT scans for life?" * "Masters vs. PhD" * "How do I prepare for Residency interviews?"

Comments:

Hey everyone! I just wanted to ask what is the best path to becoming a dosimetrist? I'm currently a radiation therapist and have been looking into getting my masters in dosimetry. How hard is it to get into dosimetry programs and what would be the best way to stand out on the application? I've been interested for a few years and would love to know what school you recommend. Any suggestions or comment would be greatly appreciated!

Is there universities in the US that offer BS in medical physics? If so, does it help to prepare for graduate medical physics programs?

>

I don't know if there are, but it might be problematic. The undergrad physics courses that are expected are more like classical mechanics, quantum mechanics, E & M, etc. Back when ABR was checking undergrad courses, they specifically excluded anything that sounded medical, even optics and electronics.

Hello everyone, has anyone heard anything from Penn regarding interviews for their graduate program? I applied, but have yet to

hear anything and their interview dates are scheduled for next week. Thanks!

>

Heard from friend who's still there that they're still sending invites but will be done soon.

>>

I see. Thank you for your reply.

The residency that I went into adhered to University policies with which it was associated. They would not hire smokers, choice including tobacco and cigarettes.

It might be a bit early, but I graduate in December. Does anyone know of any CAMPEP residencies that have a January start date?

>

The nonmatch ones might.

Hey all, a question regarding drug screening before residency. I've always been in and out of smoking cigarettes and weed. Anxious times like this , I smoke 3 to 6 cigarettes a day and as for weed, every Friday night where I smoke one joint 2 to 3 hrs just to relax and put my mind off somewhere. As interviews for the residency progresses, I was learning about an on boarding process and soon found out that for medical residency, drug screening almost always happens. I tried to find a relevant information for the physics residency and there aren't much. Now, obviously my 'coping method' just isn't worth it when comparing to the risk of sabotaging my career path; and today I ordered self testing kit for THC and started a complete abstinence. Is there anyone that has any knowledge about a drug screening before residency? Any will help tremendously. Many thanks in advance

>

I know my facility DOES require a drug test for incoming residents (med phys treated just like other residents). I do NOT know whether it specifically looks for cigarette-related substances and/or THC. My recollection is that THC, in particular, can be problematic because of how long it can persist in the body and show up in urine.

>

Yes, I had to get a drug test before starting my residency along with a few other healthcare industry specific tests at a catch-all appointment like blood draw for TB testing, color blind testing and they even gave me a tetanus booster since I was behind on that. I saw your other question about cigarettes and since cigarettes are not illegal in the United States they won't

test for it or care if you smoke cigarettes. Although once you get into residency and see how the most of lung cancer patients suspiciously smell like cigarette smoke you may change your mind on that habit...

>>

Thank you very much for sharing the information! Yes I often feel silly smoking as a employee in a RadOnc dept and quitting is always on the back of my mind. Well the stars have aligned and signs are apparent lol. Thank you again and wish me luck on Match this year :D

>>>

Please note that any subsequent jobs you get after residency will definitely do the same process, so adjust marijuana/THC as it comes.

>>>>

Thanks for the heads up Kerma. I will definitely be mindful of this.

>

I mean it's pretty standard stuff. I imagine that the drug screen would happen during the onboard process, which if you match will be like April-June sometime. Should be enough time for your system to clear it.

>>

Thanks for the input. Does the screening test include testing for tobacco/nicotine consumption as well?

Post Title: [Training Tuesday] - Weekly thread for questions about grad school, residency, and general career topics 01/31/2023

Post Content: This is the place to ask questions about graduate school, training programs, or general basic career topics. If you are just learning about the field and want to know if it is something you should explore, this thread is probably the correct place for those first few questions on your mind. Examples: * "I majored in Surf Science and Technology in undergrad, is Medical Physics right for me?" * "I can't decide between Biomedical Engineering and Medical Physics..." * "Do Medical Physicists get free CT scans for life?" * "Masters vs. PhD" * "How do I prepare for Residency interviews?"

Comments:

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Hello! I'm a high schooler who's curious about the medical physics field; what is the difference between a radiation therapist and a medical physicist? Thank you!

>

A radiation therapist typically has a bachelor's degree and assists in setting up a patient on a medical linear accelerator before turning the machine on so it can deliver a preset amount of radiation to the patient in hopes of completely destroying or shrinking a tumor. A therapy medical physicist typically has a MS or PhD and is responsible for keeping the linear accelerator properly tuned so that the radiation that comes from the machine is the same as the very first day it was used for treatment. The secondary role a medical physicist will take is ensuring the preset plan that the therapists will deliver is actually achievable and also safe for the patient to receive. Many times the physicist will have additional roles in the clinic such as planning special procedures, doing research, and teaching in some aspect. There are also different types of medical physicists outside therapy medical physics. Imaging Medical Physicists is a subsection of medical physics that handles the calibration of medical imaging machines (MR, CT, US, etc.) If you're really interested I would suggest reaching out to a local medical physicist and see if you can follow them around for a day. Shadowing them is a good way to learn about the job.

Id like to know if I should take a year of work in a clinic(the clinic specialises in SRS) or go do an internship/work in a research hospital where I'll be collaborating on what's being researched (its gonna be about carbon ion therapy) and also do a bit of clinic work on the side. This work year will be after my finishing my masters and after that work year I plan to apply for Phds. Which one is good to do and an advantage in my Phd application? A bit of background, My grades are 3.8 undergrad and set for a 3.6-3.7 on my masters. Ill be doing some clinic

experience and research project stuff starting in march and finishing in September.

>

If you're set on going to the PhD then more research experience will definitely be helpful, so the latter. But for normal clinical jobs or residency the former will probably be of more immediate use, especially since carbon ion therapy is and will remain a niche subject for a very long time.

>>

Ahh that's grand then , thank ywu

Hey guys! Just wondering if anybody knows about the scope for medical physicists in Australia. Is it difficult to find a job? How's the pay? And how's your job life if you're a fellow medical physicist. Any insight would be a great help!! (Also I'm a biomedical science graduate who got a master of medical physics offer and was wondering if it's hard for a non physics background student to fit in).

i hope i am not violating the rules , but I am 16 years old., and ill be traveling to canada , and study in their universities, tbh i love physics so much so much that i dont really know ,which field to pick bc i dont mind them all they are all fun and i experienced all of them , i worked so hard tbh and i finished all highschool physics (i study the international A level physics syllabus,) and i expanded my knowledge to cover all 3 ap physics courses , and calc 1 and calc 2, planing to study calc 3 and linear algebra and differential equations (uni level) (am not bragging but am trying to confirm on the idea that i can do it) and now i have even more time to expand my knowledge in more advanced physics, so here comes the question , i am really trying to choose a field that is lucrative . i either want to study medical physics or electrical engineering , but most likely medical physics, bc i want a ****guaranteed**** field,bc u guys know that EE have high demand in terms of admissions, , anyways my question is, do u guys recommend me to study A level biology , here is the syllabus if u guys are interested in seeing the syllabus<https://www.cambridgeinternational.org/Images/664560-2025-2027-syllabus.pdf>plz guys i am taking 4 A levels , chem physics math and further math, and i am really lost, am not sure whether i should take bio or not, , and btw if i took it i can manage the 5 a levels load. but at the same time i dont wanna waste time, i would rather study uni physics and math, , ik that this might be dumb like why the hell am studying advanced stuff ,,, but the idea is , i might not have the ability to study for a long period of time in the future , bc i might have to work and study . so plz guys is the biology of medical physics manageable, do i really need highschool bio. or the bio behing medical physics is

really a very very small branch of bio such that i can do it easily later. in terms of uni, they require 3 A levels,. and bio isn't required for studying physics, so i am not worried abt admissions, so plz guys i really need ur help. sorry if it was so long, btw i am talking about radiation therapy and medical imaging stuff , when i refer to medical physics, not the research department

>

Minimum you need for MedPhys is 1 semester of anatomy and 1 semester of physiology. Can you take those courses specifically? If not, biology would be okay but it may not be super helpful. I'd take a few English or writing classes too because that is a big part of the career as well when you start working towards your PhD. I also wasn't sure if you're starting university in Canada or just taking classes. If you're starting, also take some easy classes that might be different from your interests. Some examples of ones I took were Bowling and Japanese Government History. You're going to focus on your harder classes so mixing some fun in your academic schedule is a good thing to do.

>>

oh alright thanks for accentuating the part of anatomy and physiology, A level biology , doesn't teach u that much in anatomy and physiology i, i won't take bio. tbh i hope they accept me in the anatomy and physiology course given that i don't have high school biology knowledge, but ig it is fine. since it would be all abt memorizing and i would forget the knowledge i have in bio ,. thanks for the advise tho ill take that into consideration , thank u again for ur time and i am so sorry to disturb u

I see many medphysicist go to work in hospitals or stay in academia, but how is to work in industry? Working in developing or improving devices ? Is it even possible?

>

Yeah that's the second most common job after clinical work. There's an ongoing seminar series about non-clinical careers from AAPM now.

Is a change of track common when going into your PhD? For example, Radiotherapy in your masters then Diagnostic for PhD?

For Medical Physicists who have academic duties (teaching etc) and clinical duties, what's the work-life like? Is it more or less the same as just being fully clinical? Is pay comparable?

Hi everyone! I have a question about the required courses for a minor in physics needed for certification/grad school admission. The courses for my upper level classes in physics are classical mechanics, laser physics, and quantum computing. These are all

classes offered by the physics department at a large R1 university and count towards a minor at my university. My question is are these upper level physics courses acceptable for medical physics admission? I know they are not what a lot of people have in mind when they say minor in physics. I am also interested in pursuing a PhD and eventually going into diagnostic imaging if this is relevant. I would appreciate any feedback! Thanks!

>

The official campep minimum requirements are a physics minor consisting of at least 3 upper level undergraduate courses. However, depending on where you apply, each program may require or prefer different undergrad classes. For instance, most of the programs I applied to required (or strongly preferred) E&M and modern physics and lab. While you may be considered above the minimum requirements, it may be possible for specific programs that you are at a disadvantage to others if you are missing the preferred pre requisites.

>

Probably depends on where in the world you are and the criteria of the medical physics program you're considering applying to, but you'd probably be fine. If there's a modern physics or nuclear physics course available to you, I'd consider taking those as well.

>>

Thanks for the reply! There is a course like modern physics available for me to take but at my university but it is only a sophomore level course so it would not count as an upper level course. I could take it in the Spring if that would be helpful!

Post Title: [Training Tuesday] - Weekly thread for questions about grad school, residency, and general career topics 01/24/2023

Post Content: This is the place to ask questions about graduate school, training programs, or general basic career topics. If you are just learning about the field and want to know if it is something you should explore, this thread is probably the correct place for those first few questions on your mind. Examples: * "I majored in Surf Science and Technology in undergrad, is Medical Physics right for me?" * "I can't decide between Biomedical Engineering and Medical Physics..." * "Do Medical Physicists get free CT scans for life?" * "Masters vs. PhD" * "How do I prepare for Residency interviews?"

Comments:

Does anyone have any recommendations for a comprehensive, mathematically rigorous text on MRI that's up a mathematician/physicist's alley? From the quantum mechanics to reconstruction.

>

The ones I have in my collection are older books, so not sure how available they would be or if there's anything newer available. * NMR Imaging in Biomedicine by Mansfield and Morris (1982) ISBN 0120255626 * NMR in Biomedicine: The Physical Basis (1989) ISBN 0883186039 The second one is actually a collection of seminal papers related to NMR and MRI that was published by AIP and is good for getting a more historical look at the development of NMR/MRI There's also a Physics of MRI monograph from the 1992 AAPM Summer School (ISBN 1563962055). This one is likely harder to find and you'd probably have to find a fairly well established Medical Physics Department or diagnostic medical physicist to get your hands on a copy.

If you go to a campep accredited university for your masters, should you then go onto a campep accredited PhD program if you wanna continue to do research in the field?

>

Many do, but it's not required for credentialing as the masters would take care of it.

Anyone got received an email for an interview in MD Anderson GSBS?

What's the best way to get an MP related internship as a first year Master's student? I've been looking around the internet and talking with faculty/mp's/medical physicist assistants in my area, seeing if anyone needs an intern for the summer, but I thought I'd ask here and see if anyone knows a trick to it.

>

I asked my program director, clinical instructors, professors, and radiology department professors. Ask your 2nd year classmates and PhD students too. Most the opportunities I had offered to me were research related. Others were just shadowing opportunities. I didn't find any that paid, but I got two really good letters of recommendations from the people I worked with. The resident at my school also let me know when they were planning on doing a machines annual test on a Saturday or Sunday. So just keep asking around.

Hello everyone! I am a physics student in Latin America. I am finishing my bachelor's degree and would like to do a master's degree in medical physics. I have European nationality, so I

would like to emigrate to a European country. Some countries I have considered are Germany, Portugal and Ireland. Could anyone give me their opinion or experience about studying a master's degree in medical physics in a European country? What university do you recommend? Are medical physicists well paid in your country? Thanks!

>

I am in the US but I have a friend who went to Italy, to the ICTP the international Centre for Theoretical Physics. They liked it and all but had to go back to south america bc he was on a government scholarship. It was a good program though, he did a residency at the end.

Hi !! My wife has PhD in pure physics. We are permanent residents of Canada. She is interested in applying for CAMPEP accredited certificate program. She will be getting her provisional PhD degree on 27th January 2023. The last date for applying at University of Calgary was 15th January 2023. We are not familiar with university system of Canada. In India there are almost nil chance to get admission after last date. Is there any possibility if we request them and explain our position so that her application should be considered for September intake? Also she was interested in applying to Western University. But at WU candidate must have scored 78% marks in last two years of undergrad. My wife has 75% in last two years of undergrad. She has 83% marks in one year PhD course work which is her latest performance. As she was hospitalized for three months in last year of her undergrad due to which her marks took a dip. Is there any possibility that her application can be considered for September intake?(Or WU is extremely strict about there minimum qualification criteria) Lastly she wants to remain prepared in advance for this program. What are learning resources/book that may help her to self learn basics of Medical Physics? Or any other skill she can develop which will be useful in this field?

>

Hi! I'm not sure about Calgary, but I would suggest applying to western university - they might consider her situation and base acceptance off PhD marks. The one year MSc campep program at western is a really great program - it is in person though, so no virtual option. I encourage you to email the department if you have more questions!

Post Title: [Training Tuesday] - Weekly thread for questions about grad school, residency, and general career topics 12/13/2022

Post Content: This is the place to ask questions about graduate school, training programs, or general basic career topics. If you are just learning about the field and want to know if it is

something you should explore, this thread is probably the correct place for those first few questions on your mind. Examples: * "I majored in Surf Science and Technology in undergrad, is Medical Physics right for me?" * "I can't decide between Biomedical Engineering and Medical Physics..." * "Do Medical Physicists get free CT scans for life?" * "Masters vs. PhD" * "How do I prepare for Residency interviews?"

Comments:

Is there a huge difference between clinical medical physics and radiation oncology? From my understanding, medical physics has more physics involved and you work with more technology but what are the differences in career life and job culture? I have been intrigued with medicine for a while, but when I discovered a passion for physics, kind of gave up on that idea. Not sure what I want to pursue (still in second year of IB at the moment), but I have applied to courses in Canada relating to Biophysics. Haven't been hearing awesome things about career prospects and the PHD requirement with really low residency and job acceptance rates in Canada. Would picking one over the other be more beneficial in the long run? I definitely have a passion for both medicine and physics- I definitely have more of a background in physics at the moment (doing HL phys and chem), but I also really want to be realistic and the thought of having really low prospects gives me major anxiety.

Hi all, just started a degree in medical physics. We're covering Radiotherapy concepts. But the lectures feel very condensed and vague. Any literature recommendations please?

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The interactive videos by Eric ford were very helpful when i started. Just google "primer on radiation oncology physics eric ford" The 2 books on radiation therapy and radiation physics by khan are also very good

What are tasks that medical physics residents are allowed to do on their own? Does it vary by year?

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Similar to what others have said, at my residency you are allowed to do more tasks independently after you have completed the relevant competency. These competencies are normally built into related rotations, but a couple of them you just need to prove that you are capable of doing them once you gained enough experience. From a therapy standpoint, in the last six months I've been cleared to do IMRT QA, SRS QA, Monthly QA, TG-51, and 3D Treatment planning. All of my work is reviewed by or performed alongside a board-certified physicist, but by my second year I will be expected be able to perform the majority of the clinical work independently.

>

Therapy or imaging? Also the state regulations might change what an unlicensed physicist can do. I'm in a 1st year diagnostic residency and I can test pretty much any radiographic and fluoroscopic x-ray equipment by myself. About six months in so far. Training in ultrasound now. I am also in the process of finishing my mammo certification to test mammography units solo. What I can't do solo is CT, MRI or nuc med equipment testing solo. That's due to ACR regulations that require 3 years of experience/training. Technically all my work is reviewed by a licensed physicist. Hope that helps.

>

It does vary by year, but mostly as you get more stuff done... As soon as you show competency in a subject you'll be able to do stuff with little to no supervision (at least this is how it works for me and other residencies I know)

One thing to consider is if the university offers any medical physics courses to undergrads. It's probably not that common and most students in grad programs have no UG medical physics experience but it is something to look for. That way, you can try it before you commit.

I'm a theoretical physics PhD and I'm slowly getting interested in medical physics. Suppose I would like to get into medical physics after I graduate in my field, what should I do?

>

The path will depend on where you're located. If you're in the US/Canada and looking to get into clinical MP, then what /u/kermathefrog said. If you're elsewhere in the world, then the path will be determined by whatever the MP certifying body (if any) is.

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Thank you very much! I am indeed based in the US.

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The route into med phys academically for you would be to do a CAMPEP MS (2yrs) or certificate (1yr). Try to get some shadowing exposure in a clinic or with some physicists near you to get a better idea as to what it's like.

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Thank you very much!

Hello! I am a high school senior currently applying to colleges, and I'm very interested in medical physics! With the end goal of

becoming a medical physicist, what are factors I should consider for selecting an undergraduate university? Is student loan debt a common problem for medical physicists? Does undergraduate university prestige influence admissions into graduate programs at all? Thank you for your help!!

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People on admissions committees feel free to correct me, but I do not think that you should choose an undergraduate school based solely on going into medical physics. Especially for entering the field of medical physics, undergrad is 'what you make it'. Shadowing, research, actually knowing what medical physicists do and a commitment to our field, these are the things that I believe an admissions committee wants to see. For what it's worth, I did not go to a "big name" school, but I went somewhere that was rigorous, had supportive faculty, and was affordable (due to location and tuition scholarships). After I had started undergrad, I pursued shadowing opportunities at my local cancer center. I was successful in my graduate applications and managed to get into my top-choice graduate program. You might consider the [AAPM Summer Undergraduate Fellowship Program](<https://gaf.aapm.org/>). At this stage, you have a lot of time to gain experience and prepare an excellent application for it. It would only comprise part of your CV, but the experiences gained and possible references you may get from doing that program are highly valuable. Not to mention, it shows initiative for applying for awards and an interest in AAPM.

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Thank you so much!!

>

I'll preface this by saying I am just a grad student who is not involved in the application review process but I have talked with some of my colleagues about this stuff and gone through the interview process. The prestige of your undergraduate school doesn't really matter as much as people think. My program has people from small liberal arts colleges as well as highly rated research universities. That being said, it's typically what you do at your school that sets your application apart (typically research projects, internships, shadowing) and it is possible higher ranked schools have more opportunities, but your future won't be ruined if you don't get into an ivy. I personally would look for a school that has a reputation for undergrad research, pros if it's in cancer, imaging, radiation sciences, or other related fields. It is rare (from what I've seen) but some schools do offer undergraduate degrees in medical physics. Student loan debt is an issue for everyone, however the medical physics field pays quite well and most people I know in the field suffering from student debt aren't quite as worried about it as some other fields. That being said it is still debt and money you most

likely will have to pay back so i would factor cost into a decision of undergrad schools. I am still fairly new to field so I hope someone corrects me if I said anything egregiously wrong but feel free to reach out if you have any specific questions!

>>

Thank you so much!

Is it possible for a Radiation Therapist to move into medical physics? Im asking because I am very interested in the field

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Depends on the program you ll apply but most likely you will want to complete prerequisite courses and then go into the masters. Another thing to consider is residency. I would talk to your local physicist. It would be great if they had a residency where you work and you could get some sort of reassurance that you ll get in as a resident. Another thing to look into is becoming a CMD, a dosimetrist. Best wishes!

>

I wouldn't waste your time, I'm considering going the opposite direction. Getting a residency is near impossible

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<https://www.campep.org/2021AnnualGraduateReport.pdf> This data comes directly from campep, check out page 17. 78% of MS applicants got into residency last cycle. Getting residency isn't a trivial matter but "near impossible" is hyperbolic.

>>>

Well idk I graduated in 18 and had countless interviews and still haven't gotten one so...and these people that match at least in some of the real life experiences I've had are so far beyond qualified that nobody can really compete just having a MS. There was someone in my last cycle of disappointment in a group interview who had two doctorates and co authored a med phys textbook for instance. Someone who just completed their masters program at a shit tier school like me who didn't write code for the large hadron collider or something is very unlikely to succeed from my experience.

>>>>

Literally nobody in my cohort that matched (or my current colleagues) comes even remotely close to that description. In fact my undergraduate grades were subpar and gradschool was good but not perfect. My research experience wasn't anything out of this world and, while more than the average MS applicant,

significantly less than a PhD candidate. I matched to a great place for ONE main reason: I interviewed extremely well (confirmed by my interviewer). The paper (which doesn't need to be crazy impressive) only gets you the interview, its you as a person that gets the job.

>>>>

Cool I'm glad for you. Literally only one person in my cohort matched at all. Not everyone interviews well. The fact remains there are way overqualified people gunning for the same entry level position as the rest of us.

>

One of our current residents was a RTT. Got her master's remotely via Georgia Tech.

>>

Multiple people in my GT remote class are RTT>Dosi>MP, seems quite common.

what do you think is the most important factor when applying for medical physics therapy residency positions? Location? Size of clinic? Equipment?

>

Environment. Residency can be exhausting and tough sometimes – that part is pretty much unavoidable. But working with good, kind people who prioritize your well-being makes all the difference. I'm a resident at UNMC and the folks here are amazing. I was burnt out from my PhD work, and the physicists here rebuilt my confidence and helped me flourish. It helps that we aim to keep our work hours down to about 45 hours per week!

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So true. Everywhere I interviewed I asked the staff about their work life balance. If they struggled to answer that confidently or positively it was an instant red flag.

>>

This is very heartwarming.

For those of you starting to apply for residency, there is a communal spreadsheet to keep track of program information.

https://docs.google.com/spreadsheets/u/0/d/1hnH_EhopdAqZ0DTg9eyX66E4_g5uCCsH5uwIxmKfZ0k/htmlview#gid=1533941002 Best of luck!

I will start interviewing soon for a job. I will try my best not to fall into a toxic environment... For those with lots of

experience, what would be good questions to ask in interviews regarding work atmosphere?

>

Others may disagree but I ask very specifically about work-life balance and I'll try to gauge if current staff seems burned out. I also look into what tools they use to increase efficiency like ClearCheck or QA tracking etc. I'm not a big fan of checking little things that software can quickly identify. Some clinics are very nice and will give you comp time if you need to come in to do an annual on the weekend. However, I've never had that perk personally. I'd ask about regular work schedule, how a site/group schedules tasks out, what time patients typically start/end for the day. It's also good to see what the makeup of the rad onc team is. Smaller teams tend to have physics partially manage IT and data. If that's not your thing, you may want to find a job with dedicated IT team to handle that.

>>

Thank you! This is really good insight!

Post Title: [Training Tuesday] - Weekly thread for questions about grad school, residency, and general career topics 01/03/2023

Post Content: This is the place to ask questions about graduate school, training programs, or general basic career topics. If you are just learning about the field and want to know if it is something you should explore, this thread is probably the correct place for those first few questions on your mind. Examples: * "I majored in Surf Science and Technology in undergrad, is Medical Physics right for me?" * "I can't decide between Biomedical Engineering and Medical Physics..." * "Do Medical Physicists get free CT scans for life?" * "Masters vs. PhD" * "How do I prepare for Residency interviews?"

Comments:

Just a reminder to residency applicants, here is a link to the interview/program info spreadsheet: https://docs.google.com/spreadsheets/u/0/d/1hnH_EhopdAqZ0DTg9eyX66E4_g5uCCsH5uwIxmKfZ0k/htmlview#gid=1533941002

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In the poll spreadsheet, it doesn't specify the institute when displaying the info. I'm particularly interested in the Visa status for each. Is there anywhere to access the Visa status for each institute?

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Try this one: https://docs.google.com/spreadsheets/d/1ttLYa-7aikuj2GZX4q3Gc_NrX5q0dUja/edit#gid=512454116 Disclaimer, I have no idea about the level of accuracy of the information. If you are concerned about a particular program, email them directly.

Originally posted this in the radiology subreddit, but was advised to ask here. I have a background in EE with a masters projected related to MRI acquisition/compression for K-space data (SENSE MRI). But I ended up going into a cloud software engineering career and have around 8 years of experience. Lately I've been thinking of a career in the medical field as I have a passion for medical imaging as well as medicine in general. I understand I have the option to work for a medical devices manufacturer like Seimens or Philips but I want to be closer to medicine and patients rather than manufacturing. As I'm in my mid 30s the MD track seems too much of a challenge and not sure if I'd be able to put in the years into it. So I was advised the Medical physicist track. Would love to get some information on what education I would need to pursue and if there's a fast track give my background (BS + MS in EE with Math minor and 8 YOY). Can this be done while working/remote and then maybe full time for the residency component. Secondly, how does this line of work pay, starting out as well as maybe with a 2-3years into it? (My current pay is around \$280k) third question, what are some of the duties for a medical physicist? And if there are any other jobs that you think would be a better fit if not this?

>

For the most part, I would echo what ilovematchanxiety said, but I will add a bit more. As a therapy physicist (resident) it's true most of my patient contact is walking by them in the hallway, but I still do things like check their charts and our patients are at the forefront of our minds in everything we do. I imagine this is different than working in industry where the patient is more abstract. I'm not sure about imaging physicists though since I don't think they do stuff like check charts, place OSLDs, do special physics consults, etc. that put us therapy physicists adjacent to the patients. Maybe you would consider therapy instead of imaging if that sounds more like what you want to do? I could get more into the duties but I anticipate this will be a long comment. As for your other questions: no, I don't think you would be able to work while doing your master's as it's mostly a full time gig. The most demanding job I've personally seen students take on is something like being a waiter part time, not a career job. I imagine there are some people who pull off something more rigorous, but it's probably pretty rare and not the best idea. Getting a residency is difficult and you want to put your all into being a good candidate for one. Unfortunately, there is not a fast track given your experience. There is a fast track for those with a PhD in a related field (1 year certificate vs 2 years masters) but not for someone with a masters in a related field. If pay is really important to you, this is going

to be very tough. You get paid if you go the PhD route, although it doesn't sound like that's your move, but only around \$30k a year. While a resident you make around \$50-60k and then before boards in the low to mid-100s and after boards in the upper 100s to maybe low 200s. So to hit the low \$200s you're looking at a minimum of 5 years. This is all for therapy btw and imaging physicists make a little less and there's a lot of variation with location and type of hospital you're at. It is possible you won't hit \$280k ever again. Medical physics is an amazing career and I know lots of people who found it in their 30's and went back to school for it. These people tended to have careers where they weren't making nearly as much as you and/or were burned out and found a passion in medical physics so the temporary dip in money did not matter to them. I think you should look into schools you're interested in attending to see if the coursework and research is something that interests you. You could also weigh therapy vs. imaging if you're considering either.

>>

So basically from what it sounds like, it maybe worth it to just pursue the MD route since it will take just as long, but then I could potentially go to the radiology route. Keeping everything aside, strictly from a financial standpoint, would the MD route be a better bet to recover from the debt/loss of income for 4-5 years during medschool? Of course I know the Medical physicist salaries mentioned aren't terrible by any means, but given where I currently am, I have bills and mortgage that is at that scale. So I have to think of the family if they will be okay with a change in lifestyle.

>>>

The MD route will take a lot longer than doing a masters in medical physics (2 years school+2 year residency vs 4 years school + 1 intern year + 4 year residency + possible 1 year fellowship). If you did a PhD the amount of time could be similar depending on how long your PhD takes and if you do a residency with a research year. In the long run, MD's make a lot more since their salaries are a lot higher but we do better in the short term because our school doesn't cost as much and we are at the residency salary for a shorter period of time.

>>>>

Question, while these are not required for admission in most programs, are classes such as biology, chemistry, biochemistry, and anatomy/physiology helpful for Medical Physicists?

>>>>>

It's been a while, but I went to a top medphys program and never took a biology, biochemistry or A/P class. A/P would have made grad level A/P easier, but the other classes would have provided

little benefit. Physics and Comp Sci and a little math were really all that's necessary.

>>>>

Organic Chem is helpful if you want to go into nuclear medicine or theranostics. You really don't have to worry about A&P as you'll take an anatomy class in the grad program for med phys. One thing that is extremely helpful is computer science: if you can only fit one extra class, do coding. I did my undergrad in physics with a pre-med concentration and a math minor and felt very prepared for my grad program. My biggest advice around this is to reach out to the program first before making assumptions. The requirements for admission regarding courses can be flexible sometimes.

>>>>

Beyond the basics that are required for you to get a science or engineering bachelor's degree, not really, unless you want to do specialized research during a PhD. Anatomy is a requirement for CAMPEP but it's fine to wait until grad school to take it, I think most people do.

>>>>>

I think several grad programs require 1 semester of A&P, computer programming, bio or chem etc for admission. It'd be best to check specific program requirements.

>>>>

Oh also based on your background you will probably need some pre-reqs for medical school first. O chem, biology, anatomy, etc. Plus you will have to take the MCAT. Some medical physics programs still require the GRE but there are many that don't. You also only need the equivalent of a physics minor for med phys which you can probably easily convince a school you have with your education and a few syllabi.

>>>

You'd also want to consider your work-life balance. There was a fairly recent study that came out showing physicists were the only people in the department who had higher workloads than physicians. For many, the hours are pretty rough (often late evenings). Imaging may be better, but the salaries are lower. Great jobs exist, but you'll probably have to work for a while and move to find one.

>>>>

"There was a fairly recent study that came out showing physicists were the only people in the department who had higher workloads than physicians. For many, the hours are pretty rough (often late

evenings). Imaging may be better, but the salaries are lower." I'm early in my imaging physics career (in-house) and I cannot imagine coming close to a physicians workload. As for the "lower" salary; of course mine is lower than my therapy counterparts at the same experience level... but the salary itself is still pretty great and I'll take 15-20 k less in salary if it means I'm happy, love my job, rarely work late nights, and get to spend time with family.... My point, imaging work/life balance does not look the same as therapy work/life balance...

>>>>>

Yep, I actually moved out of therapy because the W/L balance was so bad. OP seems pretty concerned about salary and patient contact, though, so he'd probably want to go into radiation therapy.

>

It can take as long to be a medical physicist with an interesting career as it takes to be a primary care MD. You're also getting paid more now at 280k than >80% of medical physicists, especially imaging physicists which are paid a little less. Imaging physicists also have 0% patient contact as far as I know. Therapy physicists have less than 2%. I think you're barking up the wrong tree. Assuming you want to become a clinical physicist still, you're going to need to go through boarding and a residency program (3 years) in addition to a minimum 2 year degree (but this will by and large pin you in tight to a very clinical and non-research role, so 4-6 years for an accredited medphys phd and perhaps longer if doing it remote). If the time to become an MD is deterring you, I doubt you'll find physics much better. And at a pay cut.

[deleted]

>

A couple friends I know who've been in the hunt recently have seen offers closer to 200k than I would have thought. The AAPM survey is out of date and doesn't account for massive inflation increases and increasingly dire manpower shortages in physics. Go get that bread if you're new or looking to switch.

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[deleted]

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They ought to get a pay bump once they get fully boarded though right?

>

If you're an AAPM member, grab the latest professional survey.

Post Title: [Training Tuesday] - Weekly thread for questions about grad school, residency, and general career topics 12/27/2022

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Comments:

Hello Community: I would like to have an opinion and suggestion: I recently completed my Ph.D. in Physics from a non-CAMPEP University in the united states. After graduation, I got a job in the semiconductor industry as an engineer and am currently working there. I am thinking of changing my career to a medical physicist, I researched and came to know about the CAMPEP certification program, and taking this certification with the Ph.D. in Physics degree makes me eligible to apply for the medical physics residency. I have a few questions about this path, which I would like to ask within the community. 1) How difficult is it to get into residency after completing the certification course? Is there an evaluation/comparison between the candidate who directly came with Ph.D./Master in medical physics and with the one with certification plus Ph.D. in Physics? 2) How difficult is it to get a job after the completion of residency? (I would like to work in the hospitals as of my first choice) 3) Has anyone gone through this path (Ph.D. Physics+ CAMPEP certification)-> residency-> job? I am new to reddit and came to know about this subreddit. I would appreciate your thoughts and opinions about my plan. Thanks

>

1. This is entirely depends on the residency programs and what they value. For example programs at university affiliated clinics would value a PhD more. Some don't even accept Masters. With PhD + certificate, I personally see it as something that can make stand out in a good way, and you will likely have a different perspective you can bring to a clinic. 2. From my perspective, this entirely depends on connections and/or strength of the program, and of course, yourself. For general stats, see CAMPEP website. Accredited Residency programs have to release their placement stats I believe. 3. I personally have not, but to the best of my knowledge, a few of my colleagues have gone that

route. Each of them are outstanding. I highly recommend AAPM task group 298, "Recommendations on certificate program/alternative pathway candidate education and training", <https://pubmed.ncbi.nlm.nih.gov/36125203/>

>>

Thank you for your valuable and insightful comment and the link to the article. I wondered if there is any way to get connected to some of your friends who choose this path and are doing great. I am happy that the community members are taking time to provide a helpful thoughts. Thank you once again.

>>>

See private message

>

Hello welcome to our sub. I don't know any certificate physicists personally, but the data from campep re: residency chances is seems favorable: <https://www.campep.org/documents/2020%20Certificate%20Program%20Disclosure%20Data.pdf>.

>>

Thank you for the information, this is very helpful.

Medical Dosimetry Master's vs Bachelor's Hello I'm looking to become a dosimetrist. Some online programs are listed as Master's program. If I already have a bachelor's in biochemistry will I be eligible to attend this program? Also is there benefit to getting Master's compared to Bachelor's? Does it drastically improve my compensation?

[deleted]

>

It most certainly won't help if you don't go straight into residency from grad school but there are some options that might be okay for in the mean time. If there are local physics assistant positions you can apply for, definitely do that. See if you can get a remote job with one of the companies that deals with radiation oncology. I don't know if there are a lot of opportunities but look at the big names career pages and start applying. Would you be willing to do a residency if it were local? If so that would be the best option. As for residency next year, it will be a bit tougher but good grades and good references will help get you an interview and as long as you can explain what you did in your year off and it won't be a hinderance to your residency then you should be fine.

Currently an undergraduate at a US university and I go to a small liberal arts college. I'm interested in doing an REU and I'm interested in hearing someone else's experience. Do you think it could help with grad school admissions and preparing me for grad school? Thanks.

>

Yes, if you have the chance to get some research experience before grad school, then you should take it. Grad school is generally very researched focused, so undergrad experience will set you up with skills, and it will help you test if you enjoy the field/doing research. Additionally, research experience is very valuable when applying for graduate school as it is one of the key features that potential supervisors will look at.

>>

> Grad school is generally very researched focused In the past that was true, but now I would argue that's heavily dependent on the program. Some definitely are, but others have strong clinical focus. Some M.S. I've seen resumes for don't have a thesis at all.

I'm curious if anyone has made or has heard of alternative career choices that still make use of medical physics education. I'm in a PhD program now and plan to finish, but I just don't see myself continuing to do research in academia/industry or doing the residency/clinical path anymore; I went straight from physics undergrad to med phys grad and probably wasn't the most aware of what was ahead and if it was for me. What are some of the most surprising careers out there where people started out in medical physics? I'm looking to widen my perspective and consider all opportunities!

>

I went to summer school this year and met a lot of non clinical people who worked for varian, sunnuclear, etc, designing products and the next new detector.

>>

Where did you go to summer school?

>>>

Dallas, Texas...for the small dosi workshop

Hello! Long text ahead- Didnt know if this should be here or in Gradadmissions, I am a medical phycisist graduated from a developing (latin american if it tells something) country. I have recently applied to do a Phd in Medical physics at an University in Europe where I did my Msc thesis as an Internship. I recently had a online interview and they sent me an invitation to a campus

visit/ personal Interview with all costs covered at the end of January. In the meantime I also applied to many other jobs, clinical and regulatory. As unexpected as it sounds, one of the jobs contacted me to begin in January, the same month I should be getting an answer from this graduate program in Europe. My first option is the Phd, as it would maybe have more impact regarding my career. Should I refuse this first contract and leave it to the chances of being accepted to the Phd or try to delay the job in order to make a more informed decision, have anyone here also been invited to a campus visit before being accepted? What would be my chances? Thank you for reading me, hope you have great holidays.

>

Fellow latin american here. If they are covering your costs to go over to Europe for an interview, and they know you...I think they are pretty serious about you. I think in most latin america, work culture dictates you better be grateful for being employed and you feel you could get fired any minor thing. At least, this is how I felt. While it is true that opportunities like these are not common, there is a good chance that they are understanding of this situation and will give you time to think about it. After all, it is a big big move. I think it is reasonable if you ask for a couple of weeks from the job while you hear back from the PhD program. You can choose not to explain your current situation and just say that you need that time to make your decision. As for your PhD, is it a scholarship? Or do you finance it yourself? Anyways, I think going through the PhD will bring better and great opportunities in the future. Or you can work and do PhD later. Up to you, but make sure you give yourself enough chances to know about each option. It is true that if you quit, you will be replaced. But jobs don't care about you that much and you are the one responsible for your career and fulfillment in life.

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I'm not sure what the employment culture is like in your home country, but is there any reason why you cannot accept the job offer, and then if you get accepted into the PhD program, leave your position to pursue the PhD? Based on the timeline, even if you hear back from the PhD program at the end of January, it is not clear when you might start. If you start a month or two later, say in March or April, accepting the job would still allow you to work and make some money (buy food, pay rent...) before starting your PhD. Do you know when the program start date would be? Alternatively, asking your potential employer to delay the start date by 2 weeks is also not unreasonable (again, based on where I live and work - work cultures vary, so I am not sure if this would be appropriate to your location). I think people take different views on that sort of thing, but I have definitely accepted a job, moved across the country, and then about 1 month into my new job, gotten a internship offer in Europe to start 5

months later, which I accepted; so I wound up moving across the country for a job and then quitting 6 months after I started.

>>

The program start date is not that clear, definitely within February. And yes, that is probably the best course of action. I think we are all replazable for companies and quitting my job in my first two months will probably have less negative effects for them than for me not having this option if I wouldnt be accepted in the PhD. There is nothing that can deny a person to cancel a contract (maybe a penalty fee), being my first job I was concerned more on the ethical point of view.

>

If its not a secret, where in Europe have you applied?)

>>

Germany

Post Title: [Training Tuesday] - Weekly thread for questions about grad school, residency, and general career topics 02/14/2023

Post Content: This is the place to ask questions about graduate school, training programs, or general basic career topics. If you are just learning about the field and want to know if it is something you should explore, this thread is probably the correct place for those first few questions on your mind. Examples: * "I majored in Surf Science and Technology in undergrad, is Medical Physics right for me?" * "I can't decide between Biomedical Engineering and Medical Physics..." * "Do Medical Physicists get free CT scans for life?" * "Masters vs. PhD" * "How do I prepare for Residency interviews?"

Comments:

Transition from Dosimetrist to Physicist Hello! I have been a dosimetrist for close to 7 years now and my current employer would like me to consider the idea of becoming a junior physicist. I have always thought I would entertain the idea to become a medical physicist one day, but never have pursued the thought. I realize there is a much larger responsibility/expectation of becoming a physicist compared to taking on a junior physicist role. I really enjoy my job as a dosimetrist, but I also feel like I haven't hit my own professional ceiling. Do you have any advice or past experience for someone who is looking to make this jump? Thank you for all responses!

>

[Old Post](https://www.reddit.com/r/MedicalPhysics/comments/oxr9kv/can_i_become_a_medical_physicist_if_i_am_already/)
pertaining to this

Post Title: [Training Tuesday] - Weekly thread for questions about grad school, residency, and general career topics 12/20/2022

Post Content: This is the place to ask questions about graduate school, training programs, or general basic career topics. If you are just learning about the field and want to know if it is something you should explore, this thread is probably the correct place for those first few questions on your mind. Examples: * "I majored in Surf Science and Technology in undergrad, is Medical Physics right for me?" * "I can't decide between Biomedical Engineering and Medical Physics..." * "Do Medical Physicists get free CT scans for life?" * "Masters vs. PhD" * "How do I prepare for Residency interviews?"

Comments:

Would you recommend medical physics for someone who's stuck between choosing studying physics or medicine?

>

Some context helps. Where are you in your education/career? Do you have any job experience in either field?

>>

I'm in my last year pf high school

>>>

My honest advice to you is to enjoy the rest of high school, and not worry too much about choosing a career at this point. You have years to figure that out, most of the time people post here in their last year of undergrad, not high school, but a lot of people get into MP from different fields altogether. Just keep an eye out for interesting classes and internships/research experiences; shadow doctors to see if medicine is something you want (it's not for everyone).

>>>>

Thanks for the advice

Anyone here ever been asked to get ACLS for their position? I'm pretty sure the answer will be "what no of course not," but if anyone has I'd be interested to know. No particular reason.

>

Yes. I had to do it for residency. All employees of the Healthcare system had to have it.

>>

Wow. Defibrillator and airway and everything? I'm pretty used to BLS for everyone, but ACLS for everyone seems a little excessive.

Hi guys, I recently just found about this master's degree program since our professor sent out an invitation to apply for the master's program. I double majored in electrical engineering and physics in my school, and so far, I'm trying to decide if I should go for my master's in EE or just do medical physics instead since it seems that the pay is more appealing. I think though, that it only becomes more appealing IF after the program, one lands a residency in radiology oncology. I got curious and found that schools are graduating more MS in this field that there are residency slots...and its evident when one looks at places that offers residency...they're getting 50 to 100 applicants for 1 slot. I'm looking at schools near me, and saw that most of the people who scored the residency are Ph.D with a couple of published papers under their belt....i'm not afraid of a challenge, but I've always been the "worst case scenario" guy. When I do get the degree, which I think is very doable...what are the options when I don't get the residency--which I think, looking at the numbers, is very likely even with an above average gpa... and what is the expected salary of people with medical physics degree with no residency? my question sounds very "materialistic" since i'm looking at this purely on salary stand point..since the subject is interesting and technical that i'm sure i'll like it when i do it...i'm trying to gauge the value in the salary standpoint v. a Master's degree in EE.

>

In addition to MPA positions like previously mentioned, I also know a few students who didn't match do a 1year gap year for medical physics research before reapplying for residencies the following application cycle

>

The expected salary of people with a medphys degree and no residency is tricky to quantify. The AAPM's salary survey has a component measuring a masters degree with no certification, but it looks like they include people who have completed residency, but have simply not passed the ABR part 3. So, this would not answer your question well. Additionally, many MS students find positions in industry, but since you mentioned an interest in radiation oncology, I'll focus my answer around that. I am an MS degree holder who did not match in my first attempt through the match. In these cases, MPA (medical physicist assistant) positions and junior physicist positions would be the next appropriate career for a clinical oriented physicist.

Anecdotally, the salaries I saw and was offered were between 40k and 60k for an MPA, and the junior physicist positions started much higher between 75K and 120K. There did not seem to be much difference in responsibility between the two positions, however, the junior physicist positions were looking for someone who was going to stay longer than ~2 years, I believe with the idea of the junior physicist getting state licensure and working under a DABR for anything they were not qualified for while the MPA positions seemed more willing to accept that the MPA would re-enter the match the following year (In some cases, a pathway to residency was actually built into the MPA position which could be an alternative route as well). As for the concern about the likelihood of matching, the Society of Directors of Academic Medical Physics Program's (SDAMP) [report](<https://www.sdamp.org/documents/2021AnnualGraduateReport.pdf>) in 2021 showed that 78% of MS students who applied were accepted and this number seems to be increasing each year. This might be confounded by students who reapply to the match after gaining additional experience, but, looking at the applications for the upcoming cycle, this isn't that common which might indicate that many students may not reattempt after their first try. Hope this helps.

>>

thanks for the detailed response!

>

Getting a residency is bullshit. Stick with EE

How possible is it for someone in health physics to transition over to medical physics? Can people with health physics education and experience get non-clinical medical physics jobs?

Still learning about the field as I'm not in it myself (yet at least), but I came across a recent thread talking about insurance companies and which ones are a struggle to deal with, and how they often reject the specific plan the clinic comes up with... So just to confirm here - are mp's really the ones that have to deal with the insurance companies? That's incredibly surprising to me...

>

Speaking just from my own experience, which could be wildly different from the average, I am never the one directly dealing with an insurance company. When I worked in a university setting I never had anything to do with billing/insurance at all. When I worked at a cancer center I occasionally would do charging for some services like brachytherapy, but a billing specialist audited and submitted that and dealt with any questions from insurance. Now that I work at a community clinic I still don't do the billing, but I feel like it affects me a lot more. We regularly have patients that I will check a plan and then find

out we need to redo things because insurance didn't actually approve IMRT. Or someone will be supposed to start in a couple days and the dosimetrist hasn't started planning yet because we don't know how many fractions will be approved. Even not being the person that "deals with insurance companies" they are a huge pain and getting worse.

>>

I see. What a pain in the ass LOL Thanks for the response!

>>>

Yeah it is. But it's not really a medical physicist problem as it is a problem for all of healthcare, which we are part of. Every career in the medical field is dealing with increasingly frustrating insurance policies.

Post Title: [Training Tuesday] - Weekly thread for questions about grad school, residency, and general career topics 01/10/2023

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Comments:

I'm currently working on undergrad, and have been researching MP Grad Programs. Is the expiration date of CAMPEP Accreditation for programs a significant factor I should consider?

>

Not typically. Each program has to go through a re-accreditation process periodically, and that's really all that date means. I'm not aware of programs that lose CAMPEP accreditation because of missing the deadline. On CAMPEP's list, there are a variety of little symbols, e.g., star, indicating various programs are in various stages of reaccreditation.

Is it worth it moving to the US/Canada with a medical physics career? I've been working in SE Asia as a clinical medical physicist for 2 years, and my spouse may need to be transferred there for work reasons.

>

There's a lot of personal context that goes into whether it'll be worth it for you (e.g. length of stay, Canada vs US, current education level). As with most medical careers, it's unlikely your clinical certifications will transfer so you'll need to consider the cost of redoing the education/training. Opportunities in industry would be more immediately available, but may be different from your current work. I know a couple people without certification working for medphys consulting services, but I'm not exactly sure what they do. They're not making certified consulting physicist salaries, but they seem to enjoy it.

Hello, I am graduating soon with a Bachelors of Science in Comprehensive Medical Imaging. I am also attempting to minor in physics while I complete my radiography program so that I may apply to grad schools very soon. I was wondering which & how many physics classes I should take to make myself a best of an applicant as possible. I know it varies by each college but I would really appreciate any and all information/tips. So far, I have Electricity & Magnetism, Thermodynamics, Mechanics, and Modern Physics on my to do list. I am not even sure if I would be accepted given my major is not engineering or physics so I am a little worried about this.

>

Generally speaking, CAMPEP-accredited programs will follow CAMPEP requirements (which ultimately help avoid issues down the line for ABR certification). Anything beyond those minimum requirements to apply will serve to supplement your candidacy for the most part. While I'm not fully familiar with your program, it sounds like a strong background to have, particularly if your interests are in imaging/diagnostic medical physics (as opposed to therapy, but I'd still consider that a stronger background than most). Obviously, there are MANY more factors, and I'm not a program director, so take that with a grain of salt. A good example is UPenn's official requirements: >*Minimum of an undergraduate minor in physics or its equivalent: >A minor in physics, required by CAMPEP, is defined as two calculus-based introductory physics courses and at least three upper-division (junior- or senior-level) undergraduate physics courses. Upper-division physics courses include Electricity and Magnetism (preferred), Atomic Physics (preferred), Modern Physics (preferred), Quantum Mechanics (preferred), Classical Mechanics (preferred), Optics, Nuclear Physics, and Heat & Thermodynamics. The advanced physics courses should address theoretical principles from a physics curriculum. Courses that are primarily applied and related to engineering, chemistry, health, or medical physics are not acceptable. >Per the American Board of Radiology (ABR), standards for course acceptability are: 1) the course must appear on an official transcript; 2) the course must be equivalent to a standard 3-credit course; and 3) the course must

have a passing standard. It is recommended that you contact the professor of the course to inquire if you are unsure of whether a course meets these standards, or if you are unsure if the course is considered introductory or upper-division at the undergraduate level as compared to the other physics courses offered at the institution. Massive open online courses (MOOC) such as EdX and Coursera typically do not meet these standards and thus are not acceptable. >Applicants may earn the equivalency of a physics minor at any regionally accredited institution. Transcripts of all courses taken for credit are a requirement of the application. Hope that helps. Also a good idea to look through CAMPEP's official site to familiarize yourself with all the programs and requirements, as they can vary slightly.

>>

Thank you so much for this information it is extremely helpful. imaging/diagnostic medical physics actually is my preferred pathway so this also gives me some hope. Would you recommend a DMP, MSc, or PhD? Which one of these did you do personally?

Post Title: [Training Tuesday] - Weekly thread for questions about grad school, residency, and general career topics 01/17/2023

Post Content: This is the place to ask questions about graduate school, training programs, or general basic career topics. If you are just learning about the field and want to know if it is something you should explore, this thread is probably the correct place for those first few questions on your mind. Examples: * "I majored in Surf Science and Technology in undergrad, is Medical Physics right for me?" * "I can't decide between Biomedical Engineering and Medical Physics..." * "Do Medical Physicists get free CT scans for life?" * "Masters vs. PhD" * "How do I prepare for Residency interviews?"

Comments:

Are residency interviews asking for "an 8 minute presentation on the topic of your choosing" really just code for telling you to talk about your research??

>

No. They want to see you be able to communicate and demonstrate some competence, understanding and interest in the field. It could show your understanding of the clinic or research, whether yours or not. I saw candidates who presented their research, especially PhDs but some masters students, too. I saw a PhD certificate student present a research paper he had read. I talked about some clinical development projects and my masters thesis to show some breadth. My thesis wasn't very deep or complex but I could tie it to clinical applications. Clinically

focused was what I wanted to present myself as, from personal statement to interview to presentation. And all of the programs I applied to were fundamentally clinical training positions, even if they had lots of opportunity for research (so no 3-year research+clinic programs). So. I'd tailor your choice of topic to what you've done, what you'd like to do, what you think you could talk about clearly and what that program is looking for.

>

Pretty much. That's usually the easiest thing for prospective candidates to talk about anyway

>>

Ok cool, thanks. I was like 95% sure but appreciate you removing any doubt!

Post Title: [Training Tuesday] - Weekly thread for questions about grad school, residency, and general career topics 11/29/2022

Post Content: This is the place to ask questions about graduate school, training programs, or general basic career topics. If you are just learning about the field and want to know if it is something you should explore, this thread is probably the correct place for those first few questions on your mind. Examples: * "I majored in Surf Science and Technology in undergrad, is Medical Physics right for me?" * "I can't decide between Biomedical Engineering and Medical Physics..." * "Do Medical Physicists get free CT scans for life?" * "Masters vs. PhD" * "How do I prepare for Residency interviews?"

Comments:

Generally, do you recommend medical physics as a good career path? Are there residencies, jobs? Im in the metro Detroit thanks

Where can I get good sources or books about interaction of radiation with matter and Radiation Dosimetry?

>

Attix is the classic book on this.

Reposting here, should have posted here before Hi physicists! Do you think MPA is more advantageous when it comes to application for residency? (I work in Asia) I recently got an offer for the post of oncology technician. It is a new post in their department, so I believe the duties are like that of MPA. I am currently working as a FSE. If I'm switching to the technician post, I would be taking a salary cut (like a 10% drop). It is

really puzzling and I cannot make a decision. Thank you in advance all irradiators!

>

When I'm evaluating for residency and I see the candidate has worked as an MPA, I typically assume they have a good idea of what it's like to be a medical physicist so in turn they will continue to try their best to finish residency and become board certified (in the US). Now they still have to have other good things on their residency too, but it eliminates most doubts that they will not have their heart set on medical physics

>>

Thank you nutrap! I actually had some shadowing experience so I have a brief understanding about their daily work. Anyway I decided to turn down the offer! Would look for residency position instead.

>

I don't know how things are in Asia but to my knowledge having MPA experience helps with residency generally. I can't comment on the relative weight of each experience since I've never been an FSE.

>>

Thank you for your reply kermathefrog!

So I'm currently doing a masters med phys program and just finished the first semester. And I'd like to know if doing presentations, which accounts for 40 or 50% of module grade prevalent in most masters?

>

12 Weeks 12 Tests(Each Week) 12 HWs 2 coding assignment 2 Exam(Midterm + Final) 12 Reports(TGs) 1200 pages of reading plus 20 hours spent in clinic every week. Multiply all that by 4 (Number of Courses in 1st sem)

>

You will likely be presenting in some fashion your whole career as a medical physicist.

>

It really is up to the professor how they prefer to evaluate. A few I experienced in my program: two exams per semester + participation, no exams + several project-sized practical homeworks + final project, standard 4 exams + regular homeworks + group presentation. Ultimately presentations are an extremely

useful thing to be good at. You learn to express complex ideas in digestible pieces to a broad audience, ideally. Also, currently in my residency, while I am not graded on presentations, they do form a significant portion of my program. I have a 45min long presentation in front of my co-residents and program directors roughly every 4 weeks on relevant topics, plus an hour long presentation for the whole physics department of recent scientific literature that they might be interested in. It can be a lot, but it certainly develops key skills we need to excel as physicists in a clinic.

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>

Have you tried shadowing any medical physicists at an academic institution nearby? They may have some insight.

>

That should be fine. Undergrad research that's strictly medical physics might be kind of uncommon to be honest. I certainly didn't have any labs at my undergrad that I could have joined.

Hello, I am new to this sub. 24 years old, just finished 6 years in the Navy as a nuclear reactor operator, starting BS in physics in January 23. I am considering MS in medical physics (I know, it's pretty early), but have concerns about residency programs that I'm having difficulty finding results on google. Is there still a mass shortage of residency programs compared to recent graduates? As someone with scientific operations experience, does that put me in a better spot when applying for residency programs?

>

If you are considering an MS only and not a PhD try applying to grad schools known for their clinical medical physics programs. I started Medical Physics MS program at 27 and ended up matching to my first choice (although I may not have been my program's first choice). As an evaluator of residency candidates I do put Navy Nucs in high regard for an initial interview which is 75% of the battle. If you get a bunch of interviews then you'll likely get a residency. The numbers for the Match are low (like 60%), but the number of applicants that have no business applying is IMO 20%. Last word of advice, shadow medical physicists before applying to grad school. Make sure you actually enjoy the field. Plus they'll give you insights into which schools are good and may write you a letter of recommendation.

>>

Interesting point about the large of amount of unqualified candidates. Is this mainly people who are quite literally currently ineligible for the ABR certification pathway and such?

>>>

Some ineligible. Some that have a PhD or masters in another field then do a 1 year certificate program but have no idea about the field or did absolutely nothing related to medical physics outside the classes required for the certificate. I'm a little biased against the certificate programs but they can be useful if they go into the clinic and learn about the career they are applying for.

>

The MedPhys Match publishes statistics regarding match rates every year: <https://natmatch.com/medphys/statistics.html> The match rate has seemed to plateau around 60% over the last few years. Depending on who you ask, the percentage of 'acceptable applicants' who match is a more realistic expectation of matching rates for a typical graduate from a CAMPEP program, which improves that percentage considerably. Whether those rates will improve in the future is, unfortunately, hard to predict. I'm also not sure there's a consensus on whether there needs to be more accredited residencies or less matriculating graduate students. Given that, anecdotally, I've heard the job market seems to be an applicants market at the moment (at least on the therapy side) I would put my money on the former. I will say this as an individual with a similar background to you. With a BS in physics (not a BSNET), your relevant work experience from the nuke field, and if you graduate from a clinically oriented masters program with decent matching rates, I think you would be a very competitive candidate. If you publish or have research experience in your application, I would be surprised if you didn't match, assuming at least average LoR's, CV, interviews, etc.

>>

Thanks for the reply! Very helpful. Also, glad to hear you didn't go for the BSNET. Too many nukes take that route because they give you so many credits right away, but end up very limited career-wise.

>

It's certainly a lot better than 2015. I think that the experience will help with your application somewhat but I think what you do during grad school will be more impactful by a lot.

Post Title: [Training Tuesday] - Weekly thread for questions about grad school, residency, and general career topics 11/22/2022

Post Content: This is the place to ask questions about graduate school, training programs, or general basic career topics. If you are just learning about the field and want to know if it is something you should explore, this thread is probably the correct place for those first few questions on your mind. Examples: * "I majored in Surf Science and Technology in undergrad, is Medical Physics right for me?" * "I can't decide between Biomedical Engineering and Medical Physics..." * "Do Medical Physicists get free CT scans for life?" * "Masters vs. PhD" * "How do I prepare for Residency interviews?"

Comments:

Hello med physics reddit, this is my first time posting I'm currently a software developer but considering career changing. I have a BS in biomedical physics and want to know how long it would take to become a working physicist from now? Considering a MS not PhD. Thanks!

>

If you just want a MS you can get it done in 2 years. With the MS you can work as MPA and industry, but you need to go to the 2-3 yrs residency and pass the board exams to be a certified medical physicist

>>

MPA is medical physicist assistant? You can't be a clinical MP with a MS degree? Oh sorry just read you can after being certified

Hi physicists! Do you think MPA is more advantageous when it comes to application for residency? (I work in Asia) I recently got an offer for the post of oncology technician. It is a new post in their department, so I believe the duties are like that of MPA. I am currently working as a FSE. If I'm switching to the technician post, I would be taking a salary cut (like a 10% drop). It is really puzzling and I cannot make a decision. Appreciate if you could give me some insights! Thank you!

****Medical Physicists of reddit, do you have any suggestions for good books that can give me a general overview of the Medical Physics field?**** I already have Khan (for a general book), Paganetti (for proton therapy) and "Review of Radiation Oncology Physics: A Handbook for Teachers and Students" by Podgorsak. If there is any book that focused on how the different types of radiation delivery systems work, it would be great: (IMRT, VMAT, proton therapy,...); Pencil Beam Scanning vs Passive scattering

.... I started a PhD in Medical Physics one year ago and I don't have any problems with the theoretical (physics) part of the work, as I have a MSc. in Physics Engineering. However, everything that is related to the radiation delivery systems is pretty much unknown to me. Thank you for your suggestions. :)

>

Those sound like good texts to start with, just wondering do you have a radiation therapy class that goes over this too? The instructor ought to know some manuscripts, particularly if there are newer technologies that you need/want to learn about.

>>

Thank you for your reply! To answer your question, I don't. That's essentially my problem. Since in my university the Medical Physics field it's still being implemented, the courses that I'm able to attend are almost entirely unrelated to Medical Physics. These books were recommended to me by colleagues from the research center where I'm doing my PhD. I just asked to see if the people from reddit had any other recommendations, specially because I find the Podgorsak to be not that great...

I am a first year MS student, when do you normally take the ABR/when did you start studying?

>

Most seem to spend 2-3 months studying. The timeline is somewhat set by the ABR and when they decide to hold the exams; it has been shuffled around a bit (stupidly) in the last 2 years or so.

>>

I've seen January, which would make sense (between 3rd and 4th semester and before residency interviews). Hopefully they stay consistent with that. Also, any idea of when parts 2 and 3 are taken relative to the residency timeline?

>>>

It's not going to be January anymore, I think that 2023 is the last January administration, should go back to August in the future ([<https://www.theabr.org/medical-physics/calendar>] (<https://www.theabr.org/medical-physics/calendar>)). Like it said it was a stupid change to begin with.

>>>>

Ah I see! Thank you

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>

Not US, but I know Canadian physicists (so also CAMPEP accredited) that have moved from there to Australia. So it's certainly possible, but not sure on the exact process. Since there are so many different accreditation organizations I think it would be very country dependent whether it was possible, but I know being CAMPEP accredited will help a lot, as well as having more experience in the field previously. My best advice would be to reach out to the professional bodies in the countries you're interested in to discuss what the process would be to being accredited with in that country. And if it's possible, look for work in those countries.

Semi-reposting, since I had no replies in last week's thread... I am applying to grad schools for medical physics, 3 of them, all in the US (I'm in the US). One of my recommenders is a professor at the university where I got my undergrad physics degree this spring and we were on quite good terms. He has asked me to template my own letter of recommendation for him to add to and edit. I imagine he is quite busy because he runs a significant chunk of the physics research programs there, as well as teaching ALL of the junior and senior undergrad labs plus most if not all the grad-level ones, AND English is not his first language (he tends to struggle with grammar a bit despite being absolutely brilliant, and he's always struck me as being a bit embarrassed/frustrated that it's a barrier for him, but is still a fantastic and passionate teacher. He also knows my other bachelors degree is in communication). What are skills or points to touch on that would be good to include in my template? I have not been able to do research yet but my academic performance was very good (3.87 GPA) and my labs and reports were considered excellent. Obviously I'm not going to tell them I have skills I don't have (for instance, my in-person presentations are... a bit lackluster, due to anxiety, so I wouldn't put that as one of my skills), but I don't really even know from what angle to approach this.

>

When I have to write these for my letter writers, I typically break it up into three sections. The first section I focus on who is recommending me ("I am so and so from this university with these qualifications and I'm teaching these courses/doing this research")(I take this information primarily from the "about the faculty" that most places have if I don't otherwise know it). The second section I follow up with information about the program/workplace you are at ("XYZ University's program is accredited by this or that certifying body with a well-known track record for...")(Again, taken from the "program's about" page). The last section is where I will talk about myself and the relationship with my letter writer. For a professor, I would focus on my academic performance in the class and mention any projects you may have worked on that could show soft skills (writing ability, interpersonal skills). I don't think it's out of the question at this point to mention any organizations or extracurricular's you may be involved in as well ("prep\the_\ion_cannon is a well-

rounded student who enjoys prepping ion cannons and hiking in their free time"). I followed this format at several points in my career (including undergrad) and generally most letter writers have only made minor corrections or added more to the last section.

>

Strong work ethic and leadership stuff maybe? If these are phd programs or research heavy MS programs then maybe he can comment on the work you've done with that?

What is the role of a medical physics demonstrator at a radiotherapy clinic?if somebody can explain.

Post Title: [Training Tuesday] - Weekly thread for questions about grad school, residency, and general career topics 11/15/2022

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What are MS graduate programs that require job Shadowing to incoming undergraduate application instead of research?

>

No programs require shadowing as a part of your application. I'd say that any program would value relevant research experience over shadowing.

Hi everyone, I really want to pursue medical physics but have a few concerns/questions, I'll try to keep it short -Im 25, have a BS in Exercise Science and am pursuing a BS in Radiation Therapy -I have only taken introductory physics 1 and 2 (not calc based) and calculus 1, no other physics courses -Im wondering the best course of action since I believe you need the equivalent of a physics minor to be considered -Should I just chip away at the prerequisites each semester? -What specific courses are most important and have the highest carryover? -Lastly, will I be able to still work as a radiation therapist while going for my masters? (I know for residency that's not an option) Any advice is greatly appreciated!!!

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>>

I appreciate the advice! I've been speaking to a lot of the higher ups at the clinic, and I'm weighing the pros and cons of med school vs med physics. Because as you said, I don't have that engineering background and I do like the biology (memorization). And now I realize medical physics will be just as long if not longer than med school in total

>>>

Physicians definitely have the longer training duration. Question is do you actually want to be a doctor in this day and age (I read r/residency every once in a while for fun). The answer for you could be yes, but the answer for me was definitely no; medical physics is my path for sure (used to be premed in college).

>

Are you set on doing medical physics or RT? It'll take a lot of effort to change directions if you have only taken non-calc based physics courses so far.

>>

Definitely medical physics, I understand I have a lot of ground to make up. This is a long term plan. I know that by the time I'm 40 I'll wish I went for medical physics. I plan on working as an RT while I take prerequisites

>>>

OK if you're up for the increased workload of doing school while working you can certainly do physics prerequisites at a local college. This generally amounts to upper division mechanics, E&M, modern physics (some places require QM), and the math classes associated with all of these. A lot of places also require a computer programming class. If you plan on working while doing your masters, Georgia Tech's online masters in medical physics may be a good option for you. I am in my last year of the program while working as a physics assistant the whole time.

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>

There's certainly no harm (aside from increased application fees) to applying to more. It's really hard to gauge PhD acceptance chances but it sounds like you have a solid footing.

>>

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>>>

No problem, good luck with your apps!

GPA in undergrad in order to get into a CAMPEP med phys school? And what's the typical cost for grad school?

Hello all, I'm currently a clinical lab technologist interested in the medical physics field. Unfortunately I don't have a background in physics - I knew I should've double majored :(and my bachelors is in biology. What's the quickest way for me to get my foot through the door? Is there a masters track I can take?

>

Yeah, you can definitely do a masters in MP, problem is most require that you have done either a full physics major/minor, and some you need some classes. Each individual institution has their requirements in their website

How far can a PhD get you in a clinical setting compared to a master's?

>

The same. Supervisor/leadership roles may be restricted to PhD though.

I just found out through the grapevine that I'm not on the interview list for my dream job. Thought it was a perfect fit, so getting this rejection was a huge blow. Didn't even get a notification from HR. I know resiliency and grit are important,

but man this really hurts. Time to mope for a day and then get back at it.

>

I'm sorry to hear that. I'm sure that different opportunity will come up in the future.

I am a CMD helping to teach a Dosimetry class to Radiation Therapy students. This class needs major fixes/updates and I'm looking for feedback/ideas.. From your experience and perspective as physicists in Radiation oncology, what are some ideas/concepts/etc. that you wish the practicing therapists had a greater understanding of regarding treatment planning/clinical dosimetry.

Post Title: [Training Tuesday] - Weekly thread for questions about grad school, residency, and general career topics 12/06/2022

Post Content: This is the place to ask questions about graduate school, training programs, or general basic career topics. If you are just learning about the field and want to know if it is something you should explore, this thread is probably the correct place for those first few questions on your mind. Examples: * "I majored in Surf Science and Technology in undergrad, is Medical Physics right for me?" * "I can't decide between Biomedical Engineering and Medical Physics..." * "Do Medical Physicists get free CT scans for life?" * "Masters vs. PhD" * "How do I prepare for Residency interviews?"

Comments:

How's everyone's Part 1 studying going? I'll start: It hasn't.

I am curious about centers that have installed a single room proton machine. How is it going?

>

This is one of those rare times when this might be better posted on the main board instead of the career/grad school sticky. Edit: I locked this comment because u/_Shmall_ has posted this question to the main board. Please go there to answer this question.

>>

Cool! Thanks

Finally finishing my journey in the university by a dissertation, yet I lack the ideas for a proper subject for it. Something new and thorough, either in radiotherapy, brachytherapy, treatment

planning systems, quality control of linacs or CT MRI etc
Anything is very welcome, thank you in advance :D Also happy to answer any questions you have about the field.

>

Two words: FLASH

>>

Two more words for u/nutrap: Where in US? In terms of Medical Physics and not engineering. What I am getting at is the clinical application, not building the actual thing.

>>

Do you mean flash radiotherapy? The high dosage treatment plan ?

>>>

Yes. [Flash](<https://www.ncbi.nlm.nih.gov/pmc/articles/PMC8185194/>). I don't know if it meets both your criteria. It is gaining popularity and I have seen increasing talks on it over the last few years. I don't know how thorough you want the field to be. It may be hard to find the right institutions to do research with especially in the US.

>>>>

Yeah my dissertation is going to focus on practical and clinical examples instead of theory so since not alot of clinics use FLASH despite the concept being very interesting I might have issues proving it's worth it

For those of you applying to residency programs & wondering why Landauer Medical Physics wasn't on MP-RAP, that has been solved (sort of). Landauer sold its therapy division to Aspekt Solutions in October, including the residency. Aspekt has been working with CAMPEP to change the ownership of the residency. The decision to post on MP-RAP prior to formal change of ownership was done last week. So if you've got an application for Landauer in Constantinople, Aspekt will be waiting in Istanbul.

>

Even old New York was once New Amsterdam.

Post Title: [Training Tuesday] - Weekly thread for questions about grad school, residency, and general career topics 11/01/2022

Post Content: This is the place to ask questions about graduate school, training programs, or general basic career topics. If you are just learning about the field and want to know if it is

something you should explore, this thread is probably the correct place for those first few questions on your mind. Examples: * "I majored in Surf Science and Technology in undergrad, is Medical Physics right for me?" * "I can't decide between Biomedical Engineering and Medical Physics..." * "Do Medical Physicists get free CT scans for life?" * "Masters vs. PhD" * "How do I prepare for Residency interviews?"

Comments:

Hi everyone, I really want to pursue medical physics but have a few concerns/questions, I'll try to keep it short -Im 25, have a BS in Exercise Science and am pursuing a BS in Radiation Therapy -I have only taken introductory physics 1 and 2 (not calc based) and calculus 1, no other physics courses -Im wondering the best course of action since I believe you need the equivalent of a physics minor to be considered -Should I just chip away at the prerequisites each semester? -Lastly, will I be able to still work as a radiation therapist while going for my masters? (I know for residency that's not an option) Any advice is greatly appreciated!!!

I'm an undergraduate student in America set on medical physics. Is it worth it for me to do a PhD instead of a master's if I'm planning to work as a clinical physicist?

>

Depends. PhDs do have higher match rates, but MS isn't bad at ~60-70% (the figure isn't removing people who have no business applying such as those from entirely different fields from non-CAMPEP programs, so the true figure is likely higher). That said, you absolutely do NOT need a PhD to get into residency. My entire cohort of MS graduates matched. Half of my current residency cohort is MS and those that just graduated were all MS. I've had multiple program directors explicitly tell me they prefer MS applicants since they tend to hit the ground running due to the typically more clinically-focused programs. Some programs are actually PhD or MS-only even. Get into a strong, reputable program (LSU, UKentucky, Penn, Wayne State, among a few others mentioned in this sub) with good clinical experience (VERY key), do well, learn your stuff well, get as much exposure as you can, interview well, etc. I'd be shocked if you didn't into a decent program. I wouldn't call myself a particularly strong applicant. I just had the experience from a decently strong program and interviewed well. Landed at a great place where I feel Im learning a LOT and love my coworkers and mentors. Ultimately, it'll be your own unique experience that may or may not be similar to ours, so weigh the options. Hope this helps.

>

You won't get a residency unless you are very well connected. It is simply too saturated with extremely overqualified candidates to the point where the position is not entry level for MS people.

What is the difference between MS+ Residency VS DMP?

>

DMP doesn't require you to go through the process of finding a residency (which for master's students can be competitive). The major downside is that you have to pay for your residency if you do a DMP. In an MS, you only have to pay for the master's degree, then you get paid for residency. All in all MS + residency is more affordable. Otherwise I wouldn't think of the degrees as that different, look into specific programs and see if they fit your needs, DMP programs will give information about how they think their degree stands out from a master's (like more of a clinical focus). In my honest opinion, having to pay for residency doesn't sound great, but on the other hand I hear it can be hard to get a residency with a Master's.

>>

Also note that while residency slots are increasing each year, DMP programs as a whole are not (1 or 2 have actually shut down in the past few years if I'm not mistaken).

Advice I'm currently taking Psychology as my pre-med course, and still in my freshman year. I'm planning to switch to Med Tech if it'll make me possibly take Graduate Degree in Medical Physics. There is no Physics or RadTech Major near my hometown so I have no other choices. I've done my research and I couldn't find any posts regarding this question. Do you have any other options before I do action? And I'm still in my First Sem Midterms. Please help, Respect & TYIA

>

You have to give us more background, as scienceplz said. However, just finish all courses this semester. No need to drop everything. If you are in the US, pretty sure the courses in first semester are general and you can use them to fulfill electives.

>>

Was Medtech good for alternatives?

>>>

I guess you'll have to ask your college, but I am assuming you are doing something like Algebra I, Psychology I, English composition...general stuff. I mean, you can finish this semester. More harm will be done if you drop the classes mid semester: if they let you join other classes, you have to catch

up half a semester and that is tough. If they don't let you join other classes, then maybe you just lose your tuition and don't get any credits. I read you are from the Philippines. If you wanna go to the US or Canada, think about careers that grant a work visa or further studies. Being a technologist might not be worthy of a work visa (I was an Nuc Med technologist once and I had to come back to do MedPhys so I could be sponsored), since there are many people with that degree. Also being a technologist in a certain area might not have a path towards more education (cannot continue to MS or PhD). For example, I had to go back to school to get all my physics classes before enrolling in MP master's degree. I couldn't do it with my technologist degree. And even if you become a technologist graduated in the US or in Canada, you might have to go back home afterwards because no one will want to sponsor a foreign person when there are so many Americans/Canadians with the same degree waiting to be hired. Sponsoring costs money to employers. So if you come back, better be for some graduate degree desirable for employers. Do some research on which professions would help you with immigration. I know this is tough to hear, but it is something I wish someone had told me when I was in undergrad. You must have some profession that is considered a specialty profession: scientist, mathematician, biologist, MD, etc (medical physics is good too). Check out medical technology. I have heard some people coming for masters in medical technology (as in, medical technology, microbiology, laboratorist) and then going for MS, PhD and becoming scientists...so it depends. Then you could go to canada or US for a job or graduate education and then a job.

>>>>

Last question, sorry to bother you but I just wanted to clear out my mind. Do you think Universities will consider it if I'll get a certificate from online courses like Harvard, Stanford, etc etc? Big thanks to you

>>>>>

As kerma said, for grad admissions they want all of that. For furthering your education and being able to get admitted for graduate school in canada or us you dont want a certificate, you want a solid bachelor's degree. Many careers that are terminal (do not offer MS or PhD) are offered in certificates. You might be better off finishing your semester now with good grades, so you dont waste it, and talking to an academic counselor in the meantime for next semester. You could continue on getting your MD and then traveling for residency or getting degrees in STEM with a clear path to grad school. I know it feels like a lot but you are very early on this. Take it step by step.

>>>>>

Probably not for grad admissions. They want to see high GPA, good LoRs, and relevant research/work experience. Another thing to pay

attention to is your personal statement; writing and communicating well is crucial for success in academia and medicine, and your personal statement should reflect both your communication skills and your motivation to pursue this career path.

>>>>>

So my only option is to take another undergrad degree or proceed with the course I am taking/switch courses? :((

>>>>>>

It's still not clear to me what your primary major is, and where you are completing it.

>

Are you studying in the US or elsewhere? What are your ultimate goals? You're looking to get a graduate degree in medical physics following graduation from your undergrad? I'm just clarifying because I saw premed thrown in there

>>

I live here in the Philippines, planning to move to Canada after graduation to continue my studying.

>>>

In another comment on /r/premed you said "Medical School for Medical Physics" so I just want to clarify if your career goal is to become a physician (In Canada that would be an MD Doctor of Medicine) or a clinical medical physicist (MSc or PhD in Medical Physics). If the answer is physician then you'll have better luck asking on other subreddits but generally medical school is fairly forgiving in terms of undergraduate major. However, if the answer is clinical medical physicist you'll want at minimum a minor in physics as to practice clinically in North America you'll programs which are CAMPEP accredited and that is their requirement. The specific requirement from the CAMPEP documents is "Students entering a medical physics graduate educational program shall have a strong foundation in basic physics. This shall be demonstrated either by an undergraduate or graduate degree in physics, or by a degree in an engineering discipline or another of the physical sciences and with coursework that is the equivalent of a minor in physics (i.e., one that includes at least three upper-level undergraduate physics courses that would be required for a physics major)."

>>>>

Here's a sneak peek of /r/premed using the [top posts](<https://np.reddit.com/r/premed/top/?sort=top&t=year>) of the year! \#1: [After 61 months, it was time for the big chop! I've always told

people I would cut it once I got into medical school, so here I am fulfilling that promise! 30" of hair is going towards Children with Hair Loss. I may go for a mullet next year, but we'll see!]
(<https://www.reddit.com/gallery/w5eymg>) | [144 comments](https://np.reddit.com/r/premed/comments/w5eymg/after_61_months_it_was_time_for_the_big_chop_ive/) \#2: [RIP to the girl in my interview this morning](https://np.reddit.com/r/premed/comments/rim6po/rip_to_the_girl_in_my_interview_this_morning/) \#3: [This is probably how ADCOM determines applicants fate](<https://v.redd.it/vrwijm1y6mr81>) | [39 comments](https://np.reddit.com/r/premed/comments/twjf06/this_is_probably_how_adcom_determines_applicants/) ---- ^^I'm ^^a ^^bot, ^^beep ^^boop ^^| ^^Downvote ^^to ^^remove ^^| ^^[Contact] (<https://www.reddit.com/message/compose/?to=sneakpeekbot>) ^^| ^^[Info](<https://np.reddit.com/r/sneakpeekbot/>) ^^| ^^[Opt-out] (https://np.reddit.com/r/sneakpeekbot/comments/o8wk1r/blacklist_ix/) ^^| ^^[GitHub](<https://github.com/ghnr/sneakpeekbot>)

Post Title: [Training Tuesday] - Weekly thread for questions about grad school, residency, and general career topics 10/11/2022

Post Content: This is the place to ask questions about graduate school, training programs, or general basic career topics. If you are just learning about the field and want to know if it is something you should explore, this thread is probably the correct place for those first few questions on your mind. Examples: * "I majored in Surf Science and Technology in undergrad, is Medical Physics right for me?" * "I can't decide between Biomedical Engineering and Medical Physics..." * "Do Medical Physicists get free CT scans for life?" * "Masters vs. PhD" * "How do I prepare for Residency interviews?"

Comments:

I have a PhD in regular physics and have worked in academia and industry for about 6 years. Is it still possible for me to get into medical physics? Is it just a question of finding a place that will allow me to do a "postdoc" for a year? or do I have to do 4 years of med school? Im guessing this isnt something that can be just done online. It sounds like at some point id also take an ABR test to become certified? any advice/resources would be appreciated.

>

You're mistaking medical physics training with physician training. Here is a link in the sidebar that explains the training pathways: [<http://www.sdampp.org/documents/SDAMPPStudentGuideToAMedicalPhysicsCareer.pdf>](<http://www.sdampp.org/documents/>)

SDAMPPStudentGuideToAMedicalPhysicsCareer.pdf). To answer your question, yes you can enter medical physics if you have a non-medical physics PhD, you can do a graduate certificate program, which will basically encompass just the didactic portion of a CAMPEP master's program. Certificate programs are listed here: <https://www.campep.org/campeplstcert.asp>. I personally know of one person who did the UCLA certificate online while working in a different state, and they are a first year resident at a therapy program now. I do not know about other online options; check the websites for more information.

>>

thanks! is it hard to find a residency? I live next to a mid-sized city

>>>

The list of residency programs is here: <https://www.campep.org/campeplstres.asp>. Consensus seems to be that it is good to apply widely for residencies, so you will probably need to move for residency. Having a PhD helps because several are PhD only and PhD holders can have an edge on MS holders in some cases.

>>>>

So it looks like what I currently need is a 1 year didactic course for the graduate certificate. Unfortunately whenever I google that, I end up at 4-6 year universities. Any idea where I can find an online school for this material?

>>>>>

<https://www.campep.org/campeplstcert.asp> Same website as before. Some certificate programs might be online, just check their websites. If you're seriously considering this field get acquainted everything in the Guide to a medical physics career link in the sidebar.

Astrophysics major here, considering staying 1 extra quarter to get a bachelors in math as well, as anyone done something similar? Could it potentially hurt my grad application if they think I'm too focused on something in academia or a separate more math-intensive field altogether? (For reference, I'm extremely interested in the MP field and would want to do clinical)

>

I think you're overthinking this. I don't think that it would be viewed negatively to take an extra semester for another major/minor (I did the same for a bio minor). But it also won't make or

break your application either. Have good grades, strong LoRs, maybe a bit of research, and in your personal statement speak intelligently about why you want to be a clinical physicist and I think you'll do fine.

>>

Thanks for the response! We've actually chatted before, and unfortunately I'm the guy who mentioned before that he couldn't find any research opportunities for whatever reason (frustrating, but everyone around me is scrounging for positions so lots are in the same boat), and my only real idea now is to simply shadow a MP, but other than that I don't really know what to do to strengthen a potential phd application (at this point I'm starting to think I should apply to MS only and *maybe* apply for PhD after the fact, since Ms is less competitive and I'm still starving for research).

>>>

I'm sorry to hear that you're having a hard time finding research opportunities. This has been discussed in the subreddit before but generally opinion regarding a PhD is to only do it if you really want the PhD itself and to have a shot at a faculty position later on, and not just to increase your chances at the match. Still, my above advice applies to both MS and PhD applications alike.

I was a high school teacher (AP Calc & AP Physics) between undergrad and deciding to go to grad school. Do you think my master's in education is something I should put on my CV when applying for residency or is it just wasting space?

>

I actually did the same thing, MEd → high school physics teacher → MS medical physics → med phys match. It was a helpful conversation point and was only a positive during all my interviews.

>>

Oh wow. There's hope for me yet!

>

Probably wouldn't hurt. One component of the job is teaching and education, especially if you end up at an academic institution

How do I go about shadowing a MP? Is it as simple as calling the nearby oncology center and asking to speak to their physicist about shadowing at some point?

>

I searched LinkedIn for medical physicists in my area and cold messaged some. Introduced myself and explained that I was interested in finding shadowing opportunities. I was able to find one physicist to shadow that way and had a handful of fruitful conversations with others. That's another route you could pursue.

>

That is one way. You also may look on their website to see if it lists their faculty and send them an email. Or you could see if there are any local physics groups independent of a specific hospital that you can call or email.

Undergrad senior here, I got a D+ in classical mechanics. Can I still get into a medical physics grad program? My school doesn't allow grade replacements, but I can take the class over if I want. My overall GPA is still pretty decent (3.5), and I have some research experience in cosmology. Does CM even have a huge role in MP? Is there still a chance for me to get into a MS program? Thanks.

>

While my experience is unique to me and should be taken a grain of salt: I **failed** a few classes (partial DEs, differential geometry, a semester of E&M that I eventually retook and got an A in, quite a few others Cs; my overall GPA was a 3.33ish) and was still accepted into my top three choices. Mind you, I supplemented in many other ways. I was a non-traditional applicant who spent over a year in finance, I had about a years experience in solidstate physics research (despite my interest in cosmology) with no publications but my work helped get the lab funding for a future position, I had shadowed a local physicist to get an idea of the career (which showed interest and that I knew more about the career than "we make decent money"). I'm also latino and I'm sure that likely played a role. I also interview somewhat well (not amazing). Hell, I eventually even matched. Point is, you absolutely have a chance, but you should absolutely find ways to show you're more than your grades. Also, even if you didn't have a GPA issue, find concrete ways to demonstrate genuine interest in the field. We are literally responsible for the safety and effective delivery of life-saving treatment of patients. Program directors want to make sure you know that you're genuinely interested in this and going to be a safe and grounded physicist, for the sake of future patients. Also, no, cosmology doesn't play much of a role at all. There are aspects of what you learn in cosmology that **might** be useful as tools, but that's few and far in between and they certainly aren't vital.

>>

Thank you for this reply. Gives me some hope! I think I will spend some time shadowing a MP, or at least doing something

physics-related, to show I'm more than some grades. Also, sorry for the confusion, by CM I meant classical mechanics (the class I semi failed). Would admissions teams care a ton about this class? I'd imagine they would care more about classes like EM, optics, modern physics?

>>>

It's hard to say since I've never seen the admissions process from the inside. However, I will say that one of the classes I got a C in was actually the second semester of classical mechanics sooo :). Ultimately, this field isn't hyper-focused on in-depth physics once you're passed a certain point. The intuition you gain from that knowledge is absolutely useful because we're applying those concepts, but I can't even remember the last time I solved any CM/QM/EM problem.

>

You're probably okay as the GPA is more what people will focus on instead of the individual courses. But if you are even slightly worried about it, and it's available, you could try taking it again so if you're asked about it on your interviews you can mention how you are trying to improve the grade.

Can you take Part1 next year without going into residency? I have seen having enrolled in a Residency as a requirement. Can someone clear this out?

>

<https://www.theabr.org/medical-physics/initial-certification/part-1-exam/requirements-application>

>>

Looks like that is one of 5 options you can use, but either of the other 4 will suffice. You only need one.

Do medical physicists get to where the white lab coats?

>

I wear mine when the joint commission surveyors are here and occasionally when I talk to patients to discuss their radiation dose.

>

I do for brachy when I'm running around the hospital due to a lack of a brachy suite.

>

We were all issued one at work

>

If they want to, sure. Usually not required

Post Title: [Training Tuesday] - Weekly thread for questions about grad school, residency, and general career topics 11/08/2022

Post Content: This is the place to ask questions about graduate school, training programs, or general basic career topics. If you are just learning about the field and want to know if it is something you should explore, this thread is probably the correct place for those first few questions on your mind. Examples: * "I majored in Surf Science and Technology in undergrad, is Medical Physics right for me?" * "I can't decide between Biomedical Engineering and Medical Physics..." * "Do Medical Physicists get free CT scans for life?" * "Masters vs. PhD" * "How do I prepare for Residency interviews?"

Comments:

Is a master degree specifically on MP the best path if one wants to get into the field? Or is it better to just study nuclear physics, as one possibly gets more breadth of physics in such a program? I'm just feeling that it would be pretty bizarre to go and study nuclear physics and then apply for an MP position without ever having seen or studied a hospital LINAC up close, without having studied any of the concrete medical subjects which are important for MP, or without having done any internship (which is included in a program which I'm currently looking at, from KU Leuven in Belgium) On the other side of the coin, would studying MP limit yourself in terms of physics job possibilities outside of MP?

Through a long series of complicated circumstances, I am currently getting a dual masters degree in Dosimetry (accredited) and Medical Physics (non-accredited) and am trying to figure out what some possible job opportunities/board certifications I might have in the future are. My bachelors is in Physics with a math minor. Has anyone encountered someone who has done something like this? Or do you have any suggestions for internship concentrations/points of interest I might want to look at?

MS Kentucky VS MS LSU VS MS Vanderbilt 1- clinical experience provided 2- Financial support 3- the cost of living

>

1-UK,LSU,Vandy (but all very good) 2-LSU,UK (don't know a thing about Vandy financial support) 3)UK/LSU, Vandy (Nashville is more expensive to live than the other two) I think LSU might be free for most students (I could be wrong). UK some students can get teaching jobs in the physics department if it's available and the

medphys is qualified to teach physics to undergrads. All three are good schools very similar to each other. I'd just go to whichever one you like best as all 3 are held in high regards with clinical medical physicists.

I have a few questions I will be graduating in Spring 2024 with a Dual Degree in Physics & Biochemistry. So I had several questions about courses and general admissions requirements since this is my main concern: 1. What is the general admissions GPA requirement? I estimate that I will have around a 3.3 GPA by the time of graduation. This, along with research and EMT Training will be the key things on my application, along with recommendation letters from Biochemists/Physicists/Engineers. 2. How does EMT Training look for these programs? 3. I've also been debating on elective coursework for my Physics Degree, given there's choices involved with this. I was debating on the following classes: Mechanics II (Lagrangian, Two-Body Central Force, Rigid Body, Hamiltonian, etc), Condensed Matter, Optics. I have other classes picked out that I technically have to do, but I was debating on taking those courses specifically as extra. 4. Also, what is the recommended amount of programming courses to take? Thank you for anyone who responds. I am trying to plan out my upcoming semesters but I don't know what exactly to do. I had read a blog by a Medical Physicist about what it is like working the job, but I don't have any resources that tell me exactly what I should focus on.

>

You sound a lot like me, my primary major was biochemistry, and my second major was physics (biophysics concentration). 1. Agree with Ptch that the higher the better. It's very difficult to give "cutoff" estimates since it varies between programs a lot. High grades in upper division physics will be very good for you. 2. I don't think that EMT experience will add much to your application (I didn't add mine when I applied). However, if it helps you speak intelligently about why you want to become a medical physicist in your PS then go for it. 3. I'd take mechanics II because I think a lot of programs ask for upper level mechanics, E&M, and modern physics as required undergrad courses for admission. The others sound fine if you still need physics credits and time, though. 4. Some programs specifically require a programming course. 1 is probably enough tbh. Just curious, what blog are you talking about? I'm interested in reading it as well.

>>

It's a blog someone had posted on Quora a while back, but I lost track of it a while back. I had it saved somewhere, but haven't been able to find it. I will also take a look into those classes, I was never a fan of Mechanics topics so I've been trying to focus on other studies. Thank you for the feedback however, it was insightful.

>

I would say that you should take whichever classes you can do well in. Depending on the program and if you want to do PhD/Masters, you'll probably want to get it as high as possible since 3.3 is on the low end for PhDs, and committees will put a significant amount of weight on it. As for more info, feel free to email professors/grad students in medical physics. My DMs are open if you want to chat, and I know UCLA, UChicago, and Duke have regular info sessions for potential applicants. Don't worry about starting the training now, that is what grad school is for. Worry about grades and talking to medical physicists to get a good idea of the career and the paths you can do.

>>

As for the GPA aspect, do you think doing well in higher physics courses would serve me better? Also would doing good on the Physics GRE help?

>>>

Physics GRE I believe for many programs is optional now, but if you do well, it does not hurt to send the scores in. And also yes, doing well in higher physics courses would be great! For example, getting a B in Mechanics I/E&M I that you would take in first or second year, and then getting an A in Mechanics II/E&M II that you would take towards senior year would show the committee that you can do well in tougher classes and that those first/second year grades don't need to be weighted as heavily. If you're confident, I would recommend taking tougher classes (and doing well in them) that are higher-level than other classes you have taken and may have not done well in. So like Mechanics II, Quantum II, Advanced E&M, or whatever flavor of those your program has.

Does anybody know much about health physics as distinct from medical physics? I have a general idea, but I'm less aware of all its career options. Is it possible to enter that field with only a bachelors degree?

>

This website should help with regards to HP certification at least: <https://www.aahp-abhp.org/abhp/home>

>

I know of a guy who got an HP bachelors degree and now works for a nuclear power plant. He got this job mostly because a friend put a good word in for him (networking). Depending on what you're going for a bachelors might be too much or not enough. If you just want to be a radiation protection technician at a plant a

bachelors should definitely be enough but I heard of some community colleges who give you enough training and certification to enter that career. If you want the title of "health physicist" though you are probably going to need very good networking skills or grad school. Medical physics, in my opinion, is like a subfield of health physics. Medical physics is health physics applied specifically to hospital/medical use such as being the hospitals dosimetrist. Health physics does touch up a lot on dosimetry but the class is more general and not specifically for hospital/medical field. Health physics also encompasses things like environmental protection, which some graduates go and work for things like the USEPA or USNRC. Hopefully others can also comment on what they think and if they agree or disagree with me. I was honestly really split between grad school for the two but what put me over the edge was having to do a residency after grad school and how HP is more broad and can be used in more areas than MP. edit: specific job title differences could be Resident Dosimetrist for MP but HP jobs can be health physics for a nuke plant or Radiation Safety Officer for a national lab

Post Title: [Training Tuesday] - Weekly thread for questions about grad school, residency, and general career topics 10/18/2022

Post Content: This is the place to ask questions about graduate school, training programs, or general basic career topics. If you are just learning about the field and want to know if it is something you should explore, this thread is probably the correct place for those first few questions on your mind. Examples: * "I majored in Surf Science and Technology in undergrad, is Medical Physics right for me?" * "I can't decide between Biomedical Engineering and Medical Physics..." * "Do Medical Physicists get free CT scans for life?" * "Masters vs. PhD" * "How do I prepare for Residency interviews?"

Comments:

Is it okay in doing a residency first and then applying for a phd after? And during the residency, will I be knowledgeable in doing the abr tests?

>

You can do residency then PhD, but most don't. Residency is all about preparing you for ABR part II and III (more than PhD, which focuses on research more than clinical medphys). Additionally, with a MS and Residency you can enter the workforce making 120-150k year even without the ABR certification (you should be on track of getting it tho), so I believe it wouldn't be very "smart" to leave a stable/high paying job to do a 4yr PhD where, even if you get paid, it's on the ~30K year. PhD is good for increasing chances of getting a residency and to work as professor in academic institutions, but really won't make you

more knowledgeable on ABR tests, and won't increase your salary all that much (as shown in AAPM salary surveys).

What do I need to be medical physics assistant in the US? Do I need to have MS Degree from CAMPEP or BS physics would be enough for this position?

>

It depends by position, but a BS can work.

Applying to residency soon. Does the "reputation" of a residency name brand matter? I've only applied to college and grad school, where I've thought about that among other things before. If so, how do I figure out what residencies have strong "name brands" in this field. If not, what factors are more important in picking a place. Importantly, I'm by no means only considering the reputation of a residency institute, but all of the other information about each program seems to be widely available.

>

[deleted]

>>

Why?

>>>

Just so you know this person has an axe to grind against ECU. ECU isn't the biggest name out there in medical physics but a quick search of the CAMPEP data shows that multiple ECU alum have applied to residencies and gotten in (<https://www.campep.org/PublicDisclosure.asp>). This includes one current imaging resident that I spoke to personally at AAPM this year.

>

At the end of the day, residency is about finding a good fit for you as much as it is obtaining a position at all. I think anyone coming from a CAMPEP accredited residency will do just fine obtaining a job, so I wouldn't worry too much about program reputation - each program has its strengths and weaknesses, as you'll come to find during interviews. Just focus on what you want out of your residency training and what would be a good fit for you!

How optimistic are physicists about the career field moving forward? With vaccines and other methods becoming better and better, is there still a positive outlook of necessity of radiation therapy in 10 years?

>

We will absolutely need medical physicists, and don't forget imaging physicists either (medical physics is not just radiation therapy). I don't see vaccines having a significant impact on our field tbh.

>>

Hi Kerma! Honestly I'm a thousand times more interested in radiation therapy, but can you explain why you don't think successful vaccines wouldn't have any significant effect on the field of physicists (let's not even include diagnostic and just talk about therapy). Is it because vaccines and radiation are used in drastically different scenarios to the point where they're virtually independent of each other or what?

>>>

Radiation therapy is almost always treating some sort of cancer. and there is going to be a ton of cancer to treat in the future. I am aware of things like the HPV vaccine and its effectiveness in preventing cervical cancer, and there is research being done in other cancer vaccines, but we've a long way to go before putting medical physicists out of business. I mention imaging because I work as an imaging MPA, and quality imaging is critical before during and after cancer treatment, so I think people shouldn't sleep on it. At my current job we have nearly doubled the size of our physics team in the last few years due to the patient load at our practice; this trend will likely continue even if at a reduced pace.

>>>>

I see. Where on the body is radiation therapy used in? I always assumed wherever there happens to be a single tumor or whatever, but I'm still trying to learn as much as I can lol

>>>>>

The short answer is yes the radiation is applied such that high dose is applied to the tumor and the medical team (physician, dosimetrist, physicist) tries to make the dose to the rest of the body, specifically organs at risk (OARs) as low as possible. These are great questions for a therapy physicist, especially if you are able to shadow one.

[deleted]

>

You should draw on your current work and what you get out of it. If you've been an MPA for 3 years you should have at least a few experiences about the practice of medical physics that animates you and motivates you to continue your education in it.

[deleted]

>

> qualified as a medical physicist QMP is a specific term for board certified physicists. You would have to do a residency and pass the 3 board exams before you would be qualified. Doing a certificate program would make you "board eligible." I can't speak for other residencies (although I image this is a common sentiment), but the one I'm affiliated with likes having people with different perspectives. There was even an MD PhD several years ago.

I'm currently applying to PhD programs and I'm pretty nervous about it, seeing low acceptance rates across the board. I'm in my last year in my CAMPEP accredited MS program, and I'm doing a thesis. I applied to a handful of PhD programs after getting my physics BS, but was rejected from all of them. Do PhD programs prefer MS applicants over BS applicants? Will my MS thesis help? What else can I do to increase my chances of getting in? Thank you all

>

I don't know specifically about your chances to be accepted with a masters. But you do have other options in case you don't get in this year. You could always go into the Match and look for a residency and do a PhD after residency.

>>

I've thought of doing this as well, but some PhD programs don't get back to applicants until after match is decided, I hear

>>>

This is also true.

Post Title: [Training Tuesday] - Weekly thread for questions about grad school, residency, and general career topics 09/13/2022

Post Content: This is the place to ask questions about graduate school, training programs, or general basic career topics. If you are just learning about the field and want to know if it is something you should explore, this thread is probably the correct place for those first few questions on your mind. Examples: * "I majored in Surf Science and Technology in undergrad, is Medical Physics right for me?" * "I can't decide between Biomedical Engineering and Medical Physics..." * "Do Medical Physicists get free CT scans for life?" * "Masters vs. PhD" * "How do I prepare for Residency interviews?"

Comments:

I am currently in a MS Medical Physics program and I will graduating in December 2023; As an international student with my family here, I am concerned about having to wait till July 2024 before starting residency; Are there programs that start in January? If not, what roles can I apply for to fill the 6 months period of waiting to enter a residency program? Are there ways other international had dealt with getting a working visa if you don't get a program that helps with that?

>

There are a few residencies that operate off-cycle and outside the match that might have different start dates. Vanderbilt, UKansas, and UPenn, for instance, are advertising on the AAPMs career board for their off-cycle positions right now (there might be more too, but I only looked at the first page). You could start making a list now so that you can prepare your applications for next year.

>>

Thank you

Is anyone familiar with IBA's InViDos software for IVD? I will very much appreciate to ask some questions about it's operation.

I work in the UK as a registered Physicist, thinking of moving to work in Australia or NZ due to better salary and lifestyle prospects (UK Physicist salaries are too low for my plans to have another kid with my partner and various other life goals - NHS wages are stagnated to no end but that's my opinion). The issue is I hold a dual citizenship already. I can not say where it's too specific to identify me since there is not many of us. I admit I do not understand the immigration laws well. Would this be a problem obtaining a visa to work in AUS or NZ? Would doing a PhD there help my immigration prospects to achieve this too?

I am currently doing my MS in medical physics. My program gives me a lot of chances and responsibilities in the clinic to do QAs. However, I am wondering what exactly is viewed as valuable clinical experience that can set me apart when applying to residences later on. Is doing QAs all by myself (not just shadowing) viewed as a big a thing? Or is it better if I shadow more complex procedures (Brachy, GammaKnife, etc.) ?

>

I think both are good; at this stage anything you learn about is valuable. However I think that if you were forced to choose maybe do the QA's by yourself; it speaks to you as a student that they trust you with handling the equipment vs just watching. I would definitely learn the "whys" behind the QA procedure. It may be

good to read up on the relevant TG reports; not so you can parrot them back during a residency interview but to demonstrate that you've looked into the subject more deeply and are more invested in your education than an average Joe.

I obviously do not work in the field (at least not at the moment haha) but can someone explain to me what exactly a "chart check" is? Everyone here is constantly saying it's a huge part of the job but no one has explained what it actually is? It sounds like going through a safety list of items in regards to an accelerator... Edit: oh and what is an OR case, as opposed to an HDR

>

Every place (and even different people in the same place) do chart checks differently, but essentially it's checking that everything about an individual patient's plan is as the attending physician intended and that it's safe + possible to deliver. Some examples of things to check are the simulation CT quality, the setup of isocenter, contoured structures, target coverage and dose constraints, the prescription compared to the plan, the treatment machine parameters compared to the plan, etc. Also, at least in my experience "chart check" can refer to an initial plan check before the patient is treated or to weekly physics checks. OR vs HDR might be specific to your site, but at my clinic, an OR case could be referring to an HDR implant which takes place in the OR, then we do the actual treatment in the HDR room.

I'm 24 and starting my first year of college. Is it to late to pursue medical physics?

>

Not at all. Congrats on starting college! My S/O is a nontrad student as well.

>>

Awesome! Thanks, I'm very excited!

I'm seeing people here use the terms "therapist" and "physicist" differently, when the physicist being talked about is clearly in radiation therapy. What am I missing? What is the "therapist" if not the therapy physicist?

>

"Therapist" in this context refers to the radiation therapy technologist who operates the machine when a patient is being treated

>>

Ohhh okay thank you! So the radiation therapy physicist makes the plan and tests it against the phantom (?) to make sure it works as intended, and then the therapist operates it during the ACTUAL treatment?

>>>

A couple things: the dosimetrist makes the plan, and the physicist checks it. Certain plans (IMRT etc) have a phantom involved in the physicists' check but some don't. The therapist not only actually hits the buttons during treatment, but also set up the patient (immobilization, alignment, etc) before the treatment, which is extremely important.

>>>>

I see. So dosimetrist makes plan, radiotherapy physicist checks it, and technologist (therapist) actually performs it... correct? So if someone is called a "radiation therapist", that is referring to the technologist and NOT the physicist, correct?

>>>>>

Yes to the first point. I don't believe that radiation technologist is an equivalent term for radiation therapist. Technologist I have only heard to applied to the diagnostic techs (the people taking x-rays, MRIs, etc). Edit: yes, the radiation therapist is not the physicist either.

Hi everyone, i plan on doing health physics as a master's and possibly PhD. My question is, would i be able to become a medical phycist with that background? If so, how does the path to become a medical phycist look like?

>

One of your degrees must be a CAMPEP accredited degree. If your PhD isn't CAMPEP you'll have to get a certificate in order to become a board certified medical physicist.

Which MS campep programs that offer more clinical experience instead of research?

>

I second what has been said of UKentucky and LSU as those students tend to have plenty of experience when applying for residency. I will also add UToledo has a clinical component built into their graduate program that gives their students experience doing QA and treatment planning.

>

Kentucky is very clinically oriented, max 8 students per year, introductory rotation first year, 3 clinical rotations and a

treatment planning rotation second year. Research requirement is minimal but opportunities exist if people are interested in doing more

>

A handful off the top of my head: UPenn (speaking from personal experience, by default you get ample experience in the clinic with plenty of opportunity to pursue even more), last I heard UKentucky is very clinically focused as well, LSU (though they also have a very big research component, which extends their MS to 3 years).

I'm currently in my senior year of undergrad and I'll be receiving my BS in biomedical engineering in May 2023. I've spent the last 3-4 years working in a biology lab (not necessarily related to physics) and, for a long time, planned to pursue a PhD in BME. I didn't really question this 'goal' until recently, when I've felt extremely burnt out. In short, I feel academia is a very toxic environment. I no longer feel that a PhD is a good fit for me for many reasons. I have been considering other career routes. Medical physics seems like a good option in terms of still being involved with science while also doing clinical work (I hope this makes sense). I have heard a lot of different things about the field, though, such as the amount of MP graduates exceeding the amount of residencies. I'm also not sure if my background would make me a competitive applicant for MS programs and, eventually, residency programs. The other issue that I have is that my school has not allowed me to count prerequisite physics courses required by CAMPEP-accredited programs towards my degree, so I would have to take these courses as a non-degree seeking student after I graduate (which I wouldn't mind- but I would have to work a full-time job in tandem, and I would have to guarantee that my job is either close to a university or take classes online, which could raise questions about my competence in physics in later admissions processes). Given this information, I have a few questions for those currently in the field: 1. Do you think that this is a good field to get into right now? Why? 2. Despite my background in engineering and biology, could I still be a strong candidate in pursuing studies in medical physics? 3. What are the pros and cons of working in this field? Do you feel like as a medical physicist you have a good work/life balance and work culture? 4. Is there anything I should know? Do you have any general advice? I would also appreciate if anyone could tell me more about what they do on a daily basis as a medical physicist and what kinds of concepts you apply to your work regularly. Thank you in advance! :)

>

1) Yes, hot job market for graduating residents. It's just hard to get into residency. 2) I think you should be fine. I took a lot of bio/biochem stuff (used to be premed), now finishing up my last year in a campep masters. 3) Pros: salary, interesting work,

feeling like you make an impact on healthcare, actually using physics knowledge for work unlike the physics majors that go into finance. Cons: hours can be longish depending on employer, also general healthcare issues which are universal (healthcare as a business etc). Work life balance and work culture are very local to your site, results may vary there. 4) This isn't an easy job to get into, and you can't coast once you're past residency either. Keep the patient in mind while working on your computer/the machines.

>

For #2: as long as you meet the pre-reqs for medical physics programs (usually you need at least a minor in physics or atleast have taken certain physics classes) you should be fine. I know people who career switched from chemical engineering to a masters and are now successful residents.

[deleted]

>

In industry yes, for clinical work in the US the residency needs to be CAMPEP accredited and you need to pass the ABR exams to get certification, or else you are out of luck

>>

There is a CAMPEP accredited therapy residency in Ireland.

What is more renowned/better ranked program for M.Sc in Medical Physics, Brown or Georgia Tech?

>

It's really not much about the program, but what you do with it. There can be a hard working student in a "low-tier" program that is much better prepared for residency than a GA/brown student. Rankings alone won't get you a residency/job

>

Depends on what you're looking for. Ga Tech has been around and accredited longer. Brown is relatively new. Ga Tech puts out a bunch of students and probably knows more about getting their students residencies because of this. Brown has some very well-known and respected faculty amongst AAPM members so their knowledge will be beneficial. Ga Tech might have some too, I just may not know them. Personally, I don't think you can go wrong with either. Good luck in your decision.

>>

GA Tech works with Emory!

>>

Thank you!

Post Title: [Training Tuesday] - Weekly thread for questions about grad school, residency, and general career topics 10/25/2022

Post Content: This is the place to ask questions about graduate school, training programs, or general basic career topics. If you are just learning about the field and want to know if it is something you should explore, this thread is probably the correct place for those first few questions on your mind. Examples: * "I majored in Surf Science and Technology in undergrad, is Medical Physics right for me?" * "I can't decide between Biomedical Engineering and Medical Physics..." * "Do Medical Physicists get free CT scans for life?" * "Masters vs. PhD" * "How do I prepare for Residency interviews?"

Comments:

I am a graduate medical physics student and am wondering if I can apply for residency (through the match) and industry jobs at the same time? I know if I get a residency it is a binding contract, but if I don't get a residency it would be nice to already start the process of looking for an industry job. Additionally, if an industry job is a perfect fit could I drop out of the match?

>

Per match rules, you can drop out before the match closes. I wouldn't be openly mentioning that you're also pursuing industry positions as some may take that as a lack of interest in the clinical side of things. Also, industry positions will know they have leverage over you when negotiating compensation (e.g., they know you have until match day to accept and that a match isn't a guaranteed thing).

>

I don't think there's anything wrong with looking for industry jobs while applying in the match. Also you can drop out of the match as long as is before the match day

Hello All! I am currently finishing up my BS in Health Science. I have a goal of applying for grad program in Medical dosimetry. I have a background in healthcare (surgery) but not radiation. With all that said... before I spend the next 2 years diving into this career What do you think are some great traits of a medical dosimetrist?

>

I would agree with the previous comments, but also place an emphasis on time management and collaboration. Especially at busier clinics, dosimetrists can get slammed with cases, so it is important to manage your time effectively and speak up if you need help with something. We all want the best for our patients, so collaboration and helping each other out is great

>

I would say the best dosimetrists I've worked with were meticulous in their process, and creative in their problem solving. Most of their work can be pretty repetitive and that can lead to complacency errors. When they run into difficult cases, being able to get creative and figure out the solutions to the limiting aspects helps me out immensely. The top 2 or 3 that I've worked with were also excellent communicators and really helped bridge gaps between physicians, physicists and therapists. After all they probably have the most overlapping and dependant aspects of any of our coworkers.

>>

Thank you for the reply! It's a huge help. I want to lean into the soft skills that make a great dosimetrist.

>>>

I'd argue that those kinds of soft skills will get you very far in many fields (especially such a human centric one as healthcare) not just dosimetry. I wish more people understood this, especially hardcore STEM types.

>

Hi, this is a reddit section for medical physics, not dosimetry. I'm sure some of the therapy physicists could help you with your question, but going to a dosimetry thread would be beneficial to you (by getting answers from actual medical dosimetrists)

>>

Thank you for the response. The medical dosimetry reddit only allows "trusted members" to post. Historically I have seen some medical dosimetry post here also. By chance, do you work with medical dosimetry? What has your experience been? Thanks again for the reply.

Post Title: [Training Tuesday] - Weekly thread for questions about grad school, residency, and general career topics 09/27/2022

Post Content: This is the place to ask questions about graduate school, training programs, or general basic career topics. If you are just learning about the field and want to know if it is

something you should explore, this thread is probably the correct place for those first few questions on your mind. Examples: * "I majored in Surf Science and Technology in undergrad, is Medical Physics right for me?" * "I can't decide between Biomedical Engineering and Medical Physics..." * "Do Medical Physicists get free CT scans for life?" * "Masters vs. PhD" * "How do I prepare for Residency interviews?"

Comments:

Hi! I'm a Canadian undergrad studying medical physics aiming to get into the medical physics field. However my grades are quite average. I make up for this with research, I've published one paper so far and working on a second, both related to oncology. I also do research in another health care field. Do you believe that my amount of research could supplement for my average grades?

>

I would make an effort to build a relationship with faculty in medical physics programs who you might work with as a graduate student. Having faculty advocate for you is the best way to get into grad school no matter your grades.

[deleted]

>

I had no issues matching with a masters. Same with everyone in my class along with many years before and after me. Some more clinical positions actually will prefer masters applicants due to clinical work versus someone with a lot of research background.

>

If you don't want a PhD don't do a PhD. You can absolutely match with a masters.

Those of you in radiation therapy - how often do you meet and talk to your patients? I've been told patient exposure varies WILDLY between different hospitals and clinics

>

As a resident, so far the only patient interaction I've had is with placing oslds where I have to explain what they are real quick and introducing myself during hdr treatments.

>

We usually don't speak to the patients, unless they want to ask us something. But most of the time there's absolutely no interaction with the patients.

>>

And then when they request to speak to the physicist you never know what kind of question you're going to get from them. However, the majority of the time it's something simple the therapists or doctor could have explained. How much radiation are they getting or something like that. Occasionally I've had patients in related science fields that just want to nerd out about how linacs work.

>>>

We all lowkey enjoy a little talk shop with anyone interested in this field

What residency programs that will accept international students they hold F1 visa as OPT?

>

>There's a bunch really, before applying check their MP-RAP page, sometimes they disclose it there. If Not, email the program directors for the places you want to apply too (that's what I did).

Does anyone have an inside scoop on if/where there will be new CAMPEP residencies opening up in the next couple years?

>

Not an inside scoop but look at the non accredited residencies (google them or see if any are listed on match as non accredited if they can participate) and usually they will state they are in process of getting CAMPEP accreditation. At that point, call the residency director and see where they are in that process and their expected dates (site visit and such)

(Copied from the last thread as I shared it really late and no one responded) I'm an astrophysics major, planning on applying to campep programs for grad school, but I'm in my third year and still have no research experience - I've asked around and every slot is simply taken or there's just nothing "available"(It's not like I'm not a good student or anything, I have good grades and have always maintained a good relationship with faculty). The only thing I can think of to really strengthen my grad school application when I apply next year is to shadow a physicist at a nearby clinic soon, but other than that I'm really starting to panic :(Has anyone in grad school (or finished and already in the field) had similar issues? How did your graduate admissions for campep programs turn out? Edit: thanks for the responses! I'll try and keep looking, but it's really frustrating with still having nothing to show for all my efforts :/

>

I had little research experience in undergrad, but am also not really "traditional" as I worked for a few years before deciding I wanted to do medical physics. I think that getting clinical experience will be useful. My undergrad GPA was okay, not great. But I worked as a medical physics assistant and got into Georgia Tech's MSMP program.

>>

Sending you a DM!

>

Had similar issues with lack of research experience. Didn't start until my spring semester of my 3rd year. And my main research i did in undergrad was in Chem. I don't think that was too big of an issue in my application because I applied for a MS position. I can imagine it'll be a bigger issue if you're wanting to apply for a PhD. Personally, got admissions to places I wanted.

>

Your research doesn't necessarily have to be in the physics department. I did biochem and bio research in undergrad (although I was a biochem/phys double major). If you aren't finding something in your department expand your search to anything you might find interesting. Most professors could use a helping hand, just try to find one that is actually willing to mentor you vs one who wants cheap labor.

Post Title: [Training Tuesday] - Weekly thread for questions about grad school, residency, and general career topics 09/20/2022

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Comments:

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thing I can think of to really strengthen my grad school application when I apply next year is to shadow a physicist at a nearby clinic soon, but other than that I'm really starting to panic :(Has anyone in grad school (or finished and already in the field) had similar issues? How did your graduate admissions for campep programs turn out?

Are there any summer research programs one can apply to as a graduate student for medical physics?

I currently have my A.S. I am in school to be a radiation therapist A.A.S. once I have it I plan to transfer and get my bachelor's in physics and then I may go for a post bachelor certification to be medical dosimetrist. My end goal is to be a medical physicist but I'm trying to pay for it. Does this seem like a good route?

>

kerma has made some good comments already, but I would add that the training pathways for becoming a therapist/dosimetrist and for becoming a medical physicist are effectively parallel lines in the US system. The most experienced dosimetrist in the world would still need to start fresh with, at minimum, a MS in Medical Physics from a CAMPEP program and complete a competitive 2 year residency before they could work alongside the physicists they collaborated with in their prior dosimetrist role. If you want to be a physicist, I would encourage you to just go for it.

>>

Agreed, you put it much more eloquently than I did, lol.

>

I think if you do a masters it's likely you'll self pay, but there might be a few places that offer funding of some sort (I just don't know where). I think if you're up for it then it's a good career path. I don't think it is necessary to become a dosimetrist first; that may incur additional tuition burden for little reward.

>>

The reason I thought about the medical dosimetrist is because how much longer it may take to become a physicist. I heard a lot of places require a PhD. And I thought becoming a dosimetrist would maybe allow me to work with the physicist a little more while working toward it. Do you like being a medical physicist assistant? I didn't know that was a position.

>>>

Yes there are places that are open to PhD holders only but MS physicists can do just fine. Dosimetry is a lot to learn in

itself: I wouldn't see it as a "shortcut" to getting the requisite medical physics knowledge. I like being an MPA, but there aren't a lot of MPA openings typically so it is a bit difficult to come by. I also work with physicists a lot, but I don't want to overstate how much of an advantage that confers on me vis a vis my chances of getting a residency. That is as much about your personality and work ethic as it is your resume. Others who have gone through the residency process please feel free to chime in if you have anything to add.

>>>>

I don't necessarily see it as a shortcut but just a step along the path to being a medical physicist

>>>>>

Saying you want to become a dosimetrist to later become a physicist is like saying you want to become a nurse to later become a doctor. Sure they're related fields, but they're entirely different careers.

>>>>>>

I didn't realize the role between them was like that of nurse and doctor. As I said earlier I'm new to the process. Thank you for the clarification

>>>>>

I don't think that is true either. Yes some dosimetrists make the switch to physics but most don't. It may not do justice to our dosimetrist colleagues to see their profession as a stepping stone to something "bigger and better". Of course I may be reading too deeply into your posts so I apologize if I am assuming too much.

I am graduating with a BS in physics in December and am interested in going to grad school for medical physics next fall. In the meanwhile, I am wanting to work somewhat in the field with my bachelor's degree after I graduate. I thought about applying to some Medical Physicist Assistant jobs as they mostly seem to require a Bachelor's in physics. Would that be the best idea, or is there something better? Thanks!

>

I think it's a great option, if you can find a position and successfully apply to it. Unfortunately these positions are not super plentiful; you will probably need to relocate for one.

Is it possible to have a career as a radiotherapist, with only a biomedical engineering bachelor + master's degree? Is it different depending on the country? Do I have to do a master in physics or medical physics?

>

Not very likely in the United States. Most places want at least a masters in medical physics. Other countries may be possible. Not positive however.

>>

Thank you for your reply! I am a bit sad that I only realised I had a passion for medical physics after I enrolled in BME masters... I am quite lost in what to do. My Master's coordinator said it could be possible to get a radiotherapy physicist job if my thesis were related to that, and I got internship experience in that area, but I doubt it. :(

>>>

Unfortunately your master's coordinator was probably not familiar with CAMPEP, ABR and all the other medical physics stuff, which is understandable because that's not the kind of program you're in. Please take a look at the "Guide to a Medical Physics Career" document listed in the sidebar for a more detailed breakdown of what is required.

>>>>

But I don't think there is such thing in Europe right? Each country has its own rules, and for example here in Portugal, most of the job openings require only physics or engineering physics. At least from what I've seen on LinkedIn. I sent an email to DGMP in Germany and they told me I could pursue this career with a BME Master's, but only if I did a radiation protection course, and that takes years. They also told me I could take it AFTER I got the job, which is confusing to me. I just wish I had someone to talk to, that was in the same situation as me, and in Europe. I plan on emigrating but I am a bit lost with my options. I could go to the USA but I don't have the money to get education there.

>>>>>

You're right CAMPEP is for USA/Canada, ABR for USA, COMP in Canada. Sorry you should have led with the fact that you are in Portugal. There might be some physicists from the EU that can tell you more but unfortunately I don't know how things work there.

>>>>>>

Thank you for your reply! I have to look more into it. :)

>

Just to clarify, did you mean to have a career as a radiotherapy physicist? A radiotherapist is a very different role.

>>

Yes I did! I'm sorry!

Post Title: [Training Tuesday] - Weekly thread for questions about grad school, residency, and general career topics 08/02/2022

Post Content: This is the place to ask questions about graduate school, training programs, or general basic career topics. If you are just learning about the field and want to know if it is something you should explore, this thread is probably the correct place for those first few questions on your mind. Examples: * "I majored in Surf Science and Technology in undergrad, is Medical Physics right for me?" * "I can't decide between Biomedical Engineering and Medical Physics..." * "Do Medical Physicists get free CT scans for life?" * "Masters vs. PhD" * "How do I prepare for Residency interviews?"

Comments:

[deleted]

>

Constantly vigilant about safety: yes. Constantly worried about killing someone: no. These are not the same. I am not sure what you mean with your last question. Any job has stress and the risk of making a mistake. Safety protocols are good but of course they must be followed proactively and not just treated like a boring checklist to fill out.

>>

[deleted]

>>>

I'm afraid that learning what that responsibility feels like can only be experienced, rather than explained. But that's what residency is for, being given more responsibility in a gradual supervised manner.

Experience but no certification advice. Supposedly one has a PHD in Biomedical Engineering, 10 years of experience in medical R&D, publications and a pretty good record in the academic/industry. If at this point one wants to change careers and become a medical physicist, is there a way to get accepted to a position without having done the residency? I assume not. If that's the case, has anybody here done such a thing? Switch careers to go into med physics? Is it worth it all the effort and costs/ payout to go through residency?

>

Without residency you can only be a physics assistant, which almost certainly be a huge pay cut for you. As for whether it is worth it to go through the whole certification pathway (certificate program, then residency, and also pass parts 1, 2, and 3) that is an entirely personal question. Why do you want to work in a clinic vs R&D? Why change career tracks when you presumably have a well paying one already? All things you should think about before starting.

Hey fellas, this might get buried but I was wondering if anyone had any suggestions to what to do in the upcoming weeks before I start the MS. Thank you!

>

As someone who just finished a year ago and is now starting residency, I heavily concur with u/kermathefrog. Your program is going to teach you everything you need to know, there's also going to be plenty of time to pursue review material once you know what you need to review for your specific program and circumstance. Going in fresh and relaxed will pay dividends en masse. The same advice applies even more for residency.

>

Relax. I'm serious, the first semester of my campep program was one of the most stressful of my life. Do a "you" day, go on a vacation, anything that you enjoy.

[deleted]

>

Yes! I've had a number of colleagues mwho did MRI research and move to therapy residencies. You'll probably get a number of questions during residency interviews why you would be motivated to change directions. As long as you have your "why" figured out, it shouldn't be a problem. Like what others said, be prepared to play catch-up if there are concepts you are not as well-versed in because of your experience.

>>

So I'm curious "why" did they change their field from MRI to Therapy?

>>>

They each had their own reasons, but in the end it didn't matter (nor is it my place to say). Regardless they were also very smart to recognize that a lot of DI skills can translate well to therapy (especially with new IGRT strategies). So they spun a

positive light on the switch, saying they provide a unique perspective. And it's true!

>

You're never really locked into anything. You'd have a lot of material to catch up on if you're going to switch though. Be prepared to answer questions about why you're interested in switching during the residency interviews.

>

Not super common but not unheard of either. My chair switched fields for instance.

Is anyone aware of any programs offering an online option since COVID?

>

Georgia tech offers the only online CAMPEP accredited MS program.

>>

Super helpful! Thanks!

We've all seen the threads complaining about recent ABR exams. My question for recent Pt 1 takers is: what textbooks, if any, are good to base my review off of? I have all the classics, but I am not sure which ones are best for strictly ABR prep. Any of the 3rd party resources worth shelling out the money for in 2023? I am planning to take next Jan.

>

I got my hands on a bunch of Raphex exams too, some of the questions there are more clinically oriented but roughly the first 50 questions (or so) per exam are good part 1 review. Try to get imaging and therapy exams. And I also echo ABRPhysicsHelp, another decent one is oncology medical physics

>>

Cool thanks. Were these your only resources or did you go over textbooks as well?

>>>

Didn't read textbooks word for word per se, but definitely went back and found some sections I needed to brush up on. Some concepts are better explained in research articles too, so don't just limit yourself to textbooks, either. A google search of a particular subject/concept will produce helpful info. The more information you can find the better honestly

>>>>

Thanks again, I appreciate it!

>

Abrphysicshelp and we passed are what I used for part 1.
Basically only those too. Passed first try

>>

Thank you!

I will be graduating a medical dosimetry program with a masters degree in the near future and was wondering what to expect salarywise nowadays. The AAMD gives a very low number from their 2019 salary survey compared to what all the self-reported websites say, which I assume is because the survey was taken almost 4 years ago. I left my job as a radiation therapist (making over 110k/year with less than 10 years experience) to enter this career and expected to make much more money being that the field is moving towards a master's requirement and I would be in the minority of CMD's with this degree. Sorry for such a long question.

>

You were doing really good for a therapist and should be able to improve your salary with your new education. But you will likely not make the same salary starting, and it's going to take awhile to make up for the time differential (i.e. years of lost salary during your return to school). Hopefully money wasn't your primary driver for the transition.

>>

Thanks for the reply! Money was a big part of it honestly, along with the physical toll it put on my neck and back since I was one of the physically stronger male therapists, always called all over the department for lift help. I feel like many radiation therapists are significantly underpaid for the work they put in since they take on nursing and dosimetry responsibilities a lot of the time, as well as spending the most time with patients, and their families. Where I worked, the simulation therapists did a lot of dosimetry work also (I only know this now that I am interning at a different hospital as a dosimetrist). With that said I don't regret my transition even if it means taking a bit of a pay cut for a little bit. The mental and physical relief is definitely worth it.

[deleted]

>

You must attend accredited schools, CAMPEP is a requirement for board certification.

>

If you want to become ABR certified you have to to CAMPEP, or get a certificate if you do a non-CAMPEP PhD (I dont think you can do certificate for CAMPEP masters). In short, I would strongly advise to NOT do a Masters program that is not CAMPEP

I am starting my senior year of a Physics BS and I want to start applying for phd programs this fall for Medical Physics. I am looking for good text books I can start reading to learn more about the medical physics field as a whole.

>

Khan's Physics of Radiation Therapy is the standard text for therapeutic physicists; get the 4th or 5th* edition ... Johns & Cunningham have a classic 1983 text as well, which is good also for diagnostic imaging physicists. *I actually caught a typo they introduced in this edition for one of the electron beam figures, making me wonder if they're now engaging in the make-a-new-edition-every-few-years-and-charge-300USD scam.

>

I wouldn't try to get ahead of the game by reading MP textbooks while doing grad apps. That material will come later. Just focus on your classes and applications, and remember to have fun with your last year of college. Savor it! You'll never be this age again, lol.

>>

Thanks for the advice! I am worried about my apps, would you have any advice on how to standout? I have research experience as well as TA experience and a decent gpa

>>>

best advice... Shadow, understand exactly what this field entails, to the point that you can speak somewhat about it during the interview. Most undergrads really don't know much, which is fair considering how obscure it can be. The pdf I linked will help tremendously just by reading the table of contents. But shadow, and write a great personal statement on why you like this field, and not the generic, "well i like helping people, but also love my physics." Happy to reply/help more

>

<https://www.iaea.org/publications/7086/radiation-oncology-physics>

>>

Thanks!

>

hmmm, Bushberg for Imaging physics is good and Khan for therapy, I would start there

>>

Thank you for the response

For employed medical physicists here, is a yearly executive physical examination part of your benefits package?

>

Health insurance pays a good bit. There's a yearly mandatory flu shot they declare is "optional" with documentation you must sign declaring reception of it to be 'voluntary', and HR sends out an email saying anyone who doesn't receive it will be terminated ... It's so blatant it's almost funny: The form we must sign has a "Yes" checkbox for the volunteering-of-my-own-free-will statement, and no 'No' checkbox available...

>

You mean like a doctor's physical? I'd imagine any non self employed physicist has employer-sponsored health insurance that they can go see a doctor with.

>>

An executive physical exam is much more comprehensive and expensive than an annual exam and is given to employees who may wish to undergo such examination in order to treat any developing diseases that are without symptoms in the start so that they are not away from work for extended periods of time.

>>>

Yeah, that's not done at my institution -- though there is one that checks for a dozen or so common things. Not a comprehensive exam, though, just general screening, like a questionnaire + BMI measurement.

>>>

I've not heard of that, no.

Post Title: [Training Tuesday] - Weekly thread for questions about grad school, residency, and general career topics 09/06/2022

Post Content: This is the place to ask questions about graduate school, training programs, or general basic career topics. If you are just learning about the field and want to know if it is something you should explore, this thread is probably the correct place for those first few questions on your mind. Examples: * "I majored in Surf Science and Technology in undergrad, is Medical Physics right for me?" * "I can't decide between Biomedical Engineering and Medical Physics..." * "Do Medical Physicists get free CT scans for life?" * "Masters vs. PhD" * "How do I prepare for Residency interviews?"

Comments:

What preprinting archives do people usually use? Is arxiv.org popular?

Hello there! New to Reddit but wanted to get some perspective on applying to therapy residencies with a CAMPEP-accredited BME PhD. Even though my doctoral work has been clinical, involving MRI-guided surgery, with 7+ publications, I haven't touched RadOnc research! And I am worried about demonstrating my passion to be a therapy MP. Most successful residency candidates appear to be MSc students with highly focused RT involvement or PhD students who have RT-related research projects. Now I am spending a ton of time shadowing, but I know it's not equivalent to RadOnc research or experience. Any advice or similar stories of successfully transitioning to a therapy residency program? Thanks!

>

Don't sweat it. My PhD didn't even touch radiation oncology, and I matched with my dream rad onc residency. My opinion is that you'll be a more well-rounded applicant, and you'll be able to add insights from your interdisciplinary work. Science improves when we have diverse viewpoints!

Hey everyone! Undergrad here. I had questions regarding 1) match and residencies. I've been reading that more and more programs opt out of the match and the residency is a more traditional interview process now? Is this true? I assume you can attempt to match and if you fail still apply for residencies OUTSIDE of the match, correct? Secondly, are there any problems with physicists who would move states every few years? I assume all the regulations are the same across the US but I'm curious if perhaps they'd have to take a brief or something regarding different policies (like going from a clinic in California to going to a clinic in Missouri)

>

1) You can go to the MedPhys match website and look at the statistics. The number of "matching" applicants has actually increased since the inception of MedPhys match. This is because while some programs drop the match, other new programs enter the match. In general, you will have three types of programs offering "non-match" residency spots. Bullets 1 and 2 typically occur pre-match day. 1. Top tier programs. These programs are very desirable and can easily lock up a resident before the match. It would be unlikely these spots would be open after the match. These programs do not enter the match because it is honestly a waste of their time. This is a big issue with the match. 2. Lower tier programs that are not desirable may offer residency positions outside the match in an attempt to lock up a resident through the guarantee of a residency. Typically this happens pre-match, but these spots can be open post-match as well. 3. Any program that gets unlucky and does not match a candidate. These are the spots that will be open post-match, but you will be fighting for them. One final note - if you are well qualified (good grad school, have experience, etc etc), you will almost certainly get a residency. 2) You will no have issues moving state to state if you have board certification and keep up with your maintenance of certification. Some states (TX, NY, FL, HI?) require a state license to "practice" medical physics. Many other states will require some type of registration with their department of radiation safety. You will generally need to be added as an authorized medical physicist (therapy) if you are doing things like gamma knife, brachy, etc. But this is all mainly just paperwork. Many people will have residency in one state, get a job in a different state, and then in a few years when the "perfect job in the perfect location" opens, will move again.

>>

I see, thanks for the response! So it sounds like it's always in your best interest to try and match then, correct? As in you can still apply for any other non-match residency if you DONT match?

>>>

Check out the rules for the match: <https://natmatch.com/medphys/rules.html> If you click on the applicant agreement, you get a PDF. Points #5 and #6 are most important. Basically, if an applicant remains in the match, they cannot accept a position from a ****participating**** program prior to the match result release. HOWEVER, an applicant in the match program is free to interview with and accept an offer from a ****non-participating**** program provided the applicant withdraws from the match prior to submission of your rank list. So you can interview both inside and outside the match, and if you get an offer from a non-participating program, you can accept it and just withdraw from the match. It is always in the applicant's best interest to enter a CAMPEP accredited residency, whether in the match or not.

>>>>

I see, thanks so much! Although, I don't think I understand the purpose *of* the match if some are and some aren't CAMPEP, and some outside of the match are and aren't campep...

>>>>>

The match was originally implemented to "even the playing field" and get rid of "gentleman agreements." What I mean by this is that some residencies would start interviewing people super early and then say "Here is your offer, you have 48 hours to accept or we will give it to someone else." Since there were more applicants than programs, many applicants would accept the first offer they got just so that they were sure they would have a residency spot. This also put programs that were in less desirable locations (or slower to interview people) at a disadvantage. You have seen the root of the problem, which is that programs do not need to be in the match. In the opinion of many, the match should be used either by everyone or should not be used at all. Allowing a pool of programs in the match and a pool of non-match programs is not a sustainable model. CAMPEP has nothing to do with the match, you just want to make sure your program is CAMPEP accredited so that you will be eligible for your boards.

>>>>>>

Ahh alright that makes sense. Thank you sir

Hey guys, I'm currently studying physics as an undergrad in Australia and am considering going on to study medical physics. If I were to do so, would I need a PhD in order to do research in this field or would the master's just suffice?

>

I can vouch that it seems to be very similar US as it is here in Aus, though if you're particularly interested in research focused career rather than clinical a PhD might be more advantageous. However, plenty of just masters medical physicists do research along with their clinical work.

>>

thanks for this response! would you say that most medical physicists with a PhD spend more time researching and less time doing clinical work? Additionally, is it common for people to start work with just a master's and go back and get a PhD later if they want one?

>>>

I'd say in general yes, with PhD holders having better ability to publish/be head researcher for a given paper. But you can

certainly do research with only the masters. Edit: and just to clarify, research is not the majority of a medical physicist's time, PhD or not (unless you're an academic researcher, which is not common). As for the latter, yes that is very common: either going back to do a PhD full time (quite often in an attempt to improve job opportunities, though whether this makes a huge difference is a matter for debate) or sometimes part-time after starting clinical work and being TEAP certified.

>

Based in the US, so your mileage may vary. Here it's pretty common for MS (staff-level) physicists to do research on the side, especially at academic institutions. They're mainly focused on small projects with direct clinical applications since they have to balance it with clinical duties. That said, it's PhD (faculty) that tend to do significant research and be primary investigators heading labs. Whether or not they have protected research time (ie time that's not touched by clinical duties so they can dedicate to research) is institution-dependent.

>

I'm an undergrad in the US so I sadly can't answer for Australia, but I do know lots of people in this sub in the US at least suffice with just an MS and then go on to residency and their career (maybe that's different in Aus though?)

Post Title: [Training Tuesday] - Weekly thread for questions about grad school, residency, and general career topics 08/30/2022

Post Content: This is the place to ask questions about graduate school, training programs, or general basic career topics. If you are just learning about the field and want to know if it is something you should explore, this thread is probably the correct place for those first few questions on your mind. Examples: * "I majored in Surf Science and Technology in undergrad, is Medical Physics right for me?" * "I can't decide between Biomedical Engineering and Medical Physics..." * "Do Medical Physicists get free CT scans for life?" * "Masters vs. PhD" * "How do I prepare for Residency interviews?"

Comments:

When it comes to residency, does someone have an edge if one knows how to fix a CT/MRI? I am a FSE but not fixing imaging equipment. I was wondering whether it'll be helpful to be a FSE for imaging equipment before I finish my master

>

Basically every imaging physicist will know what the internal components of both CT and MR scanners are. Basically no imaging physicist will know how to fix imaging equipment (other than saying "the tube needs replaced, let's call service"). FSEs perform all equipment fixes.

>>

Thank you Gotterdam. What do you think are some important competencies/skills/knowledge when you are recruiting residents?

>>>

I am in imaging/nuclear medicine. When I was at an institution with a residency program we looked at some of the following:
Academic - quality of grad program, GPA, publications, presentations, research applicability to imaging Service - volunteer efforts, medical physics community involvement, teaching experience Clinical experience with diagnostic and nuclear medicine imaging equipment How well the applicant "fit in" with the department. For example, an applicant that wants to do a lot of research would not be a good fit in a purely clinical residency

I'm starting a MSc Medical Physics in Scotland this September and I'm wondering if I'd still be eligible for SPT afterwards without redoing the masters component of the training programme?

>

SPT? Generally speaking, American institutions can request an independent audit of international degrees if they wish to more rigorously determine equivalency, to be paid for by the applicant (roughly 300 USD ~4 years ago) ...

>>

STP is a UK thing for medical physicist's training.

I'm applying to grad school this year and I'm afraid I won't have enough to show for my research experience. I'm currently working full time as a research tech doing medical physics work, but I have no publications or any papers to show for my undergraduate research work either. Am I overthinking this or should I wait an extra year? Also, any tips for writing a personal statement would be welcome.

>

Don't be afraid to apply! It'll keep your letters of recommendation fresh (even if you have to ask them again next year), and not very many people have publications coming out of undergrad. Granted, that'd help you a lot, but as long as you can describe your research thoroughly and accurately on a technical level, that should be sufficient. If you happen to get in

somewhere, but decide that you'd prefer a different school, you can always wait and apply again after you have publications to boost your chances. If application fees are too much, most schools will give a waiver. Just ask and apply early to make sure you meet deadlines.

>

Depends on if you want to apply to PhD or MS programs. I had no publications, but had a couples of semesters of research experience. I was accepted into a few good programs. For a PhD, a publication would obviously give you a leg up. In my opinion, unless money is a huge concern, apply anyway. Let the programs tell you if you're accepted or not, don't decide that for yourself based on hypotheticals in your mind. It would also show interest for a subsequent application cycle, and some could even give you feedback for you to improve.

>>

If money is a concern, don't be afraid to email admissions and ask for an application fee waiver. Most give you them without even asking why. Edit: this includes ones that ask for FAFSA or other info. If you wouldn't qualify based on your FAFSA or income information, but are still in a financial pickle, you can explain your situation to the admissions department and most of the time, they will get you a waiver.

How to prioritize job applications? I am thinking of a weighted cost function involving political party partisanship, state income tax, climate, and family proximity. Edit: and political nonsense -- I've seen at least one university position whose *job description* was a pledge to oppose racism, literally the entire description, no mention of the medical physicist's actual work. Of course we might chalk that up to an incompetent HR agent, but it raises the question of what an employee would be forced to do as a function of the Party's popularity rather than science or patient's best interest.

>

This [site](<https://www.movemap.io/explore/us?fbclid=IwAR32RxjCCw4y6YKQ0N20jtJMh4xPQblLiH3mypB906Et61WCDDIaaininYI>) might help as it breaks the US down by counties for several of the parameters you mentioned. I do not know how they got their data though, so keep in mind the accuracy may be questionable, but it might help you narrow your list.

>>

Thanks. Neat site, but I agree the accuracy is questionable (particularly regarding the weather filter). I also didn't see sources cited ...

>

IMO first and foremost, if possible, I'd weigh the things that will support your quality of life - things like family and preferred location as you mention. But this also includes perceived work culture! A happy, fulfilled physicist in the clinic will be happier in the home. Things like state taxes will matter less because the state will find a way to take the money regardless (eg: Texas and Washington both, while having no state income tax, have regressive property taxes). ♀ Just make sure you're compensated fairly to justify cost of living.

>>

Taxes also carry a moral dimension: If the state is using the funds for evil purposes (and some states do), we must try to minimize the funds we give them -- this weights against some states in favor of others (proportionate with the percentage of income tax).

>

You might be over thinking it. Where do you want to live? That's the big question.

>>

That's described by the criteria I mentioned. You speak as if sufficiently-detailed information is conveyed by a mere city, state, or regional name.

>>>

By the time you've graduated residency, if you've lived in the US for your whole life, yes city/state/region is a perfectly fine starting point. The US south/midwest/new england/pacific northwest/etc/etc/etc all have a pretty unique identity that I find hard to believe you don't have a passing knowledge of. Most stereotypes about the different regions are at least superficially accurate. The biggest thing, for me, was "fit" and "culture" which just aren't things you can actually assess before working there. After that, rough geographic area. We wanted seasonal weather. I'll refrain from saying too much "political", but recent events in the US also shaped our decision since there are women in my life I value. Given the small footprint of our field, after these, there weren't exactly a whole lot of areas left. Besides, you can always leave and go somewhere else. I went to a job I thought I'd like and didn't. We moved after I got a better opportunity.

>>>>

Whatever stereotypes you have in mind -- I don't know them -- are such broad strokes that it bewilders me (given the sizes of the

populations and geographic areas you are equating), and concerns me that you would make decisions based on them.

>>>>>

Then yeah I've got nothing for you. I struggle to comprehend an adult in the US who doesn't know the rough geographic regions. Deep south is very conservative but has a low COL. Pacific northwest is pretty liberal but high COL. To say you are overthinking this is an understatement. It ****concerns me**** that you'd use a cost function to figure out where you want to live. The difference between the florida pandhandle and seattle are so vast that I have trouble believe you don't know the difference

Post Title: [Training Tuesday] - Weekly thread for questions about grad school, residency, and general career topics 08/16/2022

Post Content: This is the place to ask questions about graduate school, training programs, or general basic career topics. If you are just learning about the field and want to know if it is something you should explore, this thread is probably the correct place for those first few questions on your mind. Examples: * "I majored in Surf Science and Technology in undergrad, is Medical Physics right for me?" * "I can't decide between Biomedical Engineering and Medical Physics..." * "Do Medical Physicists get free CT scans for life?" * "Masters vs. PhD" * "How do I prepare for Residency interviews?"

Comments:

Hi, I'm starting a Master's in MedPhys this September, and I was wondering whether people usually apply during their Master's or after they have finished it? I know the interviewing process would require talking about research but our research project only starts in January so I wouldn't have much done at all, just background research by then. I'm also wondering if they require our results in the application process, if so I wouldn't have them until I finish the next September. I'm wondering if people in the US/Canada apply during the Master's or after? If there is a way I would like to apply during as then I feel I would be wasting a year going through the whole process and being unemployed. Edit: forgot to say applying for a residency

>

Apply to residency? If that's what you talking about that you usually apply on the last year of your masters, same for PhD. They don't required you have results from your research, just talk about what it is, what are you doing and whatever prelim result you have or wish to see. You can always apply later but yes, sooner is better than going 'unemployed', but if you decide

to wait a year, try to find a job on the field to improve your application strength

>>

Oop yeah my bad I somehow failed to mention that I'd be applying to a residency. Thanks for the advice!

>

>Hi, I'm starting a Master's in MedPhys this September, and I was wondering whether people usually apply during their Master's or after they have finished it? Apply for what? Residency? Job? Since you're just starting your Master's, you've still got at least a couple years before finishing. Applying for anything at this point would be a bit premature. Focus on your coursework and project. About a year before you finish would probably be the best time to start thinking about the next step.

>>

Residency, my bad! My Masters is only a year so in that case I'd probably have to apply this year

I'm currently working on a PhD in physics. My thesis work is computational and requires expertise in nuclear physics. Would someone like me be able to get a job doing research/development for new medical imaging technologies? In particular I could see myself doing simulation work, for example, simulating the beam and how it interacts with the environment/bodies/equipment. I would also really like to be involved with clinical research.

>

I can't say specifically. However, I've personally had two colleagues with PhDs in nuclear physics (and I've heard of many others as well) and had extensive experience with Monte Carlo. One of them was researching TSET cherenkov imaging, which involved a lot of Monte Carlo simulations and such. Just saying it's certainly possible, but I'm unaware of the difficulty.

>>

Thanks for replying! When you say these were your colleagues, in what context? I assume you're a clinical physicist because your flair says you're a therapy resident. I'm not really interested in the extra education needed to be board-eligible, so most clinical stuff is out the window. Which is fine with me because I think what I'm more interested in happens mostly in industry or non-clinical roles, but I could be wrong.

>>>

Yes, I'm currently in a clinical role, but this was before I started residency. I was working as a research associate in a lab

doing research that is radiation therapy adjacent. One of my colleagues was a post-doc researcher in the same lab (doing TSET Cherenkov imaging research). The other was in charge of a small animal radiation research platform. Both of them were completing a certificate program part-time and after a few years later applied and matched into residency.

International student here, having previously completed an MSC in medical physics (campep accredited). I'm looking toward the US for career options but do you think there's a real possibility of me getting a residency over there with just a master's + also requiring a visa, or am I wasting my time?

>

You can get an OPT (gives you 3years, so enough to finish residency) which most academic institutions are fine with, as you bear all the costs (\$400ish). Some places also do H1B visas...make sure to individually email all places you would want to apply to before paying for the application, so you don't waste your time or money.

>

If you need the visa assistance it lowers your chances. I know a lot of programs don't want to deal with the hassle. Otherwise your chances are the same as anyone with a campep masters which is decent in my opinion. I prefer many masters students over PhD with only a 1 year certificate. PhD in Medical Physics still is likely the highest sought candidates but there are not many of those compared to the number of residencies.

I'm having a very hard time between choosing if I want to go into Radiation therapy or diagnostic imaging. Can someone help me with the differences between the two? I would love to know stuff like pay, availability of jobs and residency positions, what they do in the clinic, and if one is on track to become a lot bigger in the future. I know it's a lot to ask but any information would be greatly appreciated.

>

From what I know: 1) Pay - Therapy makes more than diagnostic on average, but they also have a worst work/life balance (always a case by case, I'm again speaking 'on average'). 2) Jobs - There's a higher demand of therapy MPs, but all Diagnostics I know had a job lined up 4-6months before finishing residency 3) From the match last year there was around 25ish positions for Diagnostic (if you count all, much less if you only have a Masters), and more than 150 if I remember correctly for Therapy. 4) Therapy works with LINAC, treatment planning, brachytherapy and all else related to cancer treatment, while diagnostic you are working on different modalities such as CT, MRI, US, etc... to see if they

meet regs, image quality and whatnot. Both perform shielding designs for rooms with equipment.

>>

Wow thank you so so much for the great info. This is so helpful. It seems like therapy is just a better path to go then?

>>>

Well, as you can see from my tag I went the imaging path. It really depends on you. Therapy has the higher wages but also has higher competition for residency spots (even with more spots they have more applicants as well) and longer work weeks (I do 40rs a week in my residency, I have friends on therapy residencies that works 60hrs per week, have late nights and all that). Diagnostic has a better work life balance but worst pay (in my place therapy physicists can make up to 100k more than their diagnostic counterparts, something like 140k diag vs 240k therapy). In the end it's all about what you liked in class, what you want your work life balance to be... just go with the modality that you are interested on (my 2 cents).

>>>>

Hmm I'm only a masters student rn but if I want to go into a imaging residency, should I try to have a PhD?

>>>>>

Not really, I got a residency and I'm a masters student also. There are places in both sides of things that only take PhD, but again its up to u. I didnt wanted to do 4 more years to get a PhD before residency

>

I know therapy MPs makes up around 80-85% of MP positions, whereas as DI MP make up around 10-12%, last few percent are nuclear med specialist; if my numbers are up to date.

Would therapy residency programs rather see LoR from a surgeon, radiologist, or research scientist if all other things like career status and relationship were equal?

>

If it's a letter from a well known person in the field it can go a long way. Otherwise it probably doesn't matter as long as the content is positive.

>

Generally, who writes your LoRs is largely unimportant. It's what they can say about you that should dictate who you get LoRs from

Job applications that ask you to state your current salaries. What do others generally do here? Especially when it's a required line in an application form? It seems to have no other basis besides letting a clinic know if they can low-ball your offer.

>

I put in an obviously wrong number (\$0, \$1) and try to note somewhere that I would be happy to discuss compensation later in the process. I try to avoid disclosing my previous salary if at all possible. The exception was when I moved from a very high cost-of-living area to a low COL area—I disclosed my salary because I knew it would be higher than their offer.

>

Pull a reverse uno card on them and inflate your salary (or provide an arbitrarily large range). I've never done it in this field, but I have in others. If they're unwilling to be specific and up front about salary offers, why should we be expected to?

>>

That's dangerous, because some employers will ask you to verify past employment and salary. Some states have banned this, but most haven't. I don't think employers can get this info without your permission, but they could pull your offer if you refuse (in states where it isn't banned). I'm not sure how many would actually rescind an offer upon refusal, but it's possible.

>>>

Ah, fair point. I did this where labor laws are a little more pro-worker. Definitely didn't intend to suggest anything that could get anybody in legal trouble. It's just silly just how much leverage employers have over us.

>>>>

There wouldn't be any legal trouble, just potential loss of an offer or job. Yeah employers have too much power over workers. One nice thing about working for a radonc department at a public university hospital is that salaries are public info and you can easily see what they're paying their staff. It's harder to get screwed.

Post Title: [Training Tuesday] - Weekly thread for questions about grad school, residency, and general career topics 08/23/2022

Post Content: This is the place to ask questions about graduate school, training programs, or general basic career topics. If you are just learning about the field and want to know if it is something you should explore, this thread is probably the correct

place for those first few questions on your mind. Examples: * "I majored in Surf Science and Technology in undergrad, is Medical Physics right for me?" * "I can't decide between Biomedical Engineering and Medical Physics..." * "Do Medical Physicists get free CT scans for life?" * "Masters vs. PhD" * "How do I prepare for Residency interviews?"

Comments:

How to find a job for medical imaging industries (Siemens, GE, etc.)? I'm about to complete my master's degree in physics, specializing in medical physics and imaging. How to contact and enter these companies to do R&D?

>

There's a great AAPM Working Group for Non-Clinical Professionals (WGNC) that I want to shout out that do seminars/discussions on jobs/careers in medical physics outside the clinic. Getting in touch with them and seeing if they have any upcoming webinars or things like that may be useful. The more you can do to find out what **specific** things those **specific** teams you are trying to join are working on, the better. I mean, as specific as you can get. "I know a lot about CT scanners" is less good than "I am really interested in the performance limits of the **specific** detector materials and electronics you use, in this **specific** system, and how we can make them more accurate/reliable/whatever." The engineers working on the R&D of systems will typically spend years (5-10 years) on a single system, with most of them working for that duration on a single subsystem for the overall product. They are very interested in candidates who can bring intelligence and productivity to bear on a very narrow, highly defined problem space. Likewise, talking about the specific problems you dealt with (or even solved!) in any projects or research you may have done, both in the resume and in the interview, is likelier to attract interest than a general listing of courses and textbooks you've completed. If you join a giant conglomerate like Siemens or GE, it is unlikely you will work on a general class of things in your first role there - you will want to make yourself an attractive candidate to the actual team of 5-10 people you will be working with directly. If you join a smaller company, you may find yourself with a broader range of responsibilities earlier on. Getting your first industry job can be a bit of a hustle, but it is if anything probably a little more straightforward than clinical job hunting. I might be a little biased, but a 3-9 month internship is a really good way to learn a lot about the industry, and can sometimes be converted into a full time position.

>>

Thanks a lot for the answer! Is this group open also for students outside the US/offers ideas in Europe? I haven't specified it but I'm graduating in Italy (but with courses and thesis in English)

>>>

I think most AAPM groups are focused on the NA region, but I'm sure they're welcoming. You do have to be a AAPM member to join. I meant more along the line of seeing when they may have another webinar, or other resources they can direct you to. I am not really familiar with the environment for careers in medical physics/imaging in Europe, but I believe there are quite a few well known radiotherapy companies in Germany, as well as the UK and Scandinavia.

[deleted]

>

Generally there is just one mandatory biology course (radiation biology) in a master's program. A lot of programs require that you have an anatomy and physiology course to apply, and that should cover a lot of basic cell stuff (DNA, apoptosis, etc) that is necessary to understand the rad bio stuff. If you are already done with undergrad I'll check if you can take an A&P course as a non-degree student at your old school or a community college (whatever its equivalent is in Ireland).

What pre-requisite biology courses should I familiarize that is necessary for an MS/PhD in Medical Physics? I am an incoming second year physics major and I took a course on fundamentals of biology where we mostly studied morpho- and microanatomy of plant and animal organs. Unfortunately it's an introductory biology course so we didn't touch mechanisms of mutation, radiobiology, and tumorigenesis. Should I read up on cancer, biochemistry, and the like? How strong of a foundation should I establish?

>

In my experience, Anatomy and Physiology is the only non-physics course required by some programs, but most don't expect you to have taken the course before graduate school. However, a background in the biology courses you mentioned wouldn't hurt and might be of interest for PhD programs who do research in that area.

Astrophysics undergrad here, how important is research experience for CAMPEP grad school? There are so many students scrounging for experience like I am and I'm starting to panic I won't get any. I assume it really hurts if you're applying for PhD and probably hurts a bit less for masters? It's tough getting internships as a physics undergrad rn man. Anyone have any advice?

>

In lieu of research experience, programs will look favorably at clinical experience. Try to find a clinic that you can volunteer at, they may even have a project for you to work on once you learn the basics. Otherwise, maybe try for research positions outside of your department? The paid positions at my undergrad were very competitive, but professors were usually more than willing to let someone volunteer in the lab.

>>

OP is correct in that usually PhD programs want to see research experience though, even if it's volunteer and/or doesn't result in publication. At least a couple semesters should be good.

>>>

Yeah I figured, thanks. I'm trying my best to get any sort of research experience but it's tough man, everyone and their grandmother is competing for a very small amount of the available spots and I'm really getting disheartened :/

[deleted]

>

This is the exact right thread to post on, thank you for posting! What about medical physics is interesting to you? Is it the technology, the research, the potential for making an impact on patients using physics? I think most redditors who are active in the field (there's some exceptions though) would probably recommend physics to you `*if*` you are the right kind of person for the field (i.e. methodical, pay attention to detail, good communicator). Just be aware the training is long and you have to learn a lot. I think if you want to narrow your choices somewhat try to spend some time in a hospital environment, either by shadowing a physicist or doing some volunteer work in a clinic, and see if that is something you like.

>>

[deleted]

>>>

A radiology technologist (RT) is the person who acquires the images. Depending on what part of the world you're in, they do no image interpretation, or some interpretation of a limited set of studies (such as in the UK where they're usually called radiographers). Radiologists are physicians who do the primary interpretation of the imaging and perform some types of radiographic procedures. Both are very different professions and have different training requirements, and are also very different from medical physics.

>>>>

Galactium are you based in the US? I know that there are some countries that have the radiologist reading stations in the control room (that way if there are issues with the images the rad can just ask for a repeat right there), but I have never heard of the radiologist actually running the scanner before.

I'm getting my bachelor's in medical physics (not in the USA), however I plan to eventually immigrating, for example if I get my residency will count on something or should I after my bachelor's just apply for a masters in the us?

>

Residencies in the US will invariably require a graduate degree. Your bachelors may be helpful in getting into grad school but you cannot go directly to residency with it.

>>

Oh, I meant if I get my residency in my country, something I can get with only my undergrad and after that eventually immigrating.

>>>

EDIT: found something here: [<https://www.theabr.org/medical-physics/initial-certification/international-medical-graduates>] (<https://www.theabr.org/medical-physics/initial-certification/international-medical-graduates>)

>>>>

Thank you!

Is there anyone here that can supply me with a PDF of Bushbergs "The Essential physics of medical imaging" 4th edition?

>

Search on be-ok.cc It has a lot of goodbooks

>

Got the previous edition on thriftbooks for \$5 - hard cover. Idk if that's helpful but I'm just using it as a reference.

>

Is there a lot different from the 3rd edition? I have a pdf of 3rd and figured that is sufficient for most everything.

I have a physics degree, research experience, and I'm currently working in aerospace engineering (as a simulation modeling engineer) I'm also halfway through an MS in applied physics that I'm doing part-time. Recently-ish (in the last few months) I realized I want to get a doctorate in medical physics. I found a

program that I think will work for me (CAMPEP certified, sort of designed for people who took the long way around) but I'm not sure what, if anything, I can do to make sure my application is as strong as possible. I have about 2 years before graduating with my MS. I'm concerned that I don't have any of the medical background and that I'm coming from an aerospace career. Any advice?

>

[deleted]

>>

My undergrad GPA was less than ideal (I did very well in my upper level classes but I had some medical issues around sophomore year that tanked my grades). I also don't have super relevant research experience, but I'll have some (more relevant) design projects under my belt with this MS. Some of it was quantum optics, which I guess is sort of tangentially related, but I'm kind of hoping that this will improve my chances somehow. My current GPA for the masters is 4.0.

How long does it usually take to hear back from journals like JACMP?

>

I'd give it about 3-4 weeks or so from when you submitted before starting to worry.

Post Title: [Training Tuesday] - Weekly thread for questions about grad school, residency, and general career topics 10/04/2022

Post Content: This is the place to ask questions about graduate school, training programs, or general basic career topics. If you are just learning about the field and want to know if it is something you should explore, this thread is probably the correct place for those first few questions on your mind. Examples: * "I majored in Surf Science and Technology in undergrad, is Medical Physics right for me?" * "I can't decide between Biomedical Engineering and Medical Physics..." * "Do Medical Physicists get free CT scans for life?" * "Masters vs. PhD" * "How do I prepare for Residency interviews?"

Comments:

i am about to join residency this year in November. I want to know about the growth opportunities. how do i grow as a physicist! most of the head of med physics dept have a Phd! .If you were to start today what would be your strategy to grow?

>

There are a few main career pathways: research, education and administration / leadership. The respective ways to grow are grants and publications, developing or expanding a program and taking on large clinical projects and leading AAPM groups. While not all are necessary, many high profile professionals in our field will have some combination of all three of those areas.

[deleted]

>

What is your goal? I view the point of residency to be to get ABR certified to be a clinical physicist, so if you're looking for programs that won't allow you to get ABR certified, I'm not sure I understand the point. That being said, I think there is a list somewhere (I can't find it, but maybe someone else knows where it is) of residencies currently applying to be CAMPEP accredited. If you aren't looking to be a clinical medical physicist, there are biomedical engineering programs that offer a lot of imaging coursework, in case you just want to be medical physics adjacent.

>>

[deleted]

>>>

I think the Harvard/MGH program combines a certificate into the residency which contains a research year (ie postdoc work).

Therapy resident graduating June 2023 here-- Wanted to see what the timeline on jobs is looking like for any other graduating residents out there (and any salary info you'd be willing to share on offers you've gotten). I know the timeline has moved up for the most part but wondering when most of this resident class is going to be getting offers. Thanks!!

>

The senior resident at my location has had a couple of interviews and site visits, but no offers yet. They got these interviews through personal connections, and, as far as I know, they weren't planning on aggressively searching for a position until early next year.

>

I am looking for an specific location. I put up some resumes in AAPM and I have been applying to jobs. People want physicists now but I have gotten calls of departments who were interested. Even though I still have 9 months more, they call back to explain everything and to tell me to keep them in mind. Sometimes departments have planned open positions. It does not hurt to

apply Edit: MS degree. What would be the starting salary with residency plus 3 years of experience? We all know that the salary survey is already old.

>

Same boat. I am probably not planning on starting to aggressively look until January or February at the earliest, and really start trying to nail things down around and immediately after the Spring Clinical. But I am also planning to take a month or two off for boards and downtime after my last rotation, and hoping to find a place to start work in the early/mid fall, so my timeline may be different than yours/others.

>

I'm focusing mostly on the west coast (solving the two body problem with my fiancée) and have applied to a couple academic places this past month. Haven't heard back yet. Generally the salary I've seen is ~150k for an assistant professor role but your mileage may vary. There are good jobs out there, but there's no telling sometimes how long the posting will stay up – my advice to colleagues in the same position as me is to apply sooner rather than later, especially if you're looking for a specific location.

>

The second year residents at my place are still just looking around for job openings and revising their CVs

Post Title: [Training Tuesday] - Weekly thread for questions about grad school, residency, and general career topics 07/19/2022

Post Content: This is the place to ask questions about graduate school, training programs, or general basic career topics. If you are just learning about the field and want to know if it is something you should explore, this thread is probably the correct place for those first few questions on your mind. Examples: * "I majored in Surf Science and Technology in undergrad, is Medical Physics right for me?" * "I can't decide between Biomedical Engineering and Medical Physics..." * "Do Medical Physicists get free CT scans for life?" * "Masters vs. PhD" * "How do I prepare for Residency interviews?"

Comments:

Hello there! New to Reddit but wanted to get some perspective on applying to therapy residencies with a CAMPEP-accredited BME PhD. Even though my doctoral work has been clinical, involving fluorescence guided surgery and MRI-guided surgery, with 7+ publications, I haven't touched RadOnc research! And I am worried

about demonstrating my passion to be a therapy MP. Most successful residency candidates appear to be MSc students with highly focused RT involvement or PhD students who have RT-related research projects. Now I am spending a ton of time shadowing, but I know it's not equivalent to RadOnc research or experience. Any advice or similar stories of successfully transitioning to a therapy residency program? Thanks!

Hi everyone! I'm somewhat new to this field, I'm currently an astrophysics major in my undergrad but the more I learn about medical physics the more I think I'll pursue it in my graduate. My question - what's the difference between the campep route and getting a medical physics certificate?

>

CAMPEP route is shorter, as you don't need to waste time doing the certificate and so you can get a residency faster. Also, I would think that employers prefer CAMPEP graduates...might bring some more prestige and the security that they learner what they needed to do the job.

>>

I see. I believe to chase a certificate you already need a PhD in a related discipline, correct? Whereas campep works more so like a basic graduate program? Or am i wrong

>>>

That's kinda how it goes. to get a certificate you need a PhD in related discipline (Biomedical Eng, Physics, and even non-CAMPEP medical physics PhDs) as you said. CAMPEP has accredited masters and PhD programs in medical physics that puts you in route for a residency without the need to waste a year getting the certificate. So if you know you want to do MedPhys, just go CAMPEP route, if you are unsure, you can do a PhD in related field and decide to do a certificate down the line as well.

>>>>

I see, although I've read that a getting a job and residency through campep is significantly easier than getting a certificate. Thanks!

>>>>>

Oh yeah, CAMPEP graduates should get residencies easier, as program directors knows what you have been taught, as CAMPEP makes it "even"

I'm an international student (Indian) graduating with a PhD next month in ECE. I'm planning to join a postdoc position for about 2 years get the CAMPEP certification and then apply for therapeutic residency. Does anyone know if most of the residency programs

provide H1B sponsorship? Based on my plan I'll need some other sort of sponsorship in the 2nd year of residency. Thank you! Also, is there a ranking for therapeutic residencies?

>

I am an Indian F1 student myself. Based on what I've heard only 2-3 will be willing to do the paperwork for your H1B. You need to understand something about matching, there's no guarantee that you'll be matched to that program specifically, so no OPT? I would say 99% you're out of luck.

>>

Oh, yes OPT! MP RAP shows the schools that accepts international students, shoot them an email to see if they support H1B (mostly don't because it's expensive for them), the rest should be ok with OPT (you pay the 400\$ and have 3 years to work, more than enough for residency).

>

Out of all the residencies, about 60-70% I would say accept international students, and out of all the ones I got interviews with (12) only 1 would do H1B, most of them would do an OPT work authorization (for those students who graduated in the US). Also, no clear ranking, there's schools that are more clinical, others that are research heavy, but they are all CAMPEP so all are good, depends on how you think you'd fit.

I know Medical Physics programs are mainly graduate programs, but has anyone taken an undergraduate program in Medical Physics. I'm heading into my senior year of high school and was looking around for programs and undergrad-med-phys is something I'm considering.

>

Med Phys is essentially a graduate level program with CAMPEP requirements as others have discussed. Some schools might have a sub-matriculation program where you can combine the masters program with undergrad in 5 years instead of the usual 4+2. UPenn used to have one, but not certain after the program was restructured recently. Even without sub matriculation you may be able to take courses that count towards the degree and transfer credits to the graduate degree.

>

I did my MS at LSU and there were a couple of undergrads in some of my classes through their Med Phys program: <https://www.lsu.edu/physics/undergraduate-programs/medical-health-physics.php> . But like someone else said, it's not essential to have medical physics as an undergrad.

>

In the US all you need is CAMPEP which is for graduate programs. As far as know no MP undergrad majors exist (even if they did they wouldn't really matter, since CAMPEP is just grad), so your major could be in anything as long as it meets CAMPEP requirements.

>>

What are the undergrad requirements? When I Google "campep requirements" it's just a list of things you actually need to do during grad school

>>>

<http://campep.org/GraduateStandards.pdf> 3.1 describes it, basically at least a minor in physics, which would entail upper division mech, E&M, modern physics and the like.

>>>>

I see, thanks. I'm an astrophysics major actually so i should be pretty covered haha

>>>>>

Yeah you're definitely good. If you're worried at all you can always reach out to the admissions people of the programs you're interested and double check beforehand.

[deleted]

>

My advice would be to enjoy your summer; catch up on some hobbies, hang out with people you want to. They'll teach you what you need to know during your program. (Programming is always a welcome skill so if you ****like**** programming, do some of that)

>

Many people would say Khan's the Physics of Radiation therapy

How could I prepare myself for a better profile in order to gain residency? More about me: I am doing my 2nd year master in part time. In my country, people just need a master degree in related field (eg. physics, engineering) before they apply for residency. I have seen quite a lot of residents who have experiences in fixing linac/CT MRI. However, my job is not related to radiation and I feel that I do not have any edges.

Starting my MS next month. Have ML Experience in Image Segmentation but interested in Therapy. What research projects

are highly coveted that I can take now? Which will help down the line securing a Residency?

>

Any research on linac, brachytherapy, dosimeters...really anything on the field works. Work experience on the job of the medical physicist, so maybe shadowing one or working as a junior one in a cancer center are very important as well (my friend got a residency with no research, just working as junior physicist).

Post Title: What questions do you have about non-clinical careers?

Post Content: The AAPM Working Group for Non-Clinical Professionals will be hosting three upcoming webinars about non-clinical medical physics careers. During the webinars, we want to address questions medical physicists have about non-clinical careers. Please post your questions here or private message them to me! No questions are too small or too big. If we can't answer them all during the webinars, we will use them for future events and/or AMAs. Thanks!

Comments:

What kind of remote work is available for medical physicists?

I would appreciate more visibility on the diagnostic side of industry. These discussions almost always hyper focus on therapy, specifically vendor related work

What are the working hours and the lifestyle like? It amazes me how much concentration even I still have on "The Salary", when the number becomes irrelevant (and diminishing returns thanks to the IRS) after a certain point, especially if you never have time off to use the money to the benefit of yourself or others... I wonder if it would be better to start talking in terms of a Quality Of Life Index rather than "salary", and I suppose this probably already exists somewhere ... $QOL = \sum_i w_i k_i$ where
* k_1 = salary * k_2 = vacation days * k_3 = hours per week * k_4 = working environment (*e.g.* do you have to wear a mask all day everyday because of the ~0% risk of COVID?) * k_5 = team dynamic (toxic politics or friendly banter, etc) * k_6 = location details (city, state, infrastructure, politics, etc) I am wondering how one even gets such information, particularly about your potential team members, before you actually commit to being there and finding out how people truly are ... Even posting just k_1 -3 might seriously challenge clinic careers if people find vacation days and free time every week outweighs the increase in salary.

>

Bold to claim that covid-19 [has a ~0% risk.](<https://coronavirus.jhu.edu/data/mortality>) Particular as someone working in cancer healthcare, where there's a higher likelihood of immunocompromised patients.

>>

Mm. Obviously the details matter. Risk is a function of multiple variables. Forcing everyone without exception to wear a mask all day long regardless of context is comparable to wearing lead aprons everywhere because *sometimes* there's radiation and some people are exceptionally radiosensitive. Sometimes masks are appropriate, just as sometimes lead aprons are appropriate. (Edit: Or standing behind leaded glass if you like; I am aware of AAPM Virtual Library videos teaching that gonadal shielding is no longer recommended.)

>>>

Radiation isn't contagious... If everybody stops wearing masks in the clinic, what's to stop an outbreak from occurring and infecting patients as a consequence? The risk is there and measurable, period. It has a clinical impact and masks significantly reduce it. The data has been in for over a years now. And are you really arguing that a small (but measurable) increase in safety for patients is less important than the burden of simply wearing a cloth over your face? If taking every reasonable precaution for the sake of patient safety is so appalling to you, this is definitely not the right field for you.

>>>>

You're misrepresenting my argument, and you're bickering like someone who hasn't looked carefully at the science.

I'm doing my PhD in Medical Biophysics, without the accreditation, and a focus on MRIs. I know very little about non-clinical careers in this field...so I guess I'd want to know what's out there, what the lifestyles and pay are like, what types of skills are valued. Are these webinars free access? I'd love to see them

>

The webinars are free to access for AAPM members.

What differences in roles in industry would someone fresh out of a Master's program in Medical Physics have compared to someone who has a few years of clinical experience / residency?

Couple of questions: What does career progression look like in industry, and what are the skills that will help one to succeed? I noticed there's a blog post on careers in science writing. How

does one successfully pivot into that, and what kind of agencies have past medical physics graduates gone into?

Do you know anyone hiring right now? Haha but really...

How do you find these jobs? How well are they paid relative to standard clinical physicists? Are any of them remote?

>

Thanks! We are going to cover some of this in the first webinar! Some initial information about salary can be found in these blog posts: <https://aapmstsc.wordpress.com/>

What other job examples are there besides research?

>

Go work for a vendor who sells LINAC/TPS software. You can train new sites on the software, you could have a hand in creating new versions, you could travel, you could be in research, etc there are many positions to choose from. Also university academic route, be a professor etc. I am sure there are a plethora of others.

>

Excellent! We are covering that in the first webinar! If you want to learn more now, here are some initial resources: Blog posts: <https://aapmstsc.wordpress.com/> Past presentations at AAPM: <https://www.aapm.org/education/VL/default.asp?t=ByTitle&Title=career&submit=Submit>

Post Title: [Training Tuesday] - Weekly thread for questions about grad school, residency, and general career topics 08/09/2022

Post Content: This is the place to ask questions about graduate school, training programs, or general basic career topics. If you are just learning about the field and want to know if it is something you should explore, this thread is probably the correct place for those first few questions on your mind. Examples: * "I majored in Surf Science and Technology in undergrad, is Medical Physics right for me?" * "I can't decide between Biomedical Engineering and Medical Physics..." * "Do Medical Physicists get free CT scans for life?" * "Masters vs. PhD" * "How do I prepare for Residency interviews?"

Comments:

Any dosimetrists in or near Madison WI? I am interested in the UWL Dosimetry Master's Program, and one of the requirements is 40 hours of observation. Any help would be appreciated.

TLDR; what options for work are there for a MP M.S. holder with no residency? Howdy everyone! I'm going to be entering Georgia Tech's MP M.S. this August. I'm really excited to go, however, I'm sort of dreading the residency process. Residency acceptance rates are really *really* dismally low, especially for those only holding an M.S. Questions are: 1. If I were to fail to be accepted to a residency in my first go-around or two, what could I possibly do as a stop-gap? 2. What jobs make me more attractive to residencies? 3. Furthermore, what can one do with just a MP M.S. for an indefinite amount of time? Thank you ALL so much! Excited to join your ranks :)

>

1. You can work as an MP which is a good way to make some money and get experience on the field. You can also go work in industry, that's the route for non-residency MS holders. 2. Any job in a cancer treatment center or radiology department, depending on what type of residency you want to do. Try to shadow physicists and get some hands on experience on the different equipment types. 3. Going back to 1, with an MS you can become a MP assistant, but mostly I see people going into industry.

Hello Everyone, I wonder if an applicant who has not fully completed a certificate program (non-medical-physics Ph.D.) is eligible or could be considered for residency application? In this case, the applicant could write how many courses have been completed and how many will be finished. This will be written in a personal statement. Or, would it be possible that 1 or 2 courses could be done during residency training? Thank you!

>

Pretty sure everyone requires that all courses be completed by residency start date.

Hi, y'all I wanted to enquire about how strict schools were with GPA requirements. I messed up one semester which brought my GPA down to 2.8 due to a death in the family (my sister) in the middle of a semester and it was past the withdrawal date so I stupidly finished out the semester. I have done just fine in my higher-level classes and have 2 years of research experience (a pair of second authorships). Will I have an opportunity to explain the circumstances at all in hopes of a conditional acceptance? My professors who are writing my letters of recommendation know about this situation and have said that there is potential that semester could be sort of overlooked since I have made amends in my following semesters to rectify the

academic mistakes. My sister's death has now become the reason I want to go into medical physics as well and I apologize for being all over the place here.

>

I have personal experience with exactly this. During my undergrad, I had *several* semesters in the middle of my degree where my GPA fell around to your level (one was even lower) due to a serious medical issue I was going through. My overall GPA was around 3.3 after all was said and done. I had a semester of research experience (no publications) and was non-traditional since I worked in finance for a bit. I explained all of this in my personal statement and during interviews. I also explained how it ultimately influenced me to pursue medical physics. While your experience will vary (so take mine with a grain of salt), I was accepted into the three MS programs I preferred and applied to (for one, I was waitlisted, but eventually accepted to it). It's certainly possible for you as well, just make sure to compliment your application with signs of interest (I shadowed a local physicist to better understand what I was attempting to get into) with good LORs and things that show you're safe (this is literally the most important aspect of our life), mature and can handle the stresses of a graduate program.

>>

This was really helpful thank you, I needed to hear this

I currently work in a hospital and recently had a conversation with our medical physicist who does diagnostic only. He said that there's not a big pay difference between master's and PhD (were in Arizona). Is that generally the case? He also recommended going the therapeutic route since there are many more job opportunities. I just want to confirm with these claims because I originally was interested in the diagnostic route but after hearing that it seems like I might switch to therapeutic. Both seem interesting to me.

>

Yes there is a somewhat higher salary for PhD holders but depending on the center they may have additional duties like research and/or teaching that offsets that additional money. As far as therapy vs imaging you won't be on unemployment with imaging but you certainly have fewer total job openings to apply to. However, therapy usually works more hours, especially at academic centers. Personally I am going diagnostic because I am much more interested in the imaging side of medical physics, as well as the somewhat better work/life balance.

First time posting here as I try and determine what path to take to transition into the field of MP. Currently have a BS in Astrophysics and BS in Computational Mathematics. Some grad

coursework done in Nuclear Engineering only for my time in the military but no degree out of it; so now that I'm post-military, time to focus on this transition! Located in the DC area with my husband where we are starting our family soon. In this area they really only have MSMP programs at Georgetown U (CAMPEP approved) or Johns Hopkins U (CAMPEP pending, new-ish program). Logistically staying in DC would be best for now and then later moving to a PhD program elsewhere. Yet I'm well aware where some of the better MP grad programs are, where I could enroll in a PhD program immediately somewhere around the country, just don't know how feasible living apart from my family would be (also not ideal since we have only ever done that living the military life and I'm exhausted from it) or picking up and moving us all when my husband has a full blown career too. I know we'll have to figure that out though... Questions to the group - any familiarity with a pending CAMPEP MSMP program as far as timeline goes to become CAMPEP accredited; familiarity with Med Physics programs at JHU specifically, or Georgetown; or any guidance on if pursuing a PhD in Physics etc and then later getting a CAMPEP Certificate is worth it or is it frowned upon in industry. Thanks in advance for any insight to any of the above situations presented. Sounds like each path has a lot of benefits to it for your individual academic and career path. Working with the patients is a goal of mine for sure in addition to research.

>

If your goal is to do clinical physics, you can still make that happen with an MS (no PhD). You will have difficulty being "faculty" but you can still be very involved with research as a MS. If your goal is to *really* do research, one other route you could take is get the CAMPEP accredited MS and then continue on doing a PhD in biophysics, bioengineering, etc, with one of the faculty who are involved in medical physics. The CAMPEP MS will make you eligible for ABR Part 1. NOTE: I don't know what the timelines are (e.g., if you get your MS and pass ABR Part 1 in 2025 and finish your PhD in 2029, would you be OK to take ABR Part 2 in 2031 when you finish residency?). this is something to look up. The certificate program has mixed reviews. I know some people that did the certificate program and had no problem getting residency, whereas others didn't even get interviews for residency. In general (and obviously) it seems like if your non-CAMPEP PhD is medical physics related, you will have much better luck going the certificate pathway. One other thing to consider is that you will need to do a CAMPEP accredited residency. Are you willing to move for this if you don't get one locally? Same thing for a job, particularly if you want a faculty job. Finally, if your goal is working with patients, you should be aware that many medical physicists rarely work with patients. Some medical physicists do, but many have very little patient interaction.

>>

Echoing this sentiment about moving. Limiting yourself to one city/metro is going to reduce your chances of getting a residency _significantly_.

>>>

Thank you to you both. I really am not a fan of limiting myself to one location at all, just not ideal logistically at this stage, but I guess that is where we make the necessary sacrifices up front to do what is best for the long haul. I'd like to apply for a variety of PhD MP programs, none of which are in the DC area, so that is already something we are considering is having to move - UPenn is nearby, but I imagine highly competitive, so I will apply there and that would put me in a place to be nearby to DC if my family were to stay here. Just kinda gotta see what programs I get into. Definitely when I get to the residency portion of whichever path, we will be open to moving. Not tied to DC at all, just right now getting into a graduate program I'm trying to weigh my local options before we up and move. Ideally I'd like to find a PhD program in MP, get a MS along the way perhaps, find a residency, get board certified, get a job. That seeeeeems to be the best path forwards from several discussions I've had... Thanks again for the insight.

>>>>

I think that in your situation it really comes down to whatever you and your husband are most comfortable with, redditor advice can't compete with that discussion haha. But know that MS and PhD holders both go on to have successful careers in MP, it's just they usually have to move a bit in the beginning.

Hey everyone! I was wondering when best to apply for a phd when doing a masters in medical physics. I wish to go from masters to PhD and I was wondering how the process looked, when best to apply, and whether or not master students hold more merit than undergrad students. Thank you!

>

Generally: master's holders have an advantage over non-masters holders all other things held equal, because you show that you can handle a graduate curriculum, and probably do legit research too (if you have some abstracts or a publication under your belt), all very important things for PhD candidates. Now specifically, if you are already in a master's program, and your school has a PhD track in your department, there probably exists some formal mechanism for transitioning to the PhD track outside the normal application route, with its own deadlines and paperwork. Check if that is the case at your school.

Hello Everyone, I'm planning to apply to a MedPhys Ph.D. program after pivoting from a pre-med trajectory. The problem is that I have all these LORs I intended to use for med school. My question

is can I use my med school LORs for my Medphys app or if I should ask for a new LOR?

>

Absolutely get new LORs. Assuming that you got good letters the first time around, there are going to be multiple arguments by your letter writers as to why you would be a great fit for *med school specifically*. No PhD admissions committee is going to want to see that in your application packet.

>

It kind of depends on your relationship with each reference imo. I can't speak to what med school LORs are typically like content-wise, but you'll want at least one LOR to specifically speak to your research abilities/potential for PhD applications. PhDs are essentially research positions, so unless you were planning to apply for MD/PhD programs, then I'd think you'll want LORs more specific to research, and ideally research relevant to medphys . Other than that, I think application reviewers really like to see demonstrated commitment to the path you're applying for, considering a PhD is at least a 4-year investment for both parties. If your LORs have a med school vibe to them, that could be an immediate turn-off to some reviewers in a medphys PhD program because it would cause them to question whether you either mistakenly applied or are not fully aware of what a PhD in medphys entails. So if you have a mentor that you've discussed a medical physics career with, or even better a medical physicist you've worked with, I'd ask them for a LOR. TLDR: you'll at least want new versions of the original LORs to tailor it specifically to medphys/research potential to be safe. best of luck!

Hello everyone! First-time poster here, but I have followed this sub for a few years now :) Having recently finished my PhD and turning towards residency preparation, I had a few more questions building off the recent medphys match discussion. I have spoken to a couple programs wanting to leave the match- they are hoping to secure a resident in the next couple months. Can anyone give insight into the potential benefits of getting a residency outside of the match? Is it a "red flag" if you accept a position outside of the match? What about relatively new programs wanting to operate outside the match (or are newer programs something to look out for in general)? Of course it's nice to be wooed, but I worry that this may limit exposure to other programs, although we do have the secondary residency fair coming up. It's a stressful (and exciting) decision- ultimately it comes down to finding the best fit possible and getting certified. This obviously adds some pressure. Any advice (therapy or diagnostic) would be appreciated!

>

definitely not a red flag! you gotta do what's best for you, match or no match. would agree with the other comment regarding newer programs, be careful there. Anecdotal, I applied to one non-match program i was interested in, didn't hear back then entered the match. So if you're at all interested in a non-match program, it doesn't hurt to apply and see what happens as long as you understand what you're getting yourself into

>

Benefit - you have a residency position. congrats! You don't need to interview at 10+ places, spend thousands of dollars on travel (maybe less now due to remote interviews), or worry about matching. Negative - you have a residency position. You are locked into this residency and cannot explore other residencies (if you back out of any agreement, it will look really bad for you). You are correct, it will limit your exposure to other programs. Negative - is the new program CAMPEP accredited? If not, that is something to be worried about, unless you are confident they will get accredited. If the program is CAMPEP and in good standing this is not a concern. Red flag - no one will care, or probably even remember, if your residency program was in or not in the match in 2.5-3 years when you graduate.

Post Title: [Training Tuesday] - Weekly thread for questions about grad school, residency, and general career topics 07/26/2022

Post Content: This is the place to ask questions about graduate school, training programs, or general basic career topics. If you are just learning about the field and want to know if it is something you should explore, this thread is probably the correct place for those first few questions on your mind. Examples: * "I majored in Surf Science and Technology in undergrad, is Medical Physics right for me?" * "I can't decide between Biomedical Engineering and Medical Physics..." * "Do Medical Physicists get free CT scans for life?" * "Masters vs. PhD" * "How do I prepare for Residency interviews?"

Comments:

Is a yearly executive health exam part of your benefits package?

University of Tennessee Medical Center in Knoxville. This is where I'm going

Does anyone has an idea how can international students join to medical physics job shadowing if it is out of their own school?

>

Just ask around, shadowing is not a paid job, or a job at all (should be a volunteer position) so it doesn't violates any USCIS

law on international students work permits. If you get an outside your university job (actually paid and not just volunteer), make sure to get an CPT to stay legal. This is advice, make sure to clear everything with your school international advisors.

Hi so am little young but i must take the decision I have some questions regarding this career , firstly as a young person, will this career remain for like 20 to 40 years or it will be replaced by other alternatives , in other words, will it last forever? second question, i really like this career however now i study the british curriculum (international) and am kinda stuck at what to choose at A levels i heard that it requires a good knowledge of math and physics thats why am going to be taking those , yet idk whether chem or bio are important or not 3rd question, ill be either at Australia or Canada so how is the career there ? finally is there a lot of demand on this career?

>

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>>

>thank u bro i really appreciate it , sorry for wasting ur time , i will study medical physics for sure as i extremely adore maths and physics and as i heard, the job opportunities are quite guaranteed , thanks again

Does anyone know of residency programs that are CAMPEP accredited but not participating in the match this year? Also any new programs joining this year for MS degrees?

>

I don't have a complete list but maybe we can piece one together. To start: MD Anderson Vanderbilt

>

I don't believe there is a definitive list anywhere, but the programs not participating in the match normally post on the AAPM's career board and in the list-serve when they are actively seeking applicants. As for new residencies, check the places listed above, here (this subreddit - I think one posted semi recently), and the CAMPEP Accredited Residency page for when the entries are last updated.

What consists of professional experience on the MP-RAP application? Does this include graduate research, awarded fellowships, or strictly industry-based professional experience? I can't seem to find an explanation of this anywhere.

>

The MP-RAP is very freeform. Put whatever you think is relevant (all the ones you listed would be fine), and the program director and interviewers will ask you questions as needed. Just be sure to keep your CV easy to read and highlighting your strengths. Every residency committee is going through tons of these applications and you need to make your strengths stand out in the little time they'll spend looking at it

[deleted]

>

I've been told that for many residencies they are looking for someone that they want to work with, can trust to work independently and trust that they will ask questions when they do not know the material or are at the limit of their knowledge. Larger academic centers are also looking for residents that can contribute to ongoing research and make a niche for themselves.

>

You aren't expected to have a vast clinical medical physics knowledge prior to residency, that is what the residency is for. It may be helpful, but certainly not required. Just being able to effectively communicate about your own research is important. During interviews, show an interest in wanting to learn clinical medical physics and you will get a long way. Ask a lot of good questions.

Does anyone have tips on interviewing for app specialist positions in industry? Going for one in a week, and am not quite sure what to expect.

>

Usually they want to see that you have customer service skills. Can you interpret a problem and communicate it to someone else at different levels. Are you able to train others on a product or new feature? Do you naturally want to learn applications in depth and understand them at a level most people won't ever need to use? In my experience, this is the kind of person they are looking for. It helps, but not required, to have experience with the application/product you are interviewing for. Most app specialists will have much more intense internal training to put you through that customers don't have access to.

>>

Thanks for this! I'll keep these in mind (:

What are clinical physicists here using to find new job listings? LinkedIn, Indeed.com, AAPM, and/or just word-of-mouth?

>

All of the above. Word of mouth works best but it's not the only way. Join the listserv too. A lot of job postings on that.

[deleted]

>

I went through grad school applications last year (so take my opinion with a grain of salt because I am still new to the field) but when I applied to grad school and asked about residency acceptance odds, I was recommended to apply to Ucalgary, western, Uvic and UAlberta. I was told McGill is a great program as well but getting funding can be tougher.

Post Title: [Training Tuesday] - Weekly thread for questions about grad school, residency, and general career topics 07/12/2022

Post Content: This is the place to ask questions about graduate school, training programs, or general basic career topics. If you are just learning about the field and want to know if it is something you should explore, this thread is probably the correct place for those first few questions on your mind. Examples: * "I majored in Surf Science and Technology in undergrad, is Medical Physics right for me?" * "I can't decide between Biomedical Engineering and Medical Physics..." * "Do Medical Physicists get free CT scans for life?" * "Masters vs. PhD" * "How do I prepare for Residency interviews?"

Comments:

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>

Hey, there's actually a new thread for this next week, so you'll probably want to ask there if you want a response

I am doing my 2nd year MSc in Medical Physics in part time in Asia while working full time. In my country, people just need a master degree in related field (eg. medical physics, physics) before they apply for residency. I have seen quite a lot of residents who have experiences in fixing linac/CT MRI. My current job is not related to radiation or imaging, and I feel that it is a disadvantage for me. What would be your advices for me to prepare for residency if I do not have related exp?

On average, how much radiation is a therapeutic medical physicist exposed to a day?

>

Very little.

>>

How does it compare with the average daily amount of radiation that a normal person receives?

Has anyone graduated with an MSC or PhD in medical physics and works in biomedical engineering? Is that an option?

>

What realm of biomedical engineering? Are you thinking big companies? Startups? Medical physics is kind of a weird field that isn't really engineering and isn't really science but many companies can't be fussed about the exact nature of your grad school research unless it applies exactly.

Is it possible to be able to study full time the MS medical physics program while working part- time (10-20 hrs) on campus? Is it doable to juggle school and work? How much time do you have for your own personal activities and time?

>

Maybe; more so if you work weekends. Many programs recommend you not work part time because they want you to focus on your graduate work. The thinking behind it is because shortly after you finish your coursework, you will be working in the field full time making okay-ish money (as a resident). If you have free time during the week, it's better spent shadowing physicists or working in the clinic if you are able. This will help you out when it's time to Match. I worked as a TA/Instructor in the Physics department 15-20 hr/wk while I was in Grad School for Medical Physics. Several other classmates did as well. It added a lot of work that many other classmates didn't have to endure and ultimately put me behind. I didn't finish top of my class, but it all worked out for me. I matched to my #1 and then found a job fairly easily after residency. I do think I would have had more options (interviews) with better grades. So just remember to put your graduate studies before your job. If you're going to be a medical physicist, then remember to focus on that as your career. If you can manage a job and be successful in your coursework, more power to you.

For 2023 ABR part 1, I heard they were doing an exam in January and August. The application period for both are August 1st to September 30th. I hope I pass in January but if I don't would I be able to take it in August? If I had to guess after looking through the website, it seems like you'd have to pick one.

I'm concerned that I can't push myself to finish my PhD. So far, I've finished the additional course work, so it's just the research component. I have a first authorship and will have a second one in the coming months, both for MP-related works. I'll have other authorships that aren't related to MP. However, i need

probably 2 more papers for the thesis i plan on doing. I've been working part-time for a local hospital's (which also has a residency program) dosimetry department for the past year. I passed abr part 1 August 2019. I applied for residencies for the 2020 July starting date but didn't get a position. Had a couple in-person interviews at places local to me. All things considered, I know I'll be in a good position for a residency once I finish, but I know I won't be able to finish for the upcoming cycle unless i get incredibly lucky and pick up the pace, so I'd have to wait for the next one. All in all, this feels like an incredibly long time of *not* being a physicist and it's hard to come to terms with some days. Edit: the lab I work with is fantastic

>

I don't actually hear you saying that you're unhappy. If you are, then give serious consideration to quitting. If you're happy, then there's no race whatsoever.

>>

I don't think I'm quite as unhappy as I'm fearful that I'm not moving forward and will take more time finishing this than I'd like. It just feels like I'll be a fossil already if I were to take another year and a half to finish my PhD and then finish residency at 31

>>>

If you haven't found your way to them yet: <https://phdcomics.com/> It won't solve your problem, but at least you can laugh about other people spending 15 years in grad school! But seriously, unless you have sick parents to support or something, there's no hurry. At some point you'll probably long for the days where you could really sink your teeth into a research project and give it the time it deserves. If you are unhappy or find the financial aspect especially compelling, then do make serious consideration towards quitting. Sometimes having a solid alternative plan will help you decide whether it's worth continuing. Unfortunately since residencies aren't that easy to come by it's a little complicated to hedge by applying to them and unclear what you should be promising about your academic status to each, but I'm sure there are plenty of ABDs out there doing great things!

>>>

"You're going to be 31 anyway, would you rather be 31 with your accomplishments or without?" is the best advice my mentor gave me. I'll be finishing residency at almost 30, and it's worth it for me.

>

You're not alone! I know people who are in a similar position as far as feeling like they're spending too long on their PhD and just want to move on. I even had this feeling towards the end of my MS, when it was unclear if I would finish on time. One thing that helped me was talking to a professor who wasn't on my committee about how I was feeling. He helped put things in perspective and figure out an action plan of how to get through the last six months of my program. As long as you're reasonably happy with your research project it sounds like you're on a good track, just remember that you've already come a long way which is something to be proud of by itself.

I'm a 2nd year PhD student in a BME/Med Phys program doing research in fMRI methods and cognitive neuroscience. I read through this subreddit and see all of these clinical questions and always wonder: when did you all start gaining clinical knowledge/experiences? Was it during your degree program, through your research, or all during residency? I guess I'm just wondering how much clinical knowledge I should aim to have before residency, and how much I should focus on my research relative to trying to secure clinical shadowing experiences. Thanks in advance!

>

The majority of your clinical knowledge and experience will come from the residency program (that's the purpose of the residency). Clinical exposure during grad school is nice and if you have the opportunity to get some clinical time in, go for it. Your focus for grad school should be your research and learning the fundamentals of medical physics.

Is it possible to move/work in Europe after going to grad school in the US? I have an EU passport and am thinking about moving to Europe after finishing my PhD but not sure how that would work with certifications.

>

Things are very different between the different countries in how open they are to people coming in with foreign qualifications. I would imagine that as long as you have an expectation of doing some further training that a PhD is a PhD no matter where you get it, but e.g. a part 1 ABR pass won't do much for you.

Post Title: [Training Tuesday] - Weekly thread for questions about grad school, residency, and general career topics 06/21/2022

Post Content: This is the place to ask questions about graduate school, training programs, or general basic career topics. If you are just learning about the field and want to know if it is something you should explore, this thread is probably the correct

place for those first few questions on your mind. Examples: * "I majored in Surf Science and Technology in undergrad, is Medical Physics right for me?" * "I can't decide between Biomedical Engineering and Medical Physics..." * "Do Medical Physicists get free CT scans for life?" * "Masters vs. PhD" * "How do I prepare for Residency interviews?"

Comments:

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>

For dosimetry board certification, you want to go to an accredited program that lasts at least 12 months. The ones I know of are 12 or 18 months, but there might be others. Here's a list: <https://www.jrcert.org/find-a-program/> Before that though, I would recommend finding a clinic near you and seeing if you can shadow a dosimetrist for a day or two. Good luck!

Which DMP program is the best between the ones below? (Therapy Track) Wayne state vs UT san Antonio vs University of Nevada

>

Ask each of the residency directors about the number of graduates and their job placements. I'm not sure about the other institutions, but I'm only aware of 1 DMP graduating from WSU. The DMP as a whole isn't exactly a common educational pathway.

Not sure if this is worthy of a full post or not, but here it goes. What (if any) countries would I be able to work in as a medical physicist after I pass ABR part 3. I know this accreditation is centered around the United States, but leaving the country might be an enticing option once I'm done with schooling, residency, and such. Does anyone know if other countries (like Germany for example) have the same sort of requirements? If so would I be able to apply for accreditation in other countries, using the ABR certification to count for something?

>

Check out the certifying body of the country you want to work in and see what qualifies as a similar certification. There are [[alternate pathways](https://www.theabr.org/medical-physics/initial-certification/international-medical-graduates)](<https://www.theabr.org/medical-physics/initial-certification/international-medical-graduates>) for international Medical Physicists to become ABR certified in the US, maybe the same exists in Europe and elsewhere.

Any advice for someone who deals with anxiety/imposter syndrome? I am a strong student and love physics, but even still I sometimes feel like a fraud and that I am not smart enough. I am

only undergrad still and want to learn how to deal with this before I start graduate school.

>

I was about to type up a full response, but DavidBits said it better than I could've. Just remember, whether or not it appears to be the case, many of your peers are probably in the same boat as you. It's hard to admit that you don't feel like you know something, but as you dive deeper into physics you learn that you still don't know a lot of things. It is just the nature of physics. I'm sure you are very smart and capable, but don't be afraid to admit you don't know something. Many other people probably don't know it either.

>

What helped me was realizing (and later discussing with my peers as well) that **most** of your peers feels the exact same way. You're literally surrounded by some of the brightest minds society has to offer, you yourself being there because you are also one. It's easy to be surrounded by that and feel... common. It's especially easy when you're literally there to push yourself and see firsthand that, no matter how much you think you know, there's an ocean of knowledge out there to explore. One lifetime isn't enough to explore it all, and that's fine. Cases of nepotism aside, yes, having the opportunity to be there involves a lot of luck, (never forget that, you're blessed to be there and be able to perform well, many aren't), for most it still requires a lot of work and dedication to be there and be a strong student, especially in a field such as ours. In my time in undergrad, in grad school, and in my time as a research associate, many many people felt the same way. Some of the smartest people I know routinely called themselves dumb just because they weren't knowledgeable in some particular skill or area, which is ridiculous. Everybody explores different parts of that ocean. Explore what you want and forget the rest. Also, I love physics as well and understand a lot of it fairly well, but a lot of times physics is just plain hard haha.

For myself and others who are starting residency soon: Any tips or recommendations for residency? Resources to read, useful things to have, general strategies to go through it successfully, etc.?

>

Residency, unlike grad school, is a job with specific professional expectations. Be on time. Go to all meetings. Remember to be present and ask questions, but also most people in your department are there to do a job, so don't be a nuisance. Work hard and have fun!

>

My advice hasn't changed much: You are there to learn and are not expected to know everything going in. Make an effort to be present in whatever you are doing and ask questions often. Let your current rotation guide your reading. I would review material and reports from previous rotations often to keep things fresh. Get to know everyone in the department well. Not just physics/dosi and doctors. Nurses, MA, IT, cleaning staff etc. They will all be helpful to you many times and it's good to build those relationships. Enjoy your time and good luck!

What's the fastest way to get through the education process? I plan on summer classes. Anything else?

>

I'm not aware of any accelerated programs or self paced programs. Maybe someone else might? Most graduate begin in the fall semester and run two years. That time usually has specific classes, labs, and/or rotations that only run at specific times during that two year cycle. Then you would need a two year residency assuming board certification is your end goal. Add extra time for PhD if you go that route. Things to help speed up or make the process easier: Take pre reqs in undergrad or at a community college. Just make sure they transfer. Complete ABR Part 1 between years 1 and 2 of school. It's something nice to have completed on your application for residency but not required. You will need to register for this test early in year 1 so get on the website to check deadlines early!

>>

Thank you!

Any tips for applying to residency, such as how you're CV should be formatted?

>

Check out an online CV creator and find some of their templates to see which one you like best. It should look professional (not whacky) but a fresh look will beat the bland ones we see all the time. At the end of the day though it's about the content of the résumé not the format so make sure you include all the relevant information in it.

>>

There are lots of \\LaTeX templates that look good too if that's your cup of jam

>

I think I just copied a template online or from Google docs for mine. As for the content, I took advice from my advisor and program director. For better or worse, I added every single tool

or experience I was familiar with from school. I also tried to be clear about what I observed versus what I was an active participant in. "Performed IMRT QA with MapCheck, Portal Dosimetry" and "Observed Eclipse SBRT planning". My theory was they would see what equipment I was exposed to and could pick up quickly and that my graduate program prepared me in a wide range of regular clinical experiences. It probably ended up being longer than it needed to be but it ended up working out for me. I did include a single page resume as well so they could get a summary at a glance. Try to keep your resume and CV updated every few months during residency and even throughout your career. You never know when you'll want to send out an application.

>

I think formatting is pretty open, people in my class had a variety of different looks. The sections are also a little arbitrary, obviously need education and clinical experience sections. Publications and/or conference posters/presentations should also be in there, maybe some work experience if it helped you in developing pertinent skills. Be creative to help yourself stand out!

Post Title: [Training Tuesday] - Weekly thread for questions about grad school, residency, and general career topics 05/03/2022

Post Content: This is the place to ask questions about graduate school, training programs, or general basic career topics. If you are just learning about the field and want to know if it is something you should explore, this thread is probably the correct place for those first few questions on your mind. Examples: * "I majored in Surf Science and Technology in undergrad, is Medical Physics right for me?" * "I can't decide between Biomedical Engineering and Medical Physics..." * "Do Medical Physicists get free CT scans for life?" * "Masters vs. PhD" * "How do I prepare for Residency interviews?"

Comments:

I am an X-ray tech. I don't like patient care at all. I love the logical and analytical aspects of radiology. MR is my favorite, but i want to learn and have a job based around the science and reasoning of radiology, much less the positioning and treatment, Is this a good career switch? it it common for rad techs to make a switch like this. I also like medical dosimetry. What is a more realistic approach and what will support me more financially?

I'm in my last quarter of undergraduate before attending a PhD program and am looking into taking one of my spring classes Pass/Fail. It's a machine learning course that I'm taking out of pure interest. I'm worried that a Pass/Fail grade (vs ABC grade) might reflect poorly if I pursue residency or more education after my

PhD. Does anyone have any insight/thoughts about whether this matters as much as I'm worrying it might?

>

"More education" - I mean...there is none right? You're done. Time to enter the work force and start earning your keep. Residency - a single course between a bachelors and a PhD as a pass/fail compared to a letter grade is so inconsequential it's hard to put into words. "whether this matters as much.." it doesn't. It means pretty much ****zero**** in your future endeavors. Take it. Or don't.

>>

I would guess it means at most a certificate if the PhD isn't CAMPEP already.

>

I highly doubt 1 PF credit will factor much in residency apps, especially if you are completing a PhD. Don't worry you'll be fine.

[deleted]

>

This sounds like a really sketchy situation, especially since he is apparently blaming you or trying to throw you under the bus. This isn't normal at all. Some collaboration is expected in a team but if what you're saying is accurate I'd be very suspect of this person. I am assuming with "30 years" of experience he's much older than you and maybe has more surface level credibility to outsiders, so you should be very careful. What does your supervisor think of this? Does this new physicist report to the same person as you do?

>>

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>>>

Haha I am glad you're getting out. Good luck with your new job!

I am a junior applied physics major currently writing my thesis proposal. My program is focused in medical physics and I am also planning to go to the medphy route after I graduate. Can I get some suggestions on what would be a good topic? Currently, I am writing about making a bjt dosimeter but I am not sure.

>

Do you have an advisor that is doing medical physics or medical physics research that can suggest topics? Do you have any interests besides dosimeters? Medical physics covers many topics and there are many, many "good" topics to choose from.

>>

I don't have an advisor yet because I have to show them my proposal first. I am searching topics related to radiation physics but I still haven't picked one yet.

>>>

That is interesting, I've never heard of undergrads having a proposal but no advisor yet. The only thing I can suggest is that you pick something that lies in the middle of the venn diagram of A: things that you are most interested in radiation physics and B: things that you know potential advisors in your department are working on. You obviously don't want to work on a topic you don't care about or even hate, but you also don't want to work on something that nobody near you can give you practical hands-on advising with. Good luck!

What is the career outcome as a Phd certified MR physicist (ABR or ABMP)? I don't live in the US but plan to apply for a Phd on a CAMPEP program and pursue a career in the field of MRI. In my country I'm familiar with duties and day to day routines of a x-ray diagnostic physicist and Therapy physicist but MRI is mostly an educational or research field and there's no actual position like therapy physicists available for them in a medical center and there are few of who run QA tests and customize protocols for newly purchased devices all over the country. And I got my hands on a 2018 AAPM salary survey and saw how few MR physicists were included in there compared with others and the salary was like the least compared with other fields.

>

If you want to make your career as MRI focused as possible, getting diagnostic ABR certification is probably your best bet. Diagnostic physicist positions are typically responsible for multiple modalities, but there are a few jobs that will be mostly MR (typically these will be at large academic centers). Sometimes the job description will be explicit about this but sometimes not. ABMP is very much rarer; it's mainly people who are MRI scientists (doing research) who want to switch to a clinical work, and they are limited to MRI which makes them less desirable to most places that diagnostic ABR holders (like I said most jobs are multi-modal). That's why there are so few on the salary survey. If you are planning on doing a CAMPEP PhD program that is definitely the right track to start.

[deleted]

>

[Medical Physics Match Statistics](<https://natmatch.com/medphys/statistics.html>) That gives you yearly stats on number of applicants and number of positions available/filled. It does not appear that residency positions will keep up with graduates. There are too many graduate positions compared to the jobs becoming available each year. I know, a couple years back, residency positions were pretty on par with new job openings each year. It seems like more jobs are open now than before just from my perspective. We also had difficulty getting quality applicants for an open position last year. So maybe there is a shift happening now but I'm not sure. I do not think we will see a significant jump in residency positions anytime soon though.

Are there any places where I can find info on non-clinical jobs/roles? I have shadowed a clinical physicist for a bit and am very interested in going into the clinical route, but would love to hear about what other opportunities are in the field if I were to not get a residency.

>

AAPM jobs board, Linkedin are where I'd start looking.

I majored in Engineering but have a minor in Physics and some undergraduate research. What are some things I can do to bolster my grad school applications?

>

Something that may not bolster your applications, but would be a good idea if you haven't taken it already is anatomy & physiology!

>>

It's actually required by some programs so I'd say it's a very good class to take.

>

Take some programming if you haven't already.

>>

I agree. A basic programming course or take on some project that requires you to learn some programming. My masters program is formally adding basic programming as a pre-requisite. Some of our courses are computational (MATLAB, Python) - some rad physics, imaging analysis and machine learning. While they don't require software engineer/computer science proficiency, some basics or at least the ability to teach oneself on the fly is required. They tried just suggesting some programming tutorials for the summer between year 1 and 2. many of my classmates still had to rely on

the few of us with some experience to show them how to figure it out.

>

[deleted]

>>

I'd would recommend taking these courses first as well and, if you still need more electives, Optics and Biophysics. These two courses gave me some nice talking points during grad school interviews and some decent, albeit minor, background knowledge for the field.

What will be the difference between medical physics and medical dosimetry for treatment planning, are they doing the same things or the physics check what will the dosimetrest doing?

>

[deleted]

>>

Adding to this: Most physicists don't do much treatment planning. Brachy and some SRS/SBRT. Most places I've worked, physics plans brachy and will assist with SBRT but generally dosimetry picks up linac based SBRT/SRS. Most of my planning duties tend to be more difficult and special cases. Even then, it's more of working with the dosimetrist with suggestions while they drive the planning system. We also work in the planning system evaluating new RapidPlan models or techniques. Or sometimes, just checking what else can be pushed on for a specific plan.

>>

Just a note on PhD physicists: At some institutions, their research is a smaller portion of their duties compared to clinical duties. In fact, some institutions don't even offer protected research time; faculty are expected to "fit it in between clinical duties" (we all know it's unlikely they can manage that, so after-hours it is). That said, I don't know how common this is.

>>>

That's been my experience too. Research requirements vary institution to institution. My academic instution does not have strict research requirements, and the PhDs and MS physicists share the exact same clinical workload.

>>>>

[deleted]

>>>>

In my experience I found that 20-60% is promised and what is discussed during interviews, but what is actually given is more around 0-20%.

>>>>

On that last point, that's been my experience as well. Staff physicist are given the option to pursue a clinical project every so often, but not expected to do so. Faculty are expected to output a significant amount, typically.

Post Title: [Training Tuesday] - Weekly thread for questions about grad school, residency, and general career topics 05/10/2022

Post Content: This is the place to ask questions about graduate school, training programs, or general basic career topics. If you are just learning about the field and want to know if it is something you should explore, this thread is probably the correct place for those first few questions on your mind. Examples: * "I majored in Surf Science and Technology in undergrad, is Medical Physics right for me?" * "I can't decide between Biomedical Engineering and Medical Physics..." * "Do Medical Physicists get free CT scans for life?" * "Masters vs. PhD" * "How do I prepare for Residency interviews?"

Comments:

Do clinics take international students going through the residency match? Does The limitations of a visa get in the way of choosing an international student over a citizen? I understand that ideally it would all be fair and square but I would like to hear if anyone has any insight they could share. I honestly dont see how a clinic would choose someone who they need to get a visa and sponsor over someone who is hassle free recruiting. Thanks

>

This is almost certainly going to vary from institution to institution. Some places will have the resources and manpower to do visas etc, these are more likely large academic centers. Others may not. Probably best to ask ahead of time.

Do you guys think that its a good idea to take medical physics as a career advancement for a radiographer. Medical dosimetrist is not available in our country. Graduate courses related to radiology is also very limited. Designation to special imaging modalities is hard due to favoritism culture.

>

I am not sure what is the situation in your country, but radiographers in the US are definitely not expected to take medical physics courses, which are taught at a graduate level. A decent number of people move on from radiography into careers such as medical physics for various reasons such as higher pay, but that involves going back to school (CAMPEP programs in the US) and then doing a 2-3 year residency. Are you trying to change careers or advance in the rad tech pathway?

I don't have much to add, but I got accepted into Georgia Tech for the MS track and I'm really excited :)

>

Awesome! Hope you'll enjoy the program!

What is the difference between Machine QA and IMRT QA?

>

Machine QA is meant to make sure your machine (such as your linac) is operating correctly and to make sure it is in compliance with regulations. IMRT QA tests the delivery of a specific plan to make sure it matches the calculated plan (with some wiggle room).

Curious if any MPs have tried intermittent fasting during their 2 years? I tend to eat very slowly (not much changing that for medical reasons) but I'd like to optimize my eating schedule. Just not sure if that's realistic with the demands of residency.

>

I've done it during my masters and one of our residents did it too. Negative is a lot of hospitals offer employees discounts at the cafeterias. I would sip on iced black coffee and a lot of water most the day so I used the bathroom a lot.

[deleted]

>

I think that doing any research with substance will help with PhD applications, especially if you get a paper and a good LoR from a supervisor. The fact that it isn't 100% medical physics focused right now (especially at 2nd year) isn't a red flag or anything. Just keep your grades up and keep doing good research.

As a medical physicist we have to get a local license in my country. My issue is this license is labeled as Medical Physicist Technologist, I'm objecting the label as I think it should just say Medical Physicist (this license applies to all M.Ps regardless of qualifications and experience). So I was asked to expand/argue why M.Ps are different or shouldn't be labeled

technologists, can any one give me pointers/sources to form the argument?

>

<https://www-pub.iaea.org/MTCD/Publications/PDF/TCS-71web.pdf>

I'm an international student (New Zealand) graduating midway through next year with a BSc in Physics and Computer Science and I'm really keen on doing an MS at a CAMPEP school with the intention of doing mainly clinical after residency. I already know my GPA will transfer favourably (hopefully about 3.7/3.8) and I've already done research in Condensed Matter Physics and I'm about to do a research paper in Medical Physics (Synchrotron Data Analysis stuff). Is there anything else I should do to make my application stronger? Is there any major differences between applying as an international student vs a domestic?

>

Sounds like you have the all the main checkboxes filled out, probably just get good LoRs secure and polish up your statement of purpose (I always hate writing those so give yourself a lot of time).

>>

What do you think they look for in the statement of purpose? I've never written one before so I don't know what information/sentiment they look for

>>>

I think for an MS program it's about why you want to do medical physics AND why you think their specific program is a good fit for you. There's a lot of websites that give tips. If you've ever spent time working with a medical physicist or been in a clinic shadowing hopefully that experience will help you write about that stuff more meaningfully (vs "I want to do MP because it sounds cool").

>>>>

Amazing, thank you so much for your advice! There's a huge bottleneck to train as a medical physicist so there's not many people to ask questions, so I really appreciate your help.

>>>>>

That's what we're here for! Good luck with your applications!

I am currently a third-year undergrad with non-relevant research in medical physics. I have recently become interested in the field and considering it as a potential career. What are the best

resources for a beginner, and how should I best prepare for grad school?

>

I second what Medicalphysicsphd said! I would like to add that, if your programs require the GRE, save room to retake it for a better score. It is a wacky test (as all standardized tests are) and knowing the immense vocab list and the structure to the questions helps a ton. Program wise, make a long list of every school you would consider going to and start writing essays now. I'm talking at least 5 schools, but ideally 10 or more. I did 13 applications and got into 3, it's not easy, even if you graduated top of your class with relevant research. Make sure you're in contact with recommenders for letters now as some love it when you give lots of notice. Make sure you choose good recommenders that will make your application memorable. If there is a professor/some other qualified person that has some sort of personal connection with you, they'd be an ideal candidate. If you can relate through music, maybe you both play a musical instrument, or even if they just know something interesting about you, they are bound to write about that. Be sure to look into research you want to do if you're looking at PhD programs. Mention the research you're interested in and why it made you choose that program in your essays and interview. Be prepared to ask detailed questions in your interview about the research too. Be prepared to talk about your research and find some sort of way to relate it to your interest and the path you want to take. Maybe you did research on the language of differential forms in general relativity, you can talk about how you are highly mathematics oriented, or maybe even about applying differential geometry to image processing. Outside of that, if you aren't a physics major, take this last year to make sure you have all the prerequisites you need for each program. Take upper level physics courses (in Fall term) if you haven't already as that will look great. Otherwise taking an introductory Anatomy and Physiology course will help. It is a "requirement" for admission to some schools, but is often waived and not looked unfavorably upon if you don't have it (this comment is speculative based on interviews). I also heard that a graduate level A&P might become a CAMPEP requirement soon, so this will help prepare you for that.

I am starting my MS program this Fall. My program already provides me with enough opportunities to work in the clinic and gain experience, but I am wondering about what I can do above and beyond that to boost my chances for residency and become a better medical physicist.

>

You didn't mention it explicitly but if you have the option of doing a thesis or non-thesis: do the thesis. Be able to speak intelligently about your research. Outside of academics, soft

skills are also important. Anything you can do to speak to those abilities will help too. Leadership roles, local community involvement, etc. I actually think it these skills that got my a residency position (after maintaining a good graduate GPA of course)

>

Doing research usually helps. You'll get more milage out of that if applying to academic centers though for sure.

>

Volunteer in the community in non-medical physics area. For example, volunteer for a STEM youth outreach program. Develop your communication, leadership, and other soft skills.

Post Title: [Training Tuesday] - Weekly thread for questions about grad school, residency, and general career topics 06/14/2022

Post Content: This is the place to ask questions about graduate school, training programs, or general basic career topics. If you are just learning about the field and want to know if it is something you should explore, this thread is probably the correct place for those first few questions on your mind. Examples: * "I majored in Surf Science and Technology in undergrad, is Medical Physics right for me?" * "I can't decide between Biomedical Engineering and Medical Physics..." * "Do Medical Physicists get free CT scans for life?" * "Masters vs. PhD" * "How do I prepare for Residency interviews?"

Comments:

Wtf do I do? This is my fifth year since my initial part 1 application, and there's no exam in August. I've been passed over for residencies and PhD's multiple times. Do I try again this year for a PhD position (only way I think I'll ever get a residency), just retake a bunch of MS level classes or whatever the abr requires, or start digging ditches for a living? I have terrible anxiety so I suck at interviews and tests.

[deleted]

>

I don't really have an answer for you, but the GRE is offered online now and isn't bad. You have time if you start reviewing and stuff now, I got my scores 2 weeks after taking it, and I suggest giving time to retake if needed. There are lots of good resources for studying for it, probably the best are the practice tests and any useful tips and stuff you can find in books. The Princeton Review GRE book is pretty good. Otherwise if you really

want to avoid taking it, email the graduate admissions department for MD Anderson and ask. Doing really well on the GRE is a great way to get your foot in a competitive program though.

I am a fourth year physics student and have recently started applications for med phys masters programs. I've noticed some schools have a residency at the same location while others don't, and was wondering if, in general, you are more likely to be matched to a residency at the same location as your grad school program. To phrase it another way, would I have a better chance of getting matched to a residency if I only applied to schools that have a residency at the same location? I'm aware of the current residency bottleneck (and the fact that my only getting a masters weakens my chance) so I want to give myself that best chance of getting matched later on. I'm having a hard time finding data on this. Thanks in advance!

>

This entirely depends on the institution. Last I heard, LSU pretty much guarantees you residency at their locations if you don't match elsewhere. Also Kentucky seems to follow the same policy, not sure though. Penn has many times taken on graduates from their program, but there's only 4 residency positions, and their class size is fairly large (>12 students every year usually), and some years takes on very few, if any. Be sure to ask about this during interviews and such, as it can be a huge leg up on your career, but also don't rely on it, you never know what might change. Always aim for being a strong match candidate.

I'm considering applying for the fall semester to a medical dosimetry program. Can anyone here tell me what it's like during the day to day of the job? Do you enjoy it? Looks right up my alley but curious what other people's experiences are

>

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>>

Thanks for the write up! I'm 9 years in as a radiographer (6 in CT) and honestly I really want a change of pace. I've worked out/in patient and have worked at a cancer hospital before. I have zero desire to pivot into an administrative/leadership role. WFH would be pretty amazing considering it's not an option currently. How'd you find the didactic work? I have a BS/MS in unrelated fields so I'm not stranger to course work.

Currently, I'm a third-year applied physics student at Carleton University. I find Medical Physics interesting. Can someone suggest some related stuff that needs to be learned in beside the courses that have already been learned before applying to this?!

For example: knowing programs like C++ or other related materials.

>

Some programming is always good, C++, MATLAB, python its all good. Be prepared to work with a LOT of spreadsheets and tables. Take maybe some anatomy and physiology course too.

Do I have good odds of getting a residency if I have an atomic physics (for fundamental physics test) experimental PhD from Stanford and then do a certificate CAMPEP program? I definitely won't have as much medical physics research as other people

>

I think if you make good grades in the Certificate program, and do some work in the clinic, you should set yourself up to get interviews from a lot of places. How well you do in your interviews may depend on your research/knowledge of the clinical duties.

>>

Do you know if international students can get paid research positions in a clinic while doing the certificate?

>>>

At some institutions, yes. I had some post-docs in my cohort who were full-time researchers at the same university of the program (some clinical, some translational) while completing the certificate part-time. One had already been working there for a while, though two others I'm unsure if they started the job or the certificate first. I'd definitely contact the program of interest directly to confirm.

>>>>

Awesome! What institution did you go to? (If you're comfortable sharing!)

>>>>>

Sure, I'm talking about UPenn.

>>>

I am not sure on that one. Maybe someone else can chime in.

Background: Fourth year mechanical engineering undergraduate student soon to matriculate into masters of Medical Physics. How prevalent are medical physicist performing both clinical work and academic research? I have been conducting research for MedPhys lab on my campus for almost two semesters, and although I always

envisioned myself in a strictly clinical setting, I enjoy the innovative process that comes along with research.

>

I just finished a master's degree and of the dozen or so PhD/tenured faculty, all except maybe one have substantial clinical duties. Some of our newly graduated residents are going into faculty assistant professorships that are maybe only officially 10-20% research time. I don't know if that's the norm.

Post Title: [Training Tuesday] - Weekly thread for questions about grad school, residency, and general career topics 07/05/2022

Post Content: This is the place to ask questions about graduate school, training programs, or general basic career topics. If you are just learning about the field and want to know if it is something you should explore, this thread is probably the correct place for those first few questions on your mind. Examples: * "I majored in Surf Science and Technology in undergrad, is Medical Physics right for me?" * "I can't decide between Biomedical Engineering and Medical Physics..." * "Do Medical Physicists get free CT scans for life?" * "Masters vs. PhD" * "How do I prepare for Residency interviews?"

Comments:

I've recently gotten my bachelors in physics and am currently working full time as an engineering technician. I want to work for a year to save some money before applying to online MSMP programs that are available. My questions are 1. Are online programs from accredited universities generally comparable to in person? 2. I'd like to keep my job I'm working now for the income it provides. Would it be reasonable to be a student full-time too or would the stresses of the program plus a job make that more difficult than it needs to be? Thank you for any advice you can give!

>

I'd personally not advise for an online program (whether or not it has CAMPEP accreditation or not) *unless* your job is giving you significant clinical (or perhaps a mix of research and clinical) experience (in either radiotherapy, nucmed or imaging, whichever floats your boat). This isn't to say you won't learn the same didactics (CAMPEP checks for that), but rather you'll be at a disadvantage when it comes time to apply for residency. Match rates are typically low (~60% for MS for example), and a recent survey paper showed that the number one thing directors want in candidates is clinical readiness (ie how quickly can they get you incorporated into clinical work), that's the labor they get from you in exchange for training, afterall. Without some

level of clinical experience it will likely be an uphill battle to match. That's not to say it's impossible (my co-residents have little experience in even PSQA, for example, but they made up for it in the fit aspect), or that clinical experience guarantees matching (fit is also a big factor), it'll just be more difficult. Another option could be to supplement the online didactics with a decent amount of clinical shadowing. Perhaps you could contact local physicists and see if they're willing to help with that? Definitely need to consider this carefully. As for working during the program, it depends. In my cohort, nobody worked afaik. But in the cohort after, some would babysit regularly, some worked in restaurants part-time, etc. I don't believe any worked full-time, especially with the demands of the program. Some programs explicitly prohibit you from working more than a certain amount of hours. That said, our program was in-person with a lot of clinical experience and extra-curricular work (thesis, optional TA for some, etc), that may vary with online programs. Hope this helps.

>>

Thank you so much for the information. I'll take all of this into consideration. I guess most people take loans to pay for tuition and use any of their work income for supporting themselves. Is that right? Do grad students get paid during their clinicals? That would make me feel better if that was the case. I've done some TA work before so I could probably do some of that in whatever program I end up in.

>>>

Sorry for the late response. As for getting paid for clinical work, it depends. Most programs will be upfront about it since it's something that can attract more applicants. The amount you get paid I imagine varies wildly (depending on the rate and hours worked), in my case it was a decent rate, but certainly not enough hours to cover living expenses. For that reason the loans I took went to both tuition and living expenses (I didn't work outside of the program). Do keep in mind that in the US, the max amount of student loans you can request per year is capped at whatever your program certifies as the degrees "cost of attendance", it's very difficult to get any more than that. The CoA usually includes a part for tuition and a part for living expenses. Many programs' will say the living expenses calculation in the area are much lower than they actually are to artificially appear like a more cost-friendly program. So, if you rely purely on loans, I'd recommend frugal living and a roommate (many have a roommate from within the program) to help reduce costs. But yes, if the program permits and you can manage your time well, a part-time job or something like that would go a long way in helping you get through it. In the end, it's a gamble. I took out a significant amount of student loans on the gamble that I would perform well in the program and match into residency. Once you're

a physicist in the US, the money is worth it. The trick is matching into a residency.

Hello! I am a Physics undergrad from Singapore entering my final/senior year. I wish to pursue a career in Medical Physics. That being said, no graduate programmes are offered in Singapore for Medical Physics. I want to look into graduate programs in the UK/US. May I know which universities should I look out for and how do I progress my career from there on?

>

Hi, here is the list for CAMPEP accredited grad programs for USA: <https://campep.org/campeplstgrad.asp> Not sure where to look for the UK

[deleted]

>

Consider reaching out to medical or biology researchers who work with imaging. They might find your physics and computational background an asset. There are many researchers who work in medical physics adjacent fields who could help you get good experience.

>

Computational physics would give you a lot of transferable skills. In any case, I wouldn't sweat it too much if you don't get medical physics experience in your undergrad.

Any general advice for new residents? What tips do you have for making the residency more productive? What did/do you guys use for taking/keeping notes? Thanks in Advance!

>

It's a job: don't overwork yourself. Make sure to disconnect outside of work and enjoy life. But also, you get as much as you put in. So take every opportunity to learn as much as you can from as many different people as you can. I used a paper notebook, but wish I had used something like OneNote instead. In my current clinical job, I use OneNote for everything. I always have it with me (on my phone) and search is super fast, so it's easy to find whatever I'm looking for, even if it's been years.

Post Title: [Training Tuesday] - Weekly thread for questions about grad school, residency, and general career topics 05/31/2022

Post Content: This is the place to ask questions about graduate school, training programs, or general basic career topics. If you are just learning about the field and want to know if it is

something you should explore, this thread is probably the correct place for those first few questions on your mind. Examples: * "I majored in Surf Science and Technology in undergrad, is Medical Physics right for me?" * "I can't decide between Biomedical Engineering and Medical Physics..." * "Do Medical Physicists get free CT scans for life?" * "Masters vs. PhD" * "How do I prepare for Residency interviews?"

Comments:

Starting a medical physics residency out of state (Illinois). Must or should I change my address for driver's license? After the 2-year program, I have no specific plans to stay so I don't know if this counts as a "permanent" move. I didn't change driver's licenses for my out-of-state graduate program though that situation does seem different.

>

What I got from browsing some of the medical residency subs is that it's an even 50/50 split between those who change their license or not. Personally, I won't be changing mine bc it's a hassle and I have no plans of staying in the state my residency will be

[deleted]

>

The two alternatives I've seen people have coming into a graduate program is Nuclear Engineering and Computer Science. Of course, as long you have the equivalent of a minor in physics and a strong case for why your choosing Medical Physics in your personal statement it should not matter what your major is as long as its a hard science major.

>

I would say astrophysics is pretty good, and other good ones are Nuclear and Mechanical eng. I would say also try to get a anatomy class, and stay on top on the physics requirements for the programs you are planning to apply.

>>

Lol I'm an astrophysics major, but I only decided a few months ago that medical physics sounded like a way more exciting and fulfilling career. It's relieving to hear you say that haha

>>>

Hahah I graduated in astrophysics and it helped a lot, especially because of the radiation detectors class I took, which gaved an overview about pretty much all emthofs of radiation detection for

medical physics (just not ultrasound). In my opinion I would advise you to stay in Astro if its something you enjoy, and play your strengths on grad school applications

>>>>

Great, thank you so much! Are there any specific classes you'd recommend other than the traditional physics classes and anatomy/chemistry? I've been looking at potential physics internships but anything for medical physics just seems so limited lol

>>>>>

You should be hood with those! But again, the radiation detectors class I had was good and figuring out if you wanna do therapy or imaging before grad school can help as well. Yeah, you can broaden the search for anything related to imaging, therapy whatever. Any experience will help a lot

I just finished undergrad with a degree in Biomedical Engineering and would prefer to work for a bit before starting grad school. What job options would help me beef up my application? I already did a minor in physics and took all the recommended classes for the MSMP at Georgia Tech, but I'd really like to work 40 hours a week for a while and sort out some personal things for the next year or so.

>

I taught high school physics and calculus for a year and the people that interviewed me in my PhD applications really liked that. For a Master's it might be less beneficial, but could help you land a teaching assistantship for funding. I would not suggest an engineering job as they will be hard to get out of on your own time. If you're planning on taking more than a couple years, you might be able to find a relevant engineering job that would help your application, but again I do not recommend as the salary might be hard to leave. If you're planning on doing research (aka if you want to eventually get a PhD or Research Assistantship), get a Research assistant job. Otherwise, if you just need to make money and are going for a Master's (and no PhD), any sort of technical job you can find would be fine I bet. As nutrap said, physics assistant or some sort of medical physics related job might be hard to find with just a bachelor's, but would make the most sense if you happen upon one.

>

Nothing really comes to mind as something I could see to buff your resume outside of working as like a physics assistant or for some company that is highly involved in radiology or radiation oncology. Something very specific like that might help but may be extremely hard to come by. Definitely if you think you need a while before starting a Medical Physics degree, take your time.

You will want to focus your time on becoming a medical physicist once you start.

Can medical physicists get MRIs or CT scans for themselves whenever they'd like? (Not saying it's a good or bad idea)

>

No, you need a physician's prescription to receive a diagnostic scan (e.g. MRI, CT, etc.).

Post Title: [Training Tuesday] - Weekly thread for questions about grad school, residency, and general career topics 04/19/2022

Post Content: This is the place to ask questions about graduate school, training programs, or general basic career topics. If you are just learning about the field and want to know if it is something you should explore, this thread is probably the correct place for those first few questions on your mind. Examples: * "I majored in Surf Science and Technology in undergrad, is Medical Physics right for me?" * "I can't decide between Biomedical Engineering and Medical Physics..." * "Do Medical Physicists get free CT scans for life?" * "Masters vs. PhD" * "How do I prepare for Residency interviews?"

Comments:

I'm an Applied Physics undergrad. At my school, that basically means E&M 1 and Quantum 1 plus some STEM electives (you can basically choose what you want as long as you justify it to your advisor). I plan on taking at least a couple data/computer classes, what other classes will help me out the most?

>

Try to take an A&P class before you graduate as some programs require one.

>>

\+1 for A&P. I regret not doing it in undergrad as I have to figure out when to take it now. Also I heard that graduate level A&P might be required for CAMPEP accreditation in the coming years.

For those who have completed (or are currently completing) residencies, where did you complete your residency, and on average, how many hours a week did you work? What challenges did you face?

>

I haven't started residency yet, but while interviewing I would always ask "how many hours per week do you work on average?" to residents. The answers were mostly always 40-50hours. There was only like 2 programs where residents said that, sometimes on a tough week full of annuals and when others were on leave they would do 60+hours. In the end it really depends, you have to be sure to factor that in when applying, and always ask the personnel on the program what's the day to day of the resident there.

How much more helpful/useful is it to be promoted to chief resident? Does it significantly help out with salary or job position after residency?

>

Maybe if there are a bunch of other residents and you were the only one promoted it may look good on the resume. My residency only had two residents (1 per year) pretty easy to become chief resident. There are a lot of similar residencies out there to mine, so not a lot of emphasis is given to being the chief resident.

I recently got accepted to East Carolina University, University of Miami and San Diego state university for medical physics. Since I'm coming from Canada I'll be paying higher fees regardless. I'd like to know when it comes to each individual program what is more reputable and has a good reputation for grad students getting residency positions?

>

I'm graduating from ECU this spring, please DM me if you have any questions or wanna chat!

>

Curious, is there any particular reason you do not plan on going to a program in Canada?

>>

The admission is too competitive if a course is missing or extenuating circumstances that has impacted your GPA, at least in my personal experience. Also they are limited options when it comes to residencies in Canada. US has more residencies and placements, I also want to have more options and opportunities to network.

>

You may also want to look into the residency programs that may be offered at each of these places as you might have a little advantage there when applying. Off the top of my head, ECU accepts MS students, Miami is PhD only, and I think San Diego

State's accepts MS students but it is also a tuition-based program (you pay them to attend) which has its own advantages and disadvantages.

>>

When I talked to ECU they mentioned most of their graduate students from the MS Tracks got matched to residencies in different states. SDSU does offer residencies to MS students but it is unpaid. And UMiami I'm not too sure of, I will look into more detail. I am looking for residencies that pay and accept MS students so any advice would be great. I don't mind moving again since I do plan on applying to many residency positions.

>>>

The majority of residencies pay their residents, SDSU is kinda an exception in that regard, and a decent amount of residencies accept master student's applications with a couple even having a preference for MS. As others have stated, clinical experience will help set your application apart from others and I would add to go a step further and try to shadow the therapists and dosimetrists as well. An understanding of the treatment process from start to finish will go a long way in interviews, and shadowing them can help you make connections that aren't overly clear from the physicist's desk.

>>>>

Every time I search up for residencies they say "Phd is preferred" so I really do hope I can find a paid residency who accepts MS students. Do have any advice how to approach medical physicist, therapists and dosimetrists to shadow? I would like to attain clinical experience starting my first semester by shadowing since the clinical rotations won't be till second year

>>>>>

You should have no trouble finding a paid residency that accepts MS students. From my experience (MS student who matched this year), I applied to about twenty that met those criteria and there were at least another 10 that were out of my geographical area of interest that I know I could of applied to. As for how to connect with these people, I imagine you will most likely be introduced to the Medical Physicists who will be your professors during orientation, and probably the residents as well. Ask then if you can shadow one or two days a week (or just for an afternoon even once a week) and ask if you can be introduced to the dosimetrist and therapist too. I have not met anyone in this field yet who doesn't love to teach about what they do so I'm sure they would be happy to let you hang around. Feel free to PM me if you have any more questions!

>

What type of clinical experience will you be getting at each place?

>>

At UMiami I will be having a semester in radiation therapy clinical rotation at the Sylvester Comprehensive Cancer Centre. At ECU they did not mention where my clinical rotation will occur but is is type of shadowing experience for a semester and participating in clinical work At SDSU again they don't mention where clinical rotation will be done but they offer radiation therapy lab rotation and diagnostic imaging lab rotation

>>>

I can only speak about UMiami as I did two years of postdoc and the certificate track at their program. I am not sure whether you are doing masters or PhD track but my advice is basically the same. Look for a mentor who is at the Sylvester Cancer center or Lennar - these are the places where the action happens and you will have better opportunities to shadow. Independently of what project you pick (MRI-Linac, CBCT, Simulations, etc), approach the Med Phys residents and Physicists and ask them to let you know when they are doing QAs. Most of them will be happy to take you in and show what they are doing to you. Note if you are doing masters - try squeezing this as much as you can within your 1-3 semesters, because you will be applying for residencies before you actually have the clinical rotation (the rotations are good though, will definitely give you some experience). But AGAIN, do not wait for the clinical rotation to get some clinical experience. I am not sure whether covid has affected these opportunities, but I rarely saw students coming to the LINACs until rotation during my time working there. Make it happen for yourself. Coursework and professors are good (in my opinion), very easy to approach and do whatever they can to help you learning what is important for the field and to pass ABR part 1. One extra thing, the living cost in Miami is really high now. Mainly because of the crazy rental costs, so consider how you want to live down there - if finances are not a problem to you, disregard this comment.

>>>>

Thank you so much for the advice! My original thought is that I didn't want to wait until 3rd or 4th semester shadowing and getting clinical experience. I'm in the masters track, I don't think I have in me to do a full PhD track. I will definitely contact some medical physics residents and see if I can shadow them and be able to see what projects they are working on. Do you by chance know if the Sylvester Cancer centre or any other place they offers any summer internships to gain even more clinical experience before the clinical rotations? How is the coursework in the program? Is it heavy? How many people are in the program usually and which track has the most students. I'm honestly so

glad that professors are helpful and prepare for the ABR exam, I was thinking right after graduation to take the exam.

>>>>>

Well, As far as I know you have to talk to the faculty to check what they have going on. I don't really know the formality of it though as I have not had any experience with that. I also don't know much about the full course work, as I was only required to take 6 courses. As I said before, some classes required me to study/home work than others. Nothing insane though. I was working 40 hours a week and did well on the classes. Additionally, I had a lot of classes through zoom, which made a bit hard for me to meet all the students, so I don't really know how many were in total, or on each track- sorry. The classes are going back to in person format, so you will meet more students than I did for sure. Good luck with your decisions =)

How do physicians view medical physicists? Do they view medical physicists as glorified technicians, or do they see them as people with equal professionalism?

>

They look at us like the colleague that will make their dosimetric dream come true (if it is possible) Honestly, in my experience, they look for medical physicists to guide them to give patients what they need with all the safeguards. It is a two-way relationship but since the outcome is a medical prescription, they do the final prescription approval. It is just different training. They do the medicine part, we do the physics part.

>

As valued members of the healthcare team. The ones that don't view us that way aren't worth getting worked up over.

Post Title: [Training Tuesday] - Weekly thread for questions about grad school, residency, and general career topics 02/15/2022

Post Content: This is the place to ask questions about graduate school, training programs, or general basic career topics. If you are just learning about the field and want to know if it is something you should explore, this thread is probably the correct place for those first few questions on your mind. Examples: * "I majored in Surf Science and Technology in undergrad, is Medical Physics right for me?" * "I can't decide between Biomedical Engineering and Medical Physics..." * "Do Medical Physicists get free CT scans for life?" * "Masters vs. PhD" * "How do I prepare for Residency interviews?"

Comments:

I was admitted into Minnesota's PhD program. Is anyone aware of the funding situation this year? There was no mention of it in the acceptance letter.

>

Same question here!

Question, If you've finished a imaging residency what were you able to do by the end of it? Did the company offer you a job afterwards?

>

I haven't done it yet but I know of some people that stayed where they did residency, and also that left to a place closer to home or where they wanted to live. Most good residents get jobs lined up like 6months before finishing up, its a good market

Anyone got decision for MS from Hofstra, Duke, Purdue, Georgetown? I applied on 13th Jan

>

Hofstra will probably get back to you around first or second week of March. I am graduating from their program this year if you have any questions

>>

ughh! more wait.

>

Yes I already got a decision from duke for their MS program.

>>

When did you apply?

>>>

Applied around Jan 27th and had my interview last week.

>>>>

I wasn't even invited for an interview. Tough Luck I guess.

>

Gradcafe may have some decisions posted there.

I'm a master student in CAMPEP medical physics. I'm graduating next year. Im not sure where will be the opportunity to get residency since everyone is getting a PhD. Im grateful if you have some source to share. Thank you

>

It is far from true that "everyone" is getting a PhD. They do match at higher rates, yes, but you definitely do not require one to get a residency.

>>

I know, but even for US, the hospitals are looking for Master and PhD, and PhD preferred. I was thinking apply for Medical physics assistant and do the ABR while working. Do you know is there any website posting the jobs for medical physics assistant, please?

>>>

You can do Part 1 of ABR at the last semester of your MS, but part 2 would require you to finish residency. As the other point, some places really prefer MS compared to PhD students, and some also don't really care... it's mostly those research heavy places that really want PhD students

>>>

AAPM careers site and linkedin are where I would start to look.

>>>>

Thank you!

Hello! Anyone able to share personal or anecdotal stories about medical physics master's in Ireland? I have been accepted to UCD's program but know it is only on it's 3rd year running. Also, any info about going for CAMPEP residencies in US or Ireland post-Irish master's program would be appreciated. Finally, advice from anyone going down the MPE route -as opposed to the CAMPEP residency route- after a master's would be handy. Cheers!

>

Looks like there are graduates from Galway that have matched to US residencies, some other threads in this sub in the past about it too. Not sure how it compares to the other program.

Hello Everyone! I'm currently a sophomore doing my undergrad, (physics major) and want to start working on making myself a strong candidate for some Medical Physics Ph.D programs. Does anyone have any tips on how I can start? Or some tips on how I can get some research experience? Thanks so much!

>

I am a senior who just accepted a PhD offer and interviewed at a lot of highly ranked programs (MD Anderson, Wisconsin, UTSW, LSU, Duke) and thought I would add my 2 cents. I think the best thing you could do is apply for the AAPM Undergraduate Fellowship Program, it will give you relevant research experience and a guaranteed strong recommendation letter. In preparation for the AAPM SUFP and also graduate school, I would say to consider joining a physics research lab (I did computational biophysics, but it can really be anything in physics). Shadowing a medical physicist or volunteering at a hospital also looks nice to have the clinical side in addition to the physics side. I'll also add that medical physicists are often very nice and approachable and love to sit down and have a conversation with students who are interested in the field! So don't be afraid to reach out to some medical physicists near you - I sent an email to the chief medical physicist at an academic hospital associated with my university and I was able to speak to 3 different physicists, which was really helpful.

>

Hi! I'm a senior and in the middle of deciding where to commit for my PhD, so I could shed some light. If you're interested in a PhD, I would say that research is a must and shadowing is optional, so try to find opportunities to do that. I highly recommend applying for the AAPM Summer Undergraduate Research Fellowship or DREAM (<https://gaf.aapm.org/>). I did the former and it was super enlightening (also got a nice rec letter out of it). You can also look into SUPERS@PENN. The deadlines have passed, but there's always next year! In the meantime, maybe send cold emails to faculty in your university's BME, radiology, or radiation oncology departments (or medical physics if they have it). It might take some time to get a response, but it'll be a good experience! Feel free to message if you need help. Good luck!

>>

Thank you for taking the time to help me! I looked into the AAPM website saw that those fellowships were open to juniors and seniors, so I didn't apply. But you're right there's always next year. I emailed a professor in my school who had has a Ph.D in Medical Physics, introducing myself and asking if he had a few minutes to talk with me. Fingers crossed I get a response soon.

>

Do quality research, get good grades, get strong LoR are the main ones for PhD admissions. I would say shadow a physicist (preferably both therapy and imaging) but that is not for your application but more for yourself to make sure you want to do this field.

>>

Thanks you so much! I really appreciate your help!

Does anyone have any experience with interviewing for UCLA, UPenn, or Kentucky programs? They're coming up and I was just curious about the formats

>

Penn: I would say they're looking for personality and a show of interest in the field. There was nothing very technical, just like 'how does radiation affect tissue?' Why MP? Any inclination towards imaging or therapy?

>>

Thank you! Those are what I was preparing for but I was having anxiety about like white board show the work style questions.

>>>

That doesn't come until residency interviews and from my experience it was a small minority that went that far. Landauer is one for sure and that was after an hour long technical phone interview. The most I got for grad school was to talk about photoelectric effect and Compton scattering. Just the basics. 98% was just personality and wanting to know how I heard of the relatively small/unknown field.

Hello! I'm currently looking at 2 possible career paths, one being Medical Physics and the other Dosimetry. I'm working on my BS with a major in Biochemistry so I was wondering if this would help or hurt me ? And I also wanted to hear more on peoples experiences with grad school, residency and what it takes to work in this field. I live near Portland so I was looking at OHSU program aswell, so does anyone have any experience/ thoughts and opinions on it ? Thank you all in advance! I hope to hear from you guys.

>

I would say it really depends on what your priorities/interests are. Medical physics will take longer (B.S. and any extra physics courses + at least 1-2 years for an M.S. + 2 years of residency) but your eventual salary will be somewhat higher and you'll be able to do a larger variety of things in your day-to-day work life. The dosimetry programs I know of are around 2 years for folks coming in with a B.S. and not as therapists. As a dosimetrist you would be planning all day every day (more or less). Dosimetrists also tend to be paid hourly whereas physicists are salaried, so physicist hours tend to be a lot more variable. If you can, it could be helpful to shadow a clinic to see what the workday is like for both groups.

>>

You make a good point about going into shadow a clinic, hopefully I'll be able to do that with Covid. I knew about the pay different but I didn't know one was paid hourly and the other not. I think I'd probably like the salaried one just because I don't want to really depend too much on the hours of work if I only end up doing a half day. I don't always do the best with the same thing repeatedly so having a little variance with my day-to-day would probably be more beneficial for me. Thank you this was actually super helpful!

>>>

Therapy physics It's pretty uncommon to work less than 40. When things get busy, it can get pretty repetitive. Check plans, run QA, do chart rounds, try to not fall behind on monthlies, repeat. At my site, if you are more efficient than your colleagues, you are rewarded with more work and projects with higher expectations on how many initial checks you do.

>>>>

I appreciate the honesty, I've always been pretty efficient in everything I do and don't mind the work. I like being busy, I've just done jobs in the past as in production work that you really don't break doing a single task during that 8 hour shift. So at least from what you mentioned it can get to be repetitive but with some variety haha

>>>>>

[deleted]

>>>>>>

Thank you so much for the thorough breakdown it really explained everything so well. Enough so that I might just have to really consider Dosimetry again. Not for the money to free time ratio but because I'd hate being at the mercy of everyone else and just how well they manage their time.

>>>>>>>

[deleted]

>>>>>>>>

Every view is valid and it is that way for a reason. You don't wake up one day and for no reason have a change in view. If you don't mind me ask (please don't answer if it makes you uncomfortable) how much is your current salary? Do you think it's less than it should be for your work / overtime ? How much more do you think you should be paid ? Yeah jobs that are like that in any field, I feel are rare. I value my mental health so even if Dosimetry is repetitive it's definitely something I'll consider

more since I don't want to be overworked, abused and under appreciated. So now I just have to find a clinic to shadow.

>>>>>>>>

[deleted]

>>>>>>>>

That's very true and I fully agree there needs to be more laws to regulate that. I would like the flexibility Dosimetry brings just not the repetitiveness of it. Well thanks again, you've brought up great points I'll have to look more into.

>>>>>

Even if things pick up and you have to get a ton of new starts ready for the next couple days, those are usually split among breast, prostate, lung, head neck, palliative, etc. You can get some special physics consults in there too for re-irradiation or something interesting. Definitely broken up better than pulling the same lever all day.

>>>>>>

From what I've heard from you and the person prior I think Dosimetry is not going to be it for me. I'd probably be much happier and satisfied with being a physicist so thank you for sharing your experiences.

>>>>

Happy to help! I'll just clarify that in my experience, being salaried means working more hours, not less (although some places do allow for coming in later on Monday if you work over the weekend or something like that).

>>>>>

Totally makes sense, I understand it could totally be the opposite as in working more hours and not less. Last question, are you happy and satisfied with what you're doing ? And do you wish to change some things if so what would they be ?

>>>>>>

I would say that most days I am satisfied with what I'm doing, and changes would be too specific to my own preferences/my workplace to be worth mentioning. Best of luck with your decision-making process!

>>>>>>>

Thank you! And I hope those changes whatever they may be slowly happen :)

>

Biochem doesn't hurt you, it can help you actually if you want to like go to Diagnostic NucMed... But keep in mind all the physics courses you will need (see post below in this thread). Idk much about OHSU, I interviewed there for residency, they were all nice people, but can't speak about their grad program.

>>

I'm leaning into the Radiation Therapy specialization more than the Nuclear Medicine as I'm a little more interested in that. Would it still be as helpful? Yeah I actually ended up realizing the same thing of just how many more classes I'd have to take for it. Which is why I was looking at what it would take for a BS in physics and I realized a large percentage of classes overlap my current major. Ultimately it made me consider double majoring but I'd really have to sit down with my advisor and see how much longer it would put me behind on my time-line. Regarding OHSU having been there for my sister's surgeries over the years I can definitely say the same thing.

Hello! I am a current therapy MPA with a BS in Physics looking to apply to masters programs in Fall 2022. I am trying to narrow down my list of programs to apply to in the fall. Most of my MP colleagues did their graduate work prior to residencies & such, so they don't necessarily know what masters programs are like for students. I'd love to chat if you have any strong feelings (good or bad) about any of the east coast/Midwest CAMPEP masters programs. DMs are fine if you'd rather discuss privately. Thank you in advance!

>

Three questions to help people make suggestions. 1) Are you interested in therapy physics or imaging physics? 2) Do you want to continue past masters for a PhD? 3) Do you see yourself working in a hospital, academic setting, or in industry?

Hello! My question is about the medical physics career path in the US for a non-US citizen. Can an international student with a CAMPEP-accredited Master's in Medical Physics apply for residency? I mean, are there any Visa issues (current on an F1 visa) I should look out for, or even ineligibility?

>

Definitely. It's harder for sure but it's possible. Did you go to a Canadian or Irish grad program?

>>

Actually got in for a US grad program, and was just wondering about the VISA options. Would residency mean an extended OPT for 2 years?

>>>

Yes, it would be opt. Nevertheless, there is some residency programs that offer H1B like Henry Ford. Look for them.

>>>>

As far as I know Henry Ford do not offer H1B for diagnostics, idk about therapy. Pretty much all universities take OPT students, H1B some do, and some non-academic do as well. You should ask each program individually before sending out an application, to not waste money.

>>>>>

You are right, I was referring to the Therapy residency. Thanks for clarifying.

>>>>

Thanks for that, I'll read up more about it Would you know if international students require additional license to practice (during residency) since I'm not from a medical background? Or does that depend on the state you're applying to?

>>>>>

You don't need additional licence to practice.

I figured some of you could help me out here. I'm graduating in May with a bachelors in biology and have recently looked into medical physics. I was planning to go to medical school, but being a doctor sounds like hell at the moment, so I wanted to ask what the best course of action from here would be? I understand I'll have to take additional coursework to qualify; I have taken calc 1 and physics 1 and 2 (algebra based) and currently tutor physics, so I know that I enjoy the subject! Thanks for your help

>

Definitely take modern physics as one of the 3.

Post Title: [Training Tuesday] - Weekly thread for questions about grad school, residency, and general career topics 03/15/2022

Post Content: This is the place to ask questions about graduate school, training programs, or general basic career topics. If you are just learning about the field and want to know if it is something you should explore, this thread is probably the correct

place for those first few questions on your mind. Examples: * "I majored in Surf Science and Technology in undergrad, is Medical Physics right for me?" * "I can't decide between Biomedical Engineering and Medical Physics..." * "Do Medical Physicists get free CT scans for life?" * "Masters vs. PhD" * "How do I prepare for Residency interviews?"

Comments:

Any one know how good KUMC residency is, I have read in Reddit that it wasn't very residency friendly back in 2019 , is it still like that. It's also how good its reputation for residency training ?

I applied to a couple MedPhys programs for a PhD and didn't get accepted to any. Now I'm scrambling to figure out where to go and what to do to get some more research experience and apply again next year. Any tips on 1 year companies/paths that may be good experience before applying to grad school again?

>

Hi, I sadly can't give any advice, as I'm only an undergrad myself, but I could I ask what your resume looked like, and which programs you applied to? And did you only apply to PhD or to masters as well?

ABR 3 question....this may sound stupid but I can't get a good read on this: do the examiners actually ask you questions or do you read them yourself off the screen in this new Zoom version? I've heard kind of conflicting stories about this. Do you get a pop-up with 4 or 5 questions? Do the examiners interject whatever they want? Is the amount of conversation up to them and otherwise you're just answering the screen questions aloud?

>

You read them yourself, then the examiners can ask clarifying questions or additional questions, so pretty much the same as when it was in-person. The number of questions on the screen varies some but there will be at least a couple. The examiners do interject whenever/whatever they want, and some will interject more than others. It's their job to keep you on track time-wise, so they do guide the conversation to some degree. When I took it last year, one examiner did specifically tell me to read then answer one question at a time but the rest let me do what I wanted, which was to read all the questions out loud first then start answering. Good luck on the exam!

>>

Thanks a bunch for the details. It might not matter too much but I feel like it's helpful to know the true format going in. Never understood why that isn't just spelled out by the board

themselves. I was thinking it was like how you describe but then sites like ABRphysics help have their practice exams setup differently for some reason.

Does anyone have any input on the feasibility of a "hybrid" option for the certificate option for people who already have a PhD? As the ideal example, completing coursework remotely and only going to the campus as necessary for exams, training, etc? There is a program a few hours from where I live and I have been mulling the idea of working on those courses while I finish my PhD . That is in advance!

I know a lot of the members here are active in universities and offer research internships for MS students in NY. I wanted to ask that, 1. Do you find it difficult to hire a research intern if they are international student in first year? How the CPT situation works out? 2. If I would like to apply for some of the internships that you have or any other clinical position how will I apply in my first year of MS given no, Work Authorisation Permit except CPT. 3. I have some offers currently. One of the program(Georgetown) is very new (accredited a year back) but has promised loads of clinical experience. Another one(Hofstra) is great in terms of residency match rates. Probably the best, given it offers only MS, which one should I take?

I am international student in the US and I got into an accredited MS program (with v good residency stats and clinical experience). Is it harder for international students to match with residencies given that they need to be on OPT status? Or do most residencies accept OPT?

>

You should be fine! Your list of places that you can apply to will shrink a bit from places that don't take opt, but pretty much all universities take it. When I went through the process (imaging track) i could apply to 15 out of around 23 schools/ companies that took MS students. Companies can provide H1B visas, and universities too. Most Uni just have you on OPT as H1B can cost a bit of money, but there was a couple of places that said they would sponsor just in case. With OPT just bear in mind the start date and make sure to apply early so you won't have an issue

Hello, I am a medical physicist from the Philippines. I had worked from a company for almost 3 years that provides quality control services for medical imaging equipment (nuclear medicine and x-ray equipment) as well as shielding consultation services. The company that I worked was an ISO Accredited body. I am hoping that these experience may be able to put me onto some leverage that I am competent in studying and working abroad. I am interested in taking up Ph.D. and, eventually, working in Canada or European countries such as Ireland. Hoping that I may get work in diagnostic MP (preferably, nuclear medicine). In line with

this goal, please help me by answering the following questions:
1. May I ask which schools offer the best clinical experience in Canada/Ireland for PhD in nuclear medicine? Currently, I am leaning towards McGill University in Canada or University College Dublin in Ireland. I am also weighing the possibility to repeat my MSc in NUI Galway so that I may be able to take the ABR. 2. Is the work, PhD, and clinical residency applications in Canada/Ireland highly competitive for international students? Do I need to attain more research experience before applying to graduate schools and work? 3. Is there a scholarship for international students available in Canada that doesn't have a bond that I will return to my country of origin (similar to Erasmus Mundus)? I am leaning towards working and staying abroad. 4. Are there any work opportunities for me that I can take for additional experience so that I can undergo residency in these countries? Sidenote: I am leaning towards taking PhD first so that I may acquire further competence in the country especially that the regulations and practice may be very different in other countries. Please do enlighten me. Thank you so much, in advance!

>

In Canada, as far as I am aware, the only Nuc. Med. MP training is UAlberta. There is definitely a weight overall towards Therapy. I know McGill has graduated one Imaging physicist recently, but they are a direct replacement of another imaging physicist that is nearing retirement, not a constant thing. Anything in Canada runs through CAMPEP <http://campep.org> and its requirements for MSC/certificate, and residencies.

Hello. So I was recently accepted to Kentucky's and Wayne State's Medical Physics MS programs and would appreciate some input choosing one based on my current circumstances and long-term goals. So far my career goal is clinical, so both excel in that regard. UK is big into brachytherapy and all the students love doing it. I would also like to help with their research into custom applicators if I were to attend. Wayne State though has access to a lot of toys including 2 proton therapy centers (albeit they are located a ways away from the campus). They both said they also offer PhD programs if research and further education interests me, but according to both funding for their programs is quite limited. My other concern is transportation. I won't have a vehicle when I go to grad school. In Lexington this isn't a concern, as I can use public transport there. Detroit on the other hand is well, Detroit. Wayne is a commuter school and apparently almost all the students drive themselves in from the suburbs. Both are excellent and highly respected programs with amazing track records, but I still don't know enough to make solid decision. So my question is: is Wayne State worth using Detroit's notorious public transportation when Kentucky is also an option? I would love hear from people that know more about both schools. I've seen a lot of people on here familiar with UK, but there's not as much on here regarding Wayne. (Edited: Did further research and condensed it for ease of reading)

I completed a CAMPEP PhD and residency program... now I need to make a decision on two job offers. Work in a hospital system as a medical physicist or go to industry? Advice? Thoughts? Having a really hard time with this decision.

>

Pass your boards then if industry still is more appealing jump over to that.

>

[deleted]

>>

More context: - I'm in the diagnostic side of MP. - Both offers are from well known and respected institutions. - Both teams are great! - Offers are competitive - Industry position might be more interesting (taking R&D to consumer product) and covers two modalities - Clinical position is standard diagnostic MP work without research effort

Hi everyone - I am really interested in doing a masters in medical physics and I really want to shadow a medical physicist! I have a Bachelor's Degree and a Master's Degree in Nuclear Physics, and have been interested in pursuing a masters in medical physics, and before I go that route, I'd like to get some shadowing experience to help with my application. Where can I find shadowing opportunities in Oregon? Thank you in advance for any connections, advice, or opportunities you can offer.

>

I've met some nice physicists (virtually) at OHSU and they seem to be very dedicated to educating future physicists. You may want to try them!

>

Northwest Medical Physics Center (Lynwood, WA) has done paid summer internships in the past. Recently, Covid has thrown a wrench in that but you might look into if that is an option for you this summer.

>>

Thank you!!

Anyone know general timeline for when UNLV makes decisions for their DMP program?

Hey everyone, I'm just looking for some input on grad school decisions. As of right now I've been accepted to a PhD at Kentucky and an MS at Penn. Both don't provide guaranteed

funding/tuition waiver and with the difference in length both would be about the same cost overall. I'm kind of leaning towards UPenn right now since even with a PhD I'd most likely go clinical and they have great placement rates. And with an MS I would be able to get a job and start repaying loans 4ish years earlier than a PhD. I'm a little nervous about having to work during grad school to afford rent, groceries, etc. but again I'd rather do that for 2 years than 6. I guess I'm just looking for some people's thoughts on the situation and my thought process. Also if anyone has experience with penn I'd love to hear about it. It seems like a great program but it's the one where I've heard the least from alumni/current students. Thanks!

>

The MS at Penn is much better than the PhD at Kentucky. IMHO, you should choose Penn.

>

For what it is worth, at least when I applied Kentucky seemed to prefer to matriculate their students into their residency like LSU.

>

Why not ask to do the MS at UK if that's a worry for you?

>>

Tbh I've thought about that. I'm not too sure how warmly it will be received to reach out after being accepted as a PhD student and asked to get it changed to an MS. I also don't think Kentucky's MS is thesis based which I like about UPenn. Plus for some personal reasons Philadelphia is a bit of an easier choice logistically if the end results is a MS for both.

>

Congrats on your acceptances! Could I actually ask what your application looked like? I'm still a bit out from applying to grad school, but I'd appreciate a general idea lol

>

Even with PhD funding including stipend, if you're purely looking at costs, the opportunity cost of missing 3-4 years of professional salary is much more than two years cost of attendance at 2-year master's program like Penn. Again, that's a narrow view because it kind of an apples to oranges comparison. I'm sure PhD can be a great experience in itself and, it of course, prepares you to be an independent research scientist. But, if you already know you want to be clinical, then maybe stick to MS. I was sure I did not want to be a research physicist and was also attracted to Penn's match rates. You can participate

in research and clinical development projects. There is a research thesis requirement as well. Penn's PhD program is new (at least newly independent of the bioengineering department) and they are accepting direct applications, but I believe they also accepted students with master's in MP, including current students. I'm not sure if any current students did apply. Make sure to attend Penn's accepted student day this Saturday, in-person or virtually. Current students and recent alumni will be there, including time without faculty present. Feel free to direct message (not direct chat, I miss those for some reason).

>

[deleted]

>>

I'm concerned about length with regards to cost. I'd rather self fund for two than six. I'd prefer a PhD program but one that's unfunded sounds insanely difficult to make ends meet.

>>>

[deleted]

>>>>

They said funding is never guaranteed and *if* a PI has funding available you they can provide it but they really made it seem like it's rare. I think one of the students mentioned that a recent PhD graduate had to work a part time job. I have some emails out and I'm waiting to hear back for clsrificstions

Post Title: [Training Tuesday] - Weekly thread for questions about grad school, residency, and general career topics 05/24/2022

Post Content: This is the place to ask questions about graduate school, training programs, or general basic career topics. If you are just learning about the field and want to know if it is something you should explore, this thread is probably the correct place for those first few questions on your mind. Examples: * "I majored in Surf Science and Technology in undergrad, is Medical Physics right for me?" * "I can't decide between Biomedical Engineering and Medical Physics..." * "Do Medical Physicists get free CT scans for life?" * "Masters vs. PhD" * "How do I prepare for Residency interviews?"

Comments:

If after graduating with a masters in an accredited program, are there paths to take to then obtain a PhD in the field?

>

1. Finish Master's 2. Find PhD program doing research you're interested in 3. Apply and get accepted 4. ??? 5. Profit!

>

Of course, you can do it.

I really like research and I'm thinking about pursuing a PhD. Should I do a PhD before residency, or right after? I'm starting my last year in an MS soon. I'm also thinking about an academic career too. Thank you

>

I personally think it would be easier to do the PhD before residency. From my personal experience, I worked as a high school teacher for a year before applying for PhD programs. Even though I don't get paid a ton as a high school teacher in an expensive city, getting paid less than a third of what I do now (in an equally expensive city) is not something I'm looking forward to. There are some luxuries I've gotten used to such as being able to live far away from work because I can afford gas, being able to get a new phone for more than free, eating more than rice and egg for every meal, and being able to eat out when I'm busy. These will be hard to step away from come Fall. If you aren't coming from the same impoverished background as me, you might have certain support systems that can improve your quality of life. If you are like me, being paid enough to not have roommates for a year can make it harder to go back. This is all based on my personal experiences, but you might relate. PhD students aren't usually given enough to have an acceptable quality of life, especially in expensive areas, so if you feel like you could make it through at this point in your life, I would suggest to do it now. On the other hand, you could do a residency and work for a while in order to save enough money to improve your quality of life during your PhD. The problem with that plan is that the longer you take away from school, the harder it will be to go back.

>>

Thank you for your reply. This was exactly my concern as well, so I'm leaning towards doing the PhD first

New to the subreddit. Which is tougher to land a residency between imaging and therapy?

>

I applied for both, just not at the same institutions. I had good knowledge in both and did research in both. I would suggest

asking more about which career is the best fit for you because I totally changed my mind after interviewing.

>

There's a whole lot more therapy residencies than there are imaging residencies. Also, most of the imaging residencies that I've seen on MPRAP prefer PhDs. I think most MPs are interested in therapy physics so those positions are inherently more competitive than therapy positions. It would be cool to see the match stats broken down by subfield.

>>

Just to confirm, you mean "more competitive than imaging", correct?

>>>

Yes sorry, I had one too many margaritas :)

Post Title: [Training Tuesday] - Weekly thread for questions about grad school, residency, and general career topics 06/28/2022

Post Content: This is the place to ask questions about graduate school, training programs, or general basic career topics. If you are just learning about the field and want to know if it is something you should explore, this thread is probably the correct place for those first few questions on your mind. Examples: * "I majored in Surf Science and Technology in undergrad, is Medical Physics right for me?" * "I can't decide between Biomedical Engineering and Medical Physics..." * "Do Medical Physicists get free CT scans for life?" * "Masters vs. PhD" * "How do I prepare for Residency interviews?"

Comments:

I am starting a medical physics MS next month. Could anyone elaborate on what graduate school and the courseload is like?

>

Depends on the university, but the best advice I've heard from multiple people is "you get what you put in to it." Be proactive, explore different research areas and seek out collaborators (from the Radiology or Biology department for example), look at important dates like when you need to apply to ABR part 1 or when the AAMP and other big conferences are, they will sneak up on you. Get to know the 2nd year and PhD students, they will have the insider info. I don't think the course load is that bad semester to semester. Some teachers expect you to read the section they plan on presenting before class. Try to invest your

time wisely, especially if you are going to be a TA. I tried to reflect on what I did poorly during undergrad and make sure I improve on those areas. This will be a common interview question too.

So I am a nuclear medicine technologist certified in CT as well. I'm looking to get into a MS in MP program. Do you think it would be possible without me having to go back to school and get a bachelors in physics ? I have 2 bachelors degrees actually. One in HSc and one in Nuclear Medicine Technology. The course work for my second bachelors degree is actually very similar to the first year med phys coursework. Any advice ? Should I take the physics GRE to help my case ?

>

I'm not so sure, you would definitely need to make sure you have maths courses up to junior year (PDE's) and Junior/Senior level courses in QM, E&M, Stat. Mech and Classical mechanics for proper admission chances. You're applying to Medical physics and you may have some experience and some course work related to the field, but most medical physics programs are apart of their physics departments and you usually have to meet the general graduate admission requirements for these physics departments first before declaring an area of intent. Now I'm not sure if you need to do a third BSc with your background, but rather just take the aforementioned courses. The issue is they have pre-requisites and build on each other. I think the best course of action is to email the graduate medical physics program advisors/admissions officers and fill them in on your background and transcripts, along with your experience, and they can best advise you. Also, I'm not sure if the Physic GRE will help either. A lot of schools are now kinda flushing it out. Also, it covers Classical mechanics, QM, Stat. Mech, E&M, Optics & Waves, Atomic physics, Lab methods, special Relativity, etc. Without proper coursework up to senior/junior level in physics and math, it would definitely be quite the challenge preparing for it so it may not be the best course of action. At the same time, if you manage to do very well in it, it could help. I just don't see the time and effort being put in to it being worth much of a pay off in your specific situation.

>>

I may be wrong, but most schools only ask for the General GRE, not the Physics GRE. But you are correct, they are slowly phasing the GRE out but most programs still require it

>>

This was a great response. I appreciate it!

>

\> Do you think it would be possible without me having to go back to school and get a bachelors in physics ? You'll need to find out from the program(s) you're interested what their prerequisites are and if your previous course work satisfies any or all of those prereqs. Best case scenario is that they do and you get accepted into the program. Likely case is they want you to take some senior level physics or some other courses. They may or may not want the GRE (probably not the Physics GRE though).

>>

Thank you ! I greatly appreciate your insight and advice !

Post Title: [Training Tuesday] - Weekly thread for questions about grad school, residency, and general career topics 04/26/2022

Post Content: This is the place to ask questions about graduate school, training programs, or general basic career topics. If you are just learning about the field and want to know if it is something you should explore, this thread is probably the correct place for those first few questions on your mind. Examples: * "I majored in Surf Science and Technology in undergrad, is Medical Physics right for me?" * "I can't decide between Biomedical Engineering and Medical Physics..." * "Do Medical Physicists get free CT scans for life?" * "Masters vs. PhD" * "How do I prepare for Residency interviews?"

Comments:

Currently i am in nepal, i wanna pursue ms medical physics in australian university. Should i apply or not, can i get residency after completing course? How hard is to get job after ms?

Are there any opportunities for international work after ABR certification? Or does medical physics typically lock you into working in only one country?

>

As medical physicists are somewhat clinical workers and there's, of course, a lot of radiation involved, contries have set rules/regulations for the profession that can impede the "free" movement from one contry to the other. Example: The US clinical med physicists must have ABR certification, and to go to ABR you need CAMPEP and all that, so for an international one would be hard, as it would have to get the CAMPEP certification and go through the ABR process. So in short, I think yes, you somewhat get locked in the country you get your education.

[deleted]

>

I have not heard of it happening. If you have an anxiety disorder though you should seek help from a doctor/therapist.

Hello! I'm about to start my medical physics Ph.D. this coming fall and I wanna know what people think about tracks. One day I hope to do a residency in therapy but I really like molecular imaging/nuclear medicine projects for my Ph.D. Will this cause an issue in the future?

>

Congrats! Your program didn't make you choose a track when you applied?

>

Most people don't work on their dissertation topic as a primary focus in their post-residency employment. Do a project that is interesting to you and most importantly has good support around it (good PI, funding, etc).

I've recently been accepted to a few campep MS medical physics programs and I'm having a hard time deciding on which ones. Does anyone have advice?

>

Should align with your career goals as well. If the goal is clinical, then going to a program with good board prep and success rate is important, as is the residency match rate. In this case, try to maximize your clinical experience during the graduate program. If you don't want to be clinical, this stuff doesn't matter as much. If you are leaning industry or ultimately want to end up with a PhD, faculty connections and research history is important so it may not be a bad idea to reach out to get more info. Definitely important to keep your aspirations in mind.

>

Minimize cost and maximize clinical opportunities. Whatever program allows you to do this and you can see yourself living there for 2 years.

Any Creighton Medical Physics MS students or recent grads with insights into the program? How was your experience and success in securing a residency?

Hey everyone, I find medical physics super interesting and I would like to go back to school to get an MS and try to land a physicist position one day! I have a physics degree from 5 years ago, but my grades were not super great. For the past 3 years I've been working at a prominent company in the field as a service engineer. This gives me the chance to talk with physicists and residents pretty often, absorb a bunch of

knowledge, and see how various linacs are used. Is this likely to help me get accepted, or do they usually look for recent physics majors with straight A's?

>

Getting into a good CAMPEP university with low GPA is fine as others have said. Get good letters of recommendation and try to get a decent GRE score (if needed). I would focus on schools with good residency match percentage. That's the bottleneck for to become a clinical physicist if that's the end goal you want.

>

Having hands on experience working with clinical equipment is definitely a plus. Grades are of course part of the application but they aren't rejecting people who don't have straight A's (source: me).

Post Title: [Training Tuesday] - Weekly thread for questions about grad school, residency, and general career topics 03/08/2022

Post Content: This is the place to ask questions about graduate school, training programs, or general basic career topics. If you are just learning about the field and want to know if it is something you should explore, this thread is probably the correct place for those first few questions on your mind. Examples: * "I majored in Surf Science and Technology in undergrad, is Medical Physics right for me?" * "I can't decide between Biomedical Engineering and Medical Physics..." * "Do Medical Physicists get free CT scans for life?" * "Masters vs. PhD" * "How do I prepare for Residency interviews?"

Comments:

[removed]

>

As far as I know you will need some physics schooling. Medical physicists may work in medicine but they're still physicists, usually specializing in radiation or imaging physics. That's why most grad programs prefer students with a BS in physics, or at least a minor in it. Medical and biology courses are definitely a plus, but they aren't nearly as important as a strong background in mathematics and the physical sciences.

>>

[removed]

>>>

I know of several people that went into medical physics with an engineering BS, it's totally doable! If your school has a nuclear engineering program then even better (you'll be learning a lot about radiation physics in grad school), but an engineering degree in general should be more than sufficient to prepare you for the math and physics side of medical physics schooling. Go ahead and keep taking medicine/biology related courses as electives if those interest you, keep your grades in your math and physics courses high, and I see no reason why you shouldn't qualify for a medical physics program.

Anyone know when UNLV makes decisions for their DMP program?

I already have a master's degree in medical physics but I only got a C+ grade point average so I'm told I'll need some work experience before I can get a registrar position. Since I'm a New Zealand citizen, I've usually only applied for NZ positions. My reasoning is that other countries need to extensively search for a local employee who already has citizenship or a visa before considering foreign recruits. Is this reasoning faulty?

Hey can anyone let me know what a standard wait time is for waiting to hear back after interviewing for a position?

Hello, I wanted to know about job prospects in the UK. I read in many articles that the field is saturated but most of them were about the US/CA. How is the job market in EU? Also, Is there anyone who studied at Swansea uni? I am confused between Surrey and Swansea. I heard Swansea has better overall stats but the course is a bit heavy. On the other hand, Surrey has classes for like 3 days max in a week so there is time to catch up and take a breath if necessary. Any answers would be appreciated

I was accepted into UChicago, UCLA, and UW Madison for their respective PhD programs. Although I think I know my top choice, I was wondering if anyone could talk about what they know about these schools. Specifically, the weaknesses at each program/school, overall vibe in the program (e.g cocky attitudes, easygoing, flexibility, etc.), social scene within the program, and resources that the program/university provides. Any other tips are welcome too since I'm still undecided. Thank you!!

>

First a disclaimer that I don't have any actual experience with any of these programs and don't know anything about UChicago. Now that that's out of the way, the impression I got from UCLA was it seemed to be more research focused and less clinically focused. UW Madison seemed the opposite. In my interview (pre weird interview process they have) when I expressed interest in going into academia, the professor interviewing me said that their program focuses heavily on clinical medical physics and that other programs would be better for me. In an interview at another school with a professor that recently graduated from Wisconsin I

was also informed that Wisconsin has a very competitive, sometimes toxic atmosphere, which is not great. Despite the clinical mill and competitive attitude, if you want to do clinical medical physics I'd suggest probably that over UCLA. Otherwise I got good vibes from UCLA and I'm sure their clinical program is good too.

Hi! New to medical physics field. What are some well known grad schools in this field? I looked at some online rankings but they seemed inconsistent.

>

[deleted]

>>

Would the 5 schools that you listed be good for both an MS or PhD?

>>>

[deleted]

>>>>

Is there any online resource that lists match rates out of each school? or only the universities will post them?

>>>>>

[deleted]

>>>>>>

Gotcha, I've seen stats regarding percentage of students that continue into residency but not stats of match rate. Thank you for all your help!

>>>>>>>

On the CAMPEP website, they have a public disclosure tab on the left side. They have reports from 2018-2020 of the residency rates for all the programs which makes it easier to see rather than going to all the individual programs websites to find the statistics. <https://www.campep.org/PublicDisclosure.asp>

>>>>>>>>

Thank you!!

Anyone applied to Univ of Kentucky? Have you heard back?

>

If you mean post interview then no. I asked on Friday and they said we should hear back early this week but I guess it's taking longer than anticipated

I got waitlisted at my top choice and was just looking for some insight. A lot of programs show many more offers than students matriculating, does that mean those schools went through their waitlist as well? Has anyone been waitlisted and willing to share the experience a bit? Thanks

>

Getting into undergrad I was waitlisted at MIT and applying for grad school I was waitlisted at UTSA last year. In my experience, waitlisting is the worst. It gets your hopes up and there are high odds you won't get picked. From both schools I've been waitlisted for I never got a reply that they finally admitted everyone so if I just waited without accepting an offer for undergrad I would've been screwed. What I suggest is to wait until the last possible minute to accept any other offers though just in case, maybe even send out an email close to the deadline to your top choice to see if it is likely you'll get in.

>>

Thank you!

Hello, I made a separate post , but can someone give me some insight to help me choose between UCLA and LSU. I got accepted into both PhD programs and I wanna know what they look like in terms of life - work balance, residency matching, prestige, etc.. thank you

>

About the programs themselves, I don't have much to add. But I do know UCLA has a fantastic reputation as a research university, but at the cost of the ridiculous cost of living in LA. My partner's sister goes there and has to pay \$5,000 a month in rent for a 2 bedroom apartment she shares with 4 other people. I don't doubt that you can find cheaper but it is definitely one of the more expensive areas you could live (The \$5,000 a month is split between all 5 of them so it's \$1,000 each. I realized that is probably unclear in my original wording)

Hello, I am currently waiting on decisions for PhD programs in Medical Physics for a few schools and wanted to know some thoughts and facts that I can't locate on these programs. The only school I've been accepted to so far is University at Buffalo. It looks like funding is not given the first year, so I'd choose any school with funding over this at this point. Do any of you have any thoughts/opinions on their PhD program? Is it good? Would it be worth paying for the first year even if I get into somewhere else that funds me the first year? The schools I

am waiting for replies on are UMASS Lowell, University of Toledo, Duke, and Wayne State. In my interview I learned that Wayne State requires you to pay the first year, but it is also a great university for clinical medical Physics, although they specialize in Radiation and I want to go into imaging. Does anyone know if University at Toledo, Duke, or UMASS Lowell fund you from the beginning? I think I saw that Duke and UMASS Lowell do, but confirmation is definitely not a problem. I also wanted to know your thoughts on these other schools. Duke is the only school I know I would for sure choose over the others, but more specifically I wanted to know about University of Toledo and UMASS Lowell as compared to University at Buffalo. Hopefully some of you have some insight for me. Thank you in advance!!!

>

Have you heard anything from UMass Lowell? I applied as well and haven't gotten any communication since

>>

I have heard nothing. No interview or anything. But I also didn't interview for Buffalo and was accepted in January. (They extended my decision timeline because they were so early)

Has anybody heard from Duke graduate program yet? I applied to MS Medical Physics for early decision and had interview on February but haven't heard back from them yet

>

I heard back on the 15th of March last year, so maybe they send most final decisions around that time. Hopefully you hear back soon

>

Yes, I heard around a week after my interview in February. I would check the portal, as that was updated before I got the email.

>>

I just checked the portal and it still says submitted :(

>>>

If it was a no, you would have heard back by now. I'm guessing you're on the wait list, and Duke is still waiting on others to accept or decline their offer?

>>>>

Thanks for your reply, I just received the decision from them. Apparently they hesitated because of my undergrad courses.

>>

Did u apply to MS too or PhD?

>>>

I applied to MS as well.

As students and programs can now make their rank list, should I voluntarily e-mail all the schools I rank telling them that I did so? Are there any cons on doing that or just pros? I've gotten 4 e-mails from program directors saying they will rank me, should I reply saying I'll rank them as well (when I actually do, of course)? Should I also sent intentet emails to directors that hasn't sent me their intent?

>

Personally, I'd skip on the replies. When they say they will rank you, they've likely already made up their mind on how their rank list is organized, which can include 20+ candidates. So it doesn't exactly change how the algorithm will shake up, but rather your perception of it. I don't see a benefit in replying. Do you like these programs? Rank away! Feeling very sus? Go with your gut. When I went through the Match, I actually had several programs tell me they would not respond to any "thank you or intent emails" in order to keep the process as bias-free as possible. All you need to worry about is ranking based on your personal preference. That's how the Match is supposed to work!

>>

I see, I wasn't too incline to send rank emails or reply to the intent ones to start with, as I think it would change anyone minds (i.e. rankings). Also, doubt there's 20+ on the list for imaging haha there was like 11 or so on the secondary interviews I went (if you count all the days for places that spreads outs their applicants)

Post Title: [Training Tuesday] - Weekly thread for questions about grad school, residency, and general career topics 02/01/2022

Post Content: This is the place to ask questions about graduate school, training programs, or general basic career topics. If you are just learning about the field and want to know if it is something you should explore, this thread is probably the correct place for those first few questions on your mind. Examples: * "I majored in Surf Science and Technology in undergrad, is Medical Physics right for me?" * "I can't decide between Biomedical Engineering and Medical Physics..." * "Do Medical Physicists get free CT scans for life?" * "Masters vs. PhD" * "How do I prepare for Residency interviews?"

Comments:

My question is why would anyone want to get into med phys nowadays? You pretty much need to get a PhD, 'cuz ya need that to get into most residencies, and ya need a residency in order to get ABR. So, what are we looking at? 4 years undergrad, another 4-5+ for a PhD, and then a 3 yr residency? Why?? Why not be a doctor or lawyer or whatever? I know med school would be more \$\$ \$, but you'll also make a lot more. I'm genuinely curious why the new folks are entering this field. Heck, if you love rad onc that much, just become a rad onc doc.

>

Easier to get into? Personally, I think the work environment is better with my personality, and I am good at physics and math. despite all years of undergrad and PhD

>>

That makes sense. I know it must be appealing to some, but I would suggest that they **really** like the sorts of things medical physicists do. The things we **really** do, not the stuff you'd read in a brochure.

I'm a first year master student, can anyone share information about the opportunities for MSc student get residency in the state, please? I want to be a clinical medical physicist, but my research is not medical physics related. I'm doing video signal analyzing instead of imaging.

Hi, I was just accepted to VCU's MSc program in medical physics. Can anyone shed some light on their experience in this program, along with their search for a residency position after graduation?

I got accepted into both biomedical engineering and Medical Physics graduate programs, and now I'm unsure what to take. If anyone here made that choice, what was your reasoning?

>

I would do engineering. I honestly would not recommend medical physics to anyone nowadays. I went on and on about it in another thread, but I don't think it's "real" physics work. Not that it's bad work, but if you want to do physics, this ain't it. I can only assume most people are getting into it for the fat paychecks. Medphysicists make a LOT more than your typical "regular" physicist or physics professor.

>>

Can you link the thread here? I'd like to read what you posted

>>>

Sure, here it is: https://www.reddit.com/r/MedicalPhysics/comments/skifk1/most_medical_physicists_are_glorified_technicians/ I apologize in advance because I let some of my personal biases get into the discussion. I think I actually have two main issues. One is the feeling that most of the clinical work we do is repetitive, technician-like tasks. People have pointed out that there are other things to do, like implement new gadgets, streamline processes, etc, but to me, this is still not physics. The other is that I've become fed up with my current employers. So, feel free to take it all with a grain of salt; it's just my 2 cents.

>>>>

Definitely an interesting read because I did have the same worry - about clinical working turning into a mundane routine. Would you happen to know if this holds for clinical engineering via biomedical engineering?

>>>>>

No prob! I don't know much about those two fields, so hard to say. To be fair, I'm sure a lot of jobs can turn routine and mundane, especially after doing them for a while. It's just that, I'd like to think I'm a fairly smart dude, and also creative, and it just feels like I'm wasting that sometimes. However, then I take a cruise through Indeed.com looking at job listings that I think would interesting, and it's a sobering experience, to say the least. The pay is just pathetic, yet the demands for experience and qualifications are high.

>

The research domain for both can overlap as much as you'd want it to, so I don't see that as a deciding factor. In my mind, you should decide based on your desire for clinical duties. If you want to do clinical work: medical physics. If you'd rather work in industry: biomedical engineering.

>>

Would it be possible to elaborate more on the clinical duties that a medical physicist would work on ? Also, I've heard that clinical engineering is a possible career path for Biomedical Engineers (?)

>>>

Sure, I can address the medical physics clinical duties, but I don't feel qualified to touch upon clinical engineering. Apologies. Anyways, there are two main career paths for medical physicists: radiation therapy and imaging. Those who specialize

in radiation therapy (the majority of physicists) work in radiation oncology centers conducting quality assurance, treatment planning, administering unsealed sources, acting as a project manager for new hardware installation, conducting research and partaking in some clinical procedures (brachytherapy, inter-operative radiotherapy). At some centers the clinical medical physicist also has direct patient consults during the work-up to their treatment delivery. Imaging physicists are concerned with the quality assurance of imaging systems (mri, CT, nuclear medicine, etc.). They also have some overlap in responsibilities as a therapy physicist: new hardware oversight, handling of radioactive sources, ensuring regulations are met, etc.

>>>>

Thank you for your answer, Radiation therapy sounds really interesting. Though, I want to become an imaging physicist in the near future. So, interaction with the patients is probably limited to only the radiologists and oncologists? Just so that I've understood this correctly, We'd be clinical scientists that assist with the operations?

>>>>>

[deleted]

>>>>>>

Thank you so much for your response , You've explained it really well. It makes it easier for me to decide which medical physics track I should consider.

Was just accepted to VCU. How is their masters program ? My goal is to get a residency afterwards. Anyone have a personal experience with the school?

>

I was also recently accepted to VCU. Were you ever able to find information from someone with personal experience at the school?

>>

Congratulations! Unfortunately I was not able to. Have you?

>>>

Nope, please keep me updated if you do and I will do the same!

I often see a set of acronyms following medical physicists' names on websites, usually a mixture of FCCPM, MCCPM, DABMP, DABR, FAAPM, FCOMP. I assume that they are related to completing certifying exams by ABR and CCPM. What are the others, and what is the difference between two such as FCCPM and MCCPM?

>

The more letters, the more BS =)

>

CCPM Canadian college of physicists in medicine. Fxxxx is Fellow of the organization, it is like an honorable title that he received for some substantial achievement. MCCPM probably Member of CCPM. DABR - diplomate (certified) of American board of radiology. DABMP - diplomate of American Board of medical physics (kinda older type of certification, not available for new therapy physicists, still giving some exams for diagnostic types, but not sure). ABR exqmams in US, CCPM in Canada. Acknowledged reciprocally by both countries.

>>

I've devoted my career to collecting as many letters after my name as possible. More letters = better physics In all seriousness, I don't typically put anything after my name. My colleagues will add all their DABR, MS or PhD etc. but it just feels weird to me unless I'm signing something regarding our HDR or accrediting documentation where those credentials are required.

>>>

Same. I don't have many letters, just PhD and DABR. Almost never use them and not insist to call me Dr. unless in some accreditation documents.

>>

Thank you!

**GPA: 3.3 TOEFL: 110 BSc 3 Years Physics from Calcutta University
QS 800-1000 Graduated 2021 BSc Data Science from IIT Madras QS
255 Just completed first sem. Projects: 3D Brain MRI image
segmentation, XRay classification. Extra: Founded a Company
Applied: Duke, Purdue, Georgetown, Hofstra Please can someone
tell me where else can I apply?**

>

Do you have all the physics pre-req courses to get accepted?
Also, have you taken the GRE? a lot of schools have that as a requirement as well. Here's a list of all CAMPEP accredited Grad Schools you can apply to, if they are accepting. <http://campep.org/campeplstgrad.asp>

>>

Not the person you were responding to, but could you give me a list of the required pre-reqs? I can't find anything on the

campep website. Hopefully I'm on track to take just about all of them already, I'm currently in my undergrad as a physics/astrophysics major

>>>

A short run down will be Mathematical Methods, QM, Particle, Classical Mechanics, EMT

>>>

Hi, that goes from program to program, you'd have to go on their website and look at the requirements. But mostly, GRE and higher level physics courses (you should be fine) are all required. Some places require Chem, some don't, some ask for higher GPAs and some lower, really have to go into programs you want to apply and see it

>>>>

I see, thanks so much!

>>

I haven't written GRE yet. However, my course was very theoretical so, I have pre req in all the programs but minor was Electronics & Computer Science. So no Biology/Chemistry courses unfortunately.

>>>

Ok, yeah you need GRE for American universities, won't be able to get into one without taken that exam. Maybe there's a few that don't require, but I'm not sure. If you have all the physics courses that's ok, chemistry and biology are recommended but not required. But you might wanna have those as they are very important. I looked at Purdue as an example and they require GRE, so without it you are just wasting your money. Make sure to take it ASAP. EDIT: Purdue also requires 1 year of Chemistry courses, so I wouldn't think that they will consider you for their program. Really look through the admission requirements for each school

>>>>

GRE is waived at most unis except some state unis. In Purdue's case Program Director Dr. Stantz waived it for me. I asked him last year around June. He remembered somehow. Coming back to the Course requirements all of the programs were flexible to me stating that I've taken enough physics courses to apply. By far the biggest roadblock for me has been the 4 year undergrad requirement. I am mostly inclined to Non thesis plan of study in Imaging/Clinical.

>>>>>

That's good news then! There are some programs that are non-theses (mine is one), so look up the list and see the ones you like.

>>>>>

I'm so stressed. Haven't received any admit yet, though applied pretty late. Jan 13. I've tried attending some of the open houses. Let's see. Hoping for the best.

>

Is your question what places are still taking applications, or what are good schools in general? Most application deadlines have passed for this cycle I believe.

>>

Kinda union of both honestly.

Post Title: [Training Tuesday] - Weekly thread for questions about grad school, residency, and general career topics 02/08/2022

Post Content: This is the place to ask questions about graduate school, training programs, or general basic career topics. If you are just learning about the field and want to know if it is something you should explore, this thread is probably the correct place for those first few questions on your mind. Examples: * "I majored in Surf Science and Technology in undergrad, is Medical Physics right for me?" * "I can't decide between Biomedical Engineering and Medical Physics..." * "Do Medical Physicists get free CT scans for life?" * "Masters vs. PhD" * "How do I prepare for Residency interviews?"

Comments:

Hey does anyone have any personal experience with Rhode Island's Masters program? I was just accepted and was looking for a better picture so that I could begin trying to make a decision. Currently I am undecided between VCU and URI.

[deleted]

>

It depends on what details you go into, to be honest. I think, typically, its best to cover a summary of your education and path to where you are but also let them know a little bit about you as a person. Use some common sense though and try to keep it interesting and about things to make you look good. Getting too personal or bringing up weird topics could end up hurting you.

Did anyone receive interview invitation to duke?

>

for diagnostic residency interview, they already sent all the invites

>>

Same for therapy residency

>

For their graduate program, Duke held interviews yesterday and have another session today

[deleted]

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>>>>>>>

The venn diagram of what the job looks like between an MD and an MP are basically two separate circles. It's not like the difference between a nurse and a physician where there's a ton of overlap in what they could do and the physician's circle is much larger. We do entirely different things and just happen to work in the same clinic as a radiation oncologist or radiologist. For people that don't know what an MP does, your question is very typical but it's very confusing to a lot of people that do know what an MP does. It's like asking a lawyer why they didn't become an engineer. Idk, not for me lol. Additionally, many MDs are actually paid near what a MP is paid (.75 to 1.5X) unless you are in a more lucrative subspecialty or one of the work-life balance killers, and there is absolutely nothing guaranteeing you will land one of those unless you end up in an upper quartile of your

medical school program. Medical physics I think pound for pound/hour for hour/stress for stress comes out potentially ahead of a physician in a ton of cases. Here's hoping to another four decades of this so I can retire happy.

>>>>>>>

Just passing by to say that I love your username.

What will be the most important component for clinical medical physics for MS graduate students besides Machine Quality Assurance and Treatment Planning?

>

Machine commissioning

Hi, I'm an international student currently finishing up my Masters in Astrophysics in Germany. I'm thinking of pursuing a career in Medical Physics, but I'm not sure how to proceed , as in which program should I apply for (Masters or PhD in Medical Physics) ? Is having a masters in Astrophysics going to put me in a disadvantage when applying for a Masters/Phd in Medical Physics? Thank you!

>

Re: GRE, I believe many of the top programs like UWMadison, UCLA, UChicago, aren't requiring GREs anymore (and I know UChicago and UWMadison aren't even accepting them). Also having a masters in Astro will not in any way put you in a disadvantage when applying. It shows experience in grad level physics. And any prior research from undergrad or grad would also definitely be an advantage in an app!

>

[deleted]

>>

Hi, thanks for replying. Yes I'm interested in working in North America and I think I would prefer to pursue a PhD in Medical Physics, as I would like to keep the option of doing research in this field open, as opposed to the Masters which limits me to only doing clinical work. Are the PhD programs fully funded? and do you have any universities that you would recommend to apply for the PhD program?

>>>

I just want to add that lots of MS physicist do research too, it just depends on your center's goals (eg academic vs community) and your own motivation.

any common questions for graduate school interviews? Never done an actual interview so i'm slightly nervous on a question asked that i have no idea on how to answer

>

I think I had some light questions to see if I had looked into the science at all - like what effect does radiation have on biology? Then the rest were like to talk about a project or problem you had in school/work. Later on as a student participating in the next year's class' recruitment, we heard that by the time of interview, they're looking for more of a personality fit since the program is quite hands-on and collegial.

>>

They definitely are mostly a fit thing. I did have some questions about some modern physics like photoelectric effect and Compton but I think that was just to see if I was familiar with the concepts. > 95% of it was just talking about me and my interests and projects I worked on.

>

I'd also suggest emphasizing why you want to go to XYZ program. Know specifics about the university, the program, the city, the professors etc. and be able to mention and show why you think this program would be good for you (i.e. not only why you are good enough for the program). Grad school interviews are a strange mix of both an interview and a recruitment. You want them, but they also want to make sure that you want them!

Anyone can provide the residency opportunities for master students except for COMP website? Thank you!

>

CAMPEP website lays out all residencies and gives links to their website. If you are looking for residencies to start this July 2022 you are late, no more places to apply now. But its good to prepare for next year cycle. Ps.: The individual program website says if they only take PhD students or Ms as well. MP-RAP also has that data available when you are applying.

>>

Plenty of places say they only take PhDs but also only have MS in the program.

Anyone have information on Brown University's graduate program?

>

Some of their faculty are pretty well known amongst the Medical Physics community so that will be a plus going forward.

>

What kind of information? It is brand new so they probably don't have anyone to talk about the program experience.

Post Title: [Training Tuesday] - Weekly thread for questions about grad school, residency, and general career topics 03/01/2022

Post Content: This is the place to ask questions about graduate school, training programs, or general basic career topics. If you are just learning about the field and want to know if it is something you should explore, this thread is probably the correct place for those first few questions on your mind. Examples: * "I majored in Surf Science and Technology in undergrad, is Medical Physics right for me?" * "I can't decide between Biomedical Engineering and Medical Physics..." * "Do Medical Physicists get free CT scans for life?" * "Masters vs. PhD" * "How do I prepare for Residency interviews?"

Comments:

I will be starting my grad school (MS) this Fall. I have taken a program with lots of clinical experience in NY. Being an International Student, first thing that came to my mind is to think of residency from now. Already doing a very (we have different definition of competitive, nvm) competitive course in Data Science from a Top School. I have this summer in-front of me which I can use and one more next year. What kinda opportunities I should look out for next few years? What you would have done if you were starting out now? *Edit 1 - Therapy Medical Physics

Hello, I am currently an undergrad and I've received a few offers for MS programs in medical physics. I've been trying to decide which, and have been struggling a bit. I know the things that *I* think I like about these programs, but I don't really have access to the opinions of people who work in this field. Would y'all mind sharing your perceptions/opinions of these universities? As in, what you think their strengths are, what they're bad at, how much you like them in general, etc. 1. Oregon Health & Science University 2. University of Oklahoma 3. Purdue Thank you so much!! I'm so lost right now and any help is very much appreciated.

>

[deleted]

>>

Thank you so much! I'm visiting there soon so I'll keep that in mind.

>>>

[deleted]

>>>>

Thank you so much!

I'm wondering if it would be a bad idea to pursue a masters in physics and then afterwards apply to medical physics masters and phd programs afterwards? My GPA isnt the best (3.3) and while I do have some research experience I have currently been denied from every program I've applied to. If anyone has any advice I would gladly take it!

>

Only if you don't go into debt to get that extra masters. To me, that'd be a poor financial decision. How many programs did you apply to?

>>

[deleted]

>>>

I meant dont go into debt for a pure physics masters just to have a better chance at a completely different masters. Poor financial decision to me

>>>>

[deleted]

>>>>>

What are the low tier masters programs? I'm waiting to hear back from a few currently.

>>>>>>

[deleted]

>>>>>>>

I did apply to Hofstra so let's hope lmao

Hello, I just received an email informing me that I have been selected for an interview for the masters program at Brown University. This will be my first graduate school interview and I would really appreciate some information on what I should expect in this process.

>

I've interviewed for a few PhD programs this year with success so far. The most common thing I was prompted to do was describe my research at a high level. A couple people tried grilling me a little, but it wasn't too bad considering I studied my research beforehand. Otherwise, the five most common questions I got were (in order): (1) tell me about yourself (2) what are your goals beyond graduate school? (3) why do you feel that our institution/my lab is an appropriate fit for your needs? (4) why medical physics? (5) what do you seek in a graduate program/what resources do you need to succeed? Prepare for those and perhaps for some behavioral questions (e.g., weaknesses, strengths, teamwork, challenges). One program of mine was a panel interview and had some left-field questions (i.e., (1) what makes you more competitive than other applicants? (2) what makes you a real person?) Some schools (like Duke, I believe) might do MMIs. Also be sure to prepare a bunch of questions for the interviewer! If your interviewer is a PI, you can look at their most recent papers or look up their current grants to generate some questions. Good luck! Feel free to reach out if you have questions or just want to chat about it

>

The below was my experience years ago and also not at Brown: Tell us about yourself. What are your hobbies. Why physics. Why medical physics. Why . It's crucial to remember you are interviewing them too!

I'm currently deciding between a couple offers for where I would like to do my Medical Physics PhD and I am pretty sure I know which program is my top choice. The only thing I am hesitant on is that my top choice is the same university that I am attending for undergrad as I have heard in the past there is a stigma around people who do their graduate degree at the same place they did their undergraduate degree. Is this something I should be worried about for my Medical Physics PhD or is it something that should not influence my decision?

>

[deleted]

>>

Echo this if anyone's up to talk. I'm in a similar boat and have no idea how to choose

>>>

[deleted]

>>>>

I faced the how-to-choose situation earlier this cycle and have made my decision, so feel free to add me if you'd like to have a chat

>

I wouldn't be too concerned about it. If you like the program and find the research they're doing interesting, go for it.

Hello! I am currently in undergrad and trying to explore as many careers as possible. What does a medical Physicist do? Is it hard to find a job? What are some good majors that prepare you for this career? Finally, If not a medical physicist, what career would you have interest in? Thanks!

>

For what does a medical physics do? - <https://medicalphysics.med.wayne.edu/faq-students> this is a link from the resources tab on the right (there's a good guide there as well). Hard to find a job: I don't know, still a grad student trying to get a residency position, but it seems like the job market is vast (for certified medical physicists), other user can give better input. Majors that are good: Physics, Astrophysics, biomedical engineering, nuclear engineering, I think those are good ones to prepare. I would probably be focusing on being an MRI scientist if I wasn't on the medphys path.

>>

Thanks for the reply! What kind of residencies are there?

>>>

So you can divide MedPhys in two buckets: diagnostic and therapy. Diagnostic you work with imaging equipment (CT, MRI, ultrasound) and nuclear medicine, so working with equipment that images the patient to help doctors achieve an diagnosis. In therapy you work with linear accelerators (linacs), brachytherapy, etc... stuff relating to the use of radiation to treat tumors. So there are 2 residencies tracks: The diagnostic and therapy ones, and within them you can go either to an academic center or to a consulting company.

>>>>

How competitive is getting into a school?

>>>>>

I don't know about grad school, only applied to 1 place and got in. I know from other threads that the big names (Wisconsin, LSU, Kentucky, Vanderbilt...) are competitive. Residency is very competitive, like...VERY! haha

>>>>>

What made you chose medical physics

Post Title: [Training Tuesday] - Weekly thread for questions about grad school, residency, and general career topics 02/22/2022

Post Content: This is the place to ask questions about graduate school, training programs, or general basic career topics. If you are just learning about the field and want to know if it is something you should explore, this thread is probably the correct place for those first few questions on your mind. Examples: * "I majored in Surf Science and Technology in undergrad, is Medical Physics right for me?" * "I can't decide between Biomedical Engineering and Medical Physics..." * "Do Medical Physicists get free CT scans for life?" * "Masters vs. PhD" * "How do I prepare for Residency interviews?"

Comments:

I am going to be applying for medical physics a grad school this fall, I recently became interested in the field and I don't really have research experience. I am a physics major going for an NRE minor (closest thing to medical physics here). Am I ok with a lack of research experience? I want to go into radiation therapy mainly.

>

Lack of research experience will certainly be a problem for PhD programs. Are you applying to masters?

>>

Yeah. My current school only offers a masters and I need a masters for radiation therapy afaik so my plan is to go for masters and then a PhD later down the line.

>>>

Having a masters would definitely help, especially if you publish with your thesis research. Looks like you go to Georgia Tech; they definitely have a PhD in medical physics (I am in the DL masters right now).

>>>>

Ah ok I must have missed it. Thank you.

Does taking some courses like Radiation Physics and Radiation Protection as undergraduate student with some hours of medical physics job shadowing help to improve the application for applying to MS graduate programs?

>

For sure it would be good to have, although I don't think what exact electives you take matter as much as your grades in said electives. You'll get plenty of radiation physics and protection in a campep program so don't worry about getting a "leg up" if you get my drift.

Are CAMPEP accredited certification programs a realistic way for entry into medical physics in North America? Would they be able to compete with Medical Physics PhDs for residencies? I have been accepted to two PhDs (Geophysics and Medical Biophysics) and I like both fields equally. To me (maybe naïvely), starting a PhD in Geophysics and having the certification program as a back up seems a better idea, only if the certification makes me competitive for residencies and later on, hospital positions. What would you suggest I do or how to view it?

>

Certificates for PhDs in fields other than MP is certainly realistic - plenty of people do it. I'm a masters student with a few certificate classmates. Our department has current and past residents who did the certificate. During this residency interview season, I've met several residents at prospective programs that were certificate students. As far as being a backup option: if it does end up the case you discover geophysics is not for you and you do a certificate, by the time of residency application, have a better narrative that describes why/how you switched to medical physics and want clinical training. During our residency application coaching, they warn us that programs are on the look out for physicists who seemed like they were there because other fields just didn't work out. Some residencies themselves said the same thing during open houses and virtual residency fair before the application season. They want indications that you really are interested in being a clinical medical physicist through things like shadowing, assisting in clinic and clinical projects etc. As a side note, those classmates who are doing a certificate have all done the certificate part-time over at least two years while working day jobs as researchers - mostly post docs in rad onc. This seems like a good option since they get research experience in medical physics, have a bit more time (especially that interim summer) to do clinical stuff and they get tuition benefits as school employees. Another side note: consider the opportunity cost of going directly into a certificate route compared to a CAMPEP degree - you'd be delaying getting to a qualified medical physicist salary by a year or so. But I guess that's secondary if you're truly on the fence about which field you want right now.

Will a new model be seen with the bottleneck currently in place? Approximately many open positions are there in the US? Does the current state of ABR/CAMPEP/Residency prevent these from being filled in a timely manner? If these positions can't be filled

adequately, does that change or will it change the current model for staffing ie 1-2 FT physicists on site for consults, specials (eg HDR/seeds/SRS etc), another physicist doing remote chart checks, and another doing monthly QA for a site or system? More remote work, physicist assistants, automation? Interested to hear thoughts. Thank you.

>

I work for a healthcare staffing agency and recently saw a job posting come through for a medical physicist (6 month contract position). Normally, facilities will only utilize hiring agencies when they are having trouble filling the position. So it would seem like the need is there.. It got me looking into what it would take to become board certified (I have a MS in physics) and have been a little discouraged by what it would take. Another masters degree in MP, plus a residency where most programs accept just 1 applicant a year.

>

The bottleneck is to your benefit. Would you rather be able to easily get a residency position but struggle to find employment afterwards, when you are more specialized and have already committed more years of your life to a profession in which you are not competitive? Do you want there to be so many candidates that employers feel no pressures to offer good working conditions or competitive salaries? Be careful what you wish for. The bottleneck is the main reason you are interested in this position to begin with.

>>

Not me. I've been doing this for 25 years. The number of years required has become absurd IMO and the numbers on the boards don't reflect the intent of CAMPEP etc.

>>>

That has grown with the number of prospective applicants, not in isolation. Look at our colleagues in "real physics" trying to get jobs in academia, and tell me we should widen the bottleneck

>>>>

I'm in favor of ending the bottleneck and integrating residencies into the master's degree. While the bottleneck certainly increases salaries, employers are overpaying for medical physicists. This encourages overworking and a search for alternatives. In the future, we'll see less jobs and demand for medical physicists which mitigates the initial advantages. Finally, the residency bottleneck is pushing people into PhD's, MPAs, or away from medical physics after investing in the field. The opportunity cost of a PhD could easily be \$500k in lifelong

earnings. MPA isn't as bad, but there is also a chance you don't get it the second time around. If there is to be a bottleneck, it should be in grad school admissions. The strong possibility of wasting 2 years and \$100k on a masters degree (over 50% at many programs) when you could have been starting a career in another field is unacceptable. I don't think academic physicists are a valid comparison. There are very few industry positions for theoretical physics, and most people do it because it is their passion and not for the promise of a good career. If we got rid of the bottleneck, medical physicists would be more similar to highly paid pharmacists or engineers without a hard bottleneck in hiring. Less qualified candidates would become certified junior medical physicists for cheap and be able to move up over time.

>>>>>

Are medical physicists overpaid that much? I'm not sure it's more significantly than what American physicians are also overpaid. In general, average physicists make about half of what an average radonc makes. This trend follows in at least a few major countries where I looked it up. That being said, I completely agree with moving the bottleneck to the graduate degree. Totally ridiculous scenario to be in.

>>>>>>

Great question! I assumed medical physicists would be overpaid because of the bottleneck, but this doesn't seem to be the case looking at the AAPM salary reports. In 2010, before CAMPEP programs and residencies were required for ABR certification, the average salary for a certified master's/PhD in medical physicists was \$177k/\$191k (\$210k/\$226k in 2020 dollars) and \$204k/\$215k in 2020, so salaries are almost keeping up with inflation. At a glance, it looks like the residency bottleneck has not lead to an increase in salaries.

>>>>

Real physics is low paying academic drudgery. :) So in effect the shortage across the board for clinical physicists will continue? If the bottleneck persists, this is the only course. Then administrators will have to consider other alternatives to combat the lack of applicants with the same or greater census/workload, correct?

>

What type of positions are you talking about? Residency positions or general medical physics jobs available?

>>

General. Post bottleneck.

Post Title: [Training Tuesday] - Weekly thread for questions about grad school, residency, and general career topics 01/25/2022

Post Content: This is the place to ask questions about graduate school, training programs, or general basic career topics. If you are just learning about the field and want to know if it is something you should explore, this thread is probably the correct place for those first few questions on your mind. Examples: * "I majored in Surf Science and Technology in undergrad, is Medical Physics right for me?" * "I can't decide between Biomedical Engineering and Medical Physics..." * "Do Medical Physicists get free CT scans for life?" * "Masters vs. PhD" * "How do I prepare for Residency interviews?"

Comments:

Review my shortlist. Hi! So I'm from India, did undergrad in Physics (3 yrs) from Calcutta University(QS Asia Ranking 154) now doing data science from IIT Madras(QS Global 255). GPA: 3.3 TOEFL: 110 I've founded a company on ed-tech domain. No research experience but I've done projects like 3D brain image segmentation with DL etc stuff. Applied: Hofstra Duke Georgetown Purdue How did I do?

is anyone here a current PhD student at duke and could answer some q's I have abt the admission process? :)

About to graduate with my MS this semester, pretty sure I'm not matching for any residency programs, only got one interview out of all the places I applied to and I got ghosted for the second interview. How does post match work? Is it just sending emails once the matched/non-matched programs come around?

>

Please crosspost to the residency sticky, thanks!

Does anyone have opinions/experiences with UW Madison faculty or interviewing for their PhD program? I have five interview slots there on Friday and would like to see if anyone has any thoughts on them or know what to expect in their interviews

>

UW, like most places, will generally just be trying to see if you're a good fit. They'll ask you a lot of questions on your research (if applicable), so be ready to give succinct and clear answers. Other questions will be on your clinical background. Be ready to discuss any equipment you've worked with and machine/patient QA you may've shadowed. Finally there'll probably be some general knowledge testing. For example, they may ask how a linac works, the basic construct of a farmer chamber, or how you would

survey for radioactive seeds. Like others have said, go in planning to interview them as well. Have questions ready about the rotation structure, machine and patient QA expectations, and...if we're talking about Madison, ask how much snow they've had.

>>

Thank you! I've actually already finished 4/5 of my lab interviews there. One more to go tomorrow, but will definitely keep this in mind!

>

[deleted]

>>

Thanks! Definitely getting my own head because of the number of people it seems like they're interviewing this year. I know they ~probably~ won't expect too much detail considering the interviews are only 20 mins long. I see from your profile that you're also interviewing at Madison, so good luck!!

I currently just graduated with my B.S in physics. I have done two nuclear physics REU's and am becoming more interested in health physics and possibly the medical physics field. The only thing is I really need a job before I were to continue school right now, due to financial issues. What kind of job should/could I be searching for based off only having a B.S?

>

Working as a medical physics assistant pays average ~~\$70-80k~~ \$45-50k based on a quick google search. This would get you in a department working with physicists and dosimetrists to see if you like the type of work they do. You'll be doing a lot of grunt work but you could make some valuable connections and references for down the line. I don't see a whole lot of these posted so I think its best to reach out to rad onc departments and see if they are looking or willing to hire an assistant. That being said, I agree with u/Dosimetrist1 on just getting the debt over with while you are young. My student debt was terrible but I'm glad it was just one time. After I finished residency, I just continued living like a broke student (because \$100k+ debt is broke anyway) until I paid them off. Didn't take too long and it was easy because I never had to lower my lifestyle to make payments. I just continued living like I always had! Plus, if you were to start a program now, you are looking at 5-6 years minimum until you are board certified. I personally wouldn't want to put off that point in my career any longer than I would have to.
edit for correct salary range

>>

Wow, thank you so much! I find this info extremely helpful and appreciate you taking the time for my question!

>>

[deleted]

>>>

Lol bro I'd hardly call assistant work unskilled labor.

>>>

That was just the top google result. I'm not fortunate enough to have a medical physics assistant where I work so I have no personal insight. It did seem high. I thought it was closer to resident pay to be honest around 45-50?

>>>>

[deleted]

>>>>>

That probably is more accurate. I literally googled it and looked at a top result only. It also makes more sense given the experience and education requirements. Not a bad amount of money at all given everything...

>

[deleted]

>>

Hi, can you extrapolate on a good bit over 100k for MP? I've been browsing this sub quite a bit and it seems like it's heavily dependent on certification, correct? Like 120 without, 140 with and it keeps expanding from there?

>>>

Something like that AAPM has data on it. A Msc without board certification comes out of residency making around 100-150k depending on location and how good the person is. With certification salary usually increases by 10-20k, or around 10% of salary prior to being certified. Also, it's more usual to MedPhys in the therapy side of things to make a bit more than imaging physicists, but the price is work life balance which can kinda suck for some therapy physicists

>>>>

I see, thank you very much!

>>

Have you looked into data science? A BSc with good undergrad data science experience would easily command a \$80-100K starting pay ! Med phys training is way too long (5+ yrs with no guarantee of getting into residency etc)

>>

Thank you for the information and advice!

Q1. Residency applicants who submitted their applications in December of 2021, have you heard back from the programs you've applied to? I haven't received any reply yet. I think it might be due to one of the reference letters for my application being submitted only a few days ago (which was my fault for being preoccupied with current job and failing to stay on top of the letter status). Q2. Would it be proper to inform the individual programs that I've applied to, that my last letter has been submitted? I don't expect them to go back to reviewing if they have already past that stage. So I wonder if it would be worth it to let them know. I am honestly not sure if I should just be preparing to try again next year. Best of luck everybody!

>

Hey I just want to give you a heads up that there is now a separate residency sticky and people should direct their questions related to residency to it.

>

I'm from a program with a good match rate history (>80%) and, of the ~25 programs I applied to, I've only heard from 5 or 6, many just this week, with interview decisions. A couple more programs sent general "we're reviewing apps" emails to all applicants. Some of my classmates got decisions weeks before I heard from them, so perhaps many programs are just informing applicants as they slowly roll through applications.

>

I'm an average MS candidate from a CAMPEP program (50% match rate) and have had 1 interview invitation so far. My friend who is the top of the class has had 2 so far. Either we're all working at McDonalds or the match is taking longer this year than usual. You still have a shot. Q2: In my unqualified opinion, I would let them know. It shows initiative about fixing a mistake and that you aren't just lazy about getting 3 letters of recommendation or something. I would also imagine the letters of recommendation become more important after interviews anyway to decide between close candidates.

Which masters and DMP programs typically get back Quickest?

>

Vanderbilt was the fastest master's program to get back to me. Didn't apply to UBC Vancouver, but they've also sent out interviews I believe. The PhD programs have been the quickest at sending interviews (at least for me)

Post Title: [Training Tuesday] - Weekly thread for questions about grad school, residency, and general career topics 05/17/2022

Post Content: This is the place to ask questions about graduate school, training programs, or general basic career topics. If you are just learning about the field and want to know if it is something you should explore, this thread is probably the correct place for those first few questions on your mind. Examples: * "I majored in Surf Science and Technology in undergrad, is Medical Physics right for me?" * "I can't decide between Biomedical Engineering and Medical Physics..." * "Do Medical Physicists get free CT scans for life?" * "Masters vs. PhD" * "How do I prepare for Residency interviews?"

Comments:

Are there any programs that offer remote PhD's? I'm a therapy MS who recently passed ABR3. I'd like to continue working while pursuing PhD part-time. I love my current location, and would hate to leave and give up the paycheck. Very interested in machine learning and automation, and have a good amount of experience with this. I did grad school and residency and at a well-known and respected university. Thinking of reaching out to some old colleagues and advisors. But would like to know if anyone has had any experience with this? I'm wondering if it's become more common with COVID over the past couple years?

>

Not an answer, but sth I am curious about. Would you recommend going thru residency first before going for a phd if you are not 100% sure you wanna do research instead of going through residency and jumping onto the job market earlier through just a MSc. I am asking this as someone about to start MSc and would love to go to residency right after (for financial reasons). However, I think I would wanna do a phd eventually. Should i do the phd it right after my MSc before I do the residency and sacrifice the benefit of making money early on?

>>

I'm literally in your situation, but a few years ahead (want to do research, but also come from a very low income family so the financials make it difficult not to pursue residency first). I did my MS, spent a year doing research (didn't participate in

match upon graduation for personal reasons), and just matched into residency. I'll tell you what my thesis advisor and my current PI both said to me: it'll be difficult to let go of the money to go back to get your PhD. PhD stipends are notoriously difficult to live on. You may save up for a few years to make it easier on yourself, but by then you might be in the rhythm and comfort that a stable salary provides. Also, not having a PhD doesn't preclude you from research opportunities if you work at an academic center. Even teaching opportunities might be available if you're particularly good at something (my most insightful proton physics classes were taught by MS staff physicists). That said, you definitely won't be managing a lab, and likely won't be a course director since you're not faculty.

>>

If you're not 100% sure you want to do research, then I would suggest not getting a PhD. Life's too short to waste time doing things that don't align with your personal goals.

I'm a postdoc in academia with a background in physics, but currently more focused on computational biology & bioinformatics. I'm thinking about switching to industry and am looking into companies that do cool stuff on the interface between physics and biology. Could someone working in industry give some examples of roles or companies someone with a PhD should be looking at? I'm basically only aware of Philips and Siemens in Europe that work on healthcare technology. If you know other cool companies I should take a look at, let me know!

>

United Imaging is a newer group that works in healthcare technology, may be worth checking out.

Post Title: [Training Tuesday] - Weekly thread for questions about grad school, residency, and general career topics 03/22/2022

Post Content: This is the place to ask questions about graduate school, training programs, or general basic career topics. If you are just learning about the field and want to know if it is something you should explore, this thread is probably the correct place for those first few questions on your mind. Examples: * "I majored in Surf Science and Technology in undergrad, is Medical Physics right for me?" * "I can't decide between Biomedical Engineering and Medical Physics..." * "Do Medical Physicists get free CT scans for life?" * "Masters vs. PhD" * "How do I prepare for Residency interviews?"

Comments:

Did anyone interview or apply to UNLV DMP program?

>

I applied. Haven't heard anything on the interview front, and all my other interviews happened 2+ weeks ago.

I notice there's a bullet point saying "Masters vs. PhD"; is there a reason it doesn't say "Masters vs PhD vs DMP"? Likely a simple oversight, but including it would be very helpful for students interested in our field.

>

I think it's just a list of common example questions that get flooded here regularly. Since DMP is less common, there aren't as many questions about it. The examples listed don't encompass all topics that should be discussed in these weekly threads though. I've seen plenty of discussion of DMPs here recently.

I'm trying to decide between undergrad UC Berkeley NE program and UT Austin Physics program. Anyone who went to those schools have suggestions/thoughts? I'm trying to get into medical physics eventually, but I'm only at the first step.

>

I didn't go to either, but the most important things to getting into our field is knowing it exists, having an interest in it and getting some experience. Both should give you great coverage of the fundamental physics, so that's not a concern. If you could talk with medical physicists at / around those schools, I bet you could find summer research or shadowing opportunities. UT Austin has a medical physics program and that would be a place to start asking. Shadowing / research would both be quite helpful in determining if this is the right field for you, and displaying your interest when applying to grad schools. Also, don't disregard your own happiness, social development and personal well-being when picking a school. Being likable, collaborative and well socially adjusted goes a lot further in our field than you might think.

Hello! I recently got accepted into Umiami's med physics program and I was wondering if anyone has had any thoughts about it. Thanks!

And willing to talk a bit about the umass Lowell program?

>

Pretty campus and funded. That's really all I know. Cost of living didn't seem terrible but wasn't cheap either (but of course I live in Seattle so not bad isn't saying much). Mostly commenting because I too want to know more about their program.

Does anyone have information on a course-based masters program in Canada? I know Western has a new, one year MSc in Clinical

Medical Biophysics, but I am concerned about its future outlook since it is so new (only 2 students so far!). Are there any other masters in Canada that don't require a thesis? Would you even recommend going this route? I like the idea of this career, but if there is a strong research component I don't think I would enjoy it.

>

If you want to work in Canada you need a PhD from a CAMPEP accredited program. If you only want to do a masters you will have to look for residencies/jobs in the US. Ryerson, Dalhousie, Calgary, McGill, Western, UVic have the course based programs I believe, though I think these are intended for those who have already completed a MSc or PhD in a related field.

Post Title: [Training Tuesday] - Weekly thread for questions about grad school, residency, and general career topics 06/07/2022

Post Content: This is the place to ask questions about graduate school, training programs, or general basic career topics. If you are just learning about the field and want to know if it is something you should explore, this thread is probably the correct place for those first few questions on your mind. Examples: * "I majored in Surf Science and Technology in undergrad, is Medical Physics right for me?" * "I can't decide between Biomedical Engineering and Medical Physics..." * "Do Medical Physicists get free CT scans for life?" * "Masters vs. PhD" * "How do I prepare for Residency interviews?"

Comments:

I'm seeing a lot of threads the last 2 days on new revolutionary pills that more accurately remove cancer, particularly rectum cancer. How will breakthroughs like this alter the field of medical physics?

>

We have been under constant threat of a cure for cancer since I want to say the 1970s? I don't make any plans around it.

>

I think it is good to be very skeptical of big claims and watch the evidence as it becomes published.

Post Title: [Training Tuesday] - Weekly thread for questions about grad school, residency, and general career topics 12/14/2021

Post Content: This is the place to ask questions about graduate school, training programs, or general basic career topics. If you are just learning about the field and want to know if it is something you should explore, this thread is probably the correct place for those first few questions on your mind. Examples: * "I majored in Surf Science and Technology in undergrad, is Medical Physics right for me?" * "I can't decide between Biomedical Engineering and Medical Physics..." * "Do Medical Physicists get free CT scans for life?" * "Masters vs. PhD" * "How do I prepare for Residency interviews?"

Comments:

I am applying to Duke, Columbia, and Georgia Tech programs now. What are the advantages of each program?

>

For graduate school? I did the open house and interviewed at Duke right before COVID shut everything down. The campus is nice, the city is nice, and there is basketball if you like that. The classrooms were only a short walk to the clinic. They have a lot of research options. I would say Dukes biggest strength is its alumni network. They also bring up that they are partnered with siemens (which has a site in Durham NC). Only complaint I've heard from some non-Medical physics students there was that it was hard for them to get time at the hospital due to COVID.

Does one day medical physics shadowing is worth it to be understanding the role of medical physics or I need at least one month Thank you

>

My advice is to shadow as often as you can. You can learn a lot in a day, but to truly understand the role of the medical physicist you need prolonged exposure. In addition, there is no possible way you can see everything a medical physicist's job entails in once day. It's a multifaceted profession with many responsibilities.

>>

Prolonged exposure? Doesn't that go against ALARA? /s

>>

I remember I shadowed for a day. I realized more and more throughout grad school I had no idea what was going on during my

shadow day. Its just too much to really take in all at once. I don't know how other people feel about shadowing but I personally feel that its mostly beneficial for the individual to see and understand the field they are potentially interested in. I do not think it should give anyone an advantage in applications other than having a slightly higher chance of sticking with things because you already know what to expect.

When we should expect the residency interview invites ?

>

Our program will do prelim interviews in early-January and full interviews for the selected candidates in early-Feb.

>

Idk about others, but I got an email from Texas oncology that they would let me know late January

Do medical physicists get their own offices? I was just wondering if they get as much facilities as doctors and administrators.

>

I have my own office, not that I get to spend much time in it...

Is it worth going straight into a medical physics masters or is it worth working as an imaging tech then going into a masters for medical physics? Wondering because I don't have ANY experience coming out of my bachelors in physics.

>

If you know you want to go into medical physics, just do it. Most rad tech programs (in the US) are typically two years (and depending on where you are can be competitive to get into) so unless you're still waffling over whether or not to become a medical physicist, going that route would just be a waste of time IMO.

>

I went straight from a physics bachelors to grad school for medical physics. I had almost no experience or knowledge of the field and only shadowed half a day once and it was information overload at the time. I feel like I did fine and I had no issues getting residency or a job. Just my \$0.02. I don't think it would hurt you and may even be a good idea to see if you enjoy the type of department or work you might be doing. I'm assuming if you are looking into imaging tech you are interested in diagnostic medical physics? I don't think there is a lot of overlap there but you would certainly have good experience running machines and setting patients up.

>>

Hi! I'm actually scheduled to do an astrophysics bachelors over the next 3 years or so but will probably branch to MP for grad school(because apparently the astronomy field sucks). I assume everything you said would apply to me as well, even if our bachelor's was slightly different?

>>>

I think if you meet the pre reqs for grad school (you will if you major in almost any branch of physics) you will be fine to go straight to a MP grad program. If know you want to end up in MP, the fastest and easiest way is to just start. You will gain all the experience necessary during school. To clarify my previous post in this thread: I should have emphasized that while I think a related field wouldn't hurt, I don't think it will really help.

>>>>

I see, thank you. So I should try and take all prereq's for a CAMPEP program, is that correct? Sorry for my ignorance, I've only really started looking at medical physics over the last 2 weeks ever since I started discovering how miserable academia in astrophysics is

>>>>>

The pre reqs are all quite similar for CAMPEP programs which you'll want anyways. Usually equivalent of a physics minor with two or three upper level classes. I just looked at the top 5 or so programs I was applying to and made sure my undergrad classes would be enough.

>>>>>>

I'll look into it. Thank you very much :)

2 brand new MS programs are Brown University and Washington University (St Louis). Is there anyone here that works with either of those programs that can speak on how much clinical experience they offer ?

>

Make sure you do grad work in a CAMPEP program. Clinical work follows in residency. <https://www.campep.org/campeplstgrad.asp>

[deleted]

>

Sun nuclear corp hires IT support for their products that require no travel because they send actual physicists out for training

usually. It's also very reasonable travel rates if you do have a travel role.

>

You might consider looking at jobs even if they have some travel. My current position said "25% travel", but even before the pandemic I was only traveling one or two weeks out of the year. Of course, if you are adamant that you can't travel at all this wouldn't work, but if you have a bit of flexibility, maybe consider that "some travel" might actually mean "very little". But it doesn't surprise me to hear that most jobs in this industry require some travel, even if it's just for one or two annual meetings.

I am a 2nd-year MPhil Medical Physics student in Ghana. I wanted to find out more about Medical Physics residency programs in the US, Canada or UK and if I would be eligible to apply for it from Ghana?

>

<https://www.aapm.org/students/prospective.asp>

>

For US and Canada short answer is: no, you probably should consider PhD first in accredited school. Why is no, I suggest to through previous editions of Tuesdays posts.

Post Title: [Training Tuesday] - Weekly thread for questions about grad school, residency, and general career topics 12/21/2021

Post Content: This is the place to ask questions about graduate school, training programs, or general basic career topics. If you are just learning about the field and want to know if it is something you should explore, this thread is probably the correct place for those first few questions on your mind. Examples: * "I majored in Surf Science and Technology in undergrad, is Medical Physics right for me?" * "I can't decide between Biomedical Engineering and Medical Physics..." * "Do Medical Physicists get free CT scans for life?" * "Masters vs. PhD" * "How do I prepare for Residency interviews?"

Comments:

When do residencies usually notify candidates that they've scored an interview?

>

Very institution specific, some places likely have already reached out, others will wait until January/February

Hey everyone! I'm currently in undergrad as an astrophysics major, but I plan on pursuing medical physics in grad school as I've recently learned how miserable the field of astronomy is... I was actually just got rejected from an REU, and this got me wondering - are there any internship positions (even unpaid) I could take to help strengthen myself in the field of medical physics this summer? Upon googling, all I got as "internships" were basically clinical jobs that required degrees. Thanks for reading, I'd appreciate any feedback.

>

I'm an undergrad (so don't take my advice as certain truth), but I just contacted medical physics researchers connected with my university to see if they would be open to having an undergraduate student be part of their lab or volunteer with their group.

>

The Northwest Medical Physics Center has usually hosted a few undergrads for a summer internship. That got canned the last 2 years but it might open up again this summer.

>>

I'm in California, but will look into it. Thanks so much!

>

Check out the Summer Undergraduate Fellowship Program or the DREAM program through AAPM <http://gaf.aapm.org/> I'd also check with any med phys graduate programs that you might want attend to see if they have any undergrad opportunities available.

Hey all, I'm a senior graduating in the spring with a physics BS and I'm looking to go into medical physics. I need to take an upper level physics elective to graduate but I'm thinking of substituting it out with a nuclear engineering class. Does any one have recommendations or ideas on what kinds of topics or classes would give good knowledge or prep me for medical physics grad school?

>

Particle physics is a good one if it's available.

>

<https://www.aapm.org/students/prospective.asp>

Can anyone speak on the quality of Oregon Health Science University and their masters program, as well as Duke or VCU. I'm looking for good clinical experience to prepare for residency application

>

I've also heard really great things about Hofstra's clinical experience.

>

If the grad program is CAMPEP accredited you'll get what you need. Can't get into most residencies without it. <https://www.campep.org/campeplstgrad.asp> After that residency is mostly done by a matching program. <https://natmatch.com/medphys/>

>

I'd recommend looking at the University of Kentucky also! Small program of 7-8 students, lots of clinical experience and typically 4 dedicated residency spaces for their students.

>>

Agree with this, if I was set on a masters and wanted a lot of clinical experience then I'd check out Kentucky or LSU (not ultimately what I did, but if I had different career goals then this would've been my top choice).

>

But Duke is a very solid program and will prepare you well for anything you want to do.

>

Can't speak to the other two, but Duke is a lot less clinically focused than other programs and more foundational based. The main reason for that being your clinical training comes during residency. With that being said, the opportunity for clinical experience at Duke is there, but you need to seek it out.

Post Title: [Training Tuesday] - Weekly thread for questions about grad school, residency, and general career topics 11/30/2021

Post Content: This is the place to ask questions about graduate school, training programs, or general basic career topics. If you are just learning about the field and want to know if it is something you should explore, this thread is probably the correct place for those first few questions on your mind. Examples: * "I majored in Surf Science and Technology in undergrad, is Medical Physics right for me?" * "I can't decide between Biomedical

Engineering and Medical Physics..." * "Do Medical Physicists get free CT scans for life?" * "Masters vs. PhD" * "How do I prepare for Residency interviews?"

Comments:

I am currently a radiologic technologist with a B.S. and interested in a masters program for diagnostic medical physicist. I am having a hard time finding a program specifically for diagnostic, any advice? Arizona would be great!

>

There are not specific programs for diagnostic or therapy, you will learn about both in any CAMPEP program. That being said, some are better than others about their imaging curriculum. I would recommend looking at the course catalog and seeing if there are a decent number of imaging courses, especially advanced electives. Match rate is important too.

>>

Thanks! I just assumed there were different pathways for diagnostic vs therapeutic. No wonder I was having trouble.

>>>

The paths diverge at the residency stage; you will have to pick what track you want to do, then apply (and hopefully match) to a residency in that track. Part 2 and 3 of the ABR exam are also track specific. So keep that in mind as you progress through your career.

I have a bachelor's in physics and a masters in data science. I've worked as a pharmaceutical chemist/engineer and I'm currently in aerospace and I'm realizing I want to do something that can help people. Where do I start or what programs should I start looking into if I'm interested in working in oncology or hospital setting?

>

[deleted]

>>

Thank you for the response. I work next to a hospital in boulder and found a person on LinkedIn that I'll reach out to and see if I can do some shadowing.

>>>

[deleted]

>>>>

Yeah I don't use it much either I just didn't want to sound like I wasn't willing to try. He's got an (apparently) common name so a lot pops up so if I don't find something by the end of the weekend I'll use LinkedIn. Thanks for the heads up

I am currently doing an undergrad in Astronomy. Would like to major in Physics/Medical Physics in my masters. Is this directly possible? Do I need to do any bridge courses? What is the path like from an Astronomy major to Medical Physicist? Also, any recommendations on masters courses in the EU?

>

Are you taking other physics courses like E&M, QM, Circuits, Modern Physics? If so, you won't need any bridge courses except maybe some Anatomy/Physiology. Just check out the prerequisites for the Master's programs you're interested in applying to. If their websites don't show it email their admins.

If you've ever reviewed residency applications, what are some of the things that stick out most to you? Is there anything you look for in particular? Either positive or negative? Do you have any advice on what should be included in the personal statement?

>

There are lots of negatives. The good applications all start to bleed together. Have good grades, has some experience using the equipment we use, isn't too short, isn't too long, good letters of recommendation, a legible personal statement. A personal statement can be anything. Most people write about something they overcame and that's why they chose medical physics, or someone they loved has/had cancer and that's when they wanted to work in Radiation Oncology. Those are all good and there is nothing wrong with them. Like I said they just all bleed together. But that's not a bad thing. Your application should get you your interview, and that's where you can show your personality/work ethic/etc.

Is it ok to apply to residencies that are not campep accredited?

>

If your end goal is to work as a clinical physicist then it is risky. Programs need residents to become accredited so newer programs will need to recruit people to be first through the program. I would ask specific questions about where they are at in the accreditation process, when their site review dates are scheduled, or when they anticipate having those scheduled for. Make sure they have a full curriculum planned for their residents. Once you get this information, verify their progress toward accreditation with CAMPEP. You can get all the requirements and documents from CAMPEP of what they require programs to provide to complete this process to gauge where they currently are. I would only apply to a program that has done most

of this work upfront and has dates scheduled or are applying for site review in the near future (no more than a year out would be safe to give time to address deficiencies.) Do not apply to a program that is just looking for cheap resident labor. CAMPEP requires they have a set program with rotations and education on top of clinic work. They should allow you time to read reports, do journal presentations, and learn required information during each rotation along with regular examinations. Anyone that just wants you doing QA for 12 hours a day probably won't pass an accreditation review. Again, this is risky but not terrible if they have done a lot of work up front. As long as they complete accreditation while you are a resident, you will be board eligible.

>

Only if you are ok not to have path to ABR certification.

[deleted]

>

I would say, first you need positive references. Good physics resident recommendation is better than bad professor recommendation or even excellent recommendation from former employer (who has no idea what is medical physics and recommend you in general).

My gre scores are subpar (156Q 151V and 5W). For masters programs that don't require them, should I send them in?? I am obviously sending them to masters programs that do require them, but not sure about those that dont

Post Title: [Training Tuesday] - Weekly thread for questions about grad school, residency, and general career topics 11/16/2021

Post Content: This is the place to ask questions about graduate school, training programs, or general basic career topics. If you are just learning about the field and want to know if it is something you should explore, this thread is probably the correct place for those first few questions on your mind. Examples: * "I majored in Surf Science and Technology in undergrad, is Medical Physics right for me?" * "I can't decide between Biomedical Engineering and Medical Physics..." * "Do Medical Physicists get free CT scans for life?" * "Masters vs. PhD" * "How do I prepare for Residency interviews?"

Comments:

Is it badly seen to apply this late for residencies, or does it hurts my chances? I know there's still like 20ish days to do so, but I wonder if I should go ahead is kinda press my last

reference to finish the submission, as that's what's holding me back.

>

If you are applying to programs that participate in the match, then it will not hurt your chances as long as you apply before the deadline. Bonne chance, my dude

I am currently applying to grad schools (around 10 total mainly PhDs and like 3 masters). I would go for a PhD over MS just because I like research and also I wanna teach later on in medical physics. I have a decent GPA (3.7ish) and 2 REUs (not MP related). I don't have any publications tho, and I heard that MP grad admissions are pretty competitive. Do you think I have a decent shot, particularly for the PhDs? Or should I expect it to be very difficult to get in anywhere?

>

[deleted]

>>

My undergraduate research was in condensed matter physics. I had no publications or medical physics shadowing and got in to my preferred PhD program. I really don't think grad programs are that competitive. In the United States, it is common to go straight to PhD instead of masters, so having an MS degree is not a prerequisite.

>>>

[deleted]

>>>>

Just out of curiosity, do you think that this competitiveness is specific to MP PhD programs? Many students (with research, but no pubs) from my school end up going to great PhD programs in physics and engineering ever year. This is why I was a little surprised when I heard about the importance of having pubs for MP PhDs. One thing that I also found a lil surprising was that MP PhD programs usually have acceptance rates above 10%, which is actually higher than many pure physics PhD programs. It could be that MP applicants are generally more highly qualified than regular physics PhD applicants.

>

Not impossible but not having any publication might hurt you, as other applicants probably already have some, and maybe a master's already.

Hi everyone, so I will be starting a dosimetry program next year(know it's not med physics, but there are way more med physics to seek advice from.) Anyway, I'm trying to decide where to do clinicals. For dosimetry, would it be smarter to go to a big cancer hospital, or a smaller proton therapy center? Any tips to help decide? This is the list I'm going through <https://portal.jrcertaccreditation.org/accredited-educational-programs/details/e4309639-c3c7-e211-b0f8-00155d24be03>

>

u/Dosimetrist1 has great advice. Follow that. To add: Bigger cancer centers such as a larger city hospital system or University are ideal. If you go to a smaller community cancer center you are likely to do a lot of prostate, breast, and lung cases. At a large cancer center, you are going to get a lot of those but also every less common site quite regularly. Having that knowledge and experience is going to go a long way for your career and finding a job in the future wherever you want. Nothing against community clinics. I love working at them. But for education and experience, you just won't get the same quality and volume there.

Currently doing applications. Got my undergrad from LSU and hoping to get into the MS program. I'd like to get into a residency and work in the hospital so I prefer clinical heavy schools So far my list is LSU, Vanderbilt, Arizona, Oklahoma and Kentucky are there any other good ones? I have a pretty strong application.

>

As I know good schools for clinical experience would be LSU, Kentucky, University of Toledo, Vanderbilt, Cleveland State University, UPenn, and University of Oklahoma.

>

LSU and Kentucky are good clinic heavy schools. Arizona and Vandy are pretty good clinically too but maybe not like the first two. Not sure about Oklahoma personally. All are good options to advance your career and each one may suite your needs better.

General question... what does it mean when a school lists their medical physics program as having MS and PhD programs, but the department website only mentions PhD application processes? The department stats also list a number of MS degrees awarded in the past few years.

>

If it's anything like UW-Madison, the expectation is that everyone comes in seeking a PhD. You often earn an MS during that time.

>

Just call the physics department and ask. Physics department secretaries/administrators are usually very happy to answer questions and clear things up.

Post Title: [Training Tuesday] - Weekly thread for questions about grad school, residency, and general career topics 10/05/2021

Post Content: This is the place to ask questions about graduate school, training programs, or general basic career topics. If you are just learning about the field and want to know if it is something you should explore, this thread is probably the correct place for those first few questions on your mind. Examples: * "I majored in Surf Science and Technology in undergrad, is Medical Physics right for me?" * "I can't decide between Biomedical Engineering and Medical Physics..." * "Do Medical Physicists get free CT scans for life?" * "Masters vs. PhD" * "How do I prepare for Residency interviews?"

Comments:

I'm currently an undergrad nursing major but am heavily considering changing majors. I have a bunch of questions, mostly about the actual day-to-day of being a medical physicist. I know there's a lot so any answers you could give me would be greatly appreciated. 1. How much time do you spend at a desk vs being up on your feet? 2. How involved are you in determining treatment? Do you just check the MD orders are possible, or are you actively involved in treatment decisions? 3. Do you actually perform procedure? 4. How much interaction do you have with patients? 5. It seems like the vast majority of medical physics is radiation oncology based. What if any, other areas are there? 6. What made you decide to go into medical physics, as opposed to other science or medical fields? Are you happy with your decision?

>

I'm an assistant so I can't properly answer your other questions, but for 5: imaging physics is the other "major" branch of clinical medical physics, and it is growing in importance in practice as more and more image guidance is used in medical procedures, including radonc. Any MRI, CT, X-ray, ultrasound, nuc med, mammography scan or procedure ever has had a diagnostic physicist's input in it, directly or indirectly.

[deleted]

>

The general consensus on this sub is no wrt to DMP being worth it (it being money in most contexts).

Adding to a question is this thread: Does applying early to residency increases your chance of matching, or at least getting an interview? I plan to apply between Oct 15-30 (application cycle starts Oct11)

Are applications in the med phys residency match processed on rolling admission? (Like how med school apps are)

>

I don't think they are. You should watch this: (<https://www.youtube.com/watch?v=kvgfgGmemdA>)

Can anyone speak on the quality of Hofstras MS program?

Are there any PhD programs that include Proton therapy research? I am finishing my MS this year while also working at a proton center, and I've realized I want to learn more about protons and focus my PhD on proton therapy. However I know that there are not many proton centers so it has been difficult to find solid programs that also have proton research opportunities.

>

I would start by cross referencing places that have proton therapy and places that have a CAMPEP program. Also look at publications and see where the authors are. For instance Mayo clinic has a lot of proton therapy research but their PhD program isn't CAMPEP.

[deleted]

>

Medical physics assistant positions usually just require a bachelors in a physical science or engineering, but positions like that are not plentiful.

Is it possible to switch research interest during your med phys career? I'm applying to graduate programs this year and trying to narrow down my research interests. I will probably stick to something in radiation therapy for my graduate thesis. I'm also interested in brachytherapy and radiation biology research. Will I be pinned to radiation therapy for my entire career if I choose to write my graduate thesis on radiation therapy?

>

Take my advice with a grain of salt since I don't have decades of experience like many others here do. That said, in my experience, absolutely not lol. In general, being able to switch your research focus is mainly a function of heaving access to the resources and training wherever you work/study. I personally did my MS thesis in a topic related to cardiac SBRT, but thanks to the help of my programs faculty, I'm now doing research in mainly

photodynamic therapy, with some potential cherenkov imaging stuff down the line. Of course, there are some caveats regarding clinical work, rather than research. Mainly, if you want to do clinical imaging work after getting certified in therapy physics, you'd need to go through an imaging residency, stuff like that. But as far as research goes, in my experience, it's all about having access to the right people and resources to get your foot in the door.

>>

This was very helpful! Thank you!

Are there any graduate schools with a big focus on computational research, especially artificial intelligence? So far I've found that UChicago and MD Anderson both have a few people who do that type of research, but wasn't sure if there were any other schools that "specialize" in that type of research (and by specialize, I mean more than one or two faculty members).

>

For UChicago, you should specifically look at Maryellen Giger's lab. Not only is she a leader in the field of computer-aided diagnosis but she's a wonderful mentor and goes to bat for her trainees. She's an awesome person to have in your network (former AAPM president, former SPIE president, has successful experience with startups). I wasn't even in her lab but I could tell from her students how great of a group it is.

>

I'm part of the Center for Computer Vision and Imaging Biomarkers ([CVIB](<https://cvib.ucla.edu>)) at UCLA and we do lots of stuff with AI. There's 5 faculty part of the group that deal with both CT and MRI image processing that implements AI in different ways. If you're interested in therapy applications of AI, then there's lots of labs at UCLA that focus on that like Ke Sheng, or for neuroscience applications look at Allan McKenzie Graham or David Shattuck. Dan Ruan also does a lot of computational research and modeling/simulating I think. PM me if you'd like to know more about the program at UCLA!

>

Check UT Southwestern. They have a huge AI research group.

>

The centers you listed are big names and probably have a decent number of people working on AI, however I think it'll be a stretch to say that any one place "specializes" in AI research.

Post Title: [Training Tuesday] - Weekly thread for questions about grad school, residency, and general career topics 11/02/2021

Post Content: This is the place to ask questions about graduate school, training programs, or general basic career topics. If you are just learning about the field and want to know if it is something you should explore, this thread is probably the correct place for those first few questions on your mind. Examples: * "I majored in Surf Science and Technology in undergrad, is Medical Physics right for me?" * "I can't decide between Biomedical Engineering and Medical Physics..." * "Do Medical Physicists get free CT scans for life?" * "Masters vs. PhD" * "How do I prepare for Residency interviews?"

Comments:

Hey all older career changer here. I turn 38 this year. Would you consider 38 too old to apply to DMP programs? Is this a career one could work into their 70's since it's not overly physical demanding? Any advice or info you can provide I would greatly appreciate.

does anyone know which PhD programs have the highest number of grads matching into residency?

>

I don't know of a master list out there but all CAMPEP programs are required to post their graduation and match statistics. You could go through and make an excel sheet to record the last several years of programs you are interested in or all PhD programs out there. CAMPEP will have a list of all accredited programs and the match site will have all programs participating in the match to help you narrow it down.

I was just accepted to Georgia Tech's Distance Learning Medical Physics Program. Besides getting good grades, studying for and passing part one, and continuing my current job as a medical physics assistant, what can/should I do to help secure a residency when I'm done? I feel at a disadvantage since I will not be in the clinic on campus.

>

I don't think you'll be at a disadvantage since you are already getting way more clinical experience than the campus students assuming you are a full-time employee. Just try your best to make the most out of your work experience. For instance don't just follow directions blindly and try to understand the processes that you're working with. I think that will be very beneficial for residency apps later. Participating in research, if possible, will also help.

Is there a lot of theoretical work being done in medical physics, and if so, is it the traditional physics PhDs or the medical physicists doing this work?

I have joined bsc biotechnology program with biotechnology and physics as my majors from NZ. Can I become a medical physicist? If yes then can you outline a path for me preferably NZ or Australia based? Thank you so much.

Does Thomas Jefferson university still have an MS program?? Their website is not very informative and there's only data from 2020 and this year

>

That's because their program started in 2020 I believe.

At what age would you consider a cutoff for going to school for medical physics?

>

Depends on how far along you are in terms of prerequisites and whether you'd do MS or PhD. Also depends on what you mean by "cutoff." To me that would mean it makes financial sense, but that's obviously not the end all. Late 30s is probably where entering the pipeline would require some unusual circumstances to be viable; late 40s is probably where it isn't justifiable on a strict debits and credits basis. I suspect you'd have difficulty finding a residency in your 40s, however. Which is an entirely different cutoff.

>>

Why would you have trouble finding a residency in your 40's?

>

Like 60, older if u have a phd already

What is the difference between DMP and MS + residency programs?

>

When you enroll in a DMP program you enroll in a 4 year program. The first 2 years are essentially your MS degree, and the second 2 years are your residency. With a DMP once you get admitted, you've guaranteed yourself a residency position. Getting a residency is the most competitive part of the career. However with a DMP, you pay tuition for all 4 years. You're basically paying the institution to do a residency. Contrast this with an MS + residency: MS is 2 years that you pay for (although there are a handful of programs that you can earn a stipend or get your tuition covered). If you match to a residency, then you are paid around \$55k per year. The downside is it's not guaranteed to

match, and some people don't match. After you finish your residency or your DMP, the pathway to get board certified is identical. At that point, it doesn't matter how you got through a residency, just that you graduated one.

>>

All the numbers in your comment added up to 69. Congrats! $4 + 2 + 2 + 4 + 2 + 55 + = 69.0$

>>>

Nice. Good bot.

>>>

Nice.

>>>

Nice.

Post Title: [Training Tuesday] - Weekly thread for questions about grad school, residency, and general career topics 11/09/2021

Post Content: This is the place to ask questions about graduate school, training programs, or general basic career topics. If you are just learning about the field and want to know if it is something you should explore, this thread is probably the correct place for those first few questions on your mind. Examples: * "I majored in Surf Science and Technology in undergrad, is Medical Physics right for me?" * "I can't decide between Biomedical Engineering and Medical Physics..." * "Do Medical Physicists get free CT scans for life?" * "Masters vs. PhD" * "How do I prepare for Residency interviews?"

Comments:

Not sure if someone has already asked this question but figured I'd give it a shot. About to finish my BA in physics in 1-2 semesters. Would that be enough to be able to apply for a master's program? Would a BS be better or some other degree? Just want to make sure I'm taking the right route.

>

In the route to become a licensed medical physicist, you need: 1) either a undergraduate degree in physics, or coursework equivalent to a minors in physics 2) MS or PhD from a CAMPEP accredited program 3) Residency. Most people in MS programs will have a BS/BA. There are some who have an MS in some field of physics (some of my colleagues were from applied physics and optics MS programs). I personally was accepted into a few

reputable programs as a non-traditional applicant who worked in finance for a bit after my BS in physics. I know many other who followed a similar route. I've heard from many here that BA or BS is irrelevant, the coursework is what matters. If you do well in your BA, have solid letters of recommendation, hopefully some amount relevant experience, and interview well, I'd be shocked if you didn't get accepted into a decent program.

Hey all older career changer here. I turn 38 this year. Would you consider 38 too old to apply to DMP programs? Is this a career one could work into their 70's since it's not overly physical demanding? Any advice or info you can provide I would greatly appreciate.

My courses for next semester (undegrad) will be QM Mathematical physics And I cannot decide whether to take thermodynamics or a programming course. I have the option to take one in the spring and one in the summer but idk since my applications due in January

>

I agree with quanstrom's sentiment here. I find myself having to fill some gaps in my CS knowledge more than anything else. I certainly haven't really used any thermodynamics beyond what you'd learn in an Intro to Physics course. I did find some of statistical mechanics taught in my thermo course useful, but that's more of a "helpful to better interpret this niche concept I only saw once in my MS but you don't really need"-kinda thing.

>

I don't think I've ever used thermo after I was forced to take it as an undergrad; on a weekly basis I wish I had taken more CS classes when I had the chance.

>>

How many undergrad physics courses did you have taken when you applied ??

>>>

I don't remember; it's not important for applications. It's normal for seniors to apply, get a conditional acceptance until graduation and course work completion.

**When in the match, when do interview requests start going out?
When do the admissions committees begin reviewing applications?**

>

Residency interviews usually start in early January. There is an interview calendar at [<https://www.sdampp.org/calendar.php>] (<https://www.sdampp.org/calendar.php>) The current cycle's dates

might not be on the calendar yet, but rolling back a year or two on that calendar should give an idea of the dates.

>

<https://natmatch.com/medphys/schedule.html>

>>

Thank you, but this link doesn't really answer my question of when the interviews typically begin.

>>>

Interviews will typically start at the beginning of the year.

Post Title: [Training Tuesday] - Weekly thread for questions about grad school, residency, and general career topics 10/26/2021

Post Content: This is the place to ask questions about graduate school, training programs, or general basic career topics. If you are just learning about the field and want to know if it is something you should explore, this thread is probably the correct place for those first few questions on your mind. Examples: * "I majored in Surf Science and Technology in undergrad, is Medical Physics right for me?" * "I can't decide between Biomedical Engineering and Medical Physics..." * "Do Medical Physicists get free CT scans for life?" * "Masters vs. PhD" * "How do I prepare for Residency interviews?"

Comments:

Is there a list of schools for diagnostic medical imaging residency that do not participate in the MP-RAP?

[deleted]

>

For PhDs in physics or related but not in medical physics, there are certificate programs that cover six required courses: <https://www.campep.org/campeplstcert.asp> You can complete them 1 year full time or two years part time. There are several post-docs in my program doing it on a part-time basis. A friend at another institution is doing his while he completes his PhD in HEP.

Regarding residency competitiveness: I've been out of my MS program since May (did not apply for residency last cycle, currently working in research, will be applying for residency this cycle). I'm currently ineligible to continue being either an AAPM student member for obvious reasons. Unfortunately, I'm also

ineligible to apply for junior membership as I'm not in residency or a post-doc. I've considered simply postponing my application until I'm in residency so that I can qualify for the junior member application; the reduced cost is pretty important to me at the moment despite the benefits membership offers. However, I recently read around here that not being a current AAPM member might hurt my competitiveness. Should I make an effort to simply pay the full membership application or is that something that shouldn't be an issue, as long as I explain it?

>

Should not be an issue. My previous place had a residency and when i was reviewing candidates, half of them were not aapm members. It was not a factor in our rankings. Also you might not be eligible for full membership anyway.

I am a current undergrad and was wondering what programs are recommended for those that want to pursue a more clinical route. I have looked at many programs, but I wanted to know if there are any that stand out.

>

the greatest Schools for Clinical focus as I heard would be, LSU, University of Toledo, Vanderbilt University, and University of Kentucky.

>

You will want to go to an MS program, specifically the ones with a proven history of sending their students to residency afterwards. These statistics are required to be posted on their website, and the good programs will highlight it. Don't even bother with the programs that haven't had a graduate (or maybe just a single one) that gets a residency for several years (there are many programs like this).

[deleted]

>

Regardless of the source or field, your references should always be able to say something about you. How much can anyone you've only met a few times say about you?

What are the main factors that will make my undergraduate application to be strong, if I doing medical physics job shadowing and taking course about Radiation Physics is that will give more chance to accept in the graduate medical physics programs?

>

GPA and LORs, and maybe some physics research will matter way more than shadowing. If your shadowing can lead to a LOR then that's good, but it will carry a lot more weight if it can refer to substantial work the recommender saw you do, like research, which is obviously a longer term commitment. The value of shadowing is really just for you personally understanding the field a little better, not for adcoms.

I'm an undergrad with zero research experience. Applications are due January for MS programs. I have research planned with a TBD professor on a TBD subject. Is there a nice way to put on my resume that I have not done research, but I will the semester before I attend a program

>

I applied with zero research experience and got into 80+% of the programs I applied to. I made it clear I was interested in a clinical career and chose a clinically focused program. I don't know how I would have fared if I was aiming for a more research heavy program. You could easily list your upcoming classes and put it under there

>

For masters programs, research is not the most important thing. I had minimal research going into my masters program. I think it may be helpful to have some idea or a direction your research may go in to be able to discuss in interviews if they seem interested or directly ask you about it. As for putting this on your resume, I would either not include anything or put a section of planned courses/research in the winter semester. Again, even including a general topic that it probably will be in could be nice. Hopefully someone else that has applied with zero research experience will respond with their strategy and outcome.

Hi everybody, I was wondering if the people applying for the residency positions that are offered outside of the match system, such as Wash-U, MD Anderson and UT Southwestern, have started to hear news from the programs. Has anybody been contacted for interviews yet?

Post Title: [Training Tuesday] - Weekly thread for questions about grad school, residency, and general career topics 11/23/2021

Post Content: This is the place to ask questions about graduate school, training programs, or general basic career topics. If you are just learning about the field and want to know if it is something you should explore, this thread is probably the correct place for those first few questions on your mind. Examples: * "I majored in Surf Science and Technology in undergrad, is Medical Physics right for me?" * "I can't decide between Biomedical

Engineering and Medical Physics..." * "Do Medical Physicists get free CT scans for life?" * "Masters vs. PhD" * "How do I prepare for Residency interviews?"

Comments:

[deleted]

I was wondering, roughly, how many applicants on average does an Imaging residency program like UW, Duke... receives on a cycle?

>

All programs are supposed to publish their acceptance stats. Duke, for example: <https://cipg.duhs.duke.edu/content/residency-statistics>

Anyone who got accepted in UW-Madison without emailing PI? Like, they just submit their application and they got offer. Or is it necessary to email potential PI? Thank you

I'm about to graduate with my undergrad in Biology and a minor in CS. I have taken physics 1 and 2 and calc but not all of the specific classes some schools "require" for admission. I am going to shadow a medical physicist this winter. If I like it, do I have any chance to get into grad school without taking those upper level physics courses that some schools require?

>

[deleted]

>>

You can honestly succeed in a grad program and arguably do this job with a high school knowledge of chemistry and physics. I know plenty of people who satisfied the upper level physics requirements while in a CAMPEP graduate program.

>>>

[deleted]

>>>>

To be clear I'm not saying it's likely, but I'm also saying I don't think it's even close to impossible. The academic world is a weird place and we're really only talking about 2-3 semesters of hard requirements when it's all said and done, with lots of room to pick up or have already picked up justifiable-enough credits for requirements like anatomy or an upper division *physical* chemistry class or the thermo you took as a biochem major. "A lot" in this instance meant like three or four and granted they were all usually a bit further along in undergrad

physics than this user, normally having completed modern physics and no 300 levels. Granted, four people in a field this small is kind of a lot since I don't know close to everyone. They'd all done engineering or other things as undergrads. The people I knew were all PhD students working on MRI sequences or whatever who then got enticed by CAMPEP and found a way to make it happen. Some hated research and thought the clinic sounded rewarded, some wanted a backup plan in case that sacred tenure track job never materialized, some I'm sure had other reasons after discussing with the MP students they'd inevitably mingle with while researching PET reconstruction algorithms. "The rules" in grad school are somehow at the same time stubbornly immutable and totally flexible, so if you're a known quantity to the CAMPEP faculty through course overlap or whatever it might not be too difficult to get yourself a CAMPEP certificate while only being semi-affiliated with the department. The schools they were at all had their didactic program aligned with imaging over therapy from what I've heard/can speak directly to and I assume that's far more likely because imaging research casts a much broader net than therapy.

>>

Do you know any other careers or further schooling I can do with just a biology major that incorporates CS somehow? I have grown to really like working with computers and have some basic coding knowledge but I couldn't just throw out all of the chemistry and upper level bio courses so I stuck out my bio degree.

What's a Gre score required for a DMP programs?

>

I can only give input for masters programs. But the GRE wasn't really even considered outside the fact that it was a requirement to take it. If no one from DMP programs answer you, try reaching out to their grad school coordinators to help find the answer. There aren't many DMP programs and many would argue they may not even be worth it over a Masters & Residency.

>>

To add on to this, more and more PhD programs are dropping the GRE requirement entirely (and rightly so).

Post Title: [Training Tuesday] - Weekly thread for questions about grad school, residency, and general career topics 07/27/2021

Post Content: This is the place to ask questions about graduate school, training programs, or general basic career topics. If you are just learning about the field and want to know if it is something you should explore, this thread is probably the correct

place for those first few questions on your mind. Examples: * "I majored in Surf Science and Technology in undergrad, is Medical Physics right for me?" * "I can't decide between Biomedical Engineering and Medical Physics..." * "Do Medical Physicists get free CT scans for life?" * "Masters vs. PhD" * "How do I prepare for Residency interviews?"

Comments:

Do any of you know if there are online PhD programs for medical physics? If so, what does their funding situation look like for remote students? I will have my masters from a CAMPEP accredited school after this year and plan to go on to residency after for therapeutic physics, but would still like to work towards a PhD when I'm out working in the field after residency. Any help/knowledge would be greatly appreciated!

>

Taking on a PhD while working full time is going to be pretty demanding and stressful even under good conditions. You're essentially taking on a second full time job with the PhD. If you know you want to pursue a PhD after you've started working, you'll want to tailor your job search so that you end up at a place where the people you work for and with will support your plan (schedule flexibility, project ideas/support, etc) and have access to a place where you can do a PhD.

[deleted]

>

As much clinical experience as possible for as little cost as possible.

>

Residency. Match. Rate. Period. LSU and UK are some top dogs for placement. That's all you really need to care about. Source: someone who paid far too much for a degree from a school that did far too little for him

>>

>Residency. Match. Rate. Period. Where can one see this? Is there a centralized link? >someone who paid far too much for a degree from a school that did far too little for him ouch

>>>

Every campep school has to publish their numbers. Idk if there's any composition

[deleted]

>

Didn't matter one damn bit last year to 90% of the places I interviewed at.

I am a physics PhD specializing in accelerator physics, I have taken a couple of biophysics courses that piqued my interest in medical physics After some research, it looks like my only option is to go with a CAMPEP certificate. My question is, would this make me a competitive enough candidate to land a residency?

>

Is your interest strictly in clinical physics? There are medical physics careers in research (academic/industrial) that wouldn't require a residency too.

>

It's hard to say. Most people I see with a CAMPEP certificate have also done a Postdoc within medical physics and have a publication or two to their name, and have presented at AAPM. It's doable with just the certificate? But you need to have had a pretty solid PhD.

When should a second year resident start seriously looking at jobs? Now? Later this fall? Yesterday?! I've been seeing some job postings go up but I'm worried it's still a little early to begin the search. How have other residents navigated the black box of job hunting?

>

I think a year out is a little early for a specific posting, but if there's specific departments you are interested in, I think it's fine to reach out now. They might tell you they have no openings, or might say "we're expecting openings in XXX months, please apply then". I applied to jobs in the fall. I submitted one application in early September, and was at their facility interviewing in person right before Thanksgiving. The job I ended up taking, I was interviewing in mid December. My senior resident had a similar timeline.

>>

This is super helpful! Thank you!

>

December

[deleted]

>

US resident here. During grad school I knew of a couple individuals who took internships with either a government funded agency (US or IAEA) or a private company like Varian. Internships are less common than in other disciplines, but they are out there if you look for them. Most/nearly all of my graduate cohort didn't take one. I suppose we all took a break before grad school worked us hard!

>>

[deleted]

>>>

I finished undergrad in April then started grad school in August. I did not do anything specific between except secure the loans required for the program and move to a new city/state. I made sure to complete as many of the prereq courses as possible in undergrad so I would not have to pay out of state tuition for them during grad school (anatomy, computer programming, etc.) If you haven't completed those types of courses, it may be a good (and cheaper) idea to do them in your home state or a community college in the summer between. Just make sure your grad program would accept them. That being said... I would highly suggest taking a break and enjoying the time between unless there is more than just several months between. This will likely be your longest break from school/work until you retire.

>>>

That's hard to say. At least among my cohort, most came directly from an undergraduate physics/engineering program, so with only a 2-month gap anyway. I personally did some extra research as a summer gig. Just depends on what is available to you.

What does the "medical physics 3.0 project" imply for the type of tasks medical physicist do in the future? Does it get farther from the physics side of it to the more medical/patient care side?

>

Think of it more like bringing our medical physics knowledge closer to the patient care side. The medical physics-patient consult program at UCSD and a few other institutions is a good example of one aspect of MP3.0. If you haven't already, go through the material at [<https://w3.aapm.org/medphys30/index.php>] (<https://w3.aapm.org/medphys30/index.php>) to get a better idea of what it's all about.

Post Title: [Training Tuesday] - Weekly thread for questions about grad school, residency, and general career topics 12/07/2021

Post Content: This is the place to ask questions about graduate school, training programs, or general basic career topics. If you are just learning about the field and want to know if it is something you should explore, this thread is probably the correct place for those first few questions on your mind. Examples: * "I majored in Surf Science and Technology in undergrad, is Medical Physics right for me?" * "I can't decide between Biomedical Engineering and Medical Physics..." * "Do Medical Physicists get free CT scans for life?" * "Masters vs. PhD" * "How do I prepare for Residency interviews?"

Comments:

I'm currently a Biomedical Technician who is specializing in Imaging equipment, and used to be an Operations Engineer for several research/manufacturing labs. I'm interested in going back to school (PhD) to get into the Medical physics profession. That said the field seems to include Diagnostic Radiologic Physicists, Medical Health Physicists, Medical Nuclear Physicists, and Therapeutic Radiological Physicists. What are the major and minor differences? Do you ever work alongside each other or are they all synonymous roles? Do they have different degree/certifications? Do they address similar issues? And lastly, but not least, do they see similar salaries?

>

They are most definitely not the same role. The AAPM, the main American medical physics professional organization, [defines four subfields](<https://www.aapm.org/students/prospective.asp>) of medical physics: * Therapy: Most common. Work with linear external beam delivery machines (e.g., linear accelerators) and internal radioactive sources (e.g., I-131). Radiation therapy is usually for cancer, but there are some more "exotic" uses; for example, my clinic frequently irradiates hip replacements to prevent bone regrowth. * Diagnostic: While therapy physicists treat cancer, diagnostic physicists diagnose it. * Imaging: x-ray machines, CTs, MRIs * Nuclear medicine: Imaging using radionuclides. Example: PET scans. Most people don't really consider health physics as medical physics, but for what it's worth, health physicists work with radiation safety. They work at, for example, nuclear power plants, where employees must be properly protected from radioactive occupational hazards. Medical physicists can work in: * Clinics: Hospital, outpatient center, or private practice * Industry: R&D, software development, sales, or customer support for a hardware or software vendor * Academia: Usually at a teaching hospital * Government: This is usually only health physics. Government health physicists create and help enforce radiation safety regulations All four subfields require

[ABR certification](<https://www.theabr.org/medical-physics/initial-certification>) for clinical work. ABR requires at least a CAMPEP-accredited master's in medical physics plus a CAMPEP-approved residency. There is no legal requirement for non-clinical medical physics positions, but most require a master's. Some medical physicists do get PhDs, but this is not advisable unless the end goal is academia. Med phys is a hands-on profession, and clinical experience means loads. Of course, a med phys master's has prerequisites, usually equivalent to an undergrad physics minor. I Googled the educational requirements for an operations engineer, and whether or not you meet the med phys prereqs probably depends on the type of engineering degree you have. Because medical physics is so niche, it's difficult to find publicly available salary info, and I'd rather not provide figures from different websites because their statistical methodologies are probably different and the results may not be comparable. Your best bet for salary info is the [AAPM Salary Survey,](<https://www.aapm.org/pubs/surveys.asp>) which I unfortunately don't have access to because I am not an AAPM member (the annual dues for a physics assistant are nearly \$500 \[!\]). Other useful links: * [AAPM overview of medical physics careers](https://w3.aapm.org/medical_physicist/index.php) * [List of CAMPEP-accredited programs](<http://www.campep.org/campeplstgrad.asp>) * [Example MS med phys curriculum](<https://lsu.edu/physics/graduate-programs/medical-physics/ms-degree/med-physics.php>) (this is where my supervisor went)

>>

Thanks for this. u/Kaley_White I believe I should be fine undergrad-wise since I have a BS in Bioengineering (w/concentrations in imaging, and Biomedical Devices and Instrumentations) I also have a Master in Translational Medicine. If I decide to shoot for just the Masters would you happen to know if they see a drastically different salary than doing Ph.D.? Though I do eventually want to go into academia, but I would prefer doing a different terminal degree. The plan is to do so when I'm ready to retire from industry and teaching to my passions instead of just my strengths.

Currently working on personal statement for residency apps. I have a few questions regarding residency application. 1. How "personal" can personal statement for residency be? I am used to writing structured and stiff feeling statements which reads almost like a 'list of mt achievements'. But now that I have actually interesting aspects to my personality and experiences, I wonder if I can write about those a bit more casually instead of basically rewriting the CV in a paragraph form. 2. Conversely, how much technical information (personal achievements, awards, etc.) should I include in my personal statement? 3. I know some residency openings at the MPRAP website are already past deadline, but some are a bit later. Will more openings pop up from now on or are deadlines mostly around December? I have been able to find very little time to work on applications because of work. And I

**fear that I might be running out of time. Thank you in advance.
Edit: words**

>

It seems like everyone has different opinions on what they prefer to see in a personal statement so its certainly not a one size fits all. When I was applying for residencies, the chief physicist at my school gave us some tips that they liked to see in personal statements when they reviewed for their graduate program or residency applicants. They like things more personal beyond what is on the CV. They also stressed the personal statement is a great opportunity to stand out and be memorable among a pool of similar backgrounded people. It is also a good place to explain anything out of the ordinary on your CV (gap years or a change in major etc.) The very limited times I reviewed applications in my career it was usually finding a CV that had what I was looking for then reading the personal statements later. It may be different for others who do this more regularly though. I don't have any recent experience with MPRAP but I don't think more programs become available down the road.

Currently a physics undergrad. What would you guys suggest to build a great resume for grad school?

>

Summer research projects, ideally in medical physics projects. Shadow a medical physicist to sound like you've heard of the field at your grad school interviews.

[deleted]

>

Be willing to pay tuition. You'll probably be accepted somewhere if you apply broadly.

Post Title: [Training Tuesday] - Weekly thread for questions about grad school and general career topics

Post Content: This is the place to ask questions about graduate school, training programs, or general basic career topics. If you are just learning about the field and want to know if it is something you should explore, this thread is probably the correct place for those first few questions on your mind. Examples: * "I majored in hotel management in undergrad, is Medical Physics right for me?" * "I can't decide between Biomedical Engineering and Medical Physics..." * "Do Medical Physicists get free CT scans for life?" * "Masters vs. PhD" * "How do I prepare for Residency interviews?"

Comments:

I understand questions usually asked and answered revolve around the accreditation systems in the US and Canada, but I hope someone knowledgeable about processes internationally could respond as well. I'm an international student interested in the career path for medical physics in South Africa. For reference, i'll be graduating with a three year B.Sc. in Physics this May from an Indian university, and understand that will necessitate me doing an B.Sc. Honours in the subject to qualify for Masters. I understand that times are tough right now to get a response from respective course conveners (though I've double emailed them over a month ago and fear doing it again in case they feel harassed), so I was hoping someone from this fine subreddit could either chime in (or DM me) about getting admitted for the 2022 academic year, specifically to University of Pretoria, Wits, or Stellenbosch. I've been able to get a response from the convener for UCT, but if possible, could anyone free enough comment, or DM me so I could pick their brain (respectfully ofc) about their personal experience with these places, admissions, this course, and the current situation of how studies are (online vs in person, and how they could be by next year according to your knowledge) ? Can international students register for the hpcsa (South African medical board) to become certified medical physicists and do a 2 year internship after their honours? I've also posted twice on the r/SouthAfrica subreddit but don't think my enquiries will gain traction because my automatic upvote upon posting kept getting downvoted (I don't think it's a moderator because I didn't get an explanation or warning). One person did however respond with this link: <http://www.mpijournal.org/pdf/2019-03/MPI-2019-03-p271.pdf> -> (a worry I have is would i be in over my head trying to vye for an education and training in a field that won't pan out in job security, would any accreditation I hope to qualify for in South Africa be acceptable elsewhere,...) Stay coolio

I was wondering if someone could explain the residency match program? How does it work and is it beneficial than finding your own residency programs that are not listed on the Match system?

Questions about Columbia's M.S. program: Hi folks! Sorry if this has been covered before, but I was looking at Columbia's M.S. program and it looks like it's only a year and a half, i.e. Fall term 1, Spring term, Summer term, Fall term 2, graduate. Anyone who's in/has been in the program, is that accurate? How does that effect completing ABR part 1/applying to residencies??? Also, more generally, what are people's impressions of Columbia's program? I've also gotten into Oregon's M.S. program and am looking at UPenn. Any advice is appreciated!

>

I'm assuming you're referring to the Columbia MS in New York? I know 4 people who went through it; three of them found research opportunities to add to their CV so they had material for residency interviews (not sure if this outside of the program or as part of it). Ultimately, they all ended up staying in the NYC area - one of them stayed at Columbia to lump their residency with a PhD. All of them seem prepared for residency but I think it's quite expensive.

Duke M.S. program: I've recently been accepted into Duke's M.S. medical physics program. I'm excited but nervous because of the large amount of loans that I'd have to take out (even after scholarship). What type of things should I be thinking about/questions should I ask as I consider this option?

>

Duke is a great school with a great programkind of. The education is no doubt great but the poor residency stats are not something to gloss over. Having gone to Duke for something else it's a great school but they are in it for the \$. If they can't deliver on residency I'd say it's not worth it. I also got in there and turned them down for that reason even though their program is awesome looking.

>

> o Duke's M.S. medical physics program. I'm excited but nervous because of the large amount of loans that I'd have to take out (even after scholarship). What type of things should I be thinking about/questions should I ask as I consider this option? Ask yourself why Duke. Do the residency placement stats warrant the cost? Do you want to attend a program with a large number of students? Are there other programs that cost less and provide the same or more clinical exposure?

DO you get CTs for free?

>

yes but the radiologist readings are not so free.

Wisconsin vs UCLA vs UChicago: I know that all of these are generally regarded as great medical physics PhD schools, but does anyone know which may be the best of the three? Maybe in terms of residency placements, opportunities for publishing papers, prestige, etc.

>

I went through this decision a few years ago, and truthfully, I don't think you can make a wrong choice. All are phenomenal programs with top tier faculty, residency placement, and ~prestige~. I would encourage you to consider your best "fit" for

you - geographic location, city environment, social environment, and support for projects you could be interested in. Feel free to message me if you have further questions!

>

UW residency placement is 100%, also one of largest and oldest programs in the US. Plenty of prestige if that is important to you but many would probably say that prestige is overrated. I don't know residency rates of the other schools but they should be listed somewhere on their websites - CAMPEP requires that info be listed somewhere.

>>

For Chicago they are 100% as well. I know prestige isn't that important but when taking about the top programs I think splitting hairs is somewhat justified. Would you consider Chicago competitive to Wisconsin?

>>>

Like someone else said, the PI and potential projects are important considerations for schools you can't decide between. You can contact each school's admission director and they probably could give you more personalized information about their program and get you in touch with current grad students. Things like location might be important too if schools are a toss up in your mind. If you are living somewhere for 5+ years, it is nice to like the place. Eventually, if you are invited to open house interviews, that is a great way to narrow your choice down by seeing the facilities, students, and faculty in person.

>>>>

Yeah that's where I'm at right now, I've been interviewed and kinda wanted to gauge what some of the community thought about these schools. Thanks!

>>>>>

Have you heard back from UCLA or UChicago yet? I also interviewed at both of those schools and have been checking my email constantly today hoping for some good news.

>>>>>>

Any news?

>>>>>>>

Got an email from UChicago around 7:30pm informing me I'm waitlisted!

>>>

I think all of them have a great reputation and perfect residency placement rates. It really depends on what field you want to work in for your Ph.D. I think your PI matters more than the program's reputation.

>>>>

Hey thanks, you are probably right. I may have the choice soon between knowing my advisor at the start at Wisconsin vs lab rotations at UChicago.

level 1[Fluffy-Department-29](<https://www.reddit.com/user/Fluffy-Department-29/>)[3 minutes ago](https://www.reddit.com/r/MedicalPhysics/comments/lqx9oc/new_weekly_mega_thread_for_career_residency/goiwwiy/?utm_source=reddit&utm_medium=web2x&context=3) Hi, I'm an international student getting my MSc in medical Physics in the US. How's the residency rate for international? Is there a lot of difference? Should I try to get a PhD before applying to residency? PS.: So far I have a 4.0 GPA, going to a Diagnostic imaging route. I'll apply to residency having worked since 2018 in an MRI lab, with ISMRM/OHBM abstracts and a couple of manuscripts (mostly contributing author), and trying to get some clinical training this summer/next semester. Best

>

If you're on an F1 visa, you can use STEM OPT and not need sponsoring. Sure you may have to divulge your status, but the employer wouldn't have to do anything to be able to hire you, just help you submit a training report as your supervisor. This is the route I have taken throughout residency, so if you need assistance, just message me.

>>

Alright! Thanks for letting me know! What happens if I already used my OPT? After I graduated I worked for around 9 months on my OPT... I know it can be renewed for 2 years with STEM, but is it possible for me? Also, how did you time the application/what did the program had to provide(documents...etc? Best

>>>

I applied in March time due to my anticipated graduation date and start date, you should be able to use both the extra years of STEM OPT as long as the CPT code for your graduate program identifies as STEM with department of homeland security you should be fine

>

Should be ok as long as you use your OPT bc no one needs to sponsor you. But you have to time it very well. I couldn't time it very well :(

>

I don't really think individual programs will have preferences for citizens. The real issue you'll run into is that about half of programs (loose estimate I am a US citizen so I never really took stock) do not sponsor visas.

>

I don't think there are stats published about citizenship of applicants but as an anecdote I know a good amount of non-US citizens who didn't have a problem landing a residency. As long as you're in a CAMPEP program I would assume you have the same chance as any other MSc grad. I'm currently going through the match (for therapy) and I'm not from the US, aside from making sure ahead of time the programs you're interested in sponsor visas I have not found citizenship to be a factor.

I'm an undergrad in medical physics right now. What do graduate courses entail? Lots of math? Or more focused on treatment and devices? Honestly don't even know what medical physics really entails as I'm only in my second year and courses haven't gotten too specific yet.

>

I thought the classes were a lot easier than undergrad - a lot more depth and less breadth. BUT I also did not struggle in my physics BS/math minor, and had taken extra classes (intro programming, biophysics, some chemistry, some math matlab course, and high school anatomy/physiology (didn't take that again in college but it sure helped). Classis did have "math", but none of it was super intense or difficult like some of the math in physics undergrad was. There was plenty of learning how things related to medical physics work (radiation biology, diagnostic imaging machines, shielding, therapy treatment devices). Some "basic" courses like stats, ethics, and radiophysics. Might be helpful for you to look up a specific program and find the curriculum. Perhaps look up an accredited program that is close to you and see what they are doing: [CAMPEP programs](<https://www.campep.org/campeplstgrad.asp>)

>

Not a lot of math; differential equations and some calculus at most. Much more conceptual than a physics undergrad.

>>

Sounds awesome!!!

>

Where are you pursuing your undergrad? I really want to pursue medical physics and your answer might help

>

It's pretty ok on math for me right now. The dosimetry and radiation classes are more math heavy, but the rest is nothing anyone that went through a physics undergrad can't handle

How are interviews going for all of my fellow match participants??

>

Applied to 21 programs. Zero responses. Have my MS and decent clinical experience. Very confusing.

>>

Oof I'm so sorry, you're definitely not the only one in that boat though, there might be some programs hiring in the off season

>

[deleted]

>>

Some places have been so hit or miss, I thought I would for sure get an interview at certain places and they just never contacted me

>

So much zoom!

>>

At least Zoom is better than Teams, if one more place sends me a link for Teams, I'm gonna lose it

>>>

One program I interviewed with insisted on using webex, like bruh

So... is hotel management a good undergraduate major for medical physics?

>

I knew a guy who started with BA in psychology. Comparing with that Hotel management looks better suited.

>

I think as long as you have a minor in physics, you are all set

>

Only if you learned about managing hotels that give complementary gamma knife upon arrival.

>>

Are there any other kind of hotels?

Post Title: [Training Tuesday] - Weekly thread for questions about grad school, residency, and general career topics 08/31/2021

Post Content: This is the place to ask questions about graduate school, training programs, or general basic career topics. If you are just learning about the field and want to know if it is something you should explore, this thread is probably the correct place for those first few questions on your mind. Examples: * "I majored in Surf Science and Technology in undergrad, is Medical Physics right for me?" * "I can't decide between Biomedical Engineering and Medical Physics..." * "Do Medical Physicists get free CT scans for life?" * "Masters vs. PhD" * "How do I prepare for Residency interviews?"

Comments:

Hello friends I'm currently a 4th year undergraduate student at California State Fullerton (my graduate date is May 2023, 5 years) and I'm doing a lot of research on grad school for Medical Physics and was wondering if anyone had any experiences or thoughts on these universities. Currently I'm looking at, McGill (Quebec), San Diego State, Columbia, Upenn, Umass Lowell, Oregon State, and SUNY Buffalo. I'm currently at a 3.2 cumulative gpa and I am only a handful of major courses in (hopefully looking to keep my B/A average) as a Physics major with a minor in Cinema and Television arts. Any comments or experiences on these universities would be appreciated. And I'm open to chats or PM's if you'd like to talk. Thank you very much

>

If getting a clinical job is your goal, I'd check the residency placement stats of each school you're interested to help gauge how successful their alumni are (there is a lot of variability between schools here).

I would like to have a Medical Physics ABR exam facsimile to study, is it posible or are not available to anyone?

>

That's 1000% against the rules. Examinees are explicitly told not to share test questions.

>>

Yeah I thought, I don't want to break rules. But I thought that there were facsimiles for practicing. Thank you for your reply, I appreciate it.

Hello! I am looking for some basic career advice. I graduated with a Master's in Medical Physics/Radiological Sciences in 2016. For various life reasons, I ended up taking a job in engineering, and I have been doing that for the past five years. I very much enjoy what I do, but lately I've had the itch to go back to my medical physics educational upbringing. At the time of my graduation, I had registered for but did not sit for the ABR Part 1 Exam. As a result, I am currently ineligible to take the exam without another year of training. (Had I not initially registered for the exam, it is my understanding that I could register for it and take it at any time, which seems a bit unusual. However, I realize I didn't make the ABR rules, I just have to follow them. ;) If I decided to pursue this route, is my best recourse to start to look into medical physics residencies? Or to possibly pursue an entry-level position/volunteer position (if at all possible) and accrue experience that way (or would that even suffice for additional training needed to take the exam)? I apologize for my ignorance in the matter; I am looking to get a heading check to figure out the best course of action here. Any and all feedback would be greatly appreciated. Thank you!

[deleted]

>

It would definitely be helpful to do research and volunteer more in clinical projects, although what form this takes may vary a lot between different programs. However, there is definitely no need to "pigeonhole" yourself into a specific technology (it might even be harmful). Even people who do their PhD dissertations on a certain method are in no way guaranteed to keep working on that thing exclusively (if at all) when they're in a clinical job after residency. Many other posts on this forum indicate that the necessary knowledge is more or less covered in the CAMPEP curriculum, and once you get to the interview stage of residency applications they are more screening for personality, work ethic, attitude, etc.

I'm an undergrad thinking of a career in medical physics. I recently had an advisor tell me that I would benefit from studying machine learning. Is this true in medical physics? I'm looking into the therapy side of MP. Thanks!

>

Its probably true in general. Any relation between the latest tech and the clinic seems to be where medical physicists excel. I would expect that python and general programming, as well as machine learning knowledge will become a part of the practice within a decade.

>

Machine learning is a hot topic in probably every technical industry in the world and you'd probably never regret taking classes in it.

I hold a medical physics MS (non-CAMPEP) and have been working clinically for 2 years outside the US. I'm currently thinking of going for a PhD, partly because I miss research and partly to improve career progression within my country. I unfortunately have no publications, and was recently told in a zoom call with a professor that that may severely undermine my application since I failed to publish my master's thesis. How true do you think this is? I do think I have a fairly strong application apart from the lack of a peer-reviewed publication.

>

Lots of people start PhD programs without an authorship. Obviously it is better to have a paper than to not have one, but in this case I think that the professor was being dramatic. You have an MS for which you did a thesis; that is evidence that you have the ability to do research, which is the #1 most important part of your application.

>>

Right, yes, thanks for this! She did seem to imply that there was something wrong with me for not being able to get a paper out, so it was fairly disheartening.

>>>

She's definitely being overdramatic then. Don't let it discourage you, lots of professors give bad advice. I'd say just go for it and apply! Not sure where you are thinking of, but there are plenty of good MP PhD programs in the US (visa issues notwithstanding).

>>>>

Will do, thanks!!

What clinical experience do MS graduate students need to be qualified as a junior physicists?

>

None.

Post Title: [Training Tuesday] - Weekly thread for questions about grad school, residency, and general career topics 08/17/2021

Post Content: This is the place to ask questions about graduate school, training programs, or general basic career topics. If you are just learning about the field and want to know if it is something you should explore, this thread is probably the correct place for those first few questions on your mind. Examples: * "I majored in Surf Science and Technology in undergrad, is Medical Physics right for me?" * "I can't decide between Biomedical Engineering and Medical Physics..." * "Do Medical Physicists get free CT scans for life?" * "Masters vs. PhD" * "How do I prepare for Residency interviews?"

Comments:

If I were to do a residency overseas(so no CAMPEP accreditation) how hard will it be to find a job in the US/Canada? I'm thinking of doing a residency program in my home country and working for a few years as a medical physicist but want to be open to immigration since my partner wishes to do post grad in the future.

>

Impossible to get a board certified job with your current credentials

>>

So I can apply for a job in the states as long as I pass the abr? Is the exams for this certification in person or online so I can take it halfway around the world? Also do other countries like Canada of aus and nz have similar certifications?

>>>

Some industry jobs don't require ABR certification. On the therapy side, think linac, TPS, and QA software vendors. But to work in the clinic, board certification is pretty much always required.

>>>

You can't board the abr unless you've taken a CAMPEP accredited graduate program (PhD, post-phd certificate usually for one year, or masters degree) which is fairly easy to get in to but time consuming. Then you have to get in to (very hard) and complete (2-3 years) a residency program.

How hard is it to get into a residency program nowadays?

How open is the field to older candidates? I'm looking into a career change from control systems in the oil and gas industry. Realistically I'll be about 40 at the earliest that I could complete a program. Is MP an option worth exploring or is this a young man's game?

>

I went to school with people in their 30s/40s. If you can get into a quality program with good residency match rates, you will be fine. Just be aware you will need the equivalent of a minor in physics to get into a program.

>>

Yeah, my BS is in math with a couple physics courses, but not a minor. Picking up a few more would be a good brush up on the math for me.

When it comes to undergraduate degree, is a BA seen as unfavorable compared to a BS in physics ? I have switched my major pretty late and it would take me about 2 years to complete the BS and 3 more years to finally be in a program (if I get in). A BA degree will only cost me one more year and then I will be able to enroll for the following year (if I get in). Thanks!

>

As a medical physicist with a BA in Physics, I do not feel as though it put me at any sort of a competitive disadvantage. Went to grad school of choice, matched with my first choice of residency, etc. Do your due diligence and you should be fine.

>

It shouldn't matter. What does matters is which classes you take. In the US, to enter a CAMPEP-accredited graduate program, you need to have taken a number of prerequisites, including quantum mechanics, electricity and magnetism, among others. Typically coursework equivalent to a minor in physics is appropriate for admission.

>

Shouldn't matter

>

What? Your Uni has a BA and a BS in physics. What's the difference?

>>

The BA requires only 20-24 credits of core physics classes. The BS requires I think either 28 or 32 credits of physics courses. I

think the difference is just that BS is more helpful for someone seeking to pursue a PhD or masters in just Physics but I'm not totally sure. Very torn because I think the BS would make me a more competitive applicant but it would also take another year of my life

>>>

It definitely wouldn't be worth a whole nother year of tuition I think (unless you have a full ride scholarship). Anything that you need for prerequisites that is outside of the BA you can just take on its own. You'll be fine with a BA (I was).

Post Title: [Training Tuesday] - Weekly thread for questions about grad school, residency, and general career topics 06/01/2021

Post Content: This is the place to ask questions about graduate school, training programs, or general basic career topics. If you are just learning about the field and want to know if it is something you should explore, this thread is probably the correct place for those first few questions on your mind. Examples: * "I majored in Surf Science and Technology in undergrad, is Medical Physics right for me?" * "I can't decide between Biomedical Engineering and Medical Physics..." * "Do Medical Physicists get free CT scans for life?" * "Masters vs. PhD" * "How do I prepare for Residency interviews?"

Comments:

I'm within a year and a half of finishing my Nuclear Engineering degree at UTK, and I honestly don't know where to start (as awful as that sounds) in order to get to where I wanna go. What steps should I take in order to become a medical physicist? I know it's very broad but I need some help to point me in the right direction!!

I am starting my last year of residency and wondering when it is appropriate to start seriously applying for jobs? I know what area I would like to end up in geographically post-residency and I want to be very proactive to increase the chances of winding up there

>

December. (If you are on conventional schedule when residency starts in July)

I'm currently a grade 12 student planning to study medical physics at Ryerson. Are there any straightforward career pathways in this field? If so what steps would I have to take? I'm not sure if this degree is in demand so I'm just worried about securing a job in the future.

>

Honestly, there isn't really anything in this field that warrants you hitching your cart so specifically to a medical physics degree at this early stage of your education/career. you effectively need a PhD to get a residency (in Canada), so grad school is when you can decide to specialize in medical physics. If you like physics, take a physics or engineering physics degree and you'll have more options open.

I'm \[34F\] making a career change and I came across Medical Physics. I have a Bachelor's in Mechanical Engineering (GPA 3.67) and have spent the last 10 years of my life working as a nuclear operator. I obtained my senior reactor operating license from the USNRC in 2014 and then the company board decided to decommission the plant in 2016. I've been supporting the decommissioning but I need to start thinking about the next phase of my life. I know I want to move into healthcare because the industry is more stable than nuclear power and I want to be able to make a difference in someone's life rather than help increase a corporation's profit margin. I've just finished with general pre-health prerequisites (GPA 3.96). I'm currently studying for the GRE and I was planning to learn Python after that. I'm also volunteering with the American Red Cross. I was really set on Medical Physics until I looked at the local residency program. Last year they had 90 applicants and only admitted 1. Assuming I get into and successfully complete the Master's program, how to I make myself stand out against 89+ other applicants? Are there other jobs out there if you can't get a residency?

>

I'd also encourage you to look into health physics; you'd be a great candidate and less barriers to entry. You can also do medical health physics so you're still in a health care setting. Of course though, they perform very different jobs but I'm just throwing that out there as an option.

>>

I'll look into it! Thanks!

>

It's very wise that you're thinking about this. Your background already makes you stand out, but the fact is that it's very competitive and if you're limited geographically you'll have to be a real rockstar. The paths are slightly different for therapy physics, imaging physics, and nuclear medicine physics so it's worth trying to understand which you're interested in and what that means for you. There are related fields you can pivot to-- certainly the related medical industries are an option-- but I can't speak for how much the master's degree contributes towards picking those up.

>>

Thanks! I really like to plan things out before I dive headfirst.

I am wondering if it's possible one can go for a CAMPEP accredited PhD programme in the USA or Canada after getting a non-CAMPEP accredited MSc from another country.

>

What's important to understand about the whole CAMPEP path is that it's the courses that make the certification, not the program status itself. Going through a "CAMPEP PhD program" means nothing if you don't also take the CAMPEP courses from the program. At my program, the core CAMPEP courses constitute ~75% of the credits needed for the MS. So, the answer I think you're looking for is that you will need to retake all of your medical physics courses from a CAMPEP program for it to count. I don't believe you can get around it.

>>

I do understand that. But what I don't understand is if I can get accepted into the PhD without a CAMPEP accredited MSc. And would I take the necessary courses in the PhD? Because I was considering going for a CAMPEP MSc instead of a CAMPEP PhD.

>>>

I think you will need to take the courses necessary to pass the qualifying exam to be a PhD student. I don't think you can be accepted as a PhD student right off the bat. I know someone who got their MS from a CAMPEP program, transferred to a different CAMPEP program for their PhD, and still had to take most of that programs courses in order to sit for the qualifying exam.

>>>>

Wait. Why?

>>>>>

I honestly never got the full story, but I know the MS program they came from is highly regarded in the field. I think it had to do with not wanting to set a precedent where students could just transfer to a more prestigious program (with more funding) to get their PhD without taking the courses that make students from that program have the status in the field that they have. I won't say I necessarily agree with that stance, but I can see why they'd make it.

>>>>>>

Hmmm. I see So does this mean it's more reasonable for someone like me to go for the MSc first, then the PhD?

>>>>>>

For me personally, if I have to do 75% of a MS to get to the PhD, I might as well take the MS on the way. Honestly, you've just got to talk to the program coordinator at this point to figure out what the deal is. I think you're going to have to take the 20+ credits of core CAMPEP courses no matter what program or path you end up in.

>

100% yes in the US

I am on my first year of residency and I want to know the prospects of automation on radiotherapy and tps, are we going to be left on the street?

>

I don't see myself losing my job because of automation. Automation just enables you to focus on more important tasks. And then you QA the automation

>

What types of automation are you seeing in your clinic that concern you? I work with several types of automation in my clinic. There is always something new that comes up when time is freed up elsewhere. I think you will find even good automated services require QA and regular verification. They also let us focus more time and energy on higher priority work.

What do masters or PhD programs typically look for in an undergrad applicant? Like what GPA is the minimum, does research matter, how much does shadowing matter and if so how many hours? And does GRE matter ?

>

I think the GPA minimum will be specific to the school and in general, programs are looking for well-rounded applicants who show interest in medical physics. Research related to medical physics and/or shadowing are certainly pluses since they demonstrate interest. A lot of universities don't have medical physics research but they might have imaging or biomedical engineering research that can give you a better idea of what you're getting into. As far as I know, most programs don't require the physics GRE and the overall GRE is evaluated basically the same as your GPA - it's one piece of a larger picture of your resume/CV.

>>

I'll just add that many grad program websites list the minimum requirements or average statistics of their average accepted

applicant. For example, UW-Madison's stats can be found in their FAQ link on their admissions page.

What are some of the highest residency placement rates for masters programs? The CAMPEP data I've been looking at for months has been from 2018 and I'd really like to see if it's changed in the last 2.5 years

>

Placement statistics are required to be publicly posted on the programs website. It will take some time, but go to each programs website and check the statistics for the last several years. Probably would be easiest to keep a spreadsheet to track and calculate the data for you.

first year student currently on clinical placement in the UK. I don't see myself living/working in this country for more than a year or two after qualifying as the NHS pay just isn't good enough and I just don't want to stay in England! which countries should I be looking at for my future career... it seems Canada, Australia and certain US states such as California look best, but how difficult would it be to transfer, and would it be worth it?

>

You can look more into the CAMPEP process but in all likelihood you're at least 4 years away from a clinical job the US.

>

Worth noting that the vast majority of clinical positions in the US and Canada will require certification that is not easy to get from international qualifications. Unless you are willing to consider coming over as a postdoc and completing a CAMPEP certificate program plus a residency, you will not be considered qualified for most clinical jobs. In essence you have to backtrack and redo some of your education and training just to qualify for these credentialing exams. See campep.org for the list of accredited programs and theabr.org for information on professional certification. I am not aware of routes readily available for international qualification conversion/acknowledgement, but that doesn't mean no one has ever done it.

>>

thank you!

>

I won't speak to how hard the transfer will be, but career wise basically every state in the US is the same. If you actually want to live in those states is a different question, but I just wanted to clarify that no state has a built in career advantage.

**Post Title: [Training Tuesday] - Weekly thread for questions about grad school and general career topics
03/02/2021**

Post Content: This is the place to ask questions about graduate school, training programs, or general basic career topics. If you are just learning about the field and want to know if it is something you should explore, this thread is probably the correct place for those first few questions on your mind. Examples: * "I majored in Viticulture in undergrad, is Medical Physics right for me?" * "I can't decide between Biomedical Engineering and Medical Physics..." * "Do Medical Physicists get free CT scans for life?" * "Masters vs. PhD" * "How do I prepare for Residency interviews?"

Comments:

Hello guys, I was offered a position as a medical physicist assistant at a hospital. I have a biology and microbiology bachelor degree. I know not really my same type of work. My questions is what is the career growth for this position if I do take it? What would be my next possible promotion? What would be the salary look like after a few years? What other industry could my experience here be useful in? Would I need more education? Any information helps. Thank you all.

I'm still a freshman so I have time, but I've been wanting to be a medical physicist. Although leaning more towards working in a lab and researching as opposed to being in a hospital because I don't want to go to medical school. My plan is to graduate uc with a B.S. in physics, and then get a masters degree in physics again. While I'm doing my masters, I plan on applying to internships (because I can't seem to find any good medical physicist internships where I live). Afterwards, I hope to get my residential in (I'm not sure how that would look like considering I'm not planning on working in a hospital, but I heard it was something that's required after getting a master's ..?). Does this seem like a solid plan? I'm still very unsure of how to actually become a medical physicist and anything would help!

>

This is in the sidebar, it's a really good overview of the training required. Also it's residency, not residential (thought you were immigrating or something at first) [link](<https://www.sdampp.org/documents/SDAMPPStudentGuideToAMedicalPhysicsCareer.pdf>) Edit: also if you don't want to work in a hospital, then clinical medical physics may not be the right career for you. If you like research you should look into doing a PhD, and a residency wouldn't be required. Although the job market in academia is EXTREMELY tough so be warned. Look into r/askacademia.

>>

Thank you! My bad, I get residential and residency mixed up, will work on that but thank you, I'll definitely look into it

Would completing a CAMPEP accredited MSc and then a non-accredited PhD (such as at UofT) hurt my chances for getting into a residency?

>

No it wouldn't hurt your chances. A lot of residency places only take PhD holders, or at least strongly prefer them, so having a PhD would open up more opportunities; although you should not neglect the opportunity costs of doing so (years of missed potential salary, high CoL of GTA, etc). Also from what I've heard having a PhD is the only practical way of getting into a Canadian medical physics job.

>>

I have heard that as well, and a job in Canada is what I'm aiming for. The reason I asked is because on UofT's site for their residency program, they state "The preferred qualification for entry to the residency program is a Ph.D. in medical physics from a CAMPEP accredited graduate program." So I was wondering if what they mean by that is a) "the preferred candidate has a CAMPEP PhD" or b) "the preferred candidate has completed any CAMPEP graduate program + a PhD". Also was curious if a) is common for Canadian residency programs in general.

>>>

I would also consider certificate programs. Not sure how we'll they're received in Canada but a 1 year certificate after the PhD makes more sense to me in a lot of ways than the master's up front.

I got accepted to the Columbia MS program for medical physics, but it is SO EXPENSIVE and they don't give scholarships, GAships, TAships either. I was thinking of taking out a student loan, but I was wondering.. is it worth it?

Any advice on choosing schools and personal experiences would be greatly appreciated! I've been accepted to Duke, UPenn, and McGill Masters programs. What are some pros and cons of each program? I plan to get into residency after MS so I am looking for a school that has lots of clinical work opportunities. In terms of cost, McGill would be the most affordable (1/10 tuition of the other schools + scholarship) but I'm hearing people say that the US job prospects for medical physicists are much better compared to Canada. Please help me out!

>

Hey, cool to see a potential McGill classmate! I just recently accepted my offer for their MSc :) Have you made a decision yet?

>

>I'm hearing people say that the US job prospects for medical physicists are much better compared to Canada Just because you go to school in Canada doesn't mean you can't do a residency or get a job in the US. ABR and CCPM are regarded as interchangeable in both countries so I wouldn't consider the job market in Canada to be a deciding factor for schooling.

>>

Yes, I'm aware of the interchangeable option but I was wondering if there are any advantages for ABR students to land a residency in US and CCPM students for Canada? Do you know people who have gone to the states for residency after their masters in Canada?

>>>

I'm from a Canadian institution that has a CAMPEP PhD program and I know of at least 6 people who have gone to the US for residencies from my program (and there were probably more before my time). I think most if not all did not complete ABR part 1 before residency. Not sure about MSc but I would think it would be the same (until recently my program did not have a CAMPEP MSc option so I don't personally know people who did this). BTW CCPM is all done after residency so there is no equivalent to ABR part 1 for CCPM and if you do want to write ABR part 1 you can do so regardless of which country you are doing your training in.

>>>>

I see! Thanks so much for the info :) I wasn't too familiar with the ABR and CCPM processes. This helps a lot

>

Since residency placement is your top priority the school that has the best residency placement rate should be at the top of your list. I know that UPenn has like a 87% placement rate which is really good. They also pay you to work in there clinic to give you the necessary experience that can be crucial come time for the match, and the pay was something like ~\$20 an hour if I remember correctly from my interview there. But still a pricey school. As for Duke, they do not boast the best residency placement for their MS students, something like 60% if I remember correctly and it is extremely expensive to go there even with their scholarship's they offer their students. But I will say I really enjoyed my interview experience there and the campus and hospital are top notch and the faculty were very nice. I am not familiar with McGill though. I hope this helps with your decision making process a little bit.

>>

Thanks for your reply! These are some helpful informatoin :)

Hello all, I have been accepted to my top two MS programs: Vanderbilt and U Kentucky. I love both programs, as they are very clinically focused and have smaller, tight knit classes. I want to do the therapy track and do a residency after my MS. Does anybody have any advice on how to choose, or pros and cons of either program. Cost is my largest concern, but is not a deal breaker for me. Thank you.

>

I know Kentucky puts their students in the clinic right from the beginning eventually working alongside residents and physicists. The level of clinical experience a student gets sounds close to some actual residencies out there and they have a reputation for putting out strong clinical physicists. I would strongly consider the faculty you interviewed with and what program you got a better feeling from. If cost is a major concern, see if either program offers TA positions. I think many of the programs that have students participating in the clinic heavily ask you not to do extra jobs like TA since you are expected to be in the clinic most of the time you are not in class.

>>

Thank you for your reply. I really liked the faculty and culture at Vanderbilt. So I am leaning towards them.

>

University of Kentucky reserves some residency spots exclusively for their grads so I'd go with them.

>>

That does sound like a great benefit. Thank you for your reply.

Living in the United States, is it a good choice to apply to the CAMPEP masters located in Ireland? I have studied in Europe for a semester before and I'd love to do it again, but not at the cost of me not being able to get a residency afterwards. I understand that they are CAMPEP accredited but I still am skeptical about it being the only program not located in North America. Can anyone who has been through this program share any thoughts?

>

Other posters in the sub have said that their graduates are good but they have to learn the US regulations by themselves when applying to residencies/jobs in the US since they teach the Irish ones in that program. Also technically there is another CAMPEP program in Seoul, South Korea.

Hi everyone - I'm currently an MPA with my BS in Physics. I'm trying to decide if a Masters or PhD is right for me, & I can't seem to make any headway on an application route (looking to matriculate in 2022/2023). I really enjoy the day to day clinic life, but I've never really done any significant research so I can't say with certainty whether or not I like/dislike research. Appreciative of any & all advice!

>

I'm applying to PhD programs this cycle, so I haven't actually enrolled yet and can't speak to that, but I also had very little research experience after graduating with my BS in physics. I suggest reaching out to any labs that seem vaguely interesting and asking if you can just sit in on their research meetings (maybe leverage connections from undergrad or your MPA position). This will give you a better idea of whether you like/dislike research, and maybe you could even try to work with some of the research folks you meet to gain experience.

Hi. I'm currently applying to grad school and was wondering what my options are if I were to not get into any programs. I know that I would have to wait till the next application cycle, but what are jobs I could do in the interim period that would also help improve my application?

>

Medical Physics Assistant is a good interim job. You'll tend to do more of the laborious tasks, but you get clinical experience and pad your resume/application very nicely. I would also recommend finding a local clinic and seeing if you can shadow their Physicist. It might be a little more difficult with the current restriction but not impossible.

Hi everyone, I've been accepted to all three for a PhD and would love some input from the community. What are some pros/cons of each? Similar to /u/log-o, looking at these three schools. I'd be happy with a PI at any of them so would like some input on the softer details: UCLA: - Medium size good for both have resources and still being a small community - I am very familiar with Los Angeles and it would be a pretty smooth transition - Most research is imaging, which is not necessarily what I want to do - Students seem happier and have more free time - Laboratory rotations UChicago: - Almost all students get first choice for residency - Very small program might foster a huge sense of community - Beautiful campus and great city - Students seem much busier overall - Has more research opportunities for the field I'm interested in - Good connections to national labs if I want to pursue that route Wisconsin: - Probably the most well-known and competitive with UChicago - Large amount of resources and large program - Also 100% residency placements but not sure about top choices - I am not really a fan of the smaller city or smaller/more remote state - Students are very happy as well from

what I can tell - Already locked into a laboratory although it is in my area of interest

>

I'm biased towards UChicago, but I think most of your points are pretty accurate. One thing I will point out about UChicago is that a majority of the university is graduate students, so there are a lot of grad student resources that have been beneficial to many of my friends around the university. I don't think you can go wrong with any of the three schools though, congrats on your acceptances!

>>

Thanks for the insight! Definitely a valid point about the grad population there.

>

>I am not really a fan of the smaller city or smaller/more remote state If you're talking about Madison, don't overlook it as a cool place to live, at least in normal times!

>>

Not only is it a cool place to live, but its location allows for relatively quick access to large cities such as Chicago (2-2.5 hours), Milwaukee (~1hr), and the Twin Cities (~4 hours)

What's one thing you wish you realized before choosing which master's program to attend? Currently struggling with the decision myself

>

Piggybacking off of other commenters, cost is extremely important, and that includes the COL of the city that you're in. I did a previous masters in San Francisco and boy that was painful on the bank account.

>

Not something I wish I had realized, but something I'm glad I knew before graduate school: clinical experience is a big plus if you want to go into residency and get a clinical job, and knowing to look for somewhere that would prepare me for the ABR part 1 really well

>

I second (or third in this case) the cost comments. More money does not necessarily equal a better education or more experience.

>

I'd recommend getting to know the faculty since they'll be the ones teaching you. Make sure they have your best interest in mind.

>

Cost was a big factor for me

>>

I applied to Columbia MS and am very concerned about the cost. Still waiting to hear back. Any opinions on if it's worth the seemingly \$120k?

>>>

It's not

>>

I did not consider cost and really feel like I should have. I spent way more than I realized at the time. However, I focused on my end goal and finding a program that would best get me there. Fortunately, my programs reputation and quality definitely helped me find some jobs and make connections I otherwise wouldn't have. That being said, I often think that I could have had a similar outcome spending less than half of what I did.

>>

Cost was my number one factor too. After that you need to think about what you are trying to gain from your graduate experience is it heavy clinical experience and high residency rates or is it heavy research. Those things are important in helping you choose which school to attend. Also fit is a big thing, I don't know how your experience was so far when I went through the application process I went to a few places and interviewed and you get a good feel of the program and if you would enjoy being a part of it.

I kind of think I screwed up. I'll be finishing my Master's in May, but I never applied to residencies, partially because I thought I would be able to do a PhD in some (to me interesting) clinical research at the hospital, though I admit it was also just easier than the prospect of going for interviews during the pandemic. However now it's pretty clear that my school won't accept that and I'm not really interested in doing a PhD in non-medical physics. So, I could just graduate and apply to match next year, but I'm afraid that this looks really bad on my application. I could also apply to some other PhD programs, which I guess is probably the most realistic option, but it's not that common to come in with a Master's.

>

I'd check out Siemens, GE, Elekta, Sun Nuclear etc to see if there's any relevant work available.

>

I don't think you screwed up. It doesn't hurt your chances of matching if you don't immediately go into the match. As for going into a PhD with a masters from a different institution -- I did. It shouldn't be an issue. You should be able to have some classes transfer too (each university has its own policy on this, so you would have to do your research), or they would just expect you to re-take their version of the class. Unfortunately, the application deadlines for fall admission have most likely passed for most places. So, you might have to apply for spring admission instead.

>

You can apply next year. There are medical physics assistant or industry physics positions available that you could look into if you want something related to the field. You can see if any of the major vendors have openings which don't typically require residency or board certification. I imagine that would look pretty good to residencies next year when you apply. You can also find residencies that don't participate in the match or that accept residents on a different schedule than normal. While rare, there are residencies out there that are not 2 years (usually 2.5-3 years). I would just compare the list of CAMPEP residencies to the list that participates in the match and contact any of the approved ones not matching.

[deleted]

>

What is the deadline for you to make the decision? I would recommend talking to someone in this field but in schools other than these three to get some more objective perspectives. Also one thing you want to look at is whether the school has an affiliated hospital, even if you want to go to academia afterwards, it would still be super helpful to have hands-on clinical experience.

>

At least in the midwest, Madison candidates get pretty much an auto-interview for residency programs, which is not necessarily true of the other two.

>>

From the grad students and faculty at Chicago they told us they have 100% residency placement and almost everyone has their top

choice. I think Wisconsin also has 100%, but not sure where in the match they landed

>

The biggest factor should be which lab/PI do you want to work with and what research is the most interesting to you. This will be the biggest influence on how much you enjoy your 4+ years of grad school IMO

>>

>Is there a downside to doing research rotations, as opposed to immediately joining a lab? Which do you prefer? If you aren't exactly sure what kind of research you'll want to do, doing a few research rotations will help you figure that out. You'll get to "try on" a few different labs/Pis/projects. This could be very helpful to determine what you want your PhD project to be. But if you already know exactly what you want to research, and who your PI will be, these rotations may not be necessary.

>>>

To follow up on this point, I know someone who knew exactly which lab+project they wanted when they started at UChicago. They were still required to do 2 rotations, which was 10 weeks away from the lab they wanted, but had a beneficial experience during the rotation anyway. It's not ideal if you know exactly what you want to do, but it's very desirable if there's even the slightest doubt on which lab you want to join. No other downside to rotations in my opinion though, but plenty of upside (e.g. networking with other professors and connecting with students in other labs, gaining a broader set of research tools).

Post Title: [Training Tuesday] - Weekly thread for questions about grad school, residency, and general career topics 07/13/2021

Post Content: This is the place to ask questions about graduate school, training programs, or general basic career topics. If you are just learning about the field and want to know if it is something you should explore, this thread is probably the correct place for those first few questions on your mind. Examples: * "I majored in Surf Science and Technology in undergrad, is Medical Physics right for me?" * "I can't decide between Biomedical Engineering and Medical Physics..." * "Do Medical Physicists get free CT scans for life?" * "Masters vs. PhD" * "How do I prepare for Residency interviews?"

Comments:

Simple question, help is very appreciated. I am considering applying to medical physics for a master's degree, however from

my research it seems like they are all two years in length. And the problem is i can barely afford one year, so does anyone know a college in Canada that offers a one year program?

>

Some programs have funded masters it offer scholarships though. It might be worth looking into University of Toledo, Purdue, and University of Wisconsin (I don't think funding is guaranteed, but it might be worth inquiring). It would be a lot to learn everything in a year.

>

I think the only 1 year CAMPEP masters program is the one in Galway, Ireland.

Hi all, I'm currently an undergrad majoring in Biomedical Physics. I'm getting my master's degree in Medical Physics, and am applying to programs now. As such, I've been thinking about what's next. I've seen a couple of people say that residencies are extremely hard to get for Medical Physics. Since I am pursuing a master's degree and not a PhD (I am pursuing a master's degree as I am a senior in college and already suffering from some burnout... I am not sure I can do enough work for a PhD at this time)- how much will my ability to find a residency be hurt? Will I be able to find a residency? Or what should I do after graduation?

>

I see this discussed here a lot and I, personally, don't understand the concern or at least why it comes up so often. I think there was even a survey post match and plenty of people with masters were matched. Background: I have a masters and I am in contact with many of my previous classmates (all masters degrees) and those from several years after I graduated. So only 20 - 30 people total I'd estimate but enough for me to make this post. None of us had issues getting interviews or getting matched to a residency right out of school. I personally do not know anyone who did not match. I know that plenty of people do not match every year and I do feel awful for their situation and wish the number of graduate programs would decrease to reduce this issue. But that's another topic all together... My point is: if you work hard and are competitive, you should get interviews for residencies. Then it is up to you to really sell yourself and make a great impression for why you would be an asset to their department for two years. If you're feeling burn out now, know that you are going to have to work harder than you have before for the next two years to be competitive. Then residency also involves a lot of learning while working 40+ hour weeks. There is a long path of examinations ahead. Just a friendly warning from someone who was feeling burn out by the end of undergrad and

definitely had some rough patches from grad school through board certification.

>>

Thanks for the initial advice! I am nervous by nature, and it's very sad for me to see people without residencies. For burnout, what can I do to combat it? I will be 20 when I enter grad school, and I am extremely afraid of falling behind because of my age. However, my parents will not let me stop school, and I agree that it's in my best interest to apply now as the GRE is waived for a couple of my top choice schools right now.

>>>

I was in a similar situation. Graduated college at 19 and felt obligated to continue school, but, as u/Beam_Runner speculates, was pretty burnt out! Instead of continuing on to graduate school, I took a position as an MPA. I love it! It's crazy how much more I learn *on the job* than I did in school. MPA is not a well-defined profession, so duties vary a lot from clinic to clinic, and, at least in my experience, you can "work your way up" to basically any task legal for a non-QMP. You may need some supervision from a physicist, but some tasks are best tag-teamed, anyway. Most MPAs are medphys graduate students with plans to become certified. But it's possible to go straight from MPA to working in industry, where certification isn't always required. Medphys professionals in industry write software, provide technical support, sell products, etc. Unlike in the clinic, in industry your skills matter at least as much as your credentials. I guess what I'm saying is, "Don't make yourself miserable by continuing in school if you're not passionate about it. Try out an entry-level job in a field that interests you, and if you're good, you can work your way up."

>>>

I think its good to be a bit nervous. It can motivate some people to work harder and do research ahead of time. Why would you think you would be falling behind because of your age? You are ahead of almost anyone else I've seen enter a medical physics grad program. If you are 20 and entering grad school, I am assuming that you are been going at 150% for a long time. I can only speak from my personal experience but I felt that from the start of grad school to the end of part 3 (~5 years if all goes well) was pretty non-stop. Its probably a good idea to identify what study/work methods work well for you to help things feel a bit more enjoyable. Medical physics carried a lot more meaning for me than my undergraduate physics classes and research but its still a lot of work. Is the waived GRE just the general? I wouldn't be too concerned about that either way since if you completed the prereqs for medical physics you can probably do extremely well on the general with just a couple weeks of focused studying. If you're referring to the physics GRE on the other hand... well

thats just always going to be tough and I only really remember PhD programs looking for that. Something I also left out of my last comment was if you want to do clinical work, a masters is great. You will pretty much 100% need a PhD if you desire to do research or work at most universities. I would pick the degree based on what you'd like to work on in the future.

How much do radiation therapy medical physicists work directly with patients? In other words, how often do you get to handle things like developing and overseeing treatment plans and other responsibilities that would have a direct impact on a patient's outcome? I'm just learning about this field for the first time (undergrad in electrical engineering), and it sounds like very interesting and meaningful work, but some people on forums describe their job as 95% machine testing and quality assurance - which just isn't something I could see myself doing for a career. Thanks in advance.

>

There are definitely different roles within medical physics which have more and less patient contact. Radiopharmaceuticals, TBI, brachytherapy, kV and electron treatments all have a substantial amount of patient contact. At UCSD they're trying to involve physicists in the patient consult process, maybe other places are too. These tend to be the less desirable activities too just because of how far a lot of us are on the spectrum, but tend to happen more at large centers so it's not automatic.

>>

That is some fantastic insight. Thank you so much!

>

Honestly, contingent on the workload at your center (aka if you have the precious resource of time) I think it's up to you. If you are involved with brachy, hang around at sim/the machines, etc. and want patient interactions I think you can find ways to make it happen. Granted, this is very dependent on a given department's culture and how you're defining what it means to be a physicist. Hope that helps!

>>

That does help, or at least provides some hope lol. I've (so far) had a hard time finding much of my engineering coursework fulfilling, and pivoting to medicine after getting my B.S. feels like a worthwhile thing to do. I'm just trying to find an avenue that doesn't involve totally changing gears, redoing a bunch of my undergrad, and outright going to medical school - while still getting to feel like I'm doing something significant. Thank you again!

>>>

I have some patient contact in my practice and I enjoy it, but if your objective is patient contact, and you are now considering, medicine is the way to go. A modern hospital is a complex machine with many different professionals, but at the end the patient is of the doctors. If a hospital is a soccer team, a doctor is like the striker and your job will be more as midfield-defence.

>>>>

Aside from direct patient contact, how much of your job involves participating in treatment? I guess that my main reservation has more to do with the idea of being pigeonholed into doing equipment maintenance, rather than providing care. To me, the former sounds closer to being a technician (which is perfectly respectable work), but it's just not something that gets me excited. The idea of performing quality assurance and servicing machines all day is partially what's turning me away from engineering in the first place.

Is anybody here knows on what schools waived GRE exam? I see that I am not able to take this exam due to the COVID situation and financial constraints. I do hope schools considering waiving GRE now.

>

I've heard University of Wisconsin and UChicago, but there probably are others too.

>

I would email the programs you're interested in and ask.

>

I would assume that schools would have that listed on their websites.

Does anyone have any experience with USF? They're on my list because they're in my area but beyond their own website I can't find any information on the program.

||

- [File 1](#)
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