IDSA

Advisory Guide for International Medical Graduates: *Career Planning for Infectious Diseases Fellowship and Beyond on a J-1 Visa*

Expanded Guide for Infectious Diseases Fellows: Planning Your Career in Infectious Diseases

IDSA Training Program Directors Community of Practice

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Introduction

This advisory guide is designed to help physicians who are international medical graduates pursuing a career in infectious diseases in the United States on J-1 visas. Written from the perspective of ID program directors, it provides comprehensive advice on choosing a career path, finding a position, and navigating the visa process and timelines to help fellows successfully transition to post-fellowship careers.

The information in this guidance is intended to serve as a tool to help physicians navigate the early phase of their career. Information and requirements should be verified as they are subject to change over time. It is strongly recommended that a person seeking a J-1 waiver position retain *their* own immigration attorney to ensure their interests are represented.

Key questions to answer before looking for a position

- What is your career goal?
- Where would you like to be in 10 years assuming you obtain a J-1 waiver and are able to transition to a green card?
- What are your immediate needs/goals?
  - ◇ Do you have strong preferences/needs to be in a certain geographic location?
    - If not, consider prioritizing geographic locations (this will help target the need to research individual state processes)
  - ◇ Income needs (sole or primary earner, etc.)
  - ◇ Family needs: When considering positions, also consider the needs of your family and other personal obligations:
    - Childcare
    - Caregiving needs
    - Spouse/partner employment
    - Schools
- What duties would be ideal for a first job? What duties are you willing to do for the duration of the J-1 waiver? What duties are a dealbreaker?
  - ◇ Examples to consider are:
    - All ID
    - Hybrid ID and primary care/general internal medicine
    - Primary care with an ID focus (STI clinic, HIV, tuberculosis, hepatitis treatment)
    - General medicine (hospitalist, nocturnist, primary care)
- Do you have a compelling case for a hardship/persecution waiver? If so, it is recommended to discuss with an experienced immigration attorney.

Choosing a career path in infectious diseases

Overview of common career pathways

Position	Benefits	Additional considerations
Academic ID physician: Clinician educators and researchers (clinical/basic science/translational)	• Career mentorship • Ability to work with trainees • Ability to develop a subspecialty niche • Access to resources for research • Opportunities for academic promotion	• Base compensation • Added institutional obligations • Teaching responsibilities • Research expectations • Expected balance between clinical and nonclinical responsibilities
Community ID practice: Private practice and health system-employed positions	• Broader clinical exposure • Availability of different practice structures (solo practitioner vs. group practice) • Potential for higher reimbursement	• Fewer opportunities to participate in graduate medical education • Less availability of resources for research, support for HIV programs and OPAT programs, and ID pharmacist support • Potential for a higher call burden
Public health career	• Ability to have a greater impact on communities • Ability to help influence policy	• Less involvement in direct patient care Challenges of changes in level of funding • Effects of changes in political or governmental priorities
Industry career: Diagnostics and biopharmaceuticals	• Opportunity to be involved with research and development that can be innovative	• Less involvement in direct patient care • Economic factors that can influence privately funded companies

Establishing a clinical niche

Pursuing a career in specialized areas of infectious diseases can lead to opportunities for career advancement in medical education, research and leadership. Some areas of specialization that infectious diseases physicians pursue include:

- General infectious diseases
- HIV
- Transplant infectious diseases
- Antimicrobial stewardship
- Hospital epidemiology
- Outpatient parenteral antimicrobial therapy
- Travel medicine/tropical medicine
- Public health

Immigration: Navigating the visa process

It is important to map your pathway through training, board certification and licensure that will lead to your desired career pathway.

Important questions to consider include:
- What is your 10-year plan?
- What visa pathway will help you achieve your goals? A typical pathway for many international medical graduates is to pursue a successful J-1 waiver → H-1B visa → green card.

Pursuing infectious diseases training and board certification

- If you completed a U.S. internal medicine residency
  - ◇ Standard ID fellowship → ABIM ID boards.
  - ◇ Visa: J 1 is common; plan for waiver search in late PGY 5 (fellowship year 1)/early PGY 6 (fellowship year 2). (May delay by a year if doing a 3 year fellowship)

- f you did not complete a U.S. residency but completed training abroad, review the ABIM pilot pathway.
  - ◇ Review ABIM pilot pathway information
  - ◇ Requirements for ABIM pilot pathway (summarized):
    - ≥ 3 years internal medicine training abroad
    - Completion of an ACGME accredited fellowship in an ABIM subspecialty
    - "Exceptionally qualified" by ACGME criteria or graduate of ACGME I residency
    - Valid ECFMG certificate; USMLE Steps 1 and 2 (and 3 if eligible)
  - ◇ ACGME "exceptionally qualified" applicants must have:
    - Non ACGME residency in internal medicine
    - Demonstrated excellence (clinical, scholarship, leadership or ACGME I completion)
    - Program director and Graduate Medical Education Committee approvals and early milestones evaluation/ remediation if needed

Obtaining medical licensure

- Variability by state:
  - ◇ Some require USMLE Step 3 and specific training lengths.
  - ◇ Board eligibility/certification expectations differ.
  - ◇ Start license research at least 6–9 months before planned start date
- Useful resource: AMA International Medical Graduate Toolkit

Visa Strategy and Timeline

Common J 1 waiver options:

- State Conrad 30: Most common; each state has unique rules, timelines and priority areas
- Federal (not subject to Conrad 30): HHS (clinical care in HPSA/MUA), VA, Appalachian Regional Commission, Southeast Crescent Regional Commission, Northern Border Regional Commission, Delta Regional Authority, Interested Government Agency (federal agency), etc.
- Hardship/persecution waivers: Consult an immigration attorney to assess viability

Timeline	Key actions
12-18 months before fellowship completion	• Clarify geography, clinical scope, family needs and compensation floor. • Meet with an immigration attorney to map waiver options and state priorities. • Prepare CV, personal statement, teaching/research portfolio. • Begin networking (IDSA events, mentors, prior graduates). • Secure Step 3 if possible (helps licensure and some waivers).
9-12 months before completion	• Apply for jobs in targeted states; ask explicitly about J1 waiver support and timeline. • Collect state waiver checklists; confirm employer's experience with waivers.
6-9 months before completion	• Finalize offer; begin state waiver package; secure letters of support and site eligibility documentation (HPSA/MUA, as applicable). • File H1B change of status if moving from J1 after waiver approved; coordinate start dates.
0-6 months before completion	• Complete medical license, hospital credentialing, DEA, CDS; plan relocation.
After agency or Department of State approval	• Once approved, the agency forwards your application to the Department of State, then to USCIS. • Begin preparing any necessary H-1B or other visa petitions with your employer or agency, mirroring the process used in the Conrad 30 pathway.

After accepting a waiver position

First 1–2 years post waiver start:

- Start or file I 140 (PERM or NIW), maintain H 1B status; keep duties aligned with waiver obligations.

Additional resources

- AMA International Medical Graduate Toolkit
- AMA immigration information for international medical graduates
- IDSA podcast on navigating a career in infectious diseases
- IDSA international medical graduate resources

An infectious diseases-focused job search playbook

Preparing for your job search: Build your portfolio and network

Developing your CV and letters of interest

- Highlight clinical excellence, leadership, QI/stewardship projects, OPAT/HIV experience and teaching.
- For the exceptional candidate pathway: Emphasize scholarship, leadership roles, awards and advanced training.

References/letters of recommendation

- From program leadership and collaborators who can attest to independence, complexity management and professionalism

Networking

- IDSA meetings, listservs, mentor introductions
- Connect with alumni placed in your target states

Online presence

- Professional LinkedIn and a brief clinical interests summary; consider a one page portfolio of select projects

Targeting a job search

- Consider geography and career goals/duty preferences to shortlist:
  - ◇ Academic centers (ID divisions, transplant/oncology programs)
  - ◇ Community health systems needing stewardship, OPAT, HIV care
  - ◇ VA or public health agencies (sometimes waiver friendly)

Questions to ask prospective employers

- Regarding waivers and immigration:
  - ◇ Have you successfully sponsored J 1 waivers in this state? Which type? How many?
  - ◇ Do you provide in house immigration counsel or cover attorney/filing fees (waiver, H 1B, green card)?
  - ◇ Timeline expectations; who prepares state/federal packets?

- Scope of the position and available support and resources:
  - ◇ Clinical mix of the position (inpatient consults %, HIV clinic, stewardship %, infection prevention, OPAT, travel/tropical)
  - ◇ Call schedule; weekend/holiday coverage; backup for complex cases
  - ◇ Expectations for general medicine (hospitalist/nocturnist/primary care) — how much, expected volume, and for how long?
  - ◇ Protected time for stewardship/hospital epidemiology/quality; administrative support (ID pharmacist, data analysts)
  - ◇ For academic roles: protected time, promotion criteria, mentorship, startup/research support

- Considerations regarding compensation and employment contracts:
  - ◇ Base salary, RVU thresholds and rates, quality incentives, call pay, sign-on bonus and relocation allowance
  - ◇ CME funds/time, licensing/DEA fees, society dues
  - ◇ Loan repayment: state, federal (e.g., NHSC if eligible) or employer programs
  - ◇ Malpractice (claims-made versus occurrence-based); tail coverage responsibility upon departure
  - ◇ Noncompete clauses: Radius, duration and applicability after waiver completion
  - ◇ Flexibility to adjust duties after waiver period to align with long-term goals

Contract and negotiation essentials for international medical graduates

Immigration clauses:

- Employer pays for J 1 waiver legal/filing fees, H 1B petition and filing fees, and (ideally) green card costs
- These should include clear timeline responsibilities and document provision

Noncompete clause:

- The geographic scope and duration can be negotiated.
- Discuss exclusions if the employer cannot sponsor a green card or if the contract ends without cause.

Malpractice:

- Understand the difference between occurrence-based and claims-made policies. In most cases, occurrence-based coverage is preferred.
- Understand tail coverage (needed for claims-made policies) and address it during contract negotiations.

Position duties and full-time equivalents:

- Address the expected clinical mix.
- Address administrative time for additional responsibilities (antimicrobial stewardship, infection prevention, undergraduate and graduate medical education).
- Address call expectations and compensation in the contract or an attached addendum.

Compensation:

- Understand base salary and RVU benchmarks.
- Understand compensation for RVUs above the base salary benchmark.

Consider having both an employment attorney and an immigration attorney review the agreement.

Best practices and strategic advice

• Start early

Begin exploring waiver programs and jobs at least 18 months before fellowship ends.

• Use institutional and state resources

Leverage program directors, state health departments, and alumni for networking and advice.

• Stay organized

Track state application cycles, deadlines and required documents for each waiver type.

• Consult legal experts

Immigration attorneys can help determine the best waiver or visa strategy for your individual situation.

Resources and support

• Legal assistance

Access directories of immigration attorneys through the American Immigration Lawyers Association.

• Professional organizations

IDSA and the Educational Commission for Foreign Medical Graduates offer advocacy and guidance.

• Institutional support

Many academic centers have visa officers and staff dedicated to assisting IMGs.

• State agencies

State health departments administer Conrad 30, and regional commissions manage relevant waivers.

Conclusion

Navigating the transition from fellowship to employment on a J-1 visa presents challenges but understanding the nuances of the Conrad 30 and non-Conrad waivers and starting preparations early can assist IMGs in pursuing their preferred careers.

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