MARKET DYNAMICS REPORT

US Radiology Job Market Dynamics Report

78-day tracking window — what 20,775 job postings reveal about America's radiologist shortage

TRACKING WINDOW
Mar 9 – May 26, 2026

DATA SOURCE
RadBoard live DB (18 platforms)

SAMPLE SIZE
20,775 postings · 10,979 unique jobs

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01 Headline Numbers

20,775
Total postings tracked across 18 platforms

13,306
Postings already closed (64% churn in 78 days)

7,469
Currently active US radiology openings

1.89×
Re-post inflation: each unique job listed ~twice

19.8 d
Median posting lifespan before closing

19.7%
Of active jobs are stuck open >60 days

1,336
Cumulative job-years of unmet demand observed

21.2%
Recent postings mention AI — up from 14.7%

HEADLINE INSIGHT

The US radiology shortage narrative is partly an artifact of double-counting. About 47% of "open jobs" you see on aggregators are re-posts of the same role. But the part that's real is concentrated and stubborn — 1,470 currently-active openings have been sitting unfilled for over two months. Most of them aren't underpaid — they're geographically inconvenient.

02 Churn — How Fast Jobs Appear and Disappear

Of the 12,187 closed postings with complete lifespans (first_seen → deactivated), the distribution is sharply bimodal: a quarter vanish in under a week, but a third grind for 30–60 days. There is no "average" radiologist opening.

Lifespan distribution (closed jobs)



WHY THIS MATTERS

1 in 4 radiology jobs vanishes in under a week — either filled fast, pulled, or revealed as a duplicate. But 30%+ stay open longer than a month. The market doesn't have a single "fill rate" — it has two markets layered on top of each other.

03 Zombie Openings — Jobs That Can't Be Filled

Among the 7,469 currently-active jobs, half have been open for over 30 days and roughly 1 in 5 (1,470) have been sitting unfilled past 60 days. The 90-day bucket would be larger if the tracking window allowed it.

Active jobs by age threshold

Age threshold	Stuck jobs	% of all active
> 30 days	3,713	49.7%
> 60 days	**1,470**	**19.7%**
> 90 days	0	0% (window limit)

Worst "stuck-job" states (min 50 active openings)

State	Stuck >60d	Total active	% stuck
NE — Nebraska	36	53	**67.9%**
MN — Minnesota	29	70	**41.4%**
WA — Washington	38	109	34.9%
GA — Georgia	38	132	28.8%
WI — Wisconsin	31	108	28.7%
MT — Montana	14	50	28.0%
OR — Oregon	26	95	27.4%
MA — Massachusetts	54	209	25.8%
CA — California	100	390	25.6%
PA — Pennsylvania	82	326	25.2%
FL — Florida	116	661	17.5%
TX — Texas	65	443	14.7%
NY — New York	48	342	14.0%

Stuck rate by state population tier

Population tier	Stuck >60d	Total active	% stuck
Low-population states (<2M)	105	410	**25.6%**
Mid-population states (2–6M)	220	972	22.6%
High-population states (>6M)	849	4,629	18.3%

THE GEOGRAPHIC SHORTAGE IS REAL

Nebraska has 53 radiology openings and 36 of them have been sitting unfilled for over two months. The lowest-population states show stuck-rates 40% higher than the highest-population states. The shortage isn't national — it's concentrated in places radiologists won't move to.

04 The Geographic Salary Paradox

Conventional logic: stuck jobs should pay more, because the market is signaling scarcity. The data says the opposite. Stuck states pay **$175,000 less** on the high end than fast-cycling states.

Stuck states vs fast-cycling states (median salary max)

Group	Median max salary	Sample size
Stuck states (NE, MN, WA, GA, WI, MT, OR, MA)	**$550,000**	1,124
Fast-cycling states (FL, TX, NY, NC, OH, IN)	**$725,000**	3,454

In-state contrast — stuck salary vs fast-filled salary by state

State	Stuck >60d salary	Fast-filled <14d salary	Gap
OH — Ohio	$500K	$750K	–$250K
FL — Florida	$699K	$1,000K	–$301K
CA — California	$530K	$600K	–$70K
NY — New York	$525K	$600K	–$75K
GA — Georgia	$625K	$690K	–$65K
MA — Massachusetts	$501K	$500K	+$1K
TX — Texas	**$799K**	**$750K**	**+$49K**
MN — Minnesota	**$850K**	**$622K**	**+$228K**

WHAT THE SALARY SIGNAL SAYS

In most states, money is the lever — stuck jobs pay less. Raising offers would likely move the needle. But in Texas and Minnesota, the inverse holds: stuck positions pay MORE than fast-filling ones. There, the constraint isn't compensation. It's lifestyle, on-call burden, location, or workflow — exactly the things AI automation and remote-friendly setups can change.

05 Re-Posting — Why "Open Jobs" Numbers Are Inflated

The aggregate "open US radiology jobs" figure double-counts heavily. Across 18 sources, the same radiologist position is listed on average 1.89 times.

20,775
Raw postings across the tracking window

10,979
Unique (company + title + state) job fingerprints

Highest re-post intensity (min 50 postings)

Company / Source	Total posts	Unique jobs	Re-post ratio
ASER (subspecialty board)	56	5	**11.2×**
SPR (subspecialty board)	64	6	**10.7×**
Loma Linda Univ. Faculty	58	10	5.8×
SIR (subspecialty board)	71	13	5.5×
Indiana University Health	74	14	5.3×
Tufts Medicine	72	15	4.8×
Trinity Health	117	25	4.7×
SAR	103	23	4.5×
Oregon Health & Science Univ.	93	22	4.2×
UVA Health	89	24	3.7×

Extreme single-listing repeats

Position	Times re-posted
Indiana University Health — Radiologist (IN)	**28×**
Bayhealth — Radiologist (DE)	**26×**
Vanderbilt University Medical Center — Radiologist (TN)	20×
Ochsner Health — Chest Radiologist (LA)	19×
Dartmouth-Hitchcock — Radiologist (NH)	19×

Source-level lifespan medians

Source	Median lifespan	Closed postings
LinkedIn	**9.0 days**	2,952
SPR	12.0 days	235
AuntMinnie	14.6 days	2,596
Indeed	15.1 days	177
Hospital sites (direct)	15.1 days	484
SIR	24.0 days	507
RSNA	28.7 days	1,628
ACR	30.0 days	1,582
NEJM	30.0 days	767
PracticeLink	31.4 days	401

TWO MARKETS, SAME JOB

LinkedIn postings live 9 days because recruiters re-list constantly to game the freshness algorithm. ACR, NEJM, and RSNA postings live ~30 days because they're displayed for a contracted period. Same opening, different signal. National "shortage" numbers based on aggregator scrapes need a ~47% deflation before being trusted.

06 Hiring Throughput — Who Actually Fills Positions

The same dataset reveals an enormous operational gap between the biggest PE-backed radiology platform and the largest academic systems. Some employers close 99% of openings within 60 days. Others can't get past 55%.

Companies ranked by persistent (>60d stuck) openings

Company	Active jobs	Stuck >60d	% stuck
Radiology Partners (PE-backed)	988	12	**1.2%**
SAR	103	10	9.7%
Jefferson Health	42	12	29%
Diversified Radiology	40	12	30%
MUSC Health	40	14	35%
Cleveland Clinic	165	75	45%
Oregon Health & Science University	23	11	48%
AdventHealth	21	11	52%
University Health Associates	38	21	55%
Radiology Associates of North Texas	35	20	57%
Hospital-based private practice (composite)	73	61	**84%**
Sanford Health – Marshfield Clinic	16	15	**94%**
Medicus Healthcare Solutions	27	27	**100%**

IT'S NOT THE SALARY — IT'S THE OPERATING MODEL

PE-backed groups average $702K salary max — Cleveland Clinic-tier academic offers $515K. Yet the PE-backed platform fills 99% of 988 openings within 60 days. The academic system fills only 55% of 165. The difference: speed of decision, remote-friendly options, partnership tracks, no-call structures. PE-backed offers 32% of postings with AI tools, 44.7% remote, 37.6% no-call. Academic: 13% / 8.7% / 11.2%.

07 Subspecialty Dynamics — Who Fills Fast, Who Doesn't

Looking only at the reliable extreme — postings that closed in under 14 days — reveals a clear subspecialty hierarchy of demand intensity.

% of closed postings filled in <14 days (real demand signal)

Subspecialty	Fast-fill %	Closed sample
Pediatric radiology	**79.9%**	154
Emergency radiology	**78.0%**	82
Interventional radiology	43.8%	210
Chest / cardiothoracic	38.3%	235
Mammography	34.8%	394
Cardiac	34.2%	117
Body / abdominal	33.4%	725
General radiology	32.3%	384
IR	32.2%	676
Breast imaging	29.3%	150
MSK	27.2%	394

WHERE 24/7 COVERAGE IS NON-NEGOTIABLE, HIRES HAPPEN FAST

Pediatric and emergency radiology fill at roughly 2× the speed of body/MSK/general. Both are roles hospitals can't operate without — and where the candidate pool is structurally smaller. Body and general radiology fill slowly because the labor pool is larger but the work is increasingly commoditized — these are also the segments most exposed to AI automation.

08 Body / CT Radiology — A Closer Look

Body and chest radiology — the subspecialties most directly addressable by CT-report automation — represent 15.5% of active US radiology openings. The segment shows a bipolar fill pattern: a third of jobs close fast, a quarter sit stuck for two months or more.

3,371
Body / CT postings tracked over 78 days

1,160
Currently active body / CT openings

309
Body openings stuck >60d (26.6% of active)

28.8 d
Median lifespan when filled

Where active body / CT openings sit

State	Active body openings
FL — Florida	**121**
TX — Texas	97
NY — New York	58
PA — Pennsylvania	51
CA — California	44
OH — Ohio	44
CO — Colorado	38
NC — North Carolina	37
IL — Illinois	37
MA — Massachusetts	30

09 AI Mentions — Adoption Trending Up

The share of new postings mentioning AI tools has climbed from 14.7% to 21.2% across consistent 14-day windows over the tracking period. The adoption gap is narrowing — but ~80% of postings still don't reference AI at all.

AI mention rate by 14-day window



AI mention rate by ownership type (current snapshot)

Ownership type	% mentioning AI
PE-Backed	**32%**
Independent	21%
Academic	13%
Hospital System	10%
Staffing	6%
Government	**3%**

THE SLOPE IS WHAT MATTERS

6.5 percentage points of growth in AI mention rate over 6 weeks. If the trend holds, ~30% of US radiology job postings will reference AI tools by year-end. PE-backed groups are running 10× ahead of government-owned hospitals on this dimension.