

# Emergency Medicine Profile

Updated August 2018

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## GENERAL INFORMATION

Emergency medicine focuses on the recognition, evaluation and care of patients who are acutely ill or injured. It is a high-pressure, fast-paced specialty that, because of its diversity, requires a broad base of medical knowledge and a variety of well-honed clinical and technical skills.

Emergency physicians (emergentologists) must be prepared to treat patients of all ages and a nearly infinite variety of conditions and degrees of illness – often before a definite diagnosis is made and within time-restricted circumstances. The approach to treatment in an emergency department can vary dramatically from case to case, even for the same medical condition, depending on whether it's a pediatric patient versus a geriatric patient.

Emergency physicians need a number of personal strengths, including physical and emotional toughness, confidence, composure, ability to multi task and strong interpersonal skills. They must also be willing and able to do shift work.



## GENERAL INFORMATION

The emergency physician is foremost a clinician who uses highly developed clinical reasoning skills to care for patients with acute and often undifferentiated medical problems, frequently before complete clinical or diagnostic information is available.

Upon completion of medical school, there are two tracks that physicians can pursue to become a certified emergency medicine physician. One track, under the auspice of the College of Family Physicians of Canada (CFPC), is a one-year certificate programme in emergency medicine which follows the basic two-year residency training in family medicine. This track is particularly well-suited for individuals wishing to work in a community emergency department. For more detailed training requirements on CFPC-certification in emergency medicine, please go to:

[College of Family Physicians of Canada](#)

Figures in this document for this specialty exclude CFPC certified emergency medicine physicians.



## GENERAL INFORMATION

The other track for certification is with the Royal College of Physicians and Surgeons of Canada. This is a 5-year residency programme and is geared to those individuals interested in working in a larger tertiary care facility with substantial academic, administrative and research involvement. This training stream involves:

- a minimum of 2 years as a resident in the emergency department
- a minimum of 4 months or equivalent devoted to areas such as emergency medical services (pre-hospital care and disaster management) and the administrative aspects of emergency medicine; educational skills and research skills
- a minimum of 6 months devoted to achieving particular expertise either in a scholarly activity or a clinical area of emergency medicine including education, clinical research, health care management, pre-hospital care, pediatrics, toxicology, and critical care
- a minimum of 6 months of critical care rotations that must include at least 1 month or the equivalent in each of: anesthesiology, adult critical care, pediatric critical care and cardiac care



## GENERAL INFORMATION

For more detailed training requirements on Royal College-certification in emergency medicine go to:

[Royal College of Physicians and Surgeons of Canada](#)

[Canadian Association of Emergency Physicians](#)



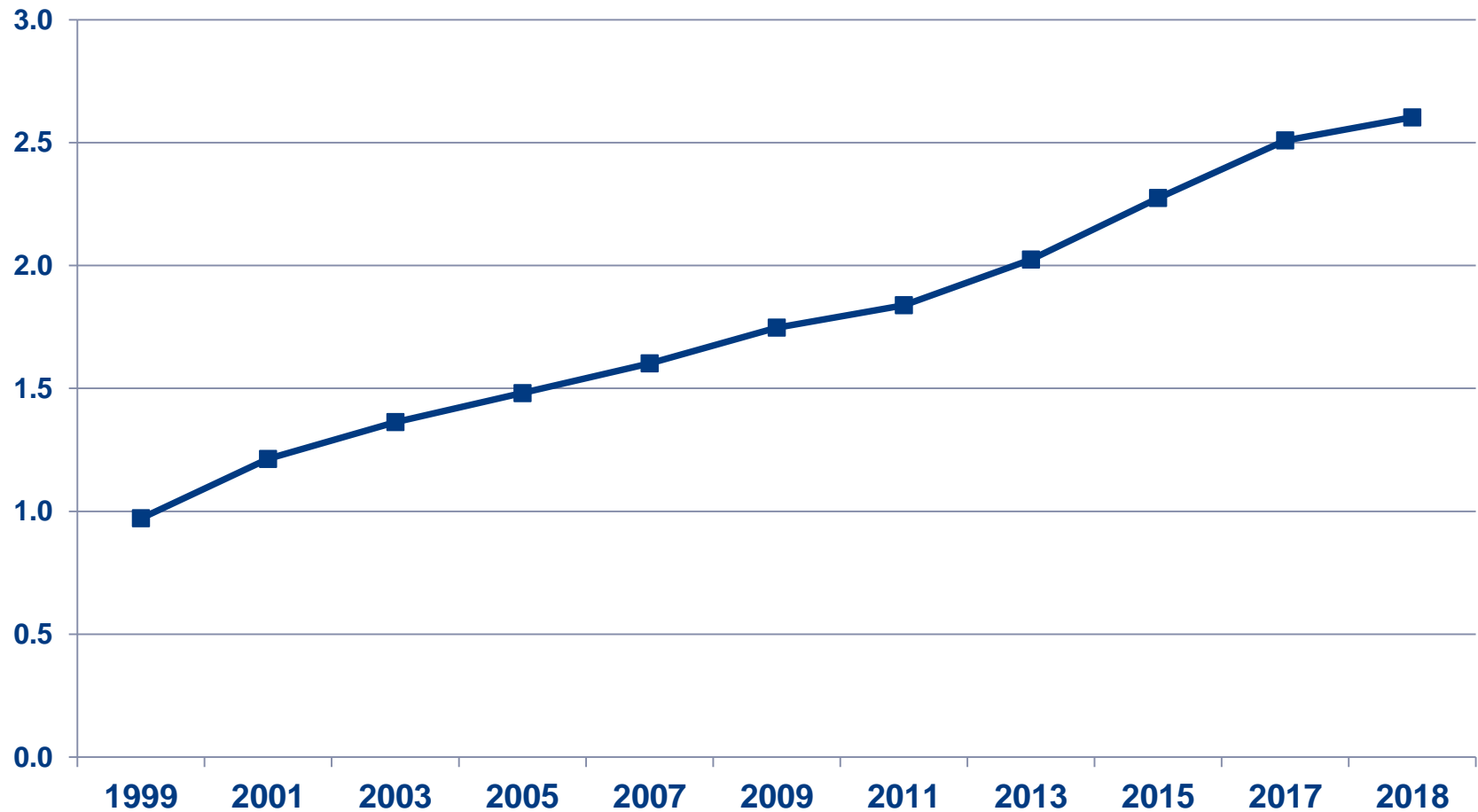
## Total number & number/100,000 population by province, 2018

Province/Territory	Physicians	Phys/100k pop'n
Newfoundland/Labrador	4	0.8
Prince Edward Island	1	0.7
Nova Scotia	24	2.5
New Brunswick	4	0.5
Quebec	175	2.1
Ontario	373	2.6
Manitoba	37	2.7
Saskatchewan	11	0.9
Alberta	162	3.8
British Columbia	171	3.5
Territories	0	0.0
<b>CANADA</b>	<b>962</b>	<b>2.6</b>

Source: 2018 CMA Masterfile



## Number/100,000 population, 1995 to 2018

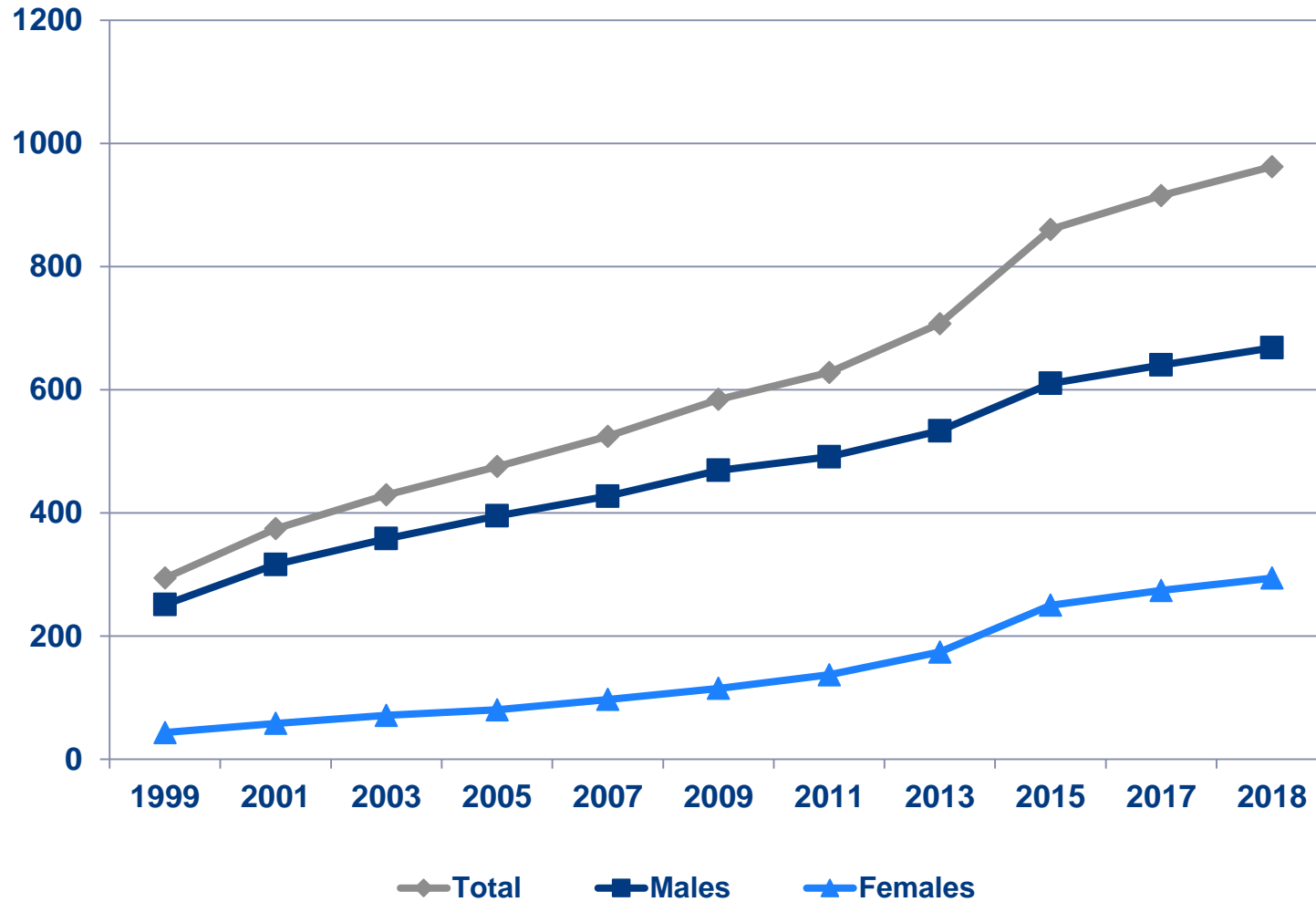


Source: 1995-2018 CMA Masterfiles





## Number by gender & year, 1995 to 2018

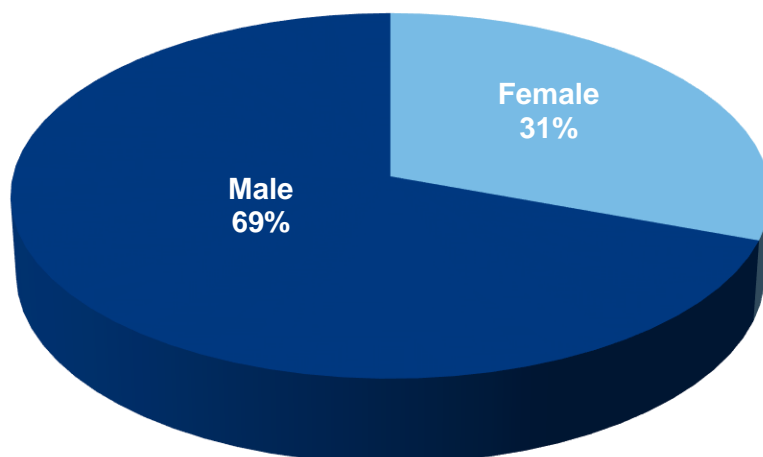


Source: 1995-2018 CMA Masterfiles

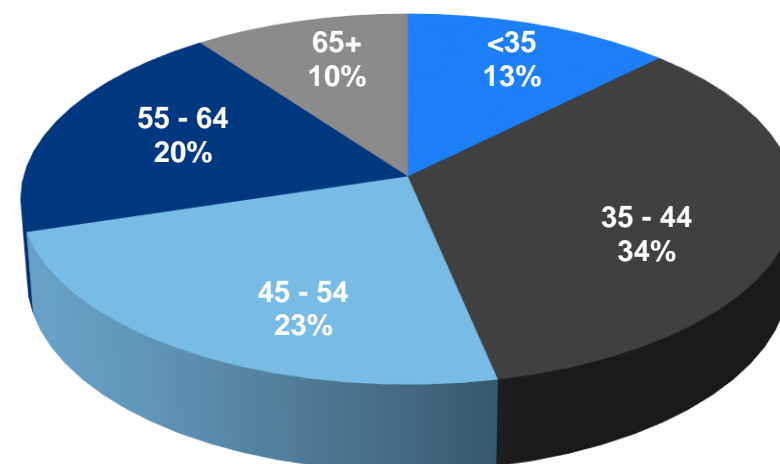


## Percentage by gender & age, 2018

### Gender



### Age Group

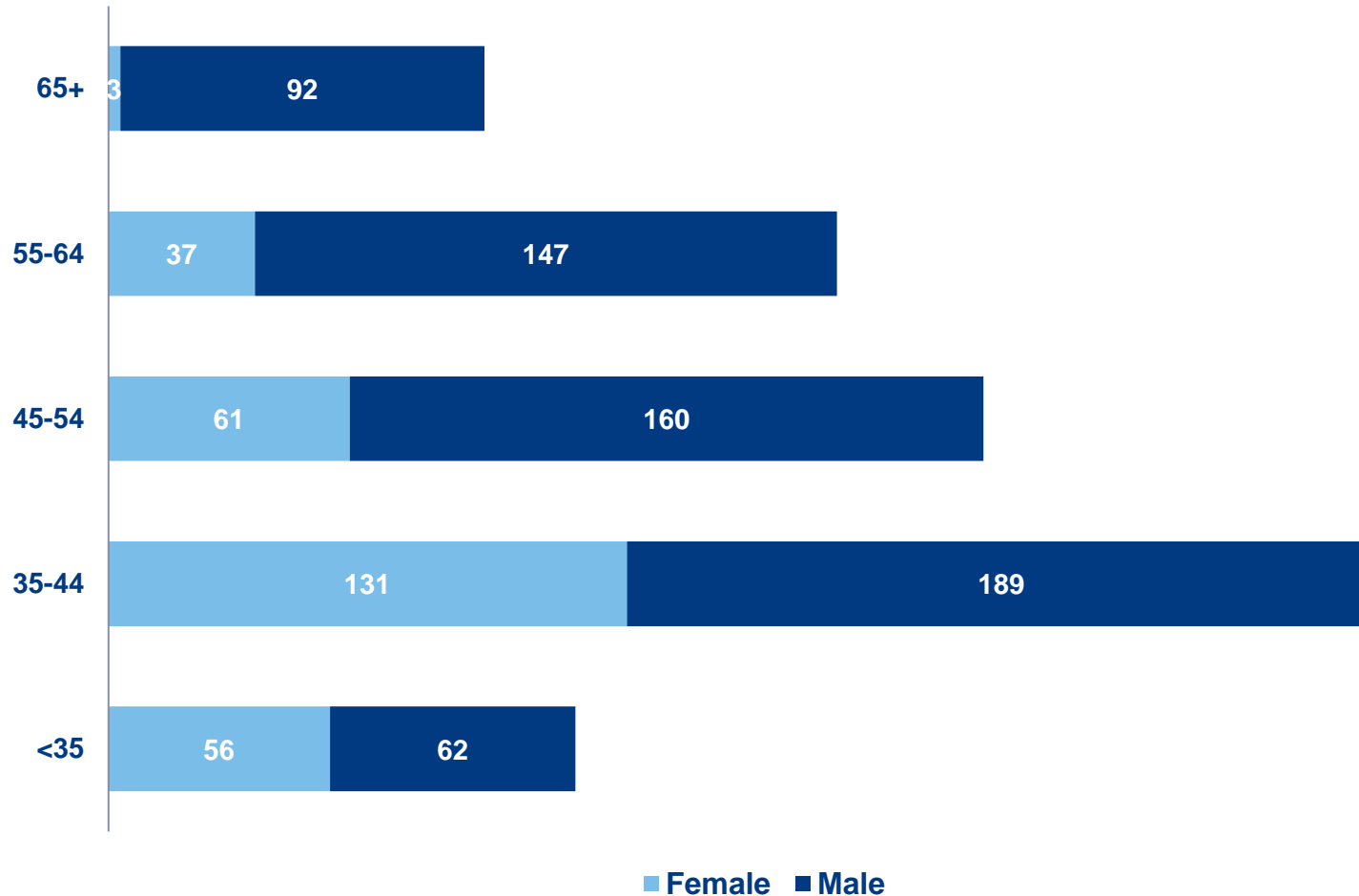


Excludes those where gender or age is unknown.

Source: 2018 CMA Masterfile



## Number by gender & age, 2018

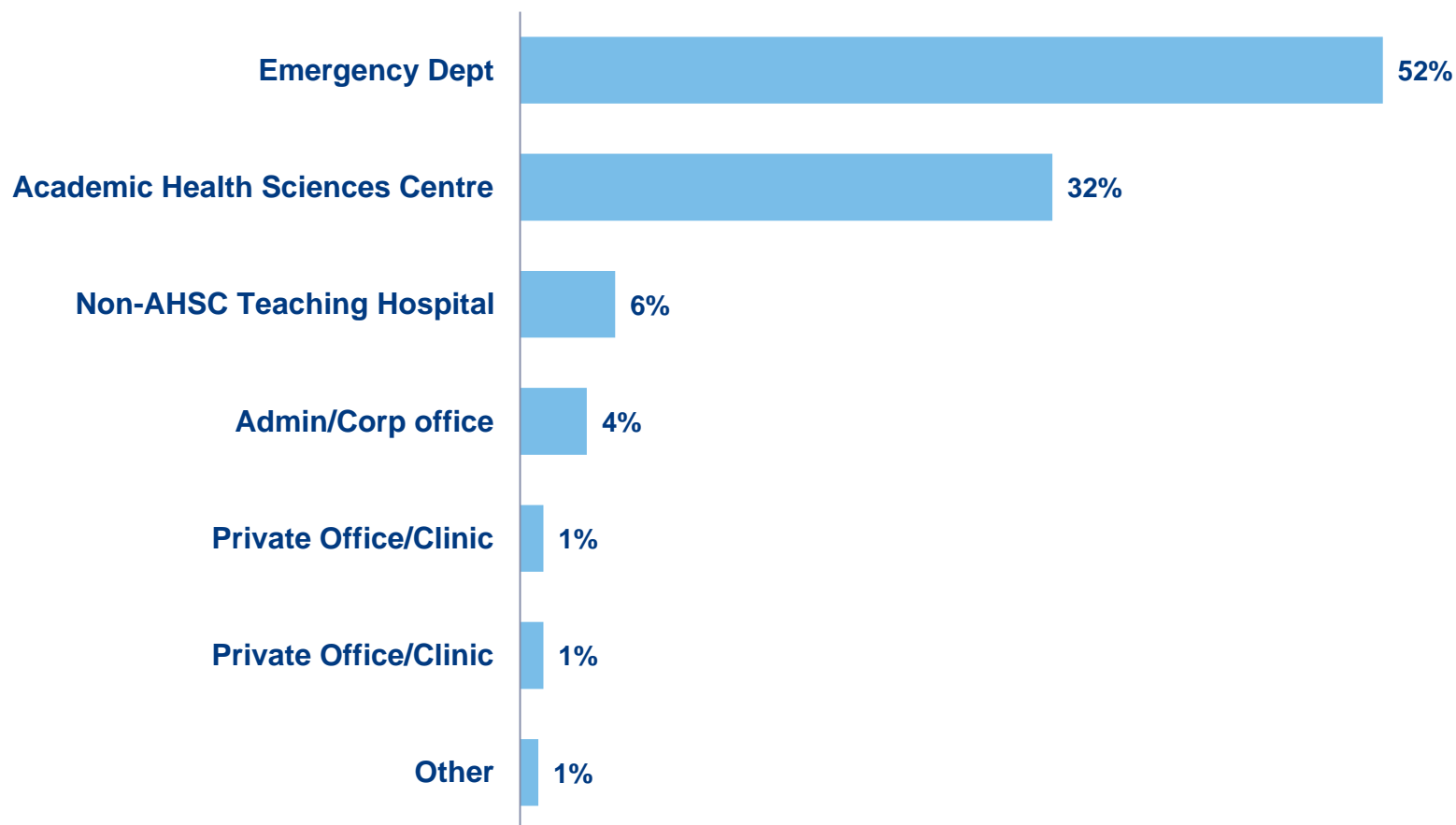


Excludes those where gender or age is unknown.

Source: 2018 CMA Masterfile

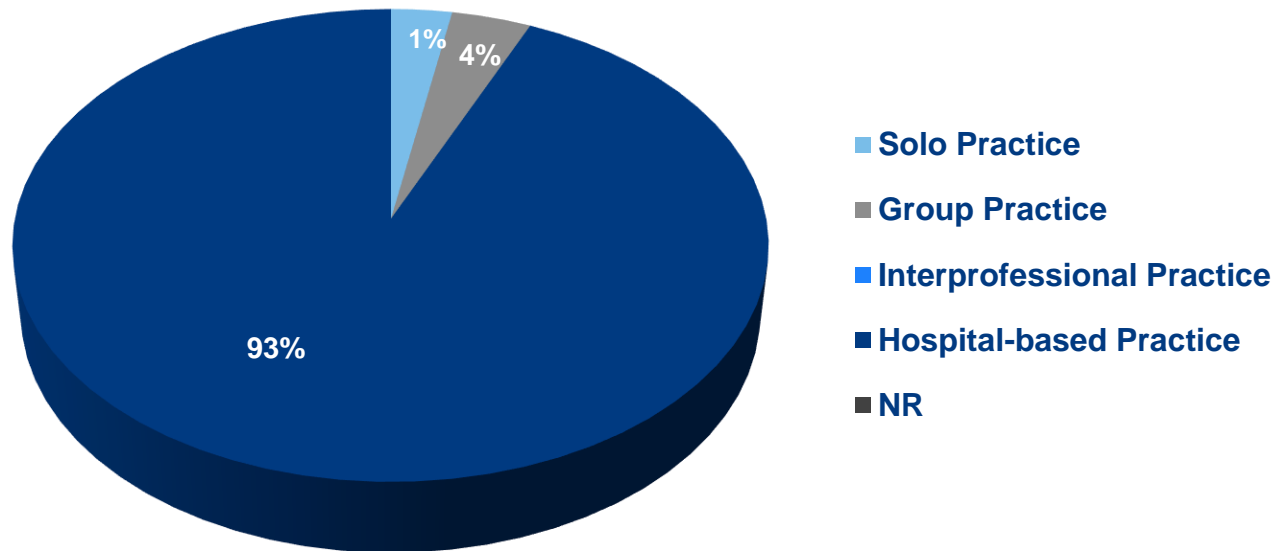


## Percentage by main work setting, 2017





## Percentage by practice organization, 2017





## Hours worked per week (excluding on-call), 2017

Activity	Hours worked per week
Direct patient care without teaching component	11.6
Direct patient care with teaching component	19.0
Teaching without patient care	2.7
Indirect patient care	3.2
Health facility committees	1.0
Administration	4.7
Research	1.8
Managing practice	0.5
Continued professional development	2.5
Other	0.7
<b>TOTAL HOURS PER WEEK</b>	<b>47.7</b>



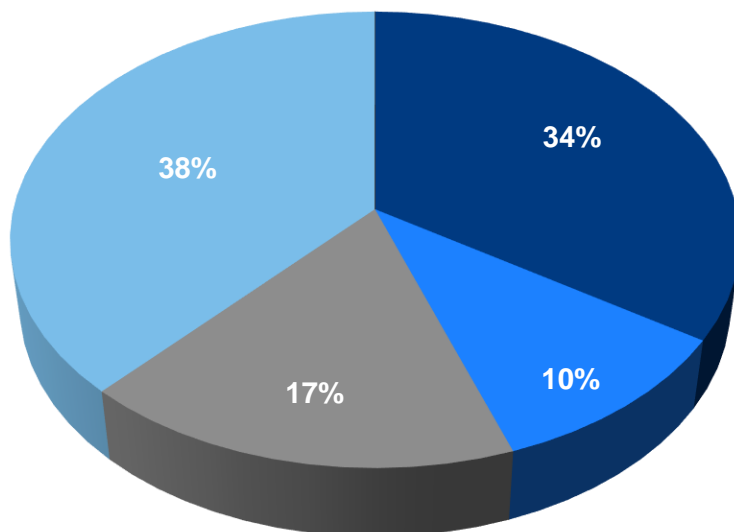
## On-call duty hours per month, 2017

- 49% provide on-call services
- On-call hours = 81 hours/month
- On-call hours spent in direct patient care = 23 hours/month



## Percentage by remuneration method

### Primary payment method<sup>1</sup> in 2017



- 90% + fee-for-service
- 90% + salary
- 90% + other\*
- Blended
- NR

\* Other includes capitation, sessional, contract and other methods

Average gross fee-for-service payment per physician for all medical specialties in 2015/16 (those earning at least \$60,000) = \$350,629<sup>2</sup>

Average percent overhead reported by Emergency Medicine specialists in 2017 = 13%<sup>3</sup>

<sup>1</sup> Source: 2017 CMA Workforce Survey. Canadian Medical Association

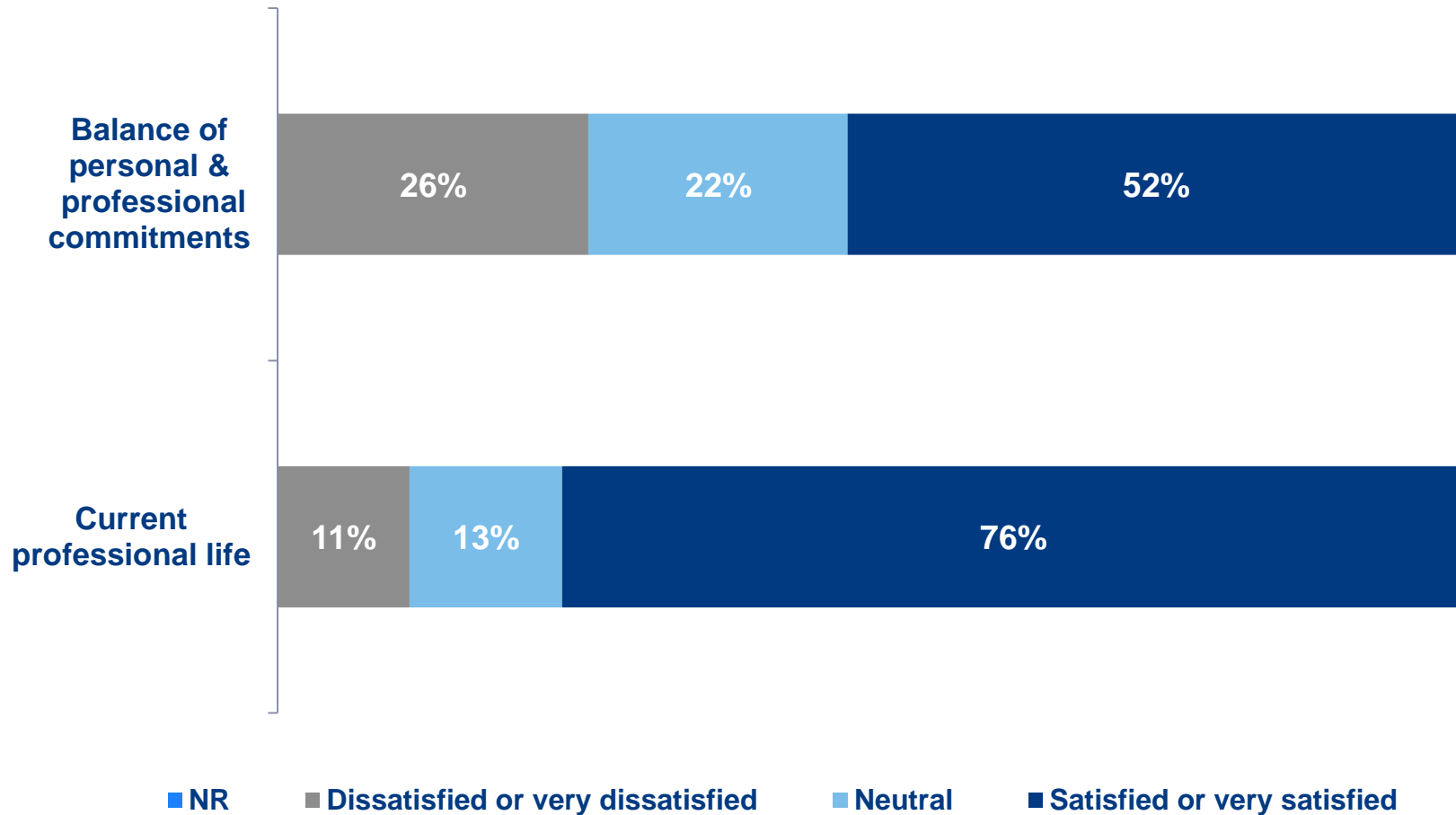
<sup>2</sup> National Physician Database, 2015/16, CIHI

<sup>3</sup> Source: 2017 CMA Workforce Survey. Canadian Medical Association





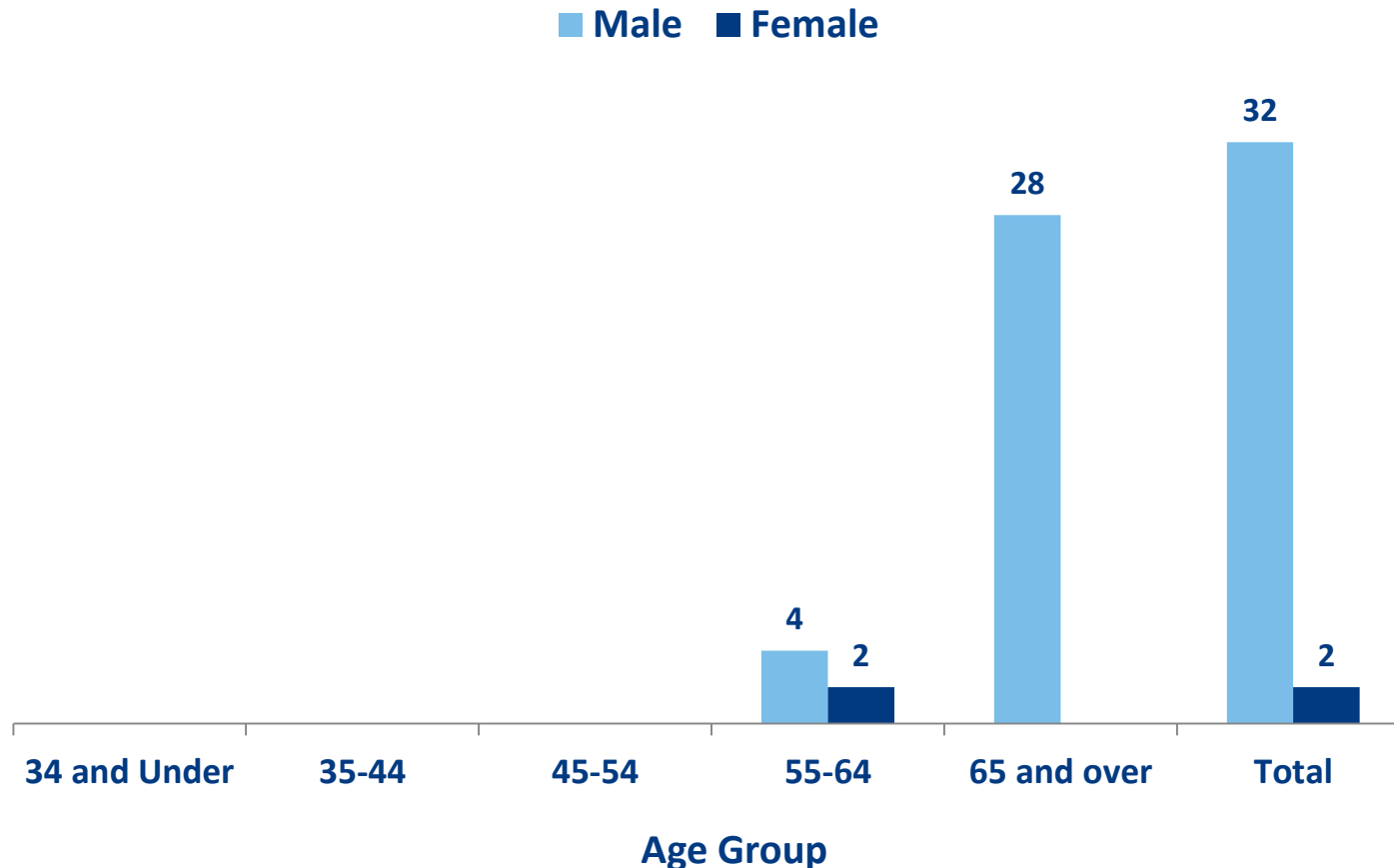
## Professional & work-life balance satisfaction, 2017



Source: 2017 CMA Workforce Survey. Canadian Medical Association



## Number of retirees during the three year period of 2014-2016

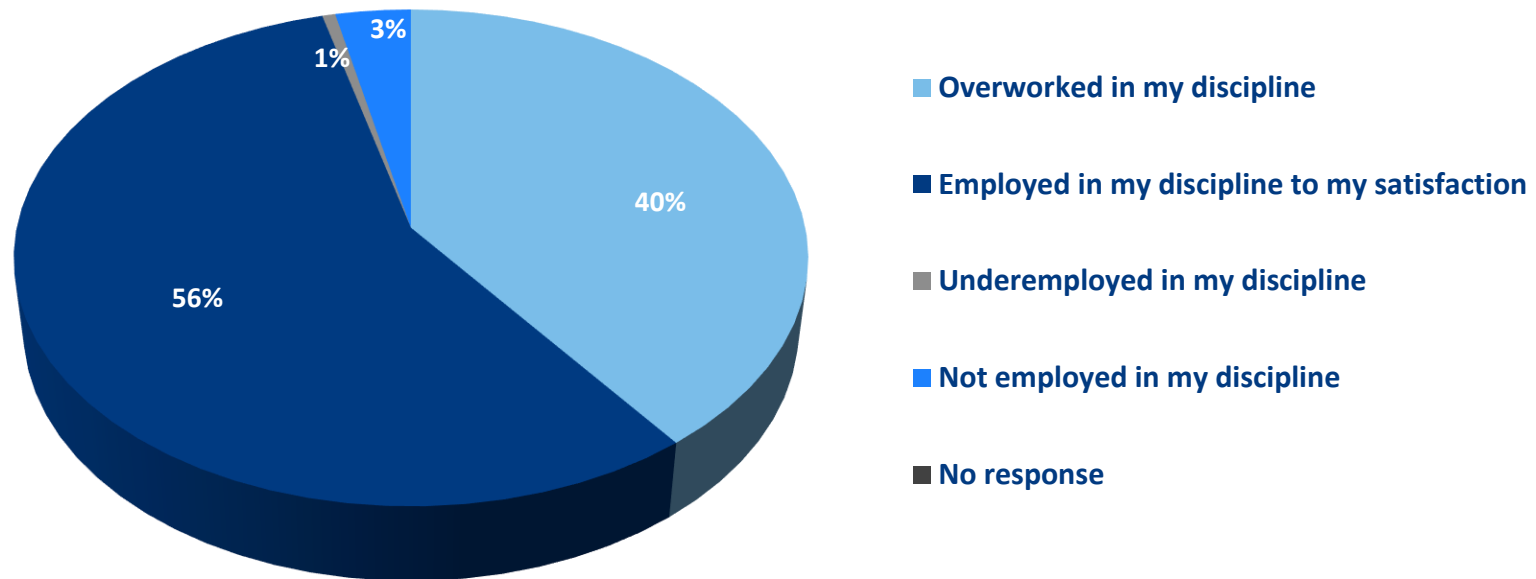


**Source: CMA Masterfile – year over year comparisons**

Note: “Retired” is based on giving up licence and therefore excludes those who have retired from clinical practice but are still licensed; those younger than 45 may include physicians who have temporarily given up their licence but return to practice at a later date.



## Employment situation, 2017





## Links to additional resources

- [Association of Faculties of Medicine of Canada](#)
- [Canadian Institute for Health Information](#)
- [Canadian Medical Association's Physician Data Centre](#)
- [Canadian Post-MD Education Registry \(CAPER\)](#)
- [College of Family Physicians of Canada](#)
- [National Physician Survey \(2004-2014\)](#)
- [Royal College of Physicians and Surgeons of Canada](#)