Anatomical Pathology Profile

Updated March 2018
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Anatomical pathology is the branch of medicine concerned with the study of the morphologic aspects of disease. Anatomical pathologists specialize in examining tissues removed by needle aspiration, surgical procedures or autopsy. They are responsible for diagnosing diseased tissue and investigating the mechanisms and development of disease. This may include the structural and physical changes that occur.

Anatomical pathology includes subspecialties that deal specifically with organ systems. These include: gynecological pathology; dermatopathology; gastrointestinal pathology; cardiovascular pathology; respiratory pathology; musculoskeletal pathology; renal pathology, genito-urinary pathology; endocrine pathology; ophthalmic pathology; E.N.T. pathology; and neuropathology. It also involves specific laboratory methods such as cytopathology, immunopathology and electron microscopy, or certain types of clinical cases including pediatric pathology and forensic pathology.
GENERAL INFORMATION

Upon completion of medical school, to become certified in this specialty requires an additional 5 years of approved residency training. This training includes: 1 year of basic clinical training; 3 years of approved residency training in anatomical pathology (including training in surgical pathology and autopsy pathology); a minimum of 3 months' training in cytopathology; and training in forensic pathology and pediatric pathology. A further year of approved residency is also required.

For further details on training requirements please go to:

Royal College of Physicians and Surgeons of Canada

Canadian Association of Pathologists

Source: Pathway evaluation program
Total number & number/100,000 population by province, 2017

<table>
<thead>
<tr>
<th>Province/Territory</th>
<th>Physicians</th>
<th>Phys/100k pop'n</th>
</tr>
</thead>
<tbody>
<tr>
<td>Newfoundland/Labrador</td>
<td>19</td>
<td>3.6</td>
</tr>
<tr>
<td>Prince Edward Island</td>
<td>3</td>
<td>2.0</td>
</tr>
<tr>
<td>Nova Scotia</td>
<td>35</td>
<td>3.7</td>
</tr>
<tr>
<td>New Brunswick</td>
<td>19</td>
<td>2.5</td>
</tr>
<tr>
<td>Quebec</td>
<td>166</td>
<td>2.0</td>
</tr>
<tr>
<td>Ontario</td>
<td>382</td>
<td>2.7</td>
</tr>
<tr>
<td>Manitoba</td>
<td>43</td>
<td>3.2</td>
</tr>
<tr>
<td>Saskatchewan</td>
<td>24</td>
<td>2.1</td>
</tr>
<tr>
<td>Alberta</td>
<td>121</td>
<td>2.8</td>
</tr>
<tr>
<td>British Columbia</td>
<td>113</td>
<td>2.4</td>
</tr>
<tr>
<td>Territories</td>
<td>0</td>
<td>0.0</td>
</tr>
<tr>
<td><strong>CANADA</strong></td>
<td><strong>925</strong></td>
<td><strong>2.5</strong></td>
</tr>
</tbody>
</table>

Source: 2017 CMA Masterfile
Number/100,000 population, 1995 to 2017

Source: 1995-2017 CMA Masterfiles
Number by gender & year, 1995 to 2017

Source: 1995-2017 CMA Masterfiles
Percentage by gender & age, 2017

Excludes those where gender or age is unknown.
Source: 2017 CMA Masterfile
Number by gender & age, 2017

- **65+**
  - Female: 48
  - Male: 89
- **55-64**
  - Female: 123
  - Male: 180
- **45-54**
  - Female: 110
  - Male: 137
- **35-44**
  - Female: 94
  - Male: 79
- **<35**
  - Female: 12
  - Male: 11

Excludes those where gender or age is unknown.

Source: 2017 CMA Masterfile
Percentage by main work setting, 2017

- Academic Health Sciences Centre: 44%
- Community Hospital: 26%
- Non-AHSC Teaching Hospital: 16%
- Free-standing Lab/Diag Clinic: 8%
- Other Hospital: 3%
- Admin/Corp office: 2%
- Community Clinic/Health-centre: 2%

Source: 2017 CMA Workforce Survey. Canadian Medical Association
Percentage by practice organization, 2017

- Solo Practice: 5%
- Group Practice: NR
- Interprofessional Practice: 5%
- Hospital-based Practice: 90%

Source: 2017 CMA Workforce Survey. Canadian Medical Association
# Hours worked per week (excluding on-call), 2017

<table>
<thead>
<tr>
<th>Activity</th>
<th>Hours worked per week</th>
</tr>
</thead>
<tbody>
<tr>
<td>Direct patient care without teaching component</td>
<td>21.3</td>
</tr>
<tr>
<td>Direct patient care with teaching component</td>
<td>4.6</td>
</tr>
<tr>
<td>Teaching without patient care</td>
<td>2.5</td>
</tr>
<tr>
<td>Indirect patient care</td>
<td>11.3</td>
</tr>
<tr>
<td>Health facility committees</td>
<td>1.0</td>
</tr>
<tr>
<td>Administration</td>
<td>3.4</td>
</tr>
<tr>
<td>Research</td>
<td>1.4</td>
</tr>
<tr>
<td>Managing practice</td>
<td>1.1</td>
</tr>
<tr>
<td>Continued professional development</td>
<td>2.3</td>
</tr>
<tr>
<td>Other</td>
<td>2.2</td>
</tr>
<tr>
<td><strong>TOTAL HOURS PER WEEK</strong></td>
<td><strong>51.0</strong></td>
</tr>
</tbody>
</table>

Source: 2017 CMA Workforce Survey. Canadian Medical Association
On-call duty hours per month, 2017

- 72% provide on-call services
- On-call hours = 75 hours/month
- On-call hours spent in direct patient care = 11 hours/month

Source: 2017 CMA Workforce Survey. Canadian Medical Association
Percentage by remuneration method

Primary payment method in 2017

- 90% + fee-for-service: 28%
- 90% + salary: 27%
- 90% + other*: 10%
- Blended: 32%
- NR: 2%

* Other includes capitation, sessional, contract or other methods
Professional & work-life balance satisfaction, 2017

Balance of personal & professional commitments
- Dissatisfied or very dissatisfied: 2%
- Neutral: 28%
- Satisfied or very satisfied: 18%
- Unspecified: 52%

Current professional life
- Dissatisfied or very dissatisfied: 15%
- Neutral: 13%
- Satisfied or very satisfied: 72%

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

Source: 2017 CMA Workforce Survey. Canadian Medical Association
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