Dermatology Profile
**TABLE OF CONTENTS**

- **General Information**
  - Total number & number/100,000 population by province, 2017
  - Number/100,000 population, 1995-2017
  - Number by gender & year, 1995-2017
  - Percentage by gender & age, 2017
  - Number by gender & age, 2017
  - Percentage by main work setting, 2017
  - Percentage by practice organization, 2017
  - Hours worked per week (excluding on-call), 2017
  - On-call duty hours per month, 2017
  - Percentage by remuneration method
  - Professional & work-life balance satisfaction, 2017
  - Number of retirees during the three year period of 2014-2016
  - Employment situation, 2017
  - Links to additional resources

- **Slide**: 3-5
  - 6
  - 7
  - 8
  - 9
  - 10
  - 11
  - 12
  - 13
  - 14
  - 15
  - 16
  - 17
  - 18
  - 19
GENERAL INFORMATION

Dermatology is a diverse specialty that deals with benign and malignant disorders of the skin, mouth, external genitalia, hair and nails, as well as a number of sexually transmitted diseases.

Dermatologists engage in a variety of procedural work and have the opportunity to combine cognitive skills with surgical skills. They also have expertise in the care of normal skin and in the prevention of skin disease and skin cancers.

A dermatologist must be knowledgeable about:

• all primary diseases of the skin and cutaneous manifestations of diseases in internal medicine, pediatrics, and other specialties;
• normal and disturbed immunological cutaneous mechanisms;
• venereal diseases;
• Dermatopathology;

Source: Pathway evaluation program
GENERAL INFORMATION

- dermatologic therapy, including a knowledge of percutaneous absorption, the pharmacology of topical and systemic medications, and light and ionizing radiation;
- the rational use of dermatological surgical procedures, including cryotherapy and more extensive cutaneous surgery.

Upon completion of medical school, it takes an additional 5 years of Royal College-approved residency training to become certified in dermatology. This period must include:

- 2 years of basic clinical training (including a minimum of 12 months of internal medicine and 3 months of pediatrics, and must include specific rotations in rheumatology, infectious diseases and oncology). In addition, rotations in plastic surgery, emergency medicine and pathology are recommended;
GENERAL INFORMATION

• 3 years of Royal College-approved residency training in dermatology, at least 1 year of which must be spent in a general hospital with not less than 6 months on in-patient or consultation services. Up to 1 year of this training may include full time clinical or basic science research related to dermatology or dermatopathology, provided both the resident and the site of training are approved by the program director.

For further details on training requirements please go to:

Royal College of Physicians and Surgeons of Canada

Canadian Dermatology Association

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>9</td>
<td>1.7</td>
</tr>
<tr>
<td>Prince Edward Island</td>
<td>0</td>
<td>0.0</td>
</tr>
<tr>
<td>Nova Scotia</td>
<td>16</td>
<td>1.7</td>
</tr>
<tr>
<td>New Brunswick</td>
<td>10</td>
<td>1.3</td>
</tr>
<tr>
<td>Quebec</td>
<td>205</td>
<td>2.5</td>
</tr>
<tr>
<td>Ontario</td>
<td>210</td>
<td>1.5</td>
</tr>
<tr>
<td>Manitoba</td>
<td>16</td>
<td>1.2</td>
</tr>
<tr>
<td>Saskatchewan</td>
<td>9</td>
<td>0.8</td>
</tr>
<tr>
<td>Alberta</td>
<td>57</td>
<td>1.3</td>
</tr>
<tr>
<td>British Columbia</td>
<td>67</td>
<td>1.4</td>
</tr>
<tr>
<td>Territories</td>
<td>0</td>
<td>0.0</td>
</tr>
<tr>
<td>CANADA</td>
<td>599</td>
<td>1.6</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

**Gender**
- Male: 51%
- Female: 49%

**Age Group**
- <35: 6%
- 35 - 44: 22%
- 45 - 54: 24%
- 55 - 64: 25%
- 65+: 23%

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

<table>
<thead>
<tr>
<th>Age Group</th>
<th>Female</th>
<th>Male</th>
</tr>
</thead>
<tbody>
<tr>
<td>&lt;35</td>
<td>27</td>
<td>9</td>
</tr>
<tr>
<td>35-44</td>
<td>80</td>
<td>50</td>
</tr>
<tr>
<td>45-54</td>
<td>74</td>
<td>64</td>
</tr>
<tr>
<td>55-64</td>
<td>62</td>
<td>83</td>
</tr>
<tr>
<td>65+</td>
<td>41</td>
<td>90</td>
</tr>
</tbody>
</table>

Excludes those where gender or age is unknown.
Source: 2017 CMA Masterfile
Percentage by main work setting, 2017

- Private Office/Clinic: 63%
- Academic Health Sciences Centre: 19%
- Community Clinic/Health-centre: 4%
- Non-AHSC Teaching Hospital: 4%
- Non-AHSC Teaching Hospital: 4%
- Community Hospital: 3%
- Admin/Corp office: 2%

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

- Solo Practice: 26%
- Group Practice: 37%
- Interprofessional Practice: 9%
- Hospital-based Practice: 28%
- NR

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>25.3</td>
</tr>
<tr>
<td>Direct patient care with teaching component</td>
<td>10.7</td>
</tr>
<tr>
<td>Teaching without patient care</td>
<td>1.3</td>
</tr>
<tr>
<td>Indirect patient care</td>
<td>7.3</td>
</tr>
<tr>
<td>Health facility committees</td>
<td>0.4</td>
</tr>
<tr>
<td>Administration</td>
<td>0.8</td>
</tr>
<tr>
<td>Research</td>
<td>2.8</td>
</tr>
<tr>
<td>Managing practice</td>
<td>2.7</td>
</tr>
<tr>
<td>Continued professional development</td>
<td>3.0</td>
</tr>
<tr>
<td>Other</td>
<td>0.1</td>
</tr>
<tr>
<td><strong>TOTAL HOURS PER WEEK</strong></td>
<td><strong>54.4</strong></td>
</tr>
</tbody>
</table>
On-call duty hours per month, 2010*

- Up to 120 hrs/month: 18%
- More than 120, up to 180 hrs/month: 6%
- More than 180, up to 240 hrs/month: 5%
- More than 240 hrs/month: 9%
- No response: 62%

Time spent on call in direct patient care = 14 hrs./month

*Most recent available data for this specialty
Source: 2010 National Physician Survey. CFPC, CMA, Royal College
Percentage by remuneration method

Primary payment method in 2017

- 90% + fee-for-service: 76%
- 90% + salary: 7%
- 90% + other*: 14%
- Blended: 2%
- NR

* Other includes capitation, sessional, contract and other methods

Average gross fee-for-service payment per physician for Dermatology in 2015/16 (those earning at least $60,000) = $431,204

Average percent overhead reported by all medical specialists in 2017** = 35%

**Most recent available data for this specialty

1 Source: 2017 CMA Workforce Survey. Canadian Medical Association
2 National Physician Database, 2015/16, CIHI
3 Source: 2017 CMA Workforce Survey. Canadian Medical Association
Professional & work-life balance satisfaction, 2017

Balance of personal & professional commitments
- 17% Dissatisfied or very dissatisfied
- 27% Neutral
- 56% Satisfied or very dissatisfied

Current professional life
- 7% Dissatisfied or very dissatisfied
- 14% Neutral
- 79% Satisfied or very dissatisfied

Source: 2017 CMA Workforce Survey. Canadian Medical Association
Number of retirees during the three year period of 2014-2016

Age Group

<table>
<thead>
<tr>
<th>Age Group</th>
<th>Male</th>
<th>Female</th>
</tr>
</thead>
<tbody>
<tr>
<td>34 and Under</td>
<td>1</td>
<td>1</td>
</tr>
<tr>
<td>35-44</td>
<td>1</td>
<td>2</td>
</tr>
<tr>
<td>45-54</td>
<td>29</td>
<td>8</td>
</tr>
<tr>
<td>65 and over</td>
<td>31</td>
<td>10</td>
</tr>
</tbody>
</table>
| Total       | 51   | 28     

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

- Overworked in my discipline
- Employed in my discipline to my satisfaction
- Underemployed in my discipline
- Not employed in my discipline
- No response

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