Clinical Immunology/Allergy Profile
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GENERAL INFORMATION

Clinical immunology/allergy focuses on disorders characterized by defective responses of the body's immune system.

This broad field generally includes atopic diseases, asthma, anaphylaxis, rhinitis, eczema, adverse reactions to environmental agents of all types (e.g., drugs, foods, insect stings, industrial exposures), immune deficiency diseases (both acquired and congenital), immunotherapy of all types (biological, pharmacological, physical), defects in host defense, the immunologic aspects of systemic diseases, and problems related to autoimmune disease, organ transplantation or malignancies of the immune system.
GENERAL INFORMATION

Clinical immunologist/allergists are expected to achieve competence in the utilization and interpretation of common laboratory procedures relevant to clinical immunology/allergy. They spend a good deal of time directly seeing and caring for patients who are generally healthy and tend to respond positively to therapy. Chronic or recurrent patient problems make the role of this specialist as much preventive and educational as diagnostic and therapeutic.

This specialty has the ability to readily diagnose and effectively treat the majority of their patients. It has little pressure associated with it in the sense that few patients ever require hospitalization. This specialty has reasonable schedule demands, largely offering regular and predictable hours.

Source: Pathway evaluation program
GENERAL INFORMATION

Upon completion of medical school, only candidates certificated by the Royal College in internal medicine or pediatrics may be eligible for the Certificate of Special Competence in Clinical Immunology and Allergy. One must complete 2 years of approved residency in immunology and allergy, not more than one of which may be undertaken during training for certification in pediatrics or internal medicine.

For further details on training requirements please go to:

Royal College of Physicians and Surgeons of Canada

Canadian Society of Allergy and Clinical Immunology

Source: Pathway evaluation program
Total number & number/100,000 population by province, 2016

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<thead>
<tr>
<th>Province/Territory</th>
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<th>Phys/100k pop’n</th>
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Source: 2016 CMA Masterfile
Number/100,000 population, 1995 to 2016

Source: 2016 CMA Masterfile
Number by gender & year, 1995 to 2016

Source: 2016 CMA Masterfile
Percentage by gender & age, 2016

**Gender**
- Male: 59%
- Female: 41%

**Age Group**
- 35 - 44: 31%
- 45 - 54: 26%
- 55 - 64: 17%
- 65+: 19%
- <35: 7%

Source: 2016 CMA Masterfile
Number by gender & age, 2016

Source: 2016 CMA Masterfile
Percentage by main work setting, 2013

- Private Office/Clinic: 55%
- Academic Health Sciences Centre: 18%
- Non-AHSC Teaching Hospital: 7%
- Admin/Corp office: 3%
- Other: 3%

* 2014 data for this specialty is not available

Source: 2013 National Physician Survey. CFPC, CMA, Royal College
Percentage by remuneration method

Primary payment method\(^1\) in 2013

- 90% + fee-for-service: 52%
- 90% + salary: 42%
- 90% + other*: 6%
- Blended: NR

* Other includes capitation, sessional, contract and other methods

Average gross fee-for-service payment per physician for Internal Medicine & subspecialties in 2014/15 (those earning at least $60,000) = $403,485\(^2\)

Average percent overhead reported by Internal Medicine specialists in 2010 = 22%\(^3\)

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\(^1\) National Physician Survey, 2013, CFPC, CMA, Royal College
\(^2\) National Physician Database, 2014/15, CIHI
\(^3\) National Physician Survey, 2010, CFPC, CMA, Royal College
Professional & work-life balance satisfaction, 2013

Balance of personal & professional commitments
- Dissatisfied or very dissatisfied: 6%
- Neutral: 26%
- Satisfied or very satisfied: 23%
- Other: 44%

Current professional life
- Dissatisfied or very dissatisfied: 4%
- Neutral: 7%
- Satisfied or very satisfied: 16%
- Other: 74%

Source: 2013 National Physician Survey. CFPC, CMA, Royal College
Number of retirees during the three year period of 2013-2015

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.
# Total & Ministry funded postgraduate MD trainees in 2014/15

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<tr>
<th>Faculty of Medicine</th>
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* Includes Clinical immunology/allergy (Int Med) and Clinical immunology/allergy (Ped)

Source: 2014/15 Annual Census of Post-MD Trainees, CAPER
PGY-4 & exiting postgraduate-MD trainees in 2014/15

Source: 2014/15 Annual Census of Post-MD Trainees, CAPER

IMG – International Medical Graduates
GCMS – Graduates of Canadian Medical Schools
Postgraduate-MD trainees in 2014/15

- Total of 16 PGY-4 Clinical Immunology and Allergy trainees representing 53% of all Clinical Immunology and Allergy trainees.
- Total of 30 Clinical Immunology and Allergy trainees representing 0.2% of all Ministry funded trainees.
- Total of 5 visa trainees in Clinical Immunology and Allergy.
- Total of 15 Clinical Immunology and Allergy trainees completed postgraduate training in 2014.

Source: 2014/15 Annual Census of Post-MD Trainees, CAPER
Location of 2013 postgraduate-MD exits in 2015

Of the 17 exits in 2013, all were known to be practising in Canada

Source: 2014/15 Annual Census of Post-MD Trainees, CAPER
Stress associated with finding employment at end of residency

**FM resident**
- Not stressful: 43%
- Somewhat stressful: 42%
- Very stressful: 8%

**Other spec res**
- Not stressful: 20%
- Somewhat stressful: 50%
- Very stressful: 25%

Source: 2012 National Physician Survey of residents. CFPC, CMA, Royal College
Links to the Organizations Supplying Information for this Document

- National Physician Survey
- Canadian Medical Association
- Association of Faculties of Medicine of Canada
- Royal College of Physicians and Surgeons of Canada
- College of Family Physicians of Canada
- Canadian Institute for Health Information