Obstetrics/Gynecology Profile

Updated March 2018
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GENERAL INFORMATION

Obstetrics/gynecology is a specialty that encompasses medical, surgical, and obstetrical and gynecologic knowledge and skills for the prevention, diagnosis and management of a broad range of conditions affecting women's general and reproductive health. In actual fact, it is the combination of two specialties: obstetrics, which provides care during pregnancy, labour and puerperium (the time directly after childbirth); and gynecology, which focuses on the health of the female reproductive system, including the diagnosis and treatment of disorders and diseases.

Obstetrics/gynecology offers the ability to subspecialize in the areas of gynecological oncology, reproductive endocrinology and infertility or maternal-fetal medicine. Other areas of sub-specialization include contraception, adolescent gynecology and endoscopy.

Source: Pathway evaluation program
GENERAL INFORMATION

It offers physicians the opportunity to practice other skills such as preventive medicine, prenatal care, detection of sexually transmitted diseases, Pap test screening, family planning, menopause, endometriosis, osteoporosis, and surgery (both invasive and endoscopy). It also allows the physician to pursue other interests such as endocrinology, psychiatry, fertility, oncology and adolescent obstetrics and gynecology. Obstetrician/gynecologists work in private offices or in hospitals, clinics or academic health centres.

Upon completion of medical school, to become certified in obstetrics/gynecology requires an additional 5 years of Royal College-approved residency training. This training includes:

• 1 year of basic clinical training in obstetrics/gynecology; internal medicine; general surgery; emergency medicine/critical care medicine; psychiatry; palliative medicine; neonatal-perinatal medicine; obstetrics/gynecology ambulatory clinics; anesthesia; and sexual medicine/pelvic pain.

Source: Pathway evaluation program
GENERAL INFORMATION

• 1 year core experience in obstetrics/gynecology as a senior resident minimum of 9 months of subspecialty experience in maternal/fetal medicine, gynecological reproductive endocrinology & infertility, gynecological oncology;
• 1 year rotations in 4 of the following: ambulatory obstetrics/gynecology; community-based obstetrics/gynecology; endoscopic surgery, gynecological pathology; colposcopy; critical care medicine; gynecological oncology; gynecological urology; maternal/fetal medicine; obstetric/gynecology ultrasound; pelvic pain investigation and management; research in obstetrics/gynecology; reproductive endocrinology & infertility; and sexual medicine;
• 3 month elective in areas listed above;
• 1 year Chief residency experience in obstetrics/gynecology.

For further details on training requirements please go to:

Royal College of Physicians and Surgeons of Canada

Society of Obstetricians and Gynaecologists of Canada

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>42</td>
<td>7.9</td>
</tr>
<tr>
<td>Prince Edward Island</td>
<td>8</td>
<td>5.3</td>
</tr>
<tr>
<td>Nova Scotia</td>
<td>68</td>
<td>7.2</td>
</tr>
<tr>
<td>New Brunswick</td>
<td>43</td>
<td>5.7</td>
</tr>
<tr>
<td>Quebec</td>
<td>514</td>
<td>6.2</td>
</tr>
<tr>
<td>Ontario</td>
<td>834</td>
<td>5.9</td>
</tr>
<tr>
<td>Manitoba</td>
<td>80</td>
<td>6.0</td>
</tr>
<tr>
<td>Saskatchewan</td>
<td>69</td>
<td>6.0</td>
</tr>
<tr>
<td>Alberta</td>
<td>230</td>
<td>5.4</td>
</tr>
<tr>
<td>British Columbia</td>
<td>278</td>
<td>5.8</td>
</tr>
<tr>
<td>Territories</td>
<td>6</td>
<td>5.0</td>
</tr>
<tr>
<td><strong>CANADA</strong></td>
<td><strong>2172</strong></td>
<td><strong>6.0</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

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

**Age Group**
- <35: 7%
- 35 - 44: 27%
- 45 - 54: 26%
- 55 - 64: 23%
- 65+: 17%

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>65+</td>
<td>66</td>
<td>295</td>
</tr>
<tr>
<td>55-64</td>
<td>205</td>
<td>274</td>
</tr>
<tr>
<td>45-54</td>
<td>370</td>
<td>193</td>
</tr>
<tr>
<td>35-44</td>
<td>462</td>
<td>103</td>
</tr>
<tr>
<td>&lt;35</td>
<td>144</td>
<td>15</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: 41%
- Academic Health Sciences Centre: 25%
- Community Hospital: 18%
- Non-AHSC Teaching Hospital: 11%
- Admin/Corp office: 1%
- Research Unit: 1%
- Community Clinic/Health-centre: 1%

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

- Solo Practice: 38%
- Group Practice: 25%
- Interprofessional Practice: 10%
- Hospital-based Practice: 26%
- NR: 1%

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>22.4</td>
</tr>
<tr>
<td>Direct patient care with teaching component</td>
<td>11.8</td>
</tr>
<tr>
<td>Teaching without patient care</td>
<td>1.6</td>
</tr>
<tr>
<td>Indirect patient care</td>
<td>5.7</td>
</tr>
<tr>
<td>Health facility committees</td>
<td>1.2</td>
</tr>
<tr>
<td>Administration</td>
<td>2.1</td>
</tr>
<tr>
<td>Research</td>
<td>1.3</td>
</tr>
<tr>
<td>Managing practice</td>
<td>1.5</td>
</tr>
<tr>
<td>Continued professional development</td>
<td>2.7</td>
</tr>
<tr>
<td>Other</td>
<td>1.0</td>
</tr>
<tr>
<td><strong>TOTAL HOURS PER WEEK</strong></td>
<td><strong>51.2</strong></td>
</tr>
</tbody>
</table>

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

- 85% provide on-call services
- On-call hours = 122 hours/month
- On-call hours spent in direct patient care = 62 hours/month

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

Primary payment method\(^1\) in 2017

- 66% 90% + salary
- 24% 90% + fee-for-service
- 6% 90% + other*
- 4% Blended
- 1% NR

* Other includes capitation, sessional, contract and other methods

Average gross fee-for-service payment per physician for Obstetrics/Gynecology in 2015/16 (those earning at least $60,000) = $403,168\(^2\)

Average percent overhead reported by Obstetricians/Gynecologists in 2017 = 30\%\(^3\)

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\(^1\) 2017 CMA Workforce Survey. Canadian Medical Association

\(^2\) National Physician Database, 2015/16, CIHI

\(^3\) 2017 CMA Workforce Survey. Canadian Medical Association
Professional & work-life balance satisfaction, 2017

Balance of personal & professional commitments
- Dissatisfied or very dissatisfied: 35%
- Neutral: 22%
- Satisfied or very satisfied: 43%

Current professional life
- Dissatisfied or very dissatisfied: 13%
- Neutral: 16%
- Satisfied or very satisfied: 71%

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

<table>
<thead>
<tr>
<th>Age Group</th>
<th>Male</th>
<th>Female</th>
</tr>
</thead>
<tbody>
<tr>
<td>34 and Under</td>
<td>2</td>
<td>1</td>
</tr>
<tr>
<td>35-44</td>
<td></td>
<td></td>
</tr>
<tr>
<td>45-54</td>
<td>9</td>
<td>9</td>
</tr>
<tr>
<td>55-64</td>
<td>53</td>
<td>9</td>
</tr>
<tr>
<td>65 and over</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Total</td>
<td>63</td>
<td>20</td>
</tr>
</tbody>
</table>

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: 5%
- Employed in my discipline to my satisfaction: 35%
- Underemployed in my discipline: 5%
- Not employed in my discipline: 3%
- No response: 5%

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