Otolaryngology Profile

Updated August 2018
# TABLE OF CONTENTS

<table>
<thead>
<tr>
<th>General Information</th>
<th>Slide</th>
</tr>
</thead>
<tbody>
<tr>
<td>Total number &amp; number/100,000 population by province, 2018</td>
<td>6</td>
</tr>
<tr>
<td>Number/100,000 population, 1995-2018</td>
<td>7</td>
</tr>
<tr>
<td>Number by gender &amp; year, 1995-2018</td>
<td>8</td>
</tr>
<tr>
<td>Percentage by gender &amp; age, 2018</td>
<td>9</td>
</tr>
<tr>
<td>Number by gender &amp; age, 2018</td>
<td>10</td>
</tr>
<tr>
<td>Percentage by main work setting, 2017</td>
<td>11</td>
</tr>
<tr>
<td>Percentage by practice organization, 2017</td>
<td>12</td>
</tr>
<tr>
<td>Hours worked per week (excluding on-call), 2017</td>
<td>13</td>
</tr>
<tr>
<td>On-call duty hours per month, 2017</td>
<td>14</td>
</tr>
<tr>
<td>Percentage by remuneration method</td>
<td>15</td>
</tr>
<tr>
<td>Professional &amp; work-life balance satisfaction, 2017</td>
<td>16</td>
</tr>
<tr>
<td>Number of retirees during the three year period of 2014-2016</td>
<td>17</td>
</tr>
<tr>
<td>Employment situation, 2017</td>
<td>18</td>
</tr>
<tr>
<td>Links to additional resources</td>
<td>19</td>
</tr>
</tbody>
</table>
GENERAL INFORMATION

Otolaryngology is concerned with the screening, diagnosis and management of medical and surgical disorders of the ear, the upper respiratory and upper alimentary systems, and related structures of the head and neck. It therefore includes the ear, nose and throat and most of the head and neck. With the exception of eye-related disorders (ophthalmology) and lesions of the brain (neurology and neurosurgery), otolaryngologists treat virtually all diseases and lesions above the shoulders. These specialists receive training in otology, rhinology, laryngology, allergy, head & neck surgery, facial surgery, plastic & reconstructive surgery, and bronchoesophagology.

Otolaryngologists must possess a sound knowledge in the general principles of medicine and surgery. During the course of training, the otolaryngology resident must acquire satisfactory knowledge of the principles common to all surgical practice.

Source: Pathway evaluation program
Otolaryngology embraces some components of neurology, neurosurgery, plastic surgery, dermatology, respirology, pathology and oral surgery. It requires clinical competence and detailed knowledge of the scientific rationale for the medical and surgical management of otolaryngologic disorders in patients of all ages. This includes knowledge of the techniques of craniofacial surgery, neurotologic surgery, facial cosmetic surgery and reconstructive surgery of the head and neck.

Upon completion of medical school, it takes an additional 5 years of approved training that must include:

• 2 years of core training in surgery, in which up to 1 year must be spent in otolaryngology or related designated specialties. This initial period of postgraduate training allows the acquisition of knowledge, skills and attitudes underlying the basics to the practice of surgery in general and preparatory to further training in otolaryngology

• 3 years of RCPSC-approved resident training in otolaryngology, which may include 6 months in clinical or basic research.
GENERAL INFORMATION

For further details on training requirements please go to:

Royal College of Physicians and Surgeons of Canada

Canadian Society of Otolaryngology
# Total number & number/100,000 population by province, 2018

<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>13</td>
<td>2.5</td>
</tr>
<tr>
<td>Prince Edward Island</td>
<td>3</td>
<td>2.0</td>
</tr>
<tr>
<td>Nova Scotia</td>
<td>26</td>
<td>2.7</td>
</tr>
<tr>
<td>New Brunswick</td>
<td>13</td>
<td>1.7</td>
</tr>
<tr>
<td>Quebec</td>
<td>238</td>
<td>2.8</td>
</tr>
<tr>
<td>Ontario</td>
<td>278</td>
<td>1.9</td>
</tr>
<tr>
<td>Manitoba</td>
<td>23</td>
<td>1.7</td>
</tr>
<tr>
<td>Saskatchewan</td>
<td>13</td>
<td>1.1</td>
</tr>
<tr>
<td>Alberta</td>
<td>59</td>
<td>1.4</td>
</tr>
<tr>
<td>British Columbia</td>
<td>97</td>
<td>2.0</td>
</tr>
<tr>
<td>Territories</td>
<td>1</td>
<td>0.8</td>
</tr>
<tr>
<td><strong>CANADA</strong></td>
<td><strong>764</strong></td>
<td><strong>2.1</strong></td>
</tr>
</tbody>
</table>

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

- Male: 77%
- Female: 23%

Age Group

- <35: 7%
- 35 - 44: 28%
- 45 - 54: 27%
- 55 - 64: 20%
- 65+: 18%

Excludes those where gender or age is unknown.
Source: 2018 CMA Masterfile
Number by gender & age, 2018

- **<35**
  - Female: 25
  - Male: 24

- **35-44**
  - Female: 61
  - Male: 146

- **45-54**
  - Female: 54
  - Male: 147

- **55-64**
  - Female: 20
  - Male: 125

- **65+**
  - Female: 6
  - Male: 125

*Excludes those where gender or age is unknown.*

Source: 2018 CMA Masterfile
Percentage by main work setting, 2017

- Private Office/Clinic: 56%
- Academic Health Sciences Centre: 35%
- Community Hospital: 7%
- Admin/Corp office: 2%

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

- Solo Practice: 29%
- Group Practice: 42%
- Interprofessional Practice: 6%
- Hospital-based Practice: 22%
- 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>25.4</td>
</tr>
<tr>
<td>Direct patient care with teaching component</td>
<td>9.8</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>0.6</td>
</tr>
<tr>
<td>Administration</td>
<td>1.1</td>
</tr>
<tr>
<td>Research</td>
<td>1.4</td>
</tr>
<tr>
<td>Managing practice</td>
<td>2.4</td>
</tr>
<tr>
<td>Continued professional development</td>
<td>2.2</td>
</tr>
<tr>
<td>Other</td>
<td>0.4</td>
</tr>
<tr>
<td><strong>TOTAL HOURS PER WEEK</strong></td>
<td><strong>50.6</strong></td>
</tr>
</tbody>
</table>

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

- 77% provide on-call services
- On-call hours = 151 hours/month
- On-call hours spent in direct patient care = 26 hours/month

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

Primary payment method in 2017

- 90% + fee-for-service: 83%
- 90% + salary: 2%
- 90% + other*: 1%
- Blended: 14%
- NR: 2%

* Other includes capitation, sessional, contract and other methods

Average gross fee-for-service payment per physician for Otolaryngology in 2015/16 (those earning at least $60,000) = $446,658

Average percent overhead reported by Otolaryngologists in 2017 = 32%

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: 26%
  - Neutral: 28%
  - Satisfied or very satisfied: 45%

- Current professional life
  - Dissatisfied or very dissatisfied: 9%
  - Neutral: 24%
  - Satisfied or very satisfied: 67%

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

- Overworked in my discipline: 4%
- Employed in my discipline to my satisfaction: 35%
- Underemployed in my discipline: 10%
- Not employed in my discipline: 51%
- No response: 0%

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