Plastic Surgery Profile
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GENERAL INFORMATION

Plastic surgery includes the management of major burns, reconstruction of congenital malformations, cosmetic surgery and other minor surgical procedures. Although many plastic surgeons concentrate on cosmetic procedures, there is a great opportunity for major reconstructive surgery that can be done with an understanding of the principles of wound healing, skin flaps, and skin grafting. There is ample opportunity for innovation and synthesis of new approaches (e.g., craniofacial surgery, microsurgery, fat transfers and artificial skin).

Plastic surgeons treat a wide variety of clinical disorders including congenital and developmental problems, trauma, cancer and degenerative diseases. Often their goal is not only to improve appearances but also to restore function. Depending on the type of practice, many procedures are done under local anesthetic on an outpatient basis.

Source: Pathway evaluation program
GENERAL INFORMATION

Practitioners characterize plastic surgery as a highly creative specialty, requiring good aesthetic sense, the ability to think in three-dimension and appreciation of detail. Upon completion of medical school, to become certified in plastic surgery requires an additional 5 years of Royal College-approved residency training. This training includes:

- a minimum of 2 years of foundational training in the core aspects of surgery related to plastic surgery, including rotations in: plastic surgery; general surgery; orthopedic surgery; critical care; otorhinolaryngology; vascular surgery; neurosurgery; pediatric surgery; surgical ophthalmology; surgical oncology; oral surgery; and urology;
- 3 years of progressive senior residency training in plastic surgery, which must incorporate the principle of graded increasing responsibility. This period includes rotations as a senior or chief resident, research or elective time. It must also include exposure to burn surgery, hand surgery, aesthetic surgery, craniofacial trauma surgery, and reconstructive surgery of the breast, trunk, head and neck, lower limb and upper limb, and pediatric plastic surgery.

Source: Pathway evaluation program
GENERAL INFORMATION

For further details on training requirements please go to:

Royal College of Physicians and Surgeons of Canada

Canadian Society of Plastic Surgeons

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>5</td>
<td>0.9</td>
</tr>
<tr>
<td>Prince Edward Island</td>
<td>2</td>
<td>1.3</td>
</tr>
<tr>
<td>Nova Scotia</td>
<td>20</td>
<td>2.1</td>
</tr>
<tr>
<td>New Brunswick</td>
<td>14</td>
<td>1.8</td>
</tr>
<tr>
<td>Quebec</td>
<td>152</td>
<td>1.8</td>
</tr>
<tr>
<td>Ontario</td>
<td>230</td>
<td>1.6</td>
</tr>
<tr>
<td>Manitoba</td>
<td>17</td>
<td>1.3</td>
</tr>
<tr>
<td>Saskatchewan</td>
<td>17</td>
<td>1.5</td>
</tr>
<tr>
<td>Alberta</td>
<td>68</td>
<td>1.6</td>
</tr>
<tr>
<td>British Columbia</td>
<td>90</td>
<td>1.9</td>
</tr>
<tr>
<td>Territories</td>
<td>0</td>
<td>0.0</td>
</tr>
<tr>
<td><strong>CANADA</strong></td>
<td><strong>615</strong></td>
<td><strong>1.7</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
Excludes those where gender or age is unknown.
Source: 2017 CMA Masterfile
Number by gender & age, 2017

- **65+**: 10 Female, 81 Male
- **55-64**: 17 Female, 138 Male
- **45-54**: 29 Female, 104 Male
- **35-44**: 66 Female, 114 Male
- **<35**: 13 Female, 22 Male

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

- Non-AHSC Teaching Hospital: 30%
- Academic Health Sciences Centre: 30%
- Private Office/Clinic: 19%
- Community Hospital: 18%
- Other: 3%

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

- Solo Practice: 35%
- Group Practice: 9%
- Interprofessional Practice: 3%
- Hospital-based Practice: 53%
- NR: 0%

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>27.3</td>
</tr>
<tr>
<td>Direct patient care with teaching component</td>
<td>11.0</td>
</tr>
<tr>
<td>Teaching without patient care</td>
<td>1.8</td>
</tr>
<tr>
<td>Indirect patient care</td>
<td>6.2</td>
</tr>
<tr>
<td>Health facility committees</td>
<td>0.8</td>
</tr>
<tr>
<td>Administration</td>
<td>2.6</td>
</tr>
<tr>
<td>Research</td>
<td>1.1</td>
</tr>
<tr>
<td>Managing practice</td>
<td>1.9</td>
</tr>
<tr>
<td>Continued professional development</td>
<td>2.1</td>
</tr>
<tr>
<td>Other</td>
<td>0.8</td>
</tr>
<tr>
<td><strong>TOTAL HOURS PER WEEK</strong></td>
<td><strong>55.5</strong></td>
</tr>
</tbody>
</table>

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

- 81% provide on-call services
- On-call hours = 136 hours/month
- On-call hours spent in direct patient care = 37 hours/month

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

Primary payment method\(^1\) in 2017

- 90% + fee-for-service: 74%
- 90% + salary: 14%
- 90% + other*: 11%
- Blended: NR

* Other includes capitation, sessional, contract and other methods

Average gross fee-for-service payment per physician for Plastic Surgery in 2015/16 (those earning at least $60,000) = $391,425\(^2\)

Average percent overhead reported by Plastic Surgeons in 2017 = 31%\(^3\)

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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: 42%
- Neutral: 19%
- Satisfied or very satisfied: 39%

Current professional life

- Dissatisfied or very dissatisfied: 12%
- Neutral: 11%
- Satisfied or very satisfied: 77%

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>1</td>
<td>1</td>
</tr>
<tr>
<td>35-44</td>
<td>1</td>
<td>1</td>
</tr>
<tr>
<td>45-54</td>
<td>1</td>
<td></td>
</tr>
<tr>
<td>55-64</td>
<td>26</td>
<td></td>
</tr>
<tr>
<td>65 and over</td>
<td>28</td>
<td></td>
</tr>
<tr>
<td>Total</td>
<td>56</td>
<td>1</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

- 56% Employed in my discipline to my satisfaction
- 2% Overworked in my discipline
- 5% Underemployed in my discipline
- 2% Not employed in my discipline
- 5% 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