

General Surgery Profile

Updated August 2018

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GENERAL INFORMATION

The general surgeon is trained to provide surgical care for the whole patient. This includes making a diagnosis; preoperative, operative and postoperative management of the patient; and the surgical treatment of the:

- alimentary tract;
- abdomen and its contents, including the pelvis;
- breast, skin and soft tissue; and
- endocrine system.

It includes head and neck surgery, pediatric surgery, surgical critical care, surgical oncology, trauma and burns, transplants and vascular surgery.

The exact profile of a general surgeon's practice may vary depending on whether the practice is in an academic centre, an urban community or a more rural centre.



GENERAL INFORMATION

In rural practice, some surgeons may do gynecologic, urologic, orthopedic and ENT surgeries. In some academic centres, a general surgeon might limit his/her practice to one subspecialty.

General surgery tends to be a varied specialty, where the activities of a general surgeon involve time in the operating room, office, emergency department and the intensive care unit. General surgical practice requires expertise in communication and collaboration, teaching and research, health care management and continuing professional development.

After completing medical school, to become a general surgeon requires an additional 5 years of training in an Royal College-approved program. Some schools offer a 6-year program, while others offer an optional PGY6 year.



GENERAL INFORMATION

The resident must acquire a thorough knowledge of the theoretical basis of general surgery, including its foundations in the basic medical sciences and research. Training should incorporate the principle of graded increasing responsibility. This must include at least 36 months of general surgery rotations, of which at least one year is spent as a senior or chief resident.

For further details on training requirements please go to:

[Royal College of Physicians and Surgeons of Canada](#)

[Canadian Association of General Surgeons](#)



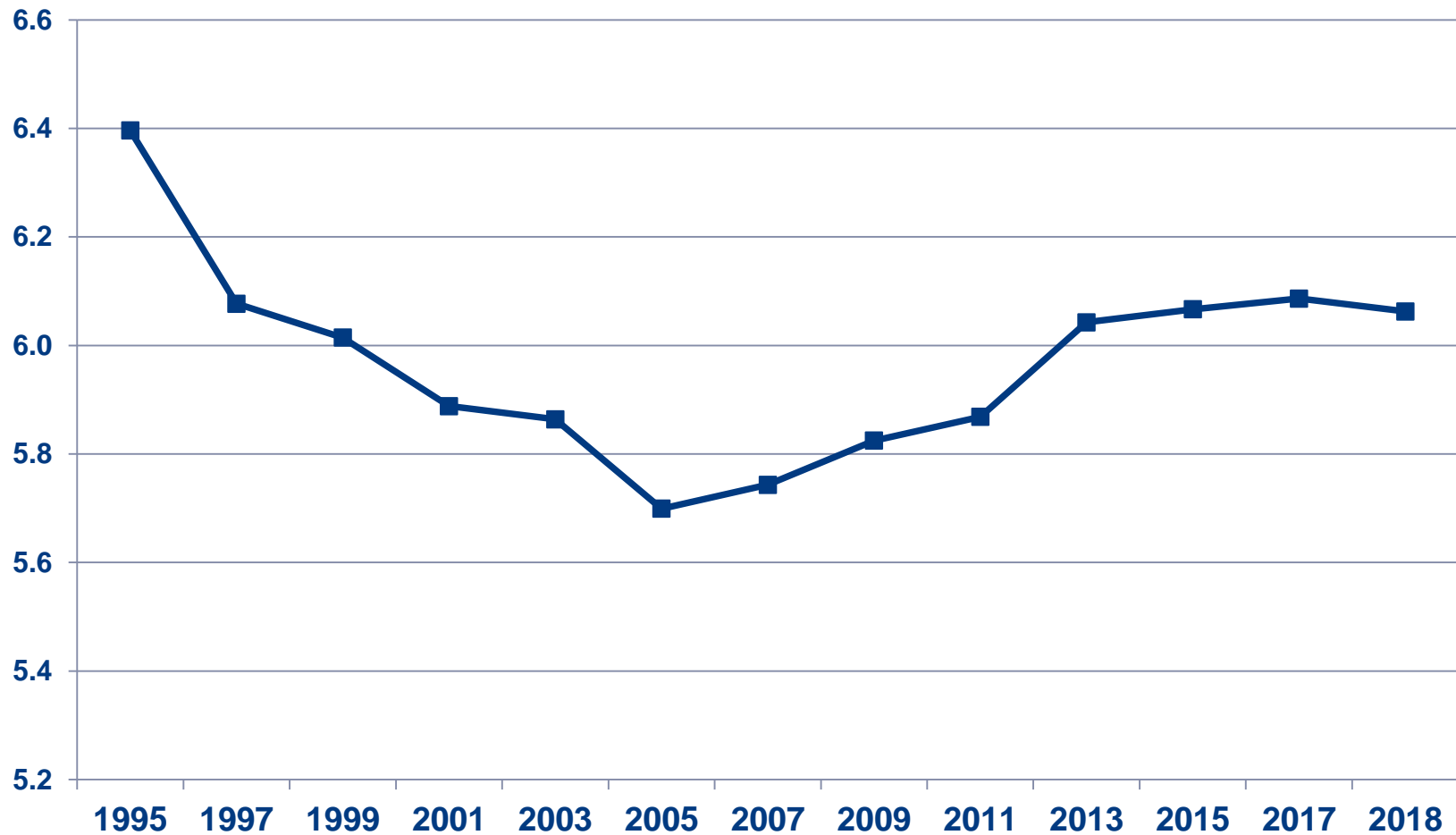
Total number & number/100,000 population by province, 2018

Province/Territory	Physicians	Phys/100k pop'n
Newfoundland/Labrador	44	8.3
Prince Edward Island	10	6.5
Nova Scotia	68	7.1
New Brunswick	48	6.3
Quebec	593	7.0
Ontario	831	5.8
Manitoba	74	5.5
Saskatchewan	77	6.6
Alberta	204	4.7
British Columbia	284	5.9
Territories	8	6.6
CANADA	2241	6.1

Source: 2018 CMA Masterfile



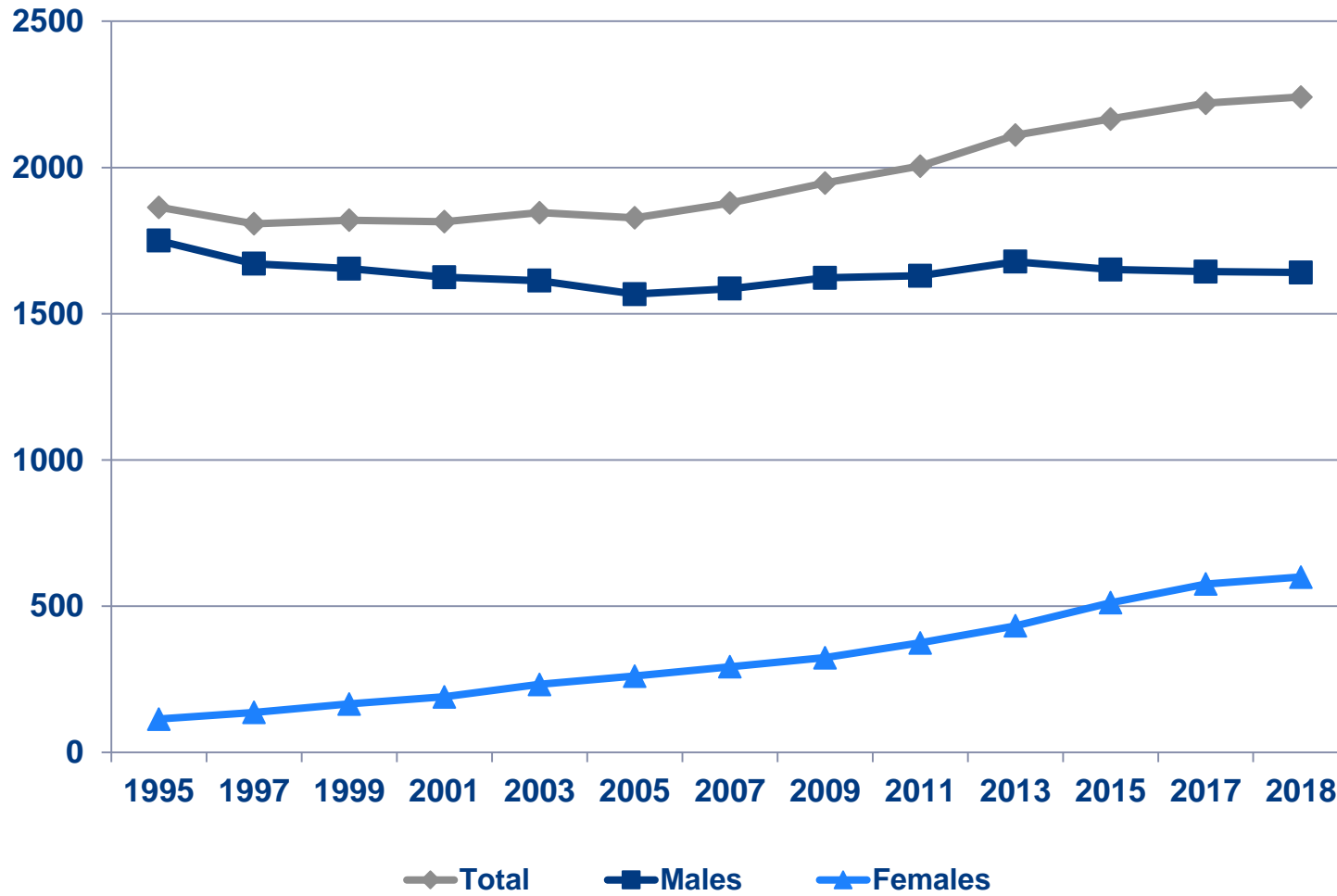
Number/100,000 population, 1995 to 2018



Source: 1995-2018 CMA Masterfiles



Number by gender & year, 1995 to 2018

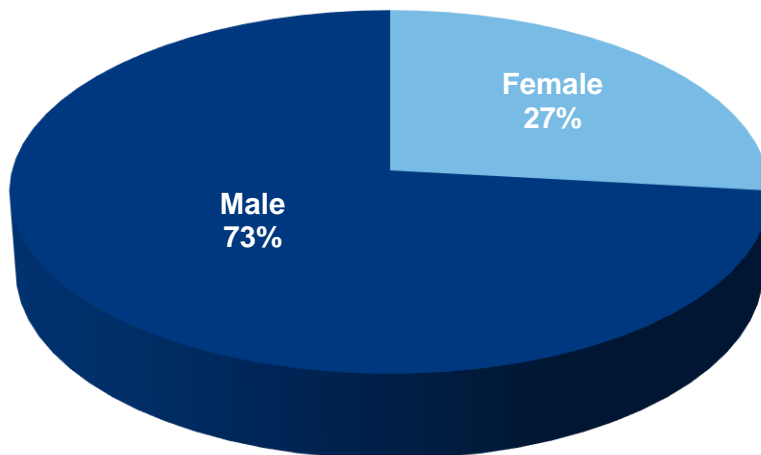


Source: 1995-2018 CMA Masterfiles

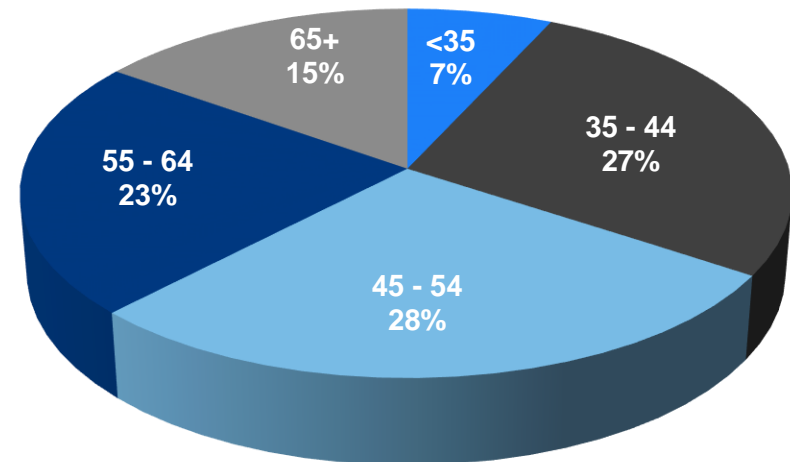


Percentage by gender & age, 2018

Gender



Age Group

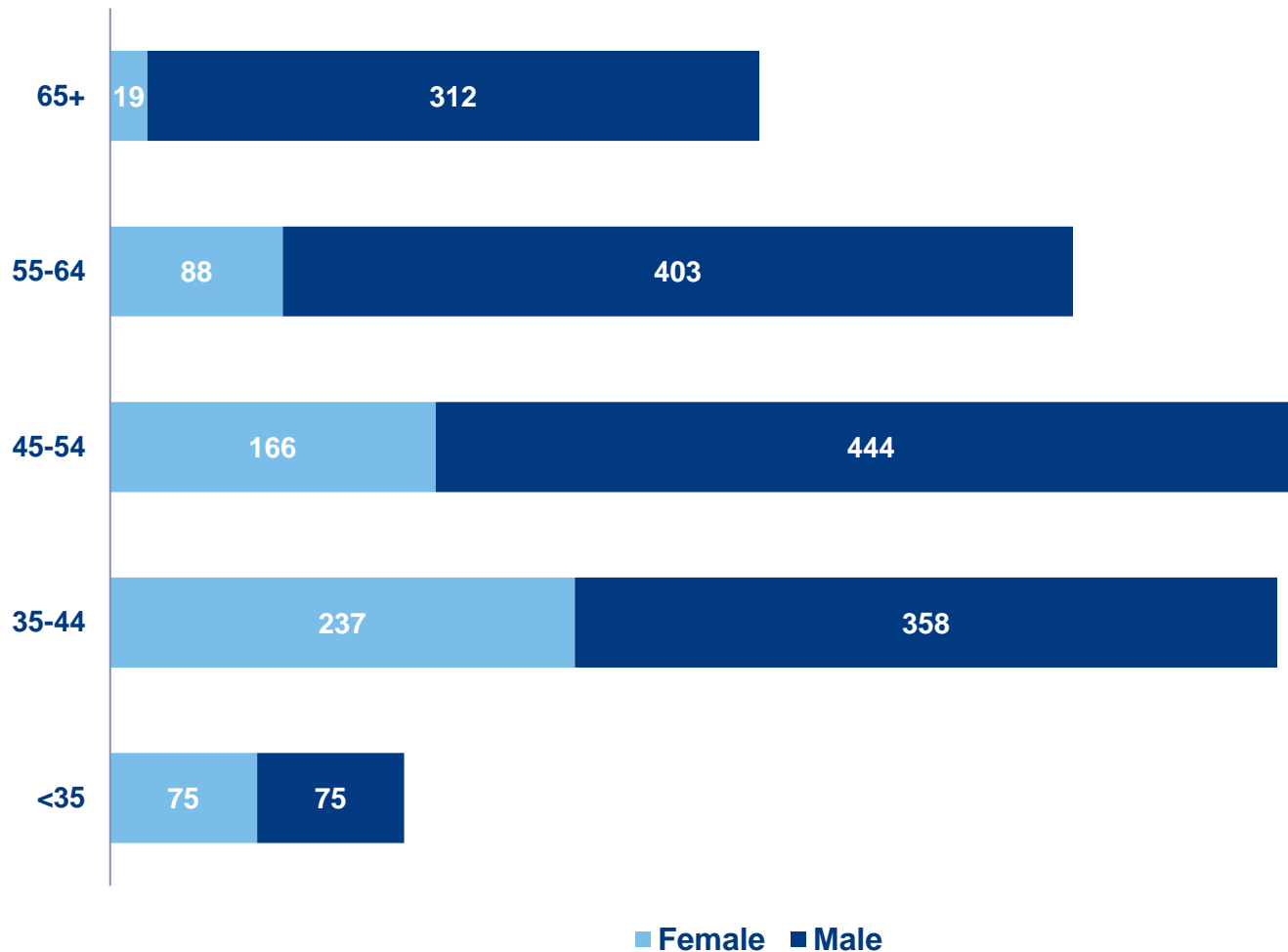


Excludes those where gender or age is unknown.

Source: 2018 CMA Masterfile



Number by gender & age, 2018

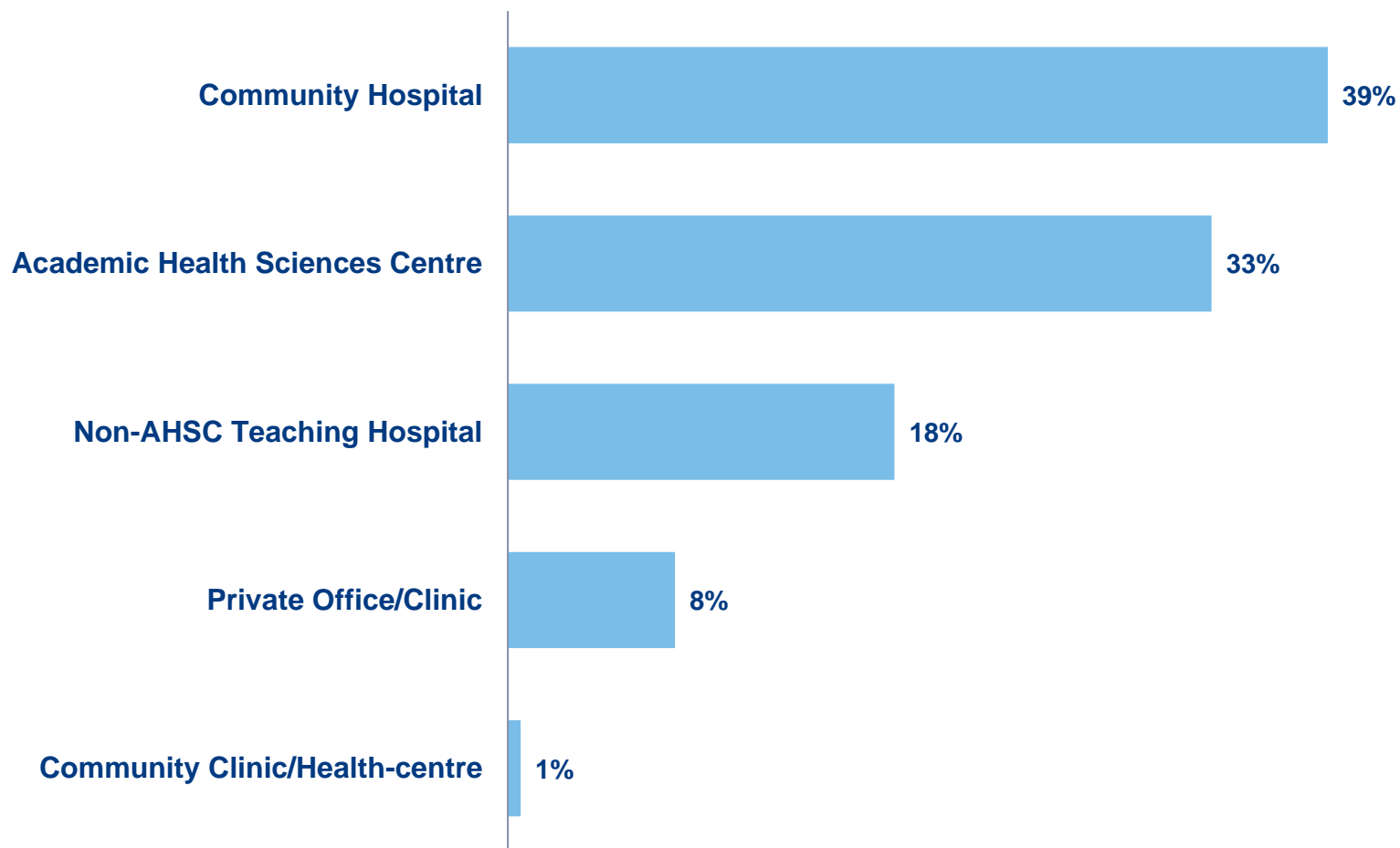


Excludes those where gender or age is unknown.

Source: 2018 CMA Masterfile

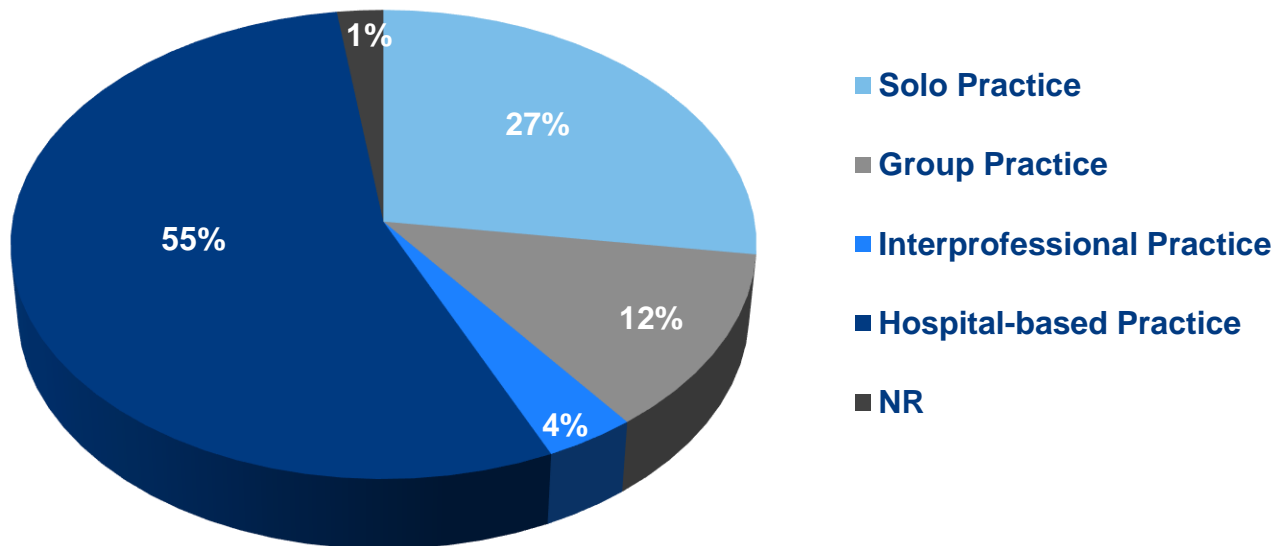


Percentage by main work setting, 2017





Percentage by practice organization, 2017





Hours worked per week (excluding on-call), 2017

Activity	Hours worked per week
Direct patient care without teaching component	26.1
Direct patient care with teaching component	13.3
Teaching without patient care	2.0
Indirect patient care	5.7
Health facility committees	1.2
Administration	3.0
Research	1.5
Managing practice	1.4
Continued professional development	2.8
Other	0.5
TOTAL HOURS PER WEEK	57.5



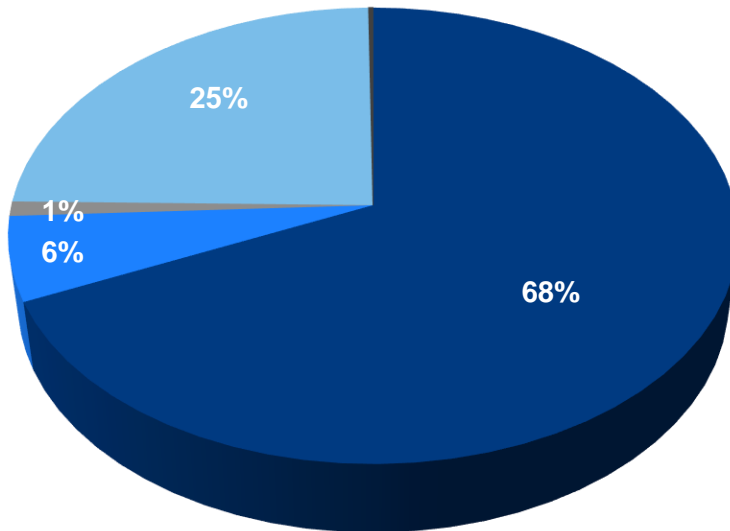
On-call duty hours per month, 2017

- 94% provide on-call services
- On-call hours = 147 hours/month
- On-call hours spent in direct patient care = 65 hours/month



Percentage by remuneration method

Primary payment method¹ in 2017



- 90% + fee-for-service
- 90% + salary
- 90% + other*
- Blended
- NR

* Other includes capitation, sessional, contract and other methods

Average gross fee-for-service payment per physician for General Surgery in 2015/16 (those earning at least \$60,000) = \$432,116²

Average percent overhead reported by General Surgeons in 2017 = 23%³

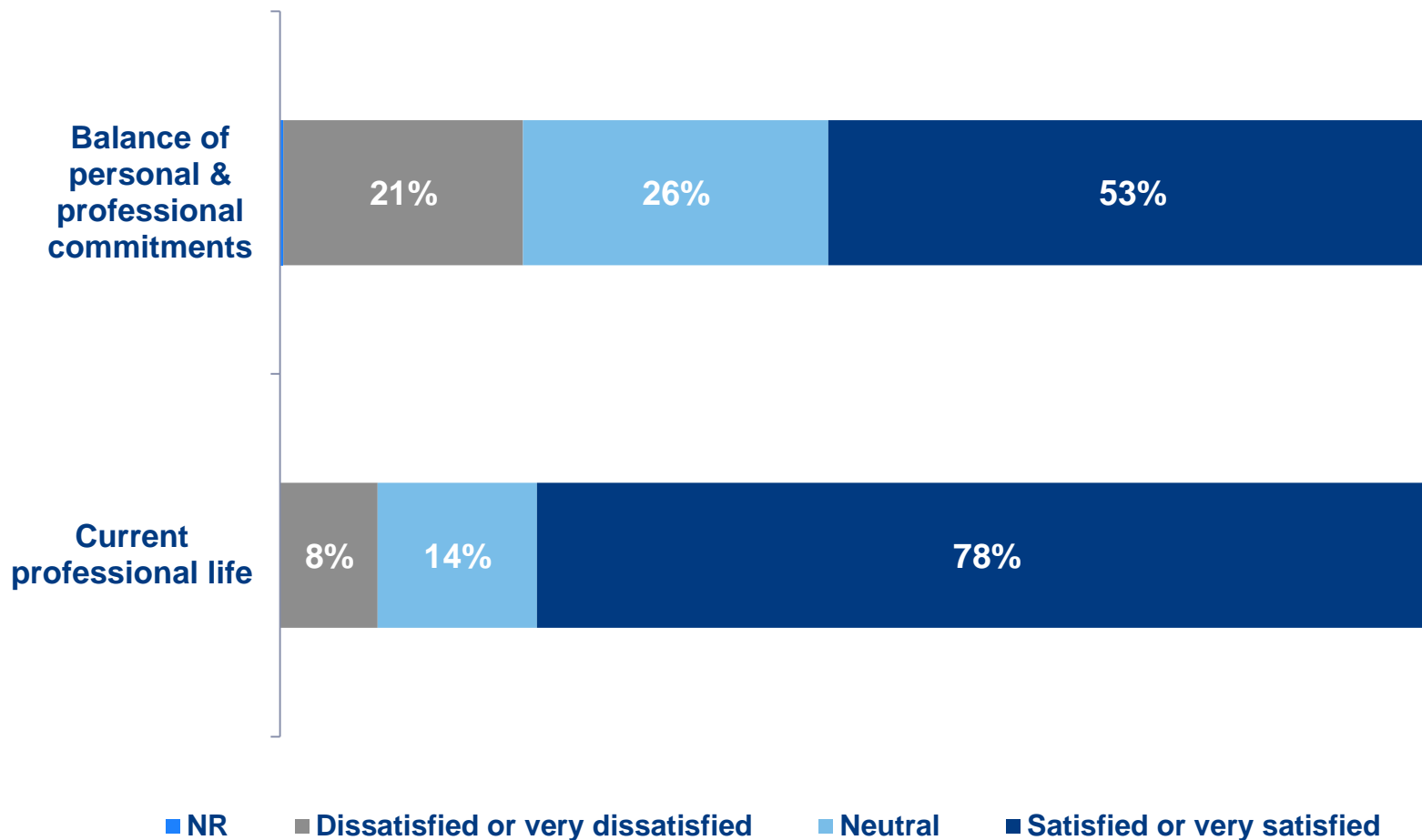
¹ 2017 CMA Workforce Survey. Canadian Medical Association

² National Physician Database, 2015/16, CIHI

³ 2017 CMA Workforce Survey. Canadian Medical Association

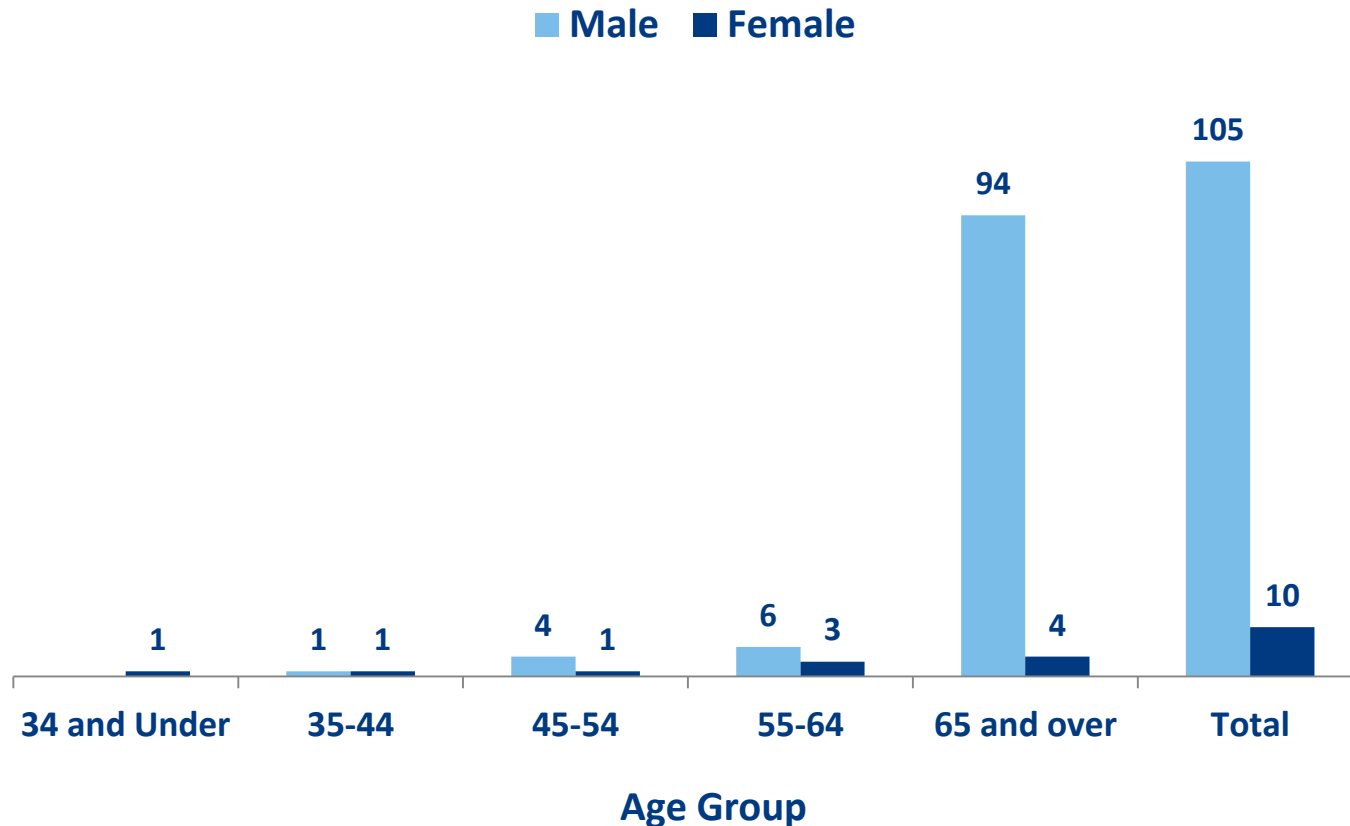


Professional & work-life balance satisfaction, 2017





Number of retirees during the three year period of 2014-2016

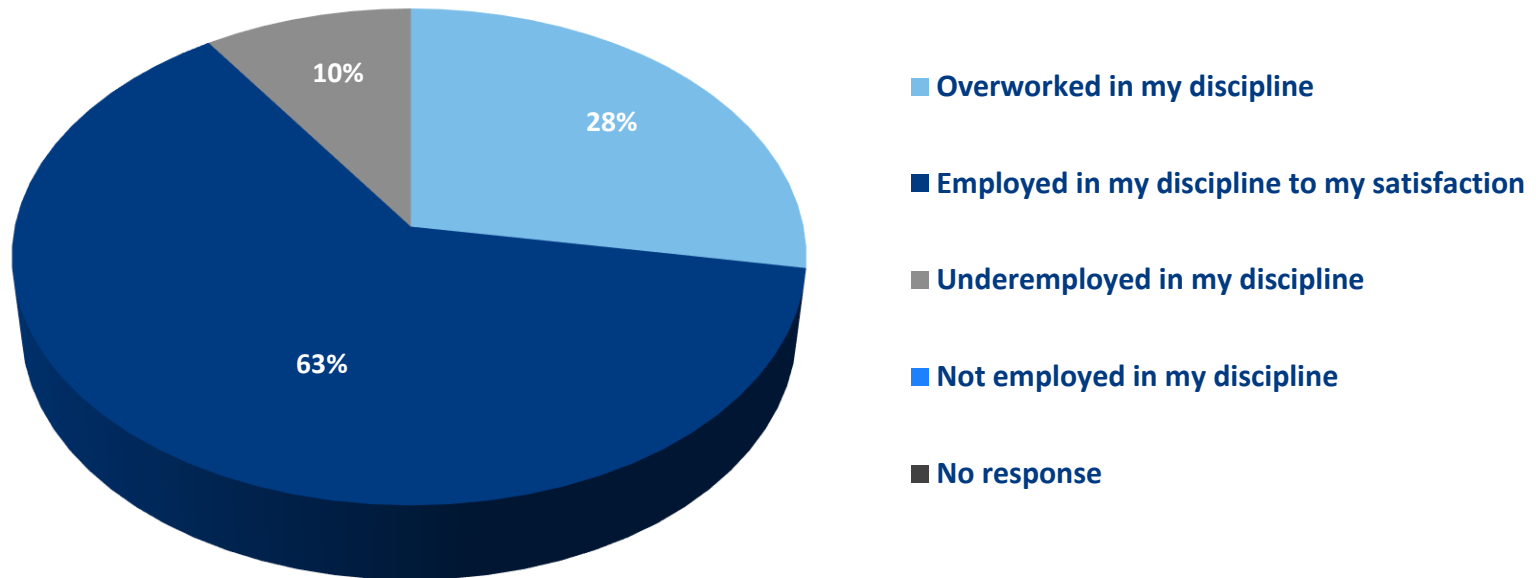


Source: CMA Masterfile – year over year comparisons

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





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](#)