General Surgery
Profile

Updated August 2018
# TABLE OF CONTENTS

- General Information
- Total number & number/100,000 population by province, 2018
- Number/100,000 population, 1995-2018
- Number by gender & year, 1995-2018
- Percentage by gender & age, 2018
- Number by gender & age, 2018
- Percentage by main work setting, 2017
- Percentage by practice organization, 2017
- Hours worked per week (excluding on-call), 2017
- On-call duty hours per month, 2017
- Percentage by remuneration method
- Professional & work-life balance satisfaction, 2017
- Number of retirees during the three year period of 2014-2016
- Employment situation, 2017
- Links to additional resources

**Slide**

- 3-5
- 6
- 7
- 8
- 9
- 10
- 11
- 12
- 13
- 14
- 15
- 16
- 17
- 18
- 19
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.

Source: Pathway evaluation program
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.

Source: Pathway evaluation program
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

Source: Pathway evaluation program
# 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>44</td>
<td>8.3</td>
</tr>
<tr>
<td>Prince Edward Island</td>
<td>10</td>
<td>6.5</td>
</tr>
<tr>
<td>Nova Scotia</td>
<td>68</td>
<td>7.1</td>
</tr>
<tr>
<td>New Brunswick</td>
<td>48</td>
<td>6.3</td>
</tr>
<tr>
<td>Quebec</td>
<td>593</td>
<td>7.0</td>
</tr>
<tr>
<td>Ontario</td>
<td>831</td>
<td>5.8</td>
</tr>
<tr>
<td>Manitoba</td>
<td>74</td>
<td>5.5</td>
</tr>
<tr>
<td>Saskatchewan</td>
<td>77</td>
<td>6.6</td>
</tr>
<tr>
<td>Alberta</td>
<td>204</td>
<td>4.7</td>
</tr>
<tr>
<td>British Columbia</td>
<td>284</td>
<td>5.9</td>
</tr>
<tr>
<td>Territories</td>
<td>8</td>
<td>6.6</td>
</tr>
<tr>
<td><strong>CANADA</strong></td>
<td><strong>2241</strong></td>
<td><strong>6.1</strong></td>
</tr>
</tbody>
</table>

Source: 2018 CMA Masterfile
Number/100,000 population, 1995 to 2018

Source: 1995-2018 CMA Masterfiles
<table>
<thead>
<tr>
<th>Year</th>
<th>Total</th>
<th>Males</th>
<th>Females</th>
</tr>
</thead>
<tbody>
<tr>
<td>1995</td>
<td>2500</td>
<td>1500</td>
<td>1000</td>
</tr>
<tr>
<td>1997</td>
<td>2200</td>
<td>1400</td>
<td>800</td>
</tr>
<tr>
<td>1999</td>
<td>2000</td>
<td>1300</td>
<td>700</td>
</tr>
<tr>
<td>2001</td>
<td>1900</td>
<td>1200</td>
<td>700</td>
</tr>
<tr>
<td>2003</td>
<td>1800</td>
<td>1100</td>
<td>700</td>
</tr>
<tr>
<td>2005</td>
<td>1700</td>
<td>1000</td>
<td>700</td>
</tr>
<tr>
<td>2007</td>
<td>1600</td>
<td>900</td>
<td>700</td>
</tr>
<tr>
<td>2009</td>
<td>1500</td>
<td>800</td>
<td>700</td>
</tr>
<tr>
<td>2011</td>
<td>1400</td>
<td>700</td>
<td>700</td>
</tr>
<tr>
<td>2013</td>
<td>1300</td>
<td>600</td>
<td>700</td>
</tr>
<tr>
<td>2015</td>
<td>1200</td>
<td>500</td>
<td>700</td>
</tr>
<tr>
<td>2017</td>
<td>1100</td>
<td>400</td>
<td>700</td>
</tr>
<tr>
<td>2018</td>
<td>1000</td>
<td>300</td>
<td>700</td>
</tr>
</tbody>
</table>

Source: 1995-2018 CMA Masterfiles
Percentage by gender & age, 2018

**Gender**
- Male: 73%
- Female: 27%

**Age Group**
- <35: 7%
- 35 - 44: 27%
- 45 - 54: 28%
- 55 - 64: 23%
- 65+: 15%
- <35: 7%

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

- Community Hospital: 39%
- Academic Health Sciences Centre: 33%
- Non-AHSC Teaching Hospital: 18%
- Private Office/Clinic: 8%
- Community Clinic/Health-centre: 1%

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

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>26.1</td>
</tr>
<tr>
<td>Direct patient care with teaching component</td>
<td>13.3</td>
</tr>
<tr>
<td>Teaching without patient care</td>
<td>2.0</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>3.0</td>
</tr>
<tr>
<td>Research</td>
<td>1.5</td>
</tr>
<tr>
<td>Managing practice</td>
<td>1.4</td>
</tr>
<tr>
<td>Continued professional development</td>
<td>2.8</td>
</tr>
<tr>
<td>Other</td>
<td>0.5</td>
</tr>
<tr>
<td><strong>TOTAL HOURS PER WEEK</strong></td>
<td><strong>57.5</strong></td>
</tr>
</tbody>
</table>

Source: 2017 CMA Workforce Survey. Canadian Medical Association
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

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

Primary payment method\(^1\) in 2017

- 90% + fee-for-service: 68%
- 90% + salary: 25%
- 90% + other*: 1%
- Blended: 1%
- 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) = $432,116\(^2\)

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

Balance of personal & professional commitments
- Dissatisfied or very dissatisfied: 21%
- Neutral: 26%
- Satisfied or very satisfied: 53%

Current professional life
- Dissatisfied or very dissatisfied: 8%
- Neutral: 14%
- Satisfied or very satisfied: 78%

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>4</td>
<td>1</td>
</tr>
<tr>
<td>45-54</td>
<td>6</td>
<td>3</td>
</tr>
<tr>
<td>55-64</td>
<td>94</td>
<td>4</td>
</tr>
<tr>
<td>65 and over</td>
<td>105</td>
<td>10</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td>105</td>
<td>10</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

- 63% Employed in my discipline to my satisfaction
- 28% Underemployed in my discipline
- 10% Overworked in my discipline
- 10% Not employed in my discipline
- 10% 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