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# **General information**

Geriatric Medicine deals with the prevention, diagnosis, treatment, remedial and social aspects of illness in older people, mainly patients 75 years of age or more. Most certified specialists take academic positions in medical schools. A typical day consists of a mix of patient care activities, education/teaching, administration and research.

Specialists in geriatric medicine are expected to be competent consultants, with a well-founded knowledge of geriatrics, who are capable of establishing an effective professional relationship with older patients. Geriatricians work with other members of the health care team to prevent illness and restore an ill, disabled older person to a level of optimal ability and, wherever possible, return the person to an independent life at home.



# **General information**

Training to be a geriatrician is complex. Residents must demonstrate the knowledge, skills and attitudes relating to gender, culture and ethnicity pertinent to geriatric medicine. In addition, all residents must demonstrate an ability to incorporate gender, cultural and ethnic perspectives in research methodology, data presentation and analysis. Residents must be able to work effectively in acute hospitals, long-term care facilities and the community, including the older patient's home.

Only candidates certified by the Royal College of Physicians and Surgeons of Canada in internal medicine may be eligible for the Certificate of Special Competence in Geriatric Medicine.



# **General information**

Once certified in internal medicine, there is an additional 2 years of approved residency in geriatric medicine. This period must include: 1 year of approved clinical residency in geriatric medicine and 1 year of further residency (which may include 6 or 12 months of approved clinical residency in geriatric medicine or another related specialty); and 6 or 12 months of approved clinical or laboratory research training, relevant to geriatric medicine.

For further details on training requirements please go to: Royal College of Physicians and Surgeons of Canada

The Canadian Geriatrics Society



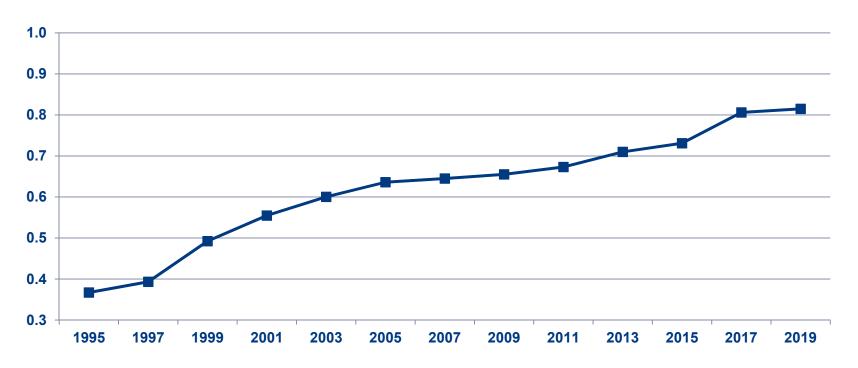
## Total number & number/100,000 population by province, 2019

Province/Territory	Physicians	Phys/100k pop'n
Newfoundland/Labrador	1	0.2
Prince Edward Island	1	0.6
Nova Scotia	11	1.1
New Brunswick	7	0.9
Quebec	83	1.0
Ontario	126	0.9
Manitoba	6	0.4
Saskatchewan	1	0.1
Alberta	20	0.5
British Columbia	48	1.0
Territories	0	0.0
CANADA	304	0.8

Source: 2019 CMA Masterfile 6



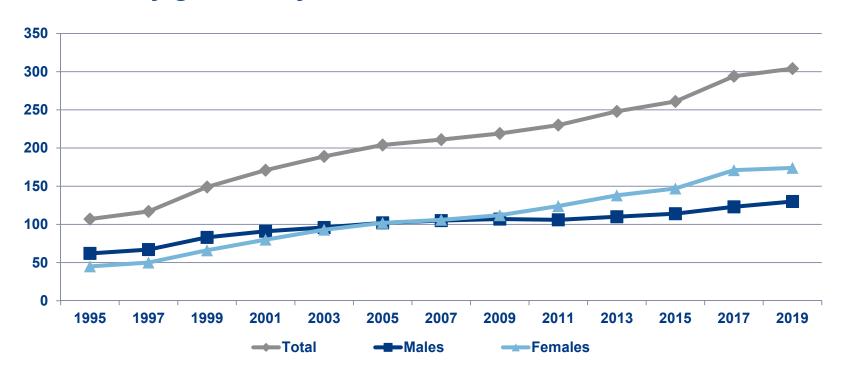
## Number/100,000 population, 1995 to 2019



Source: 1995-2019 CMA Masterfiles



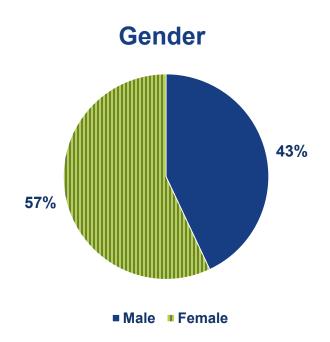
## Number by gender & year, 1995 to 2019

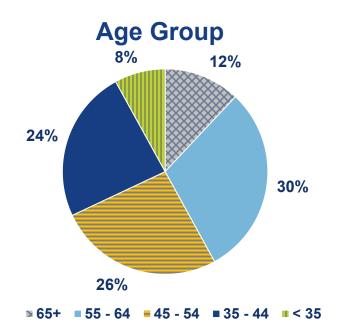


Source: 1995-2019 CMA Masterfiles



## Percentage by gender & age, 2019





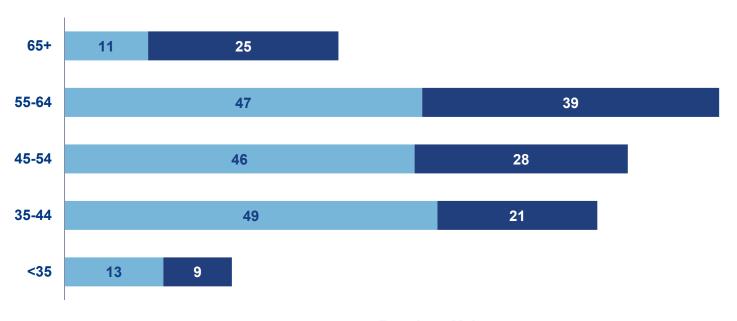
Excludes those where gender or age is unknown.

Source: 2019 CMA Masterfile

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## Number by gender & age, 2019



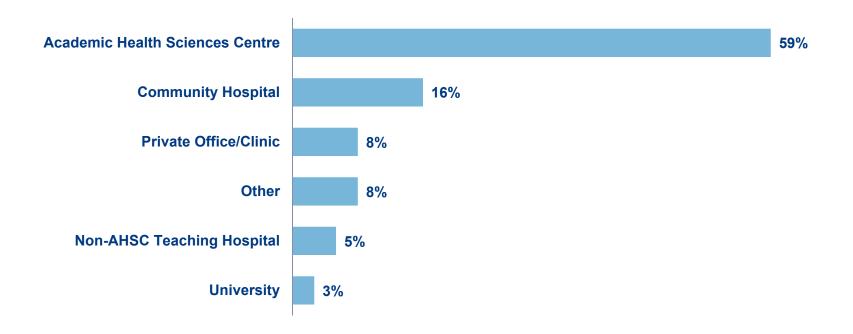
**■ Female** ■ Male

Excludes those where gender or age is unknown.

Source: 2019 CMA Masterfile



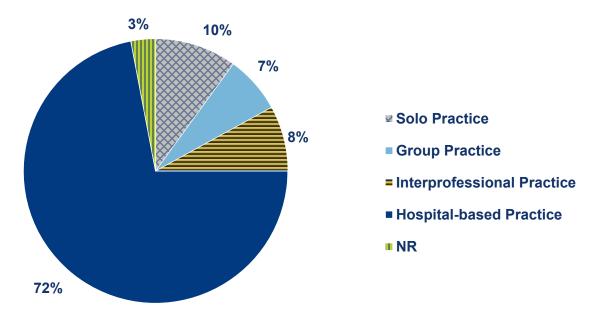
#### Percentage by main work setting, 2019



Source: 2019 CMA Physician Workforce Survey. Canadian Medical Association



## Percentage by practice organization, 2017\*



Source: 2017 CMA Workforce Survey. Canadian Medical Association

<sup>\*</sup>Most recent available data for this specialty



## Hours worked per week (excluding on-call), 2019

Activity	Hours worked per week
Direct patient care without teaching component	20.7
Direct patient care with teaching component	11.5
Teaching without patient care	3.0
Indirect patient care	7.5
Health facility committees	1.7
Administration	5.8
Research	3.8
Managing practice	1.1
Continued professional development	3.3
Other	0.1
TOTAL HOURS PER WEEK	58.7

Source: 2019 CMA Physician Workforce Survey. Canadian Medical Association



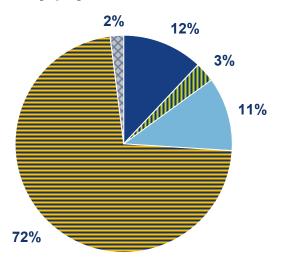
## On-call duty hours per month, 2017\*

- 68% provide on-call services
- On-call hours = 101 hours/month
- On-call hours spent in direct patient care = 18 hours/month



#### Percentage by remuneration method

#### Primary payment method<sup>1</sup> in 2017



Average gross payment per physician for Internal Medicine & subspecialties in 2017/18 (those earning at least \$60,000) = \$437.000<sup>2</sup>

Average percent overhead reported by Geriatricians in 2017 = 13%<sup>3</sup>

■ 90% + salary

■ 90% + other\*

**=** Blended

**⋈** NR

<sup>■ 90% +</sup> fee-for-service

<sup>\*</sup>Other includes capitation, sessional, contract and other methods

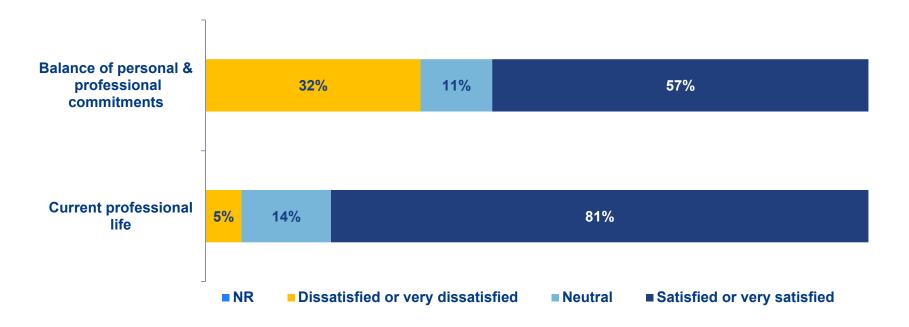
<sup>&</sup>lt;sup>1</sup> 2017 CMA Workforce Survey. Canadian Medical Association

<sup>&</sup>lt;sup>2</sup> National Physician Database, 2017/18, CIHI

<sup>&</sup>lt;sup>3</sup> 2017 CMA Workforce Survey. Canadian Medical Association



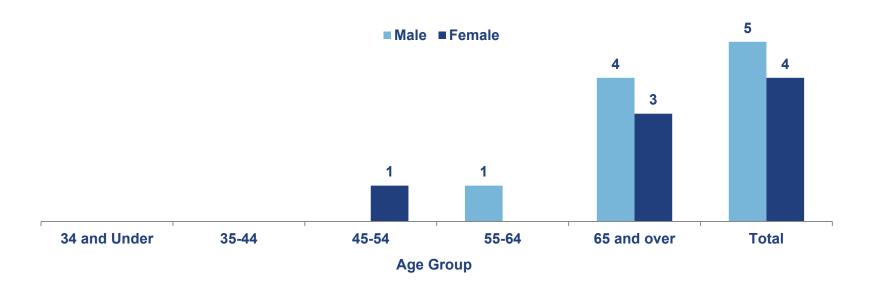
#### Professional & work-life balance satisfaction, 2019



Source: 2019 CMA Physician Workforce Survey. Canadian Medical Association



## Number of retirees during the three year period of 2016-2018

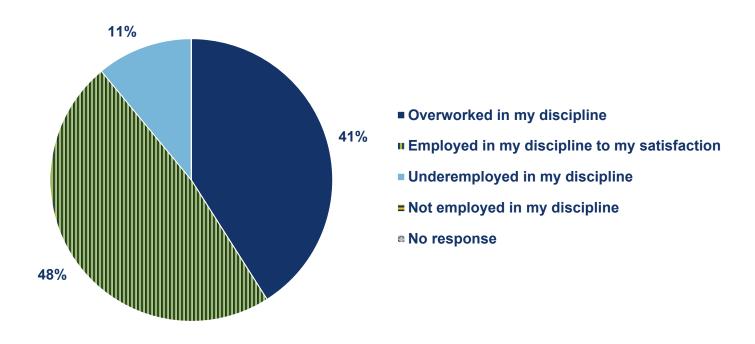


#### Source: CMA Masterfile - year over year comparisons

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**



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

