Geriatric Medicine Profile
Updated December 2019
Table of Contents

- General Information 3-5
- Total number & number/100,000 population by province, 2019 6
- Number/100,000 population, 1995-2019 7
- Number by gender & year, 1995-2019 8
- Percentage by gender & age, 2019 9
- Number by gender & age, 2019 10
- Percentage by main work setting, 2019 11
- Percentage by practice organization, 2017 12
- Hours worked per week (excluding on-call), 2019 13
- On-call duty hours per month, 2017 14
- Percentage by remuneration method 15
- Professional & work-life balance satisfaction, 2019 16
- Number of retirees during the three year period of 2016-2018 17
- Employment situation, 2017 18
- Links to additional resources 19
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.

Source: Pathway evaluation program
**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

Source: Pathway evaluation program
### Total number & number/100,000 population by province, 2019

<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>1</td>
<td>0.2</td>
</tr>
<tr>
<td>Prince Edward Island</td>
<td>1</td>
<td>0.6</td>
</tr>
<tr>
<td>Nova Scotia</td>
<td>11</td>
<td>1.1</td>
</tr>
<tr>
<td>New Brunswick</td>
<td>7</td>
<td>0.9</td>
</tr>
<tr>
<td>Quebec</td>
<td>83</td>
<td>1.0</td>
</tr>
<tr>
<td>Ontario</td>
<td>126</td>
<td>0.9</td>
</tr>
<tr>
<td>Manitoba</td>
<td>6</td>
<td>0.4</td>
</tr>
<tr>
<td>Saskatchewan</td>
<td>1</td>
<td>0.1</td>
</tr>
<tr>
<td>Alberta</td>
<td>20</td>
<td>0.5</td>
</tr>
<tr>
<td>British Columbia</td>
<td>48</td>
<td>1.0</td>
</tr>
<tr>
<td>Territories</td>
<td>0</td>
<td>0.0</td>
</tr>
<tr>
<td><strong>CANADA</strong></td>
<td><strong>304</strong></td>
<td><strong>0.8</strong></td>
</tr>
</tbody>
</table>

Source: 2019 CMA Masterfile
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

Gender

- Male: 43%
- Female: 57%

Excludes those where gender or age is unknown.

Source: 2019 CMA Masterfile
Number by gender & age, 2019

<table>
<thead>
<tr>
<th>Age Group</th>
<th>Female</th>
<th>Male</th>
</tr>
</thead>
<tbody>
<tr>
<td>65+</td>
<td>11</td>
<td>25</td>
</tr>
<tr>
<td>55-64</td>
<td>47</td>
<td>39</td>
</tr>
<tr>
<td>45-54</td>
<td>46</td>
<td>28</td>
</tr>
<tr>
<td>35-44</td>
<td>49</td>
<td>21</td>
</tr>
<tr>
<td>&lt;35</td>
<td>13</td>
<td>9</td>
</tr>
</tbody>
</table>

Excludes those where gender or age is unknown.

Source: 2019 CMA Masterfile
Percentage by main work setting, 2019

- Academic Health Sciences Centre: 59%
- Community Hospital: 16%
- Private Office/Clinic: 8%
- Other: 8%
- Non-AHSC Teaching Hospital: 5%
- University: 3%

Source: 2019 CMA Physician Workforce Survey. Canadian Medical Association
Percentage by practice organization, 2017*

*Most recent available data for this specialty
Source: 2017 CMA Workforce Survey. Canadian Medical Association
### Hours worked per week (excluding on-call), 2019

<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>20.7</td>
</tr>
<tr>
<td>Direct patient care with teaching component</td>
<td>11.5</td>
</tr>
<tr>
<td>Teaching without patient care</td>
<td>3.0</td>
</tr>
<tr>
<td>Indirect patient care</td>
<td>7.5</td>
</tr>
<tr>
<td>Health facility committees</td>
<td>1.7</td>
</tr>
<tr>
<td>Administration</td>
<td>5.8</td>
</tr>
<tr>
<td>Research</td>
<td>3.8</td>
</tr>
<tr>
<td>Managing practice</td>
<td>1.1</td>
</tr>
<tr>
<td>Continued professional development</td>
<td>3.3</td>
</tr>
<tr>
<td>Other</td>
<td>0.1</td>
</tr>
<tr>
<td><strong>TOTAL HOURS PER WEEK</strong></td>
<td><strong>58.7</strong></td>
</tr>
</tbody>
</table>

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

*Most recent available data for this specialty
Source: 2017 CMA Workforce Survey. Canadian Medical Association
Percentage by remuneration method

Primary payment method\(^1\) in 2017

- 90% + fee-for-service: 11%
- 90% + salary: 72%
- 90% + other*: 2%
- Blended: 3%
- NR: 12%

Average gross payment per physician for Internal Medicine & subspecialties in 2017/18 (those earning at least $60,000) = $437,000\(^2\)

Average percent overhead reported by Geriatricians in 2017 = 13\(^\%\)\(^3\)

\*Other includes capitation, sessional, contract and other methods

\(^1\) 2017 CMA Workforce Survey, Canadian Medical Association

\(^2\) National Physician Database, 2017/18, CIHI

\(^3\) 2017 CMA Workforce Survey, Canadian Medical Association
Professional & work-life balance satisfaction, 2019

Balance of personal & professional commitments
- Dissatisfied or very dissatisfied: 32%
- Neutral: 11%
- Satisfied or very satisfied: 57%

Current professional life
- Dissatisfied or very dissatisfied: 5%
- Neutral: 14%
- Satisfied or very satisfied: 81%

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

- Overworked in my discipline: 11%
- Employed in my discipline to my satisfaction: 41%
- Underemployed in my discipline: 48%
- Not employed in my discipline: 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