

# Nephrology Profile

Updated August 2018

Click on any of the contents below to navigate to the slide. Please click the “home icon” located at the top right of each slide to return to the “table of contents” slide.



## TABLE OF CONTENTS

	Slide
▪ <a href="#">General Information</a>	3-5
▪ <a href="#">Total number &amp; number/100,000 population by province, 2018</a>	6
▪ <a href="#">Number/100,000 population, 1995-2018</a>	7
▪ <a href="#">Number by gender &amp; year, 1995-2018</a>	8
▪ <a href="#">Percentage by gender &amp; age, 2018</a>	9
▪ <a href="#">Number by gender &amp; age, 2018</a>	10
▪ <a href="#">Percentage by main work setting, 2017</a>	11
▪ <a href="#">Percentage by practice organization, 2017</a>	12
▪ <a href="#">Hours worked per week (excluding on-call), 2017</a>	13
▪ <a href="#">On-call duty hours per month, 2017</a>	14
▪ <a href="#">Percentage by remuneration method</a>	15
▪ <a href="#">Professional &amp; work-life balance satisfaction, 2017</a>	16
▪ <a href="#">Number of retirees during the three year period of 2014-2016</a>	17
▪ <a href="#">Employment situation, 2017</a>	22
▪ <a href="#">Link to additional resources</a>	23



## GENERAL INFORMATION

Nephrology is a subspecialty of internal medicine. Practitioners diagnose and treat diseases of the kidneys and urinary system. Nephrologists are motivated by the opportunity to restore chronically ill patients to productive lives and are often challenged by life-and-death situations. The practice of nephrology is closely linked to a teaching hospital so these specialists incorporate a major component of teaching and research into their overall activity profile. This may be viewed as one of the attractions of nephrology, in as much as it allows for tremendous diversity and flexibility.

The resident must acquire a working knowledge of the theoretical basis of the specialty, including its foundations in the basic medical sciences and research. On completion of the program, the resident should be able to demonstrate the knowledge, attitudes and skills needed to independently care for patients with kidney disease (including the management of dialysis and renal transplantation) and with disturbances of acid-base, fluid and electrolyte metabolism.



## GENERAL INFORMATION

It is important for the nephrologist to have a working knowledge of the basic sciences (physiology, pathophysiology and immunology) and applied sciences (pharmacology, pathology) as they apply to renal disease and their treatments. These physicians should be able to act as both an attending physician and as a consultant.

They work in a variety of health care settings including acute and chronic care hospitals, dialysis units (hemodialysis and peritoneal dialysis), as well as ambulatory care clinics (general nephrology, pre-dialysis, renal transplantation). They should function as a member of a multi-disciplinary team, effectively collaborating with other health professionals.

Upon completing medical school, only candidates certificated by the Royal College of Physicians and Surgeons of Canada in internal medicine or pediatrics may be eligible for the Certificate of Special Competence in nephrology.



## GENERAL INFORMATION

This involves about 6 years of training in total. Once certified in one of these two specialties, a further 2 years of Royal College-approved residency in adult or pediatric nephrology is required. Residency must incorporate the principal of graded responsibility and include 1 year of approved clinical residency at a senior level in adult or pediatric nephrology, and 1 year of further training.

For further details on training requirements please go to:

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

[Canadian Society of Nephrology](#)



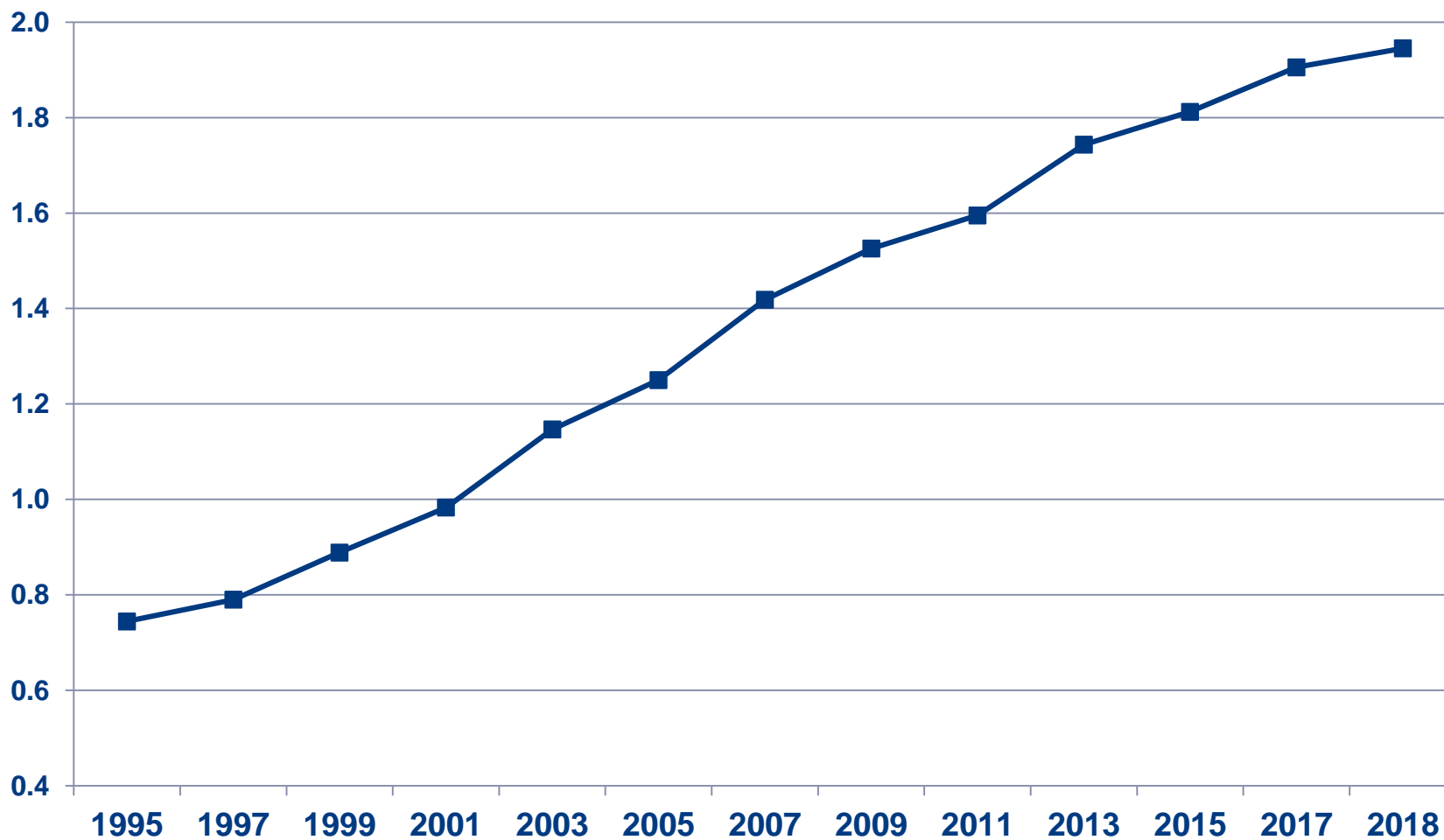
## Total number & number/100,000 population by province, 2018

Province/Territory	Physicians	Phys/100k pop'n
Newfoundland/Labrador	14	2.7
Prince Edward Island	2	1.3
Nova Scotia	19	2.0
New Brunswick	12	1.6
Quebec	199	2.4
Ontario	258	1.8
Manitoba	34	2.5
Saskatchewan	21	1.8
Alberta	80	1.9
British Columbia	80	1.6
Territories	0	0.0
<b>CANADA</b>	<b>719</b>	<b>1.9</b>

Source: 2018 CMA Masterfile



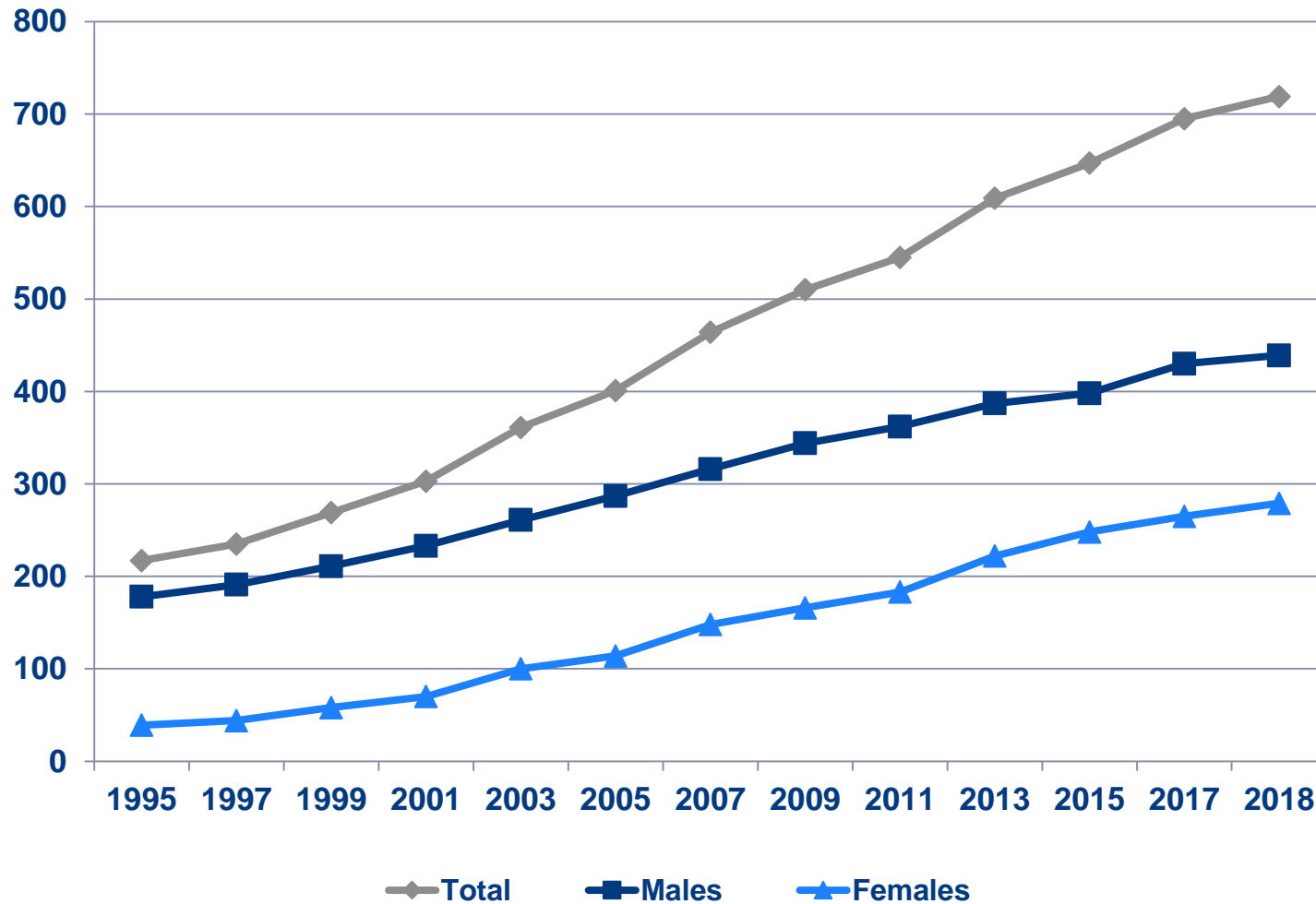
## Number/100,000 population, 1995 to 2018



Source: 1995-2018 CMA Masterfiles



## Number by gender & year, 1995 to 2018



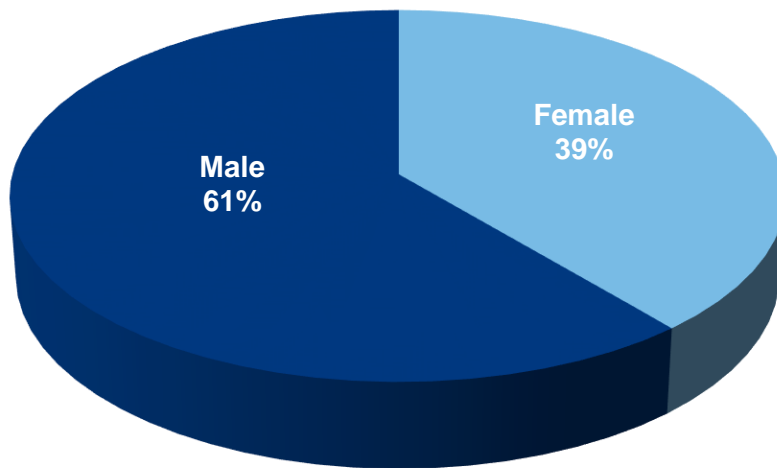
Source: 1995-2018 CMA Masterfiles



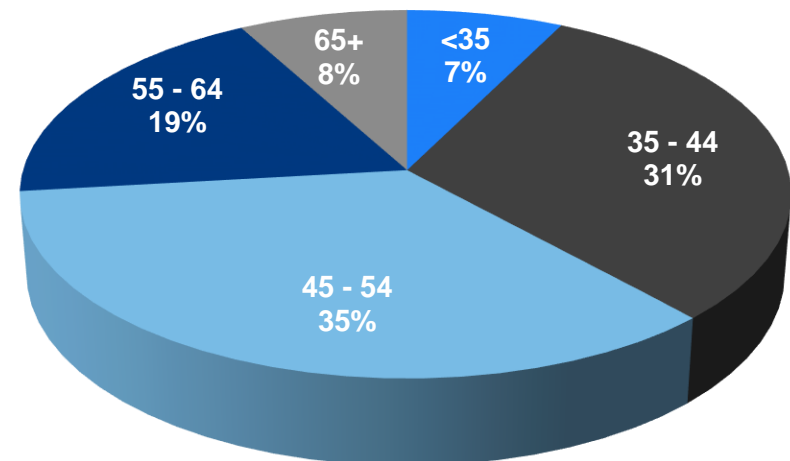


## Percentage by gender & age, 2018

### Gender



### Age Group

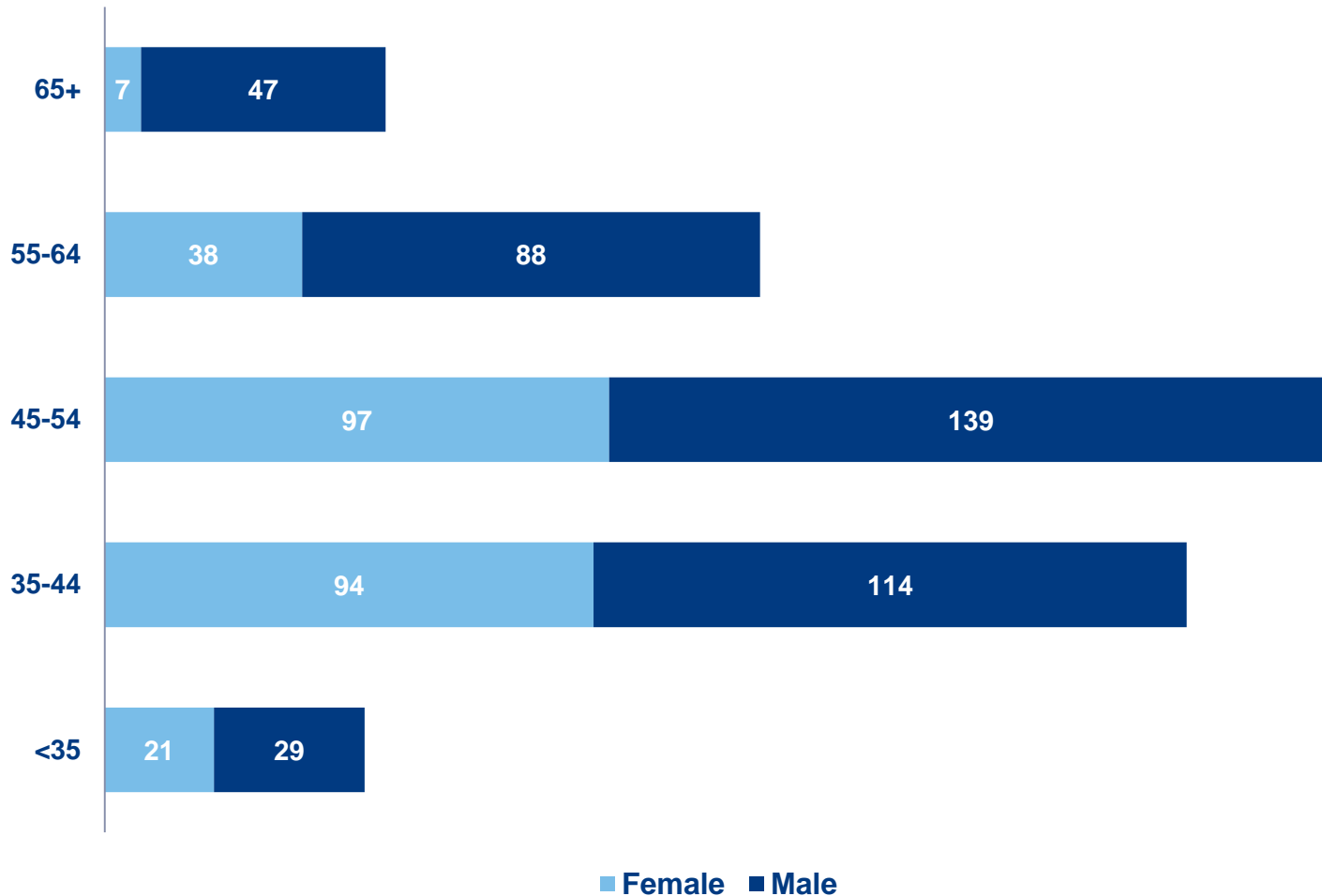


Excludes those where gender or age is unknown.

Source: 2018 CMA Masterfile



## Number by gender & age, 2018

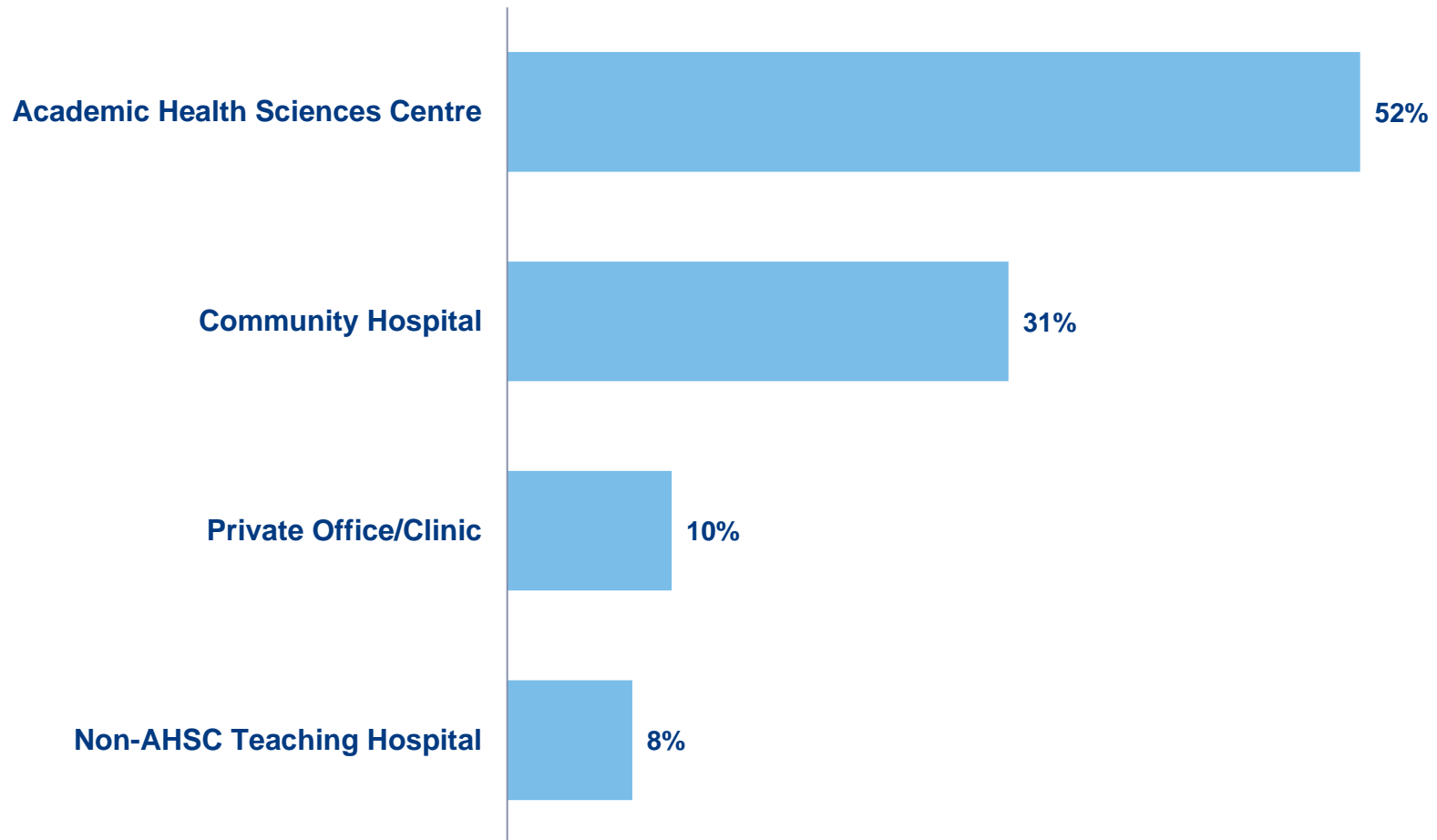


Excludes those where gender or age is unknown.

Source: 2018 CMA Masterfile

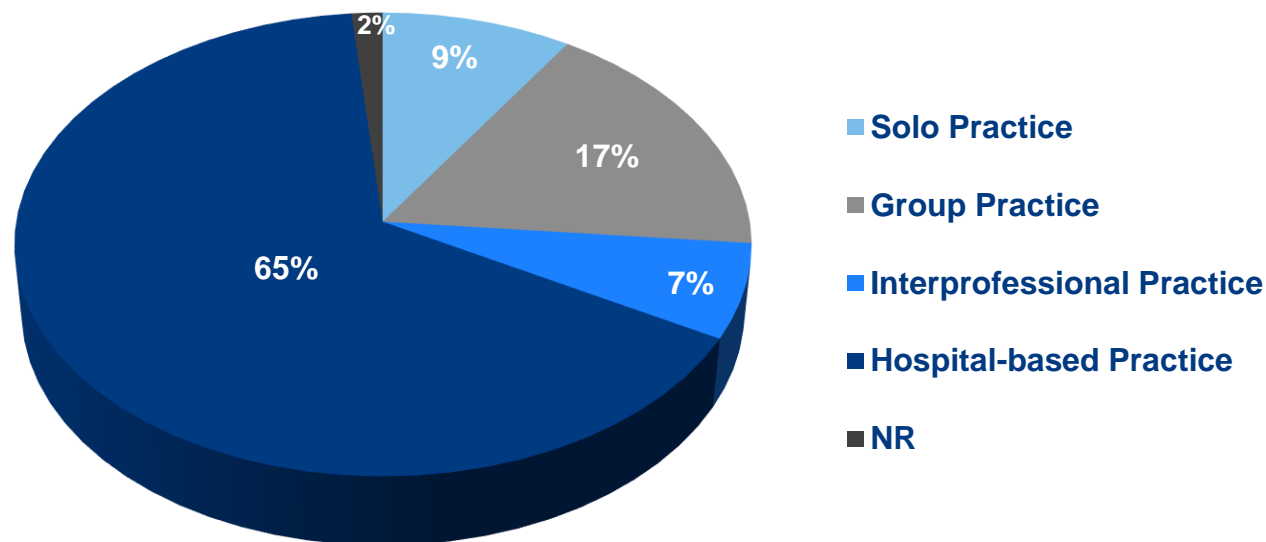


## Percentage by main work setting, 2017





## Percentage by practice organization, 2017





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

Activity	Hours worked per week
Direct patient care without teaching component	25.5
Direct patient care with teaching component	7.2
Teaching without patient care	2.1
Indirect patient care	9.6
Health facility committees	1.6
Administration	3.1
Research	2.3
Managing practice	1.4
Continued professional development	3.2
Other	1.2
<b>TOTAL HOURS PER WEEK</b>	<b>57.3</b>



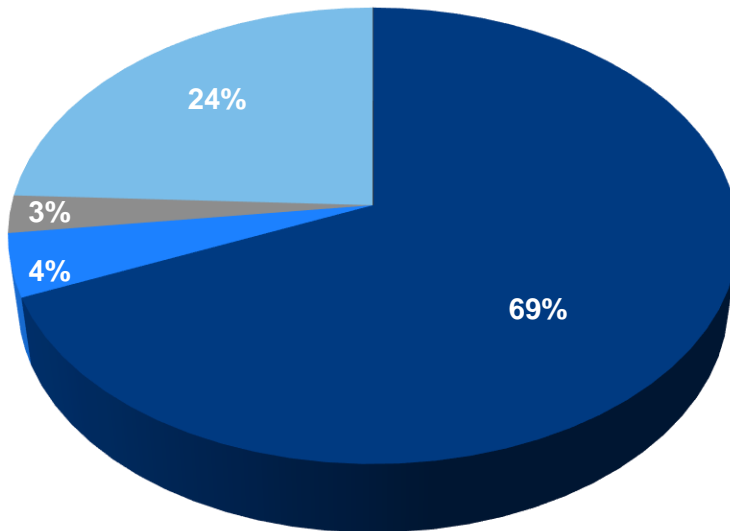
## On-call duty hours per month, 2017

- 99% provide on-call services
- On-call hours = 84 hours/month
- On-call hours spent in direct patient care = 40 hours/month



## Percentage by remuneration method

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



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

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

Average gross fee-for-service payment per physician for Internal Medicine & subspecialties in 2015/16 (those earning at least \$60,000) = \$407,224<sup>2</sup>

Average percent overhead reported by Nephrologists in 2017 = 19%<sup>3</sup>

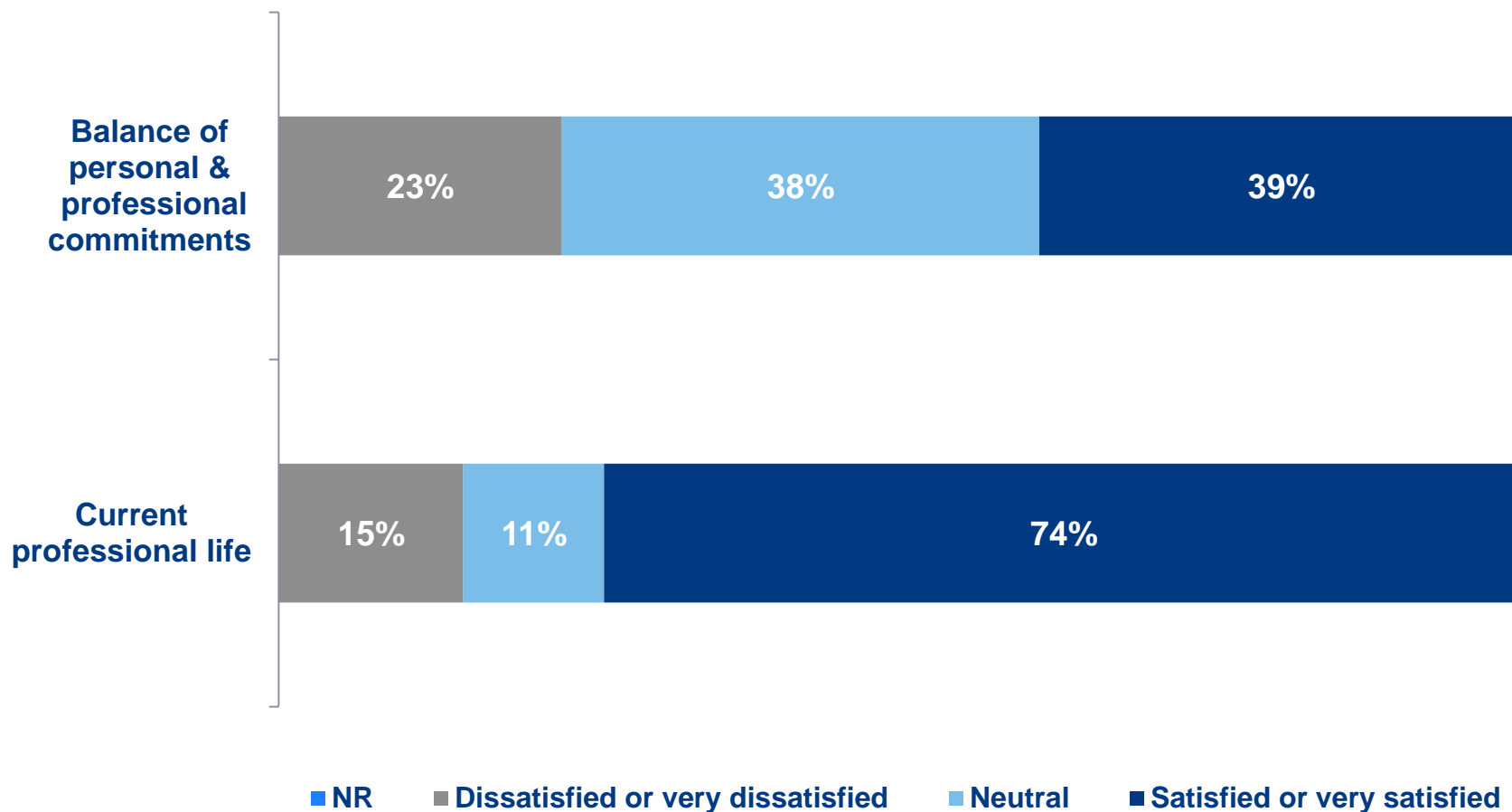
<sup>1</sup> 2017 CMA Workforce Survey. Canadian Medical Association

<sup>2</sup> National Physician Database, 2015/16, CIHI

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



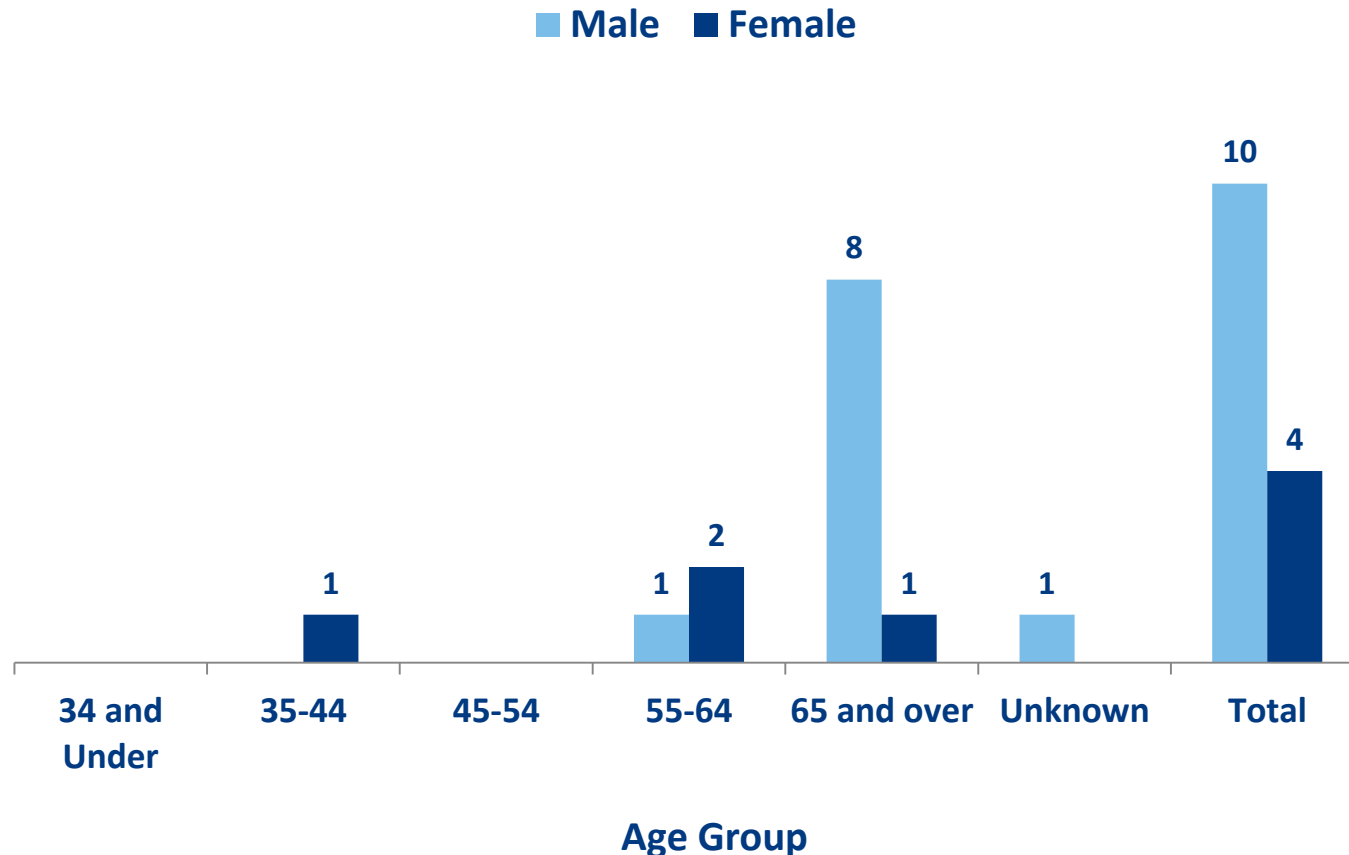
## Professional & work-life balance satisfaction, 2017







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

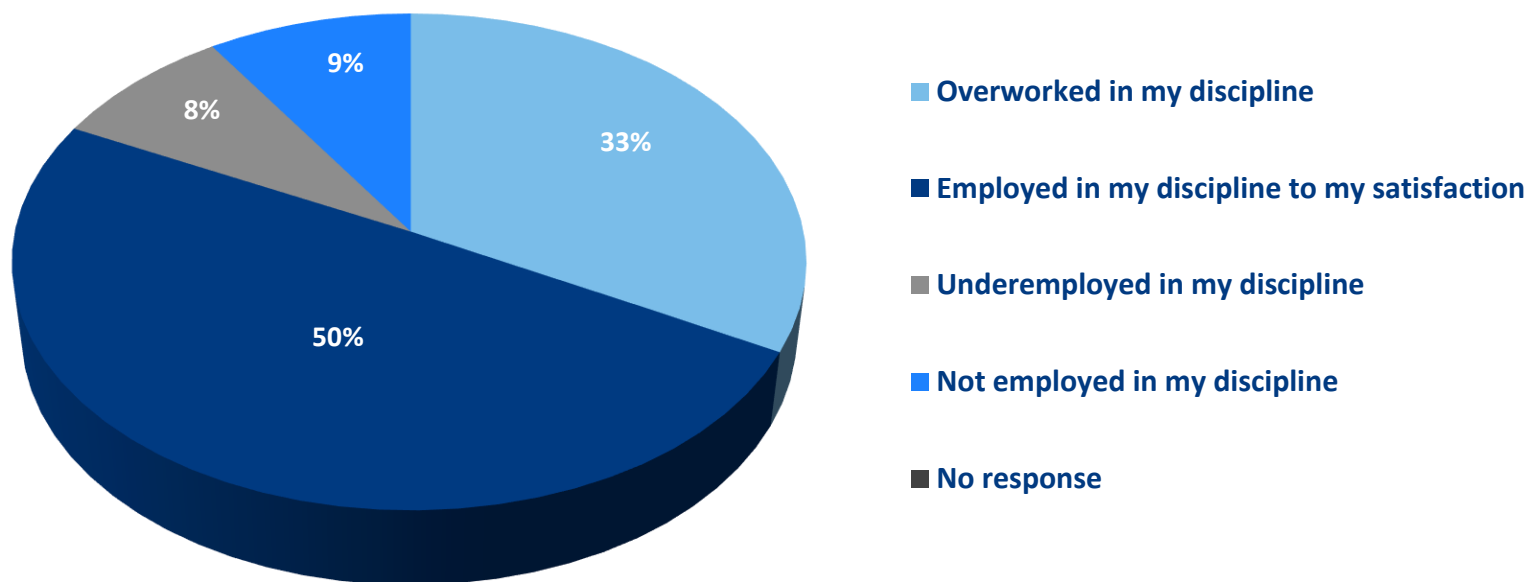


**Source: CMA Masterfile – year over year comparisons**

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](#)