Physical Medicine and Rehabilitation Profile

> Updated December 2019





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## **General information**

Physical medicine & rehabilitation (also known as physiatry) is concerned with the comprehensive diagnosis, medical management and rehabilitation of people of all ages with neuromusculoskeletal disorders and associated disabilities.

Physical medicine & rehabilitation (PM & R) requires expertise in many areas and offers good research opportunities. It is a broad, team-oriented field with a variety of practices to choose from including pediatric rehabilitation, orthopedic rehabilitation, electrodiagnosis and sports medicine.

These physicians treat the "whole" person by considering the physical and psychosocial aspects of a patient's diagnosis, basing evaluations on both neurological and musculoskeletal factors. A high degree of patient contact and long-term care are common.



## **General information**

To be a competent specialist in PM & R, a physician must be capable of assuming a consultant's role in the specialty. The physician must acquire a working knowledge of the specialty, including its foundations in the basic medical sciences and research.

Upon completing medical school, in order to become certified in PM & R requires a further 5 years of Royal College-approved residency training. This period must include:

1 year of basic clinical training to be completed within the first 18 months of residency consisting of: 6 months in internal medicine, which must include at least 3 months of general internal medicine (clinical teaching unit (CTU) or its equivalent); 2 months in surgery consisting of 1 month in two of the following: general surgery, neurosurgery, orthopedic surgery, plastic surgery, urology or vascular surgery; 4 months training consisting of 1 month in four of the following: anesthesiology, critical care medicine, diagnostic radiology, elective, emergency medicine, family medicine, geriatrics, palliative care, pediatrics, and psychiatry;



# **General information**

- 9 months residency training to include 3 months each of rheumatology, neurology and orthopedic surgery;
- 36 months residency training in core physical medicine & rehabilitation including time in cardiac and/or respiratory rehabilitation and residency training in each of the rehabilitation of persons with amputation (including prosthetics and orthotics), cerebrovascular disease, spinal cord disorders and acquired brain disorders.

For further details on training requirements please go to:

Royal College of Physicians and Surgeons of Canada

Canadian Association of Physical Medicine & Rehabilitation

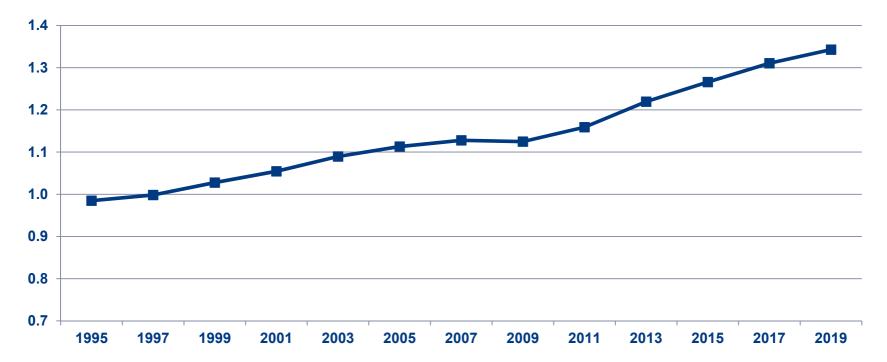


#### Total number & number/100,000 population by province, 2019

Province/Territory	Physicians	Phys/100k pop'n
Newfoundland/Labrador	2	0.4
Prince Edward Island	1	0.6
Nova Scotia	14	1.5
New Brunswick	13	1.7
Quebec	88	1.0
Ontario	202	1.4
Manitoba	14	1.0
Saskatchewan	13	1.1
Alberta	74	1.7
British Columbia	80	1.6
Territories	0	0.0
CANADA	501	1.3



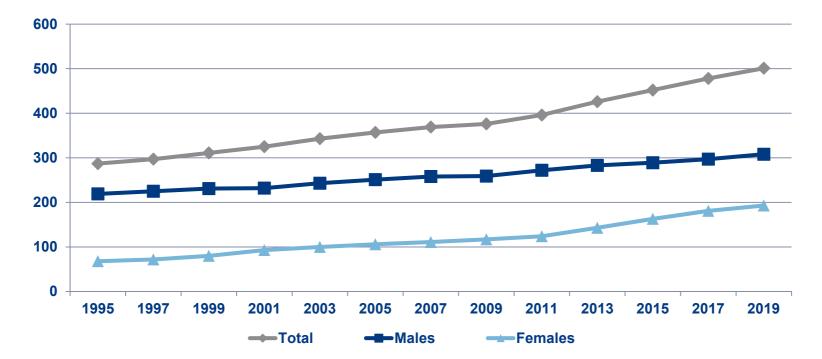
### Number/100,000 population, 1995 to 2019







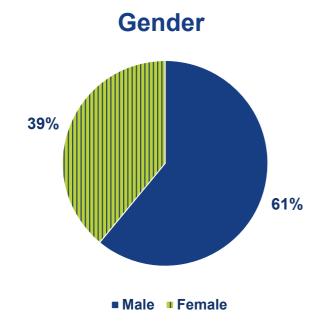
#### Number by gender & year, 1995 to 2019

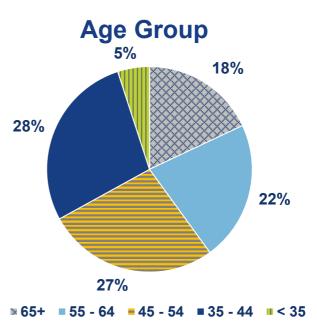






#### Percentage by gender & age, 2019





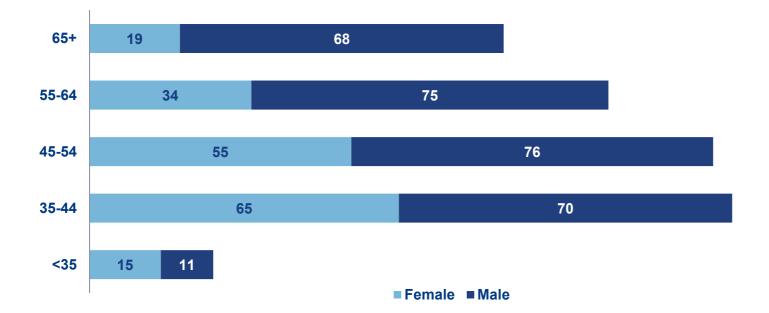
Excludes those where gender or age is unknown.

Source: 2019 CMA Masterfile





#### Number by gender & age, 2019

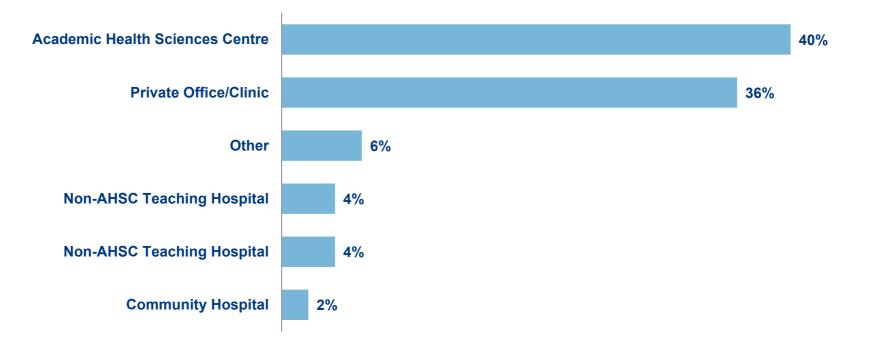


Excludes those where gender or age is unknown.

Source: 2019 CMA Masterfile



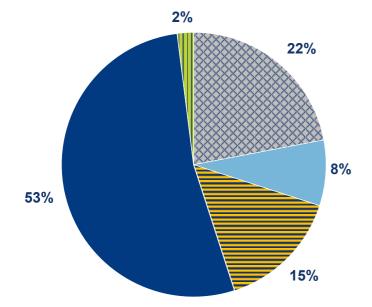
#### Percentage by main work setting, 2019



Source: 2019 CMA Physician Workforce Survey. Canadian Medical Association



### Percentage by practice organization, 2017\*



- Solo Practice
- Group Practice
- = Interprofessional Practice
- Hospital-based Practice

**NR** 

\*Most recent available data for this specialty

Source: 2017 CMA Workforce Survey. Canadian Medical Association

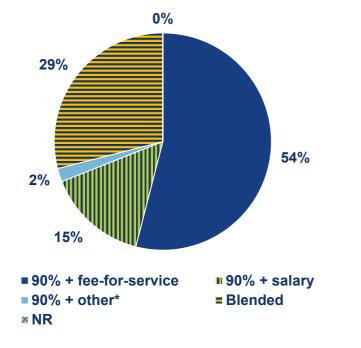


#### Hours worked per week (excluding on-call), 2019

Activity	Hours worked per week
Direct patient care without teaching component	19.6
Direct patient care with teaching component	8.2
Teaching without patient care	1.8
Indirect patient care	7.8
Health facility committees	1.6
Administration	6.4
Research	2.2
Managing practice	1.9
Continued professional development	2.4
Other	0.1
TOTAL HOURS PER WEEK	52.2

#### Percentage by remuneration method

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



Average gross payment per physician for Physical Medicine & Rehabilitation in 2017/18 (those earning at least \$60,000) = \$318,631<sup>2</sup>

Average percent overhead reported by Physical Medicine and Rehabilitation specialists in  $2017 = 19\%^3$ 

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

- <sup>1</sup> Source: 2017 CMA Workforce Survey. Canadian Medical Association
- <sup>2</sup> National Physician Database, 2017/18, CIHI

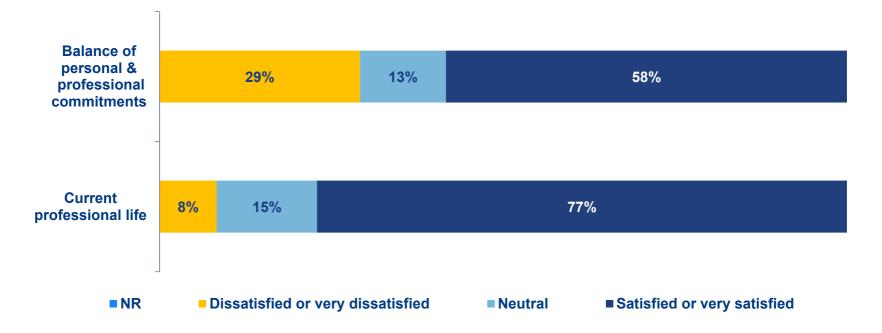
<sup>3</sup> Source: 2017 CMA Workforce Survey. Canadian Medical Association

ASSOCIATION MÉDICALE

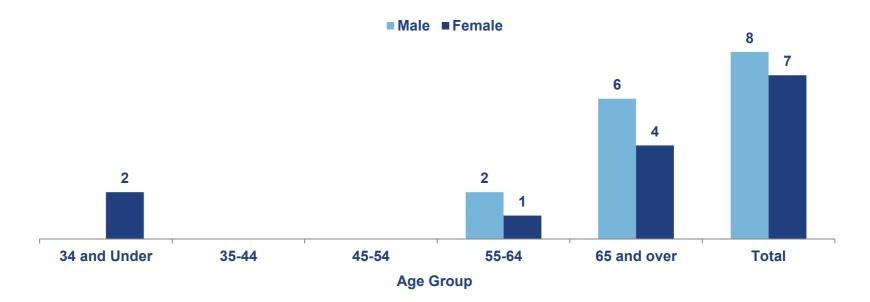




#### **Professional & work-life balance satisfaction, 2019**



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

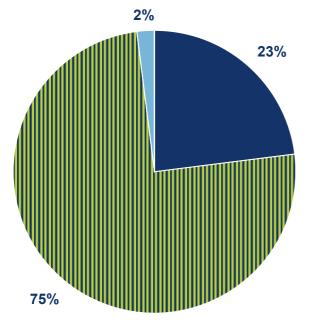


#### Source: CMA Masterfile – year over year comparisons

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
- Employed in my discipline to my satisfaction
- Underemployed in my discipline
- Not employed in my discipline
- No response

#### Links to additional resources

- Association of Faculties of Medicine of Canada
- <u>Canadian Institute for Health Information</u>
- <u>Canadian Medical Association's Physician Data Centre</u>
- <u>Canadian Post-MD Education Registry (CAPER)</u>
- <u>College of Family Physicians of Canada</u>
- <u>National Physician Survey</u> (2004-2014)
- Royal College of Physicians and Surgeons of Canada

ASSOCIATION

