

# Plastic Surgery Profile

Updated August 2018

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## GENERAL INFORMATION

Plastic surgery includes the management of major burns, reconstruction of congenital malformations, cosmetic surgery and other minor surgical procedures. Although many plastic surgeons concentrate on cosmetic procedures, there is a great opportunity for major reconstructive surgery that can be done with an understanding of the principles of wound healing, skin flaps, and skin grafting. There is ample opportunity for innovation and synthesis of new approaches (e.g., craniofacial surgery, microsurgery, fat transfers and artificial skin).

Plastic surgeons treat a wide variety of clinical disorders including congenital and developmental problems, trauma, cancer and degenerative diseases. Often their goal is not only to improve appearances but also to restore function. Depending on the type of practice, many procedures are done under local anesthetic on an outpatient basis.



## GENERAL INFORMATION

Practitioners characterize plastic surgery as a highly creative specialty, requiring good aesthetic sense, the ability to think in three-dimension and appreciation of detail. Upon completion of medical school, to become certified in plastic surgery requires an additional 5 years of Royal College-approved residency training. This training includes:

- a minimum of 2 years of foundational training in the core aspects of surgery related to plastic surgery, including rotations in: plastic surgery; general surgery; orthopedic surgery; critical care; otorhinolaryngology; vascular surgery; neurosurgery; pediatric surgery; surgical ophthalmology; surgical oncology; oral surgery; and urology;
- 3 years of progressive senior residency training in plastic surgery, which must incorporate the principle of graded increasing responsibility. This period includes rotations as a senior or chief resident, research or elective time. It must also include exposure to burn surgery, hand surgery, aesthetic surgery, craniofacial trauma surgery, and reconstructive surgery of the breast, trunk, head and neck, lower limb and upper limb, and pediatric plastic surgery.

Source: Pathway evaluation program



## GENERAL INFORMATION

For further details on training requirements please go to:

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

[Canadian Society of Plastic Surgeons](#)



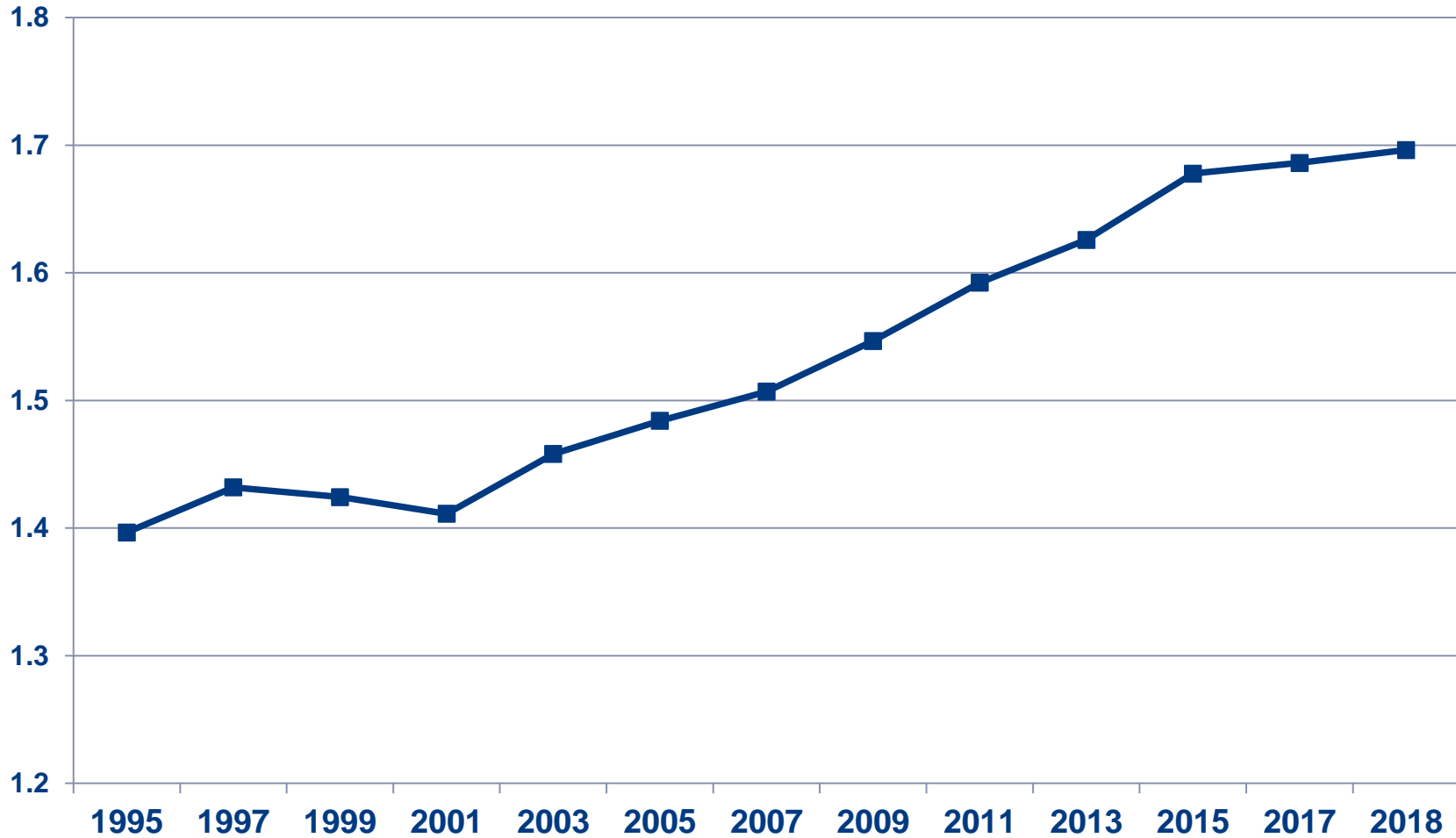
## Total number & number/100,000 population by province, 2018

Province/Territory	Physicians	Phys/100k pop'n
Newfoundland/Labrador	5	0.9
Prince Edward Island	2	1.3
Nova Scotia	20	2.1
New Brunswick	14	1.8
Quebec	153	1.8
Ontario	229	1.6
Manitoba	17	1.3
Saskatchewan	17	1.5
Alberta	72	1.7
British Columbia	98	2.0
Territories	0	0.0
<b>CANADA</b>	<b>627</b>	<b>1.7</b>

Source: 2018 CMA Masterfile



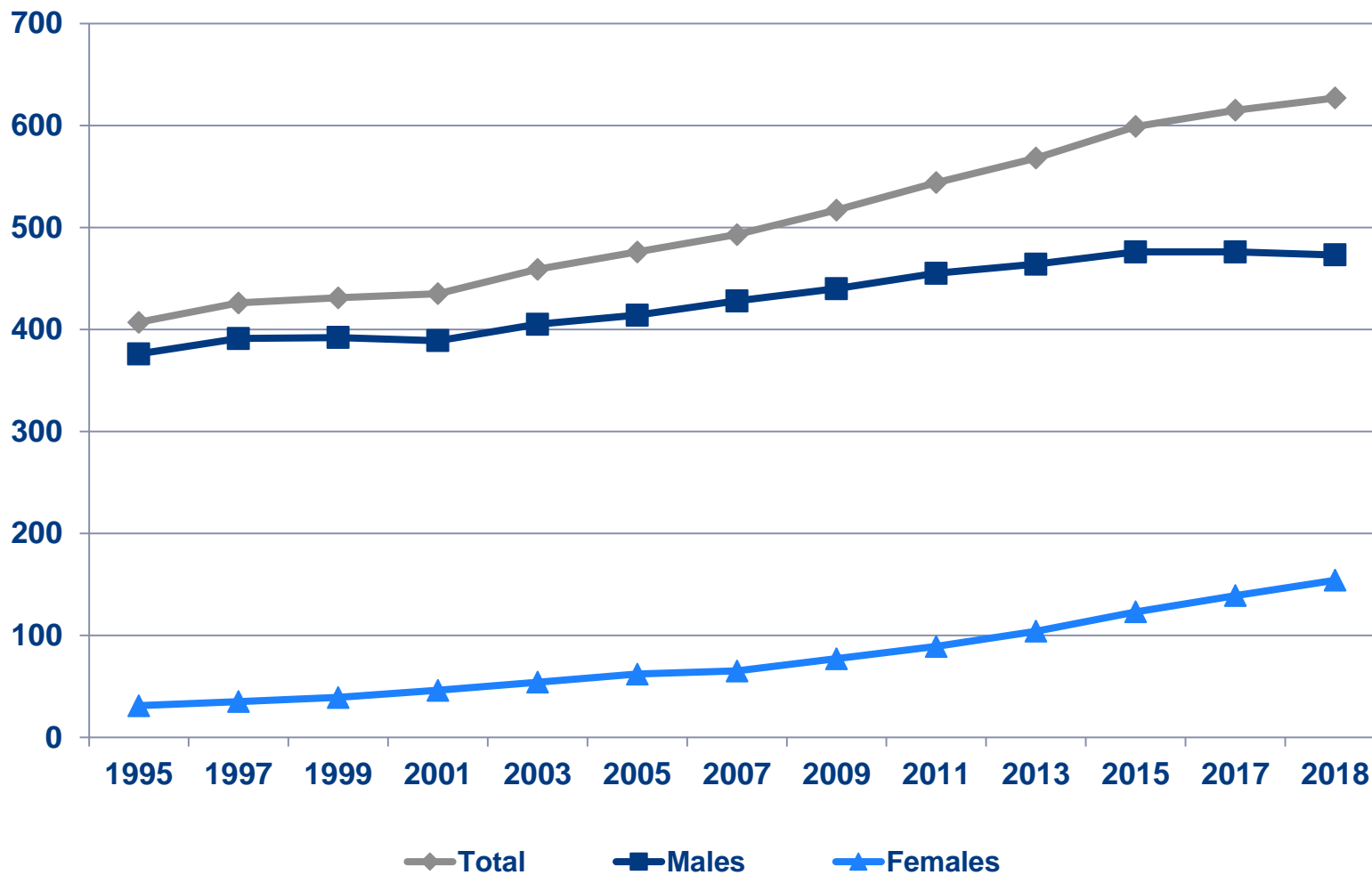
## Number/100,000 population, 1995 to 2018



Source: 1995-2018 CMA Masterfiles



## Number by gender & year, 1995 to 2018



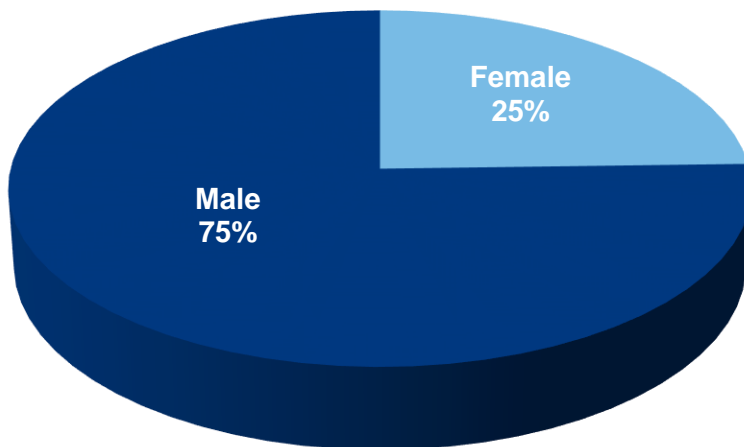
Source: 1995-2018 CMA Masterfiles



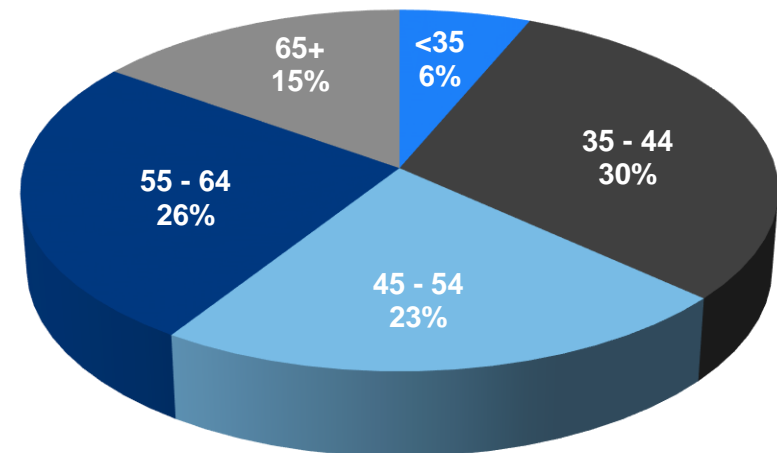


## Percentage by gender & age, 2018

### Gender



### Age Group

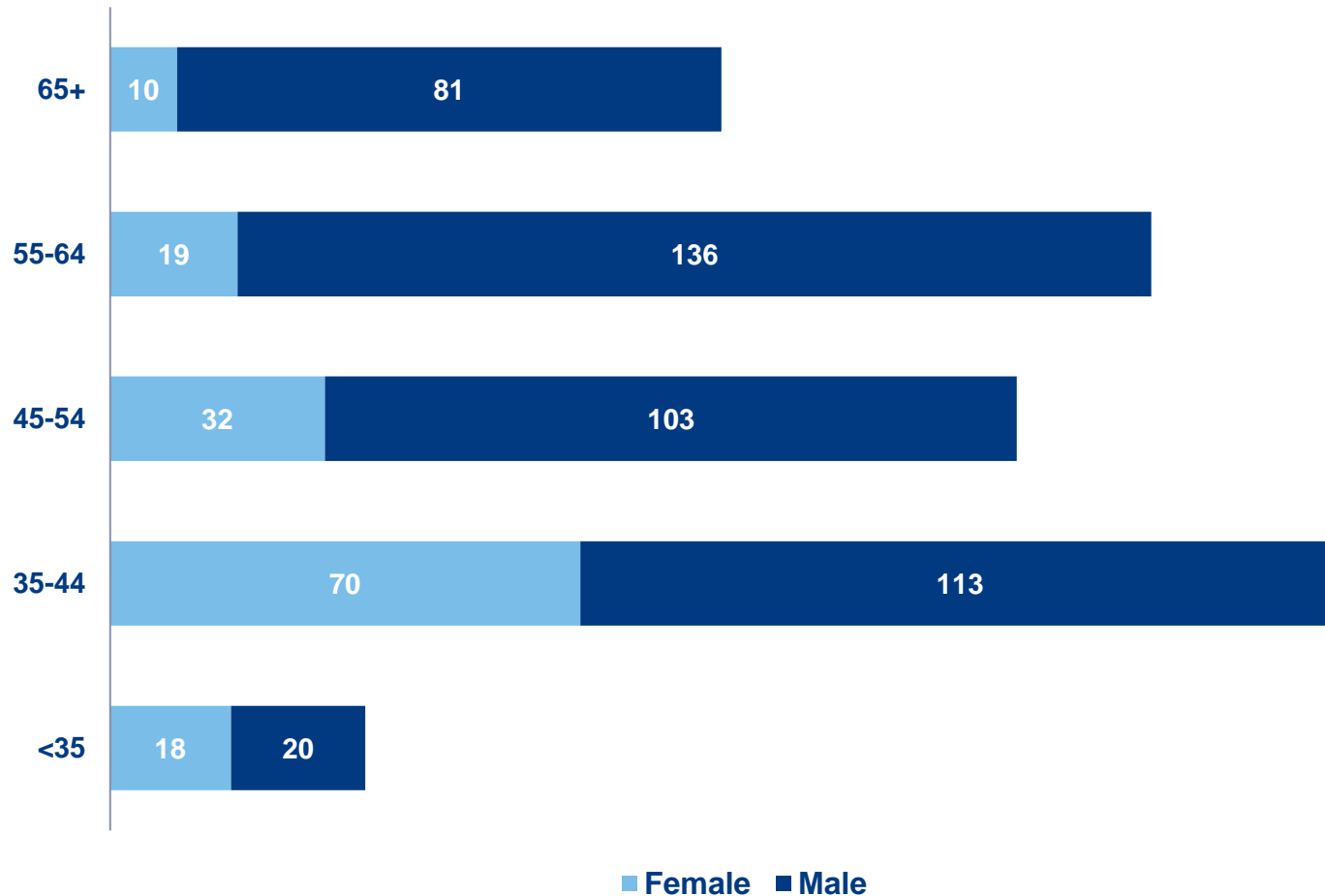


Excludes those where gender or age is unknown.

Source: 2018 CMA Masterfile



## Number by gender & age, 2018

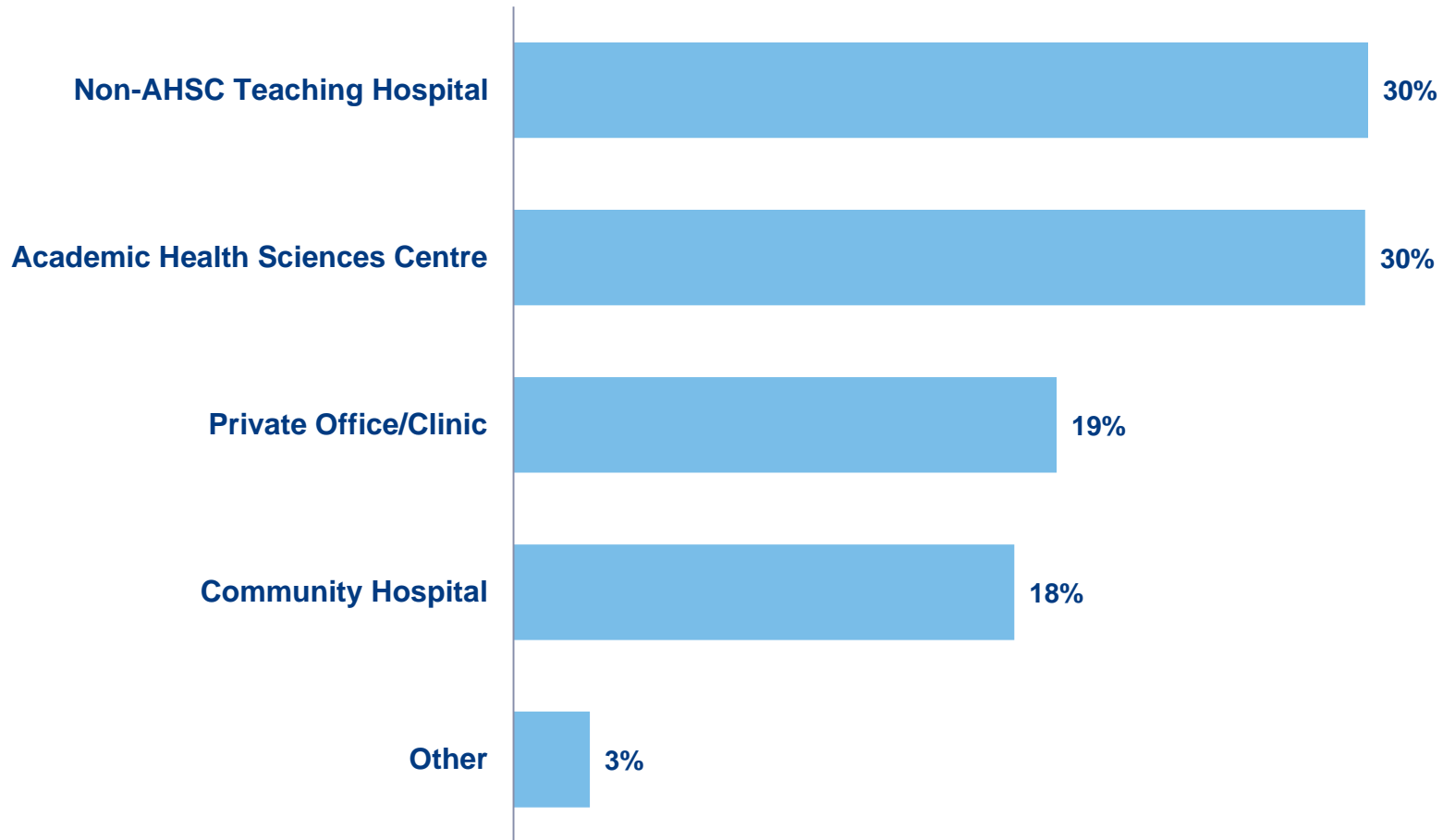


Excludes those where gender or age is unknown.

Source: 2018 CMA Masterfile

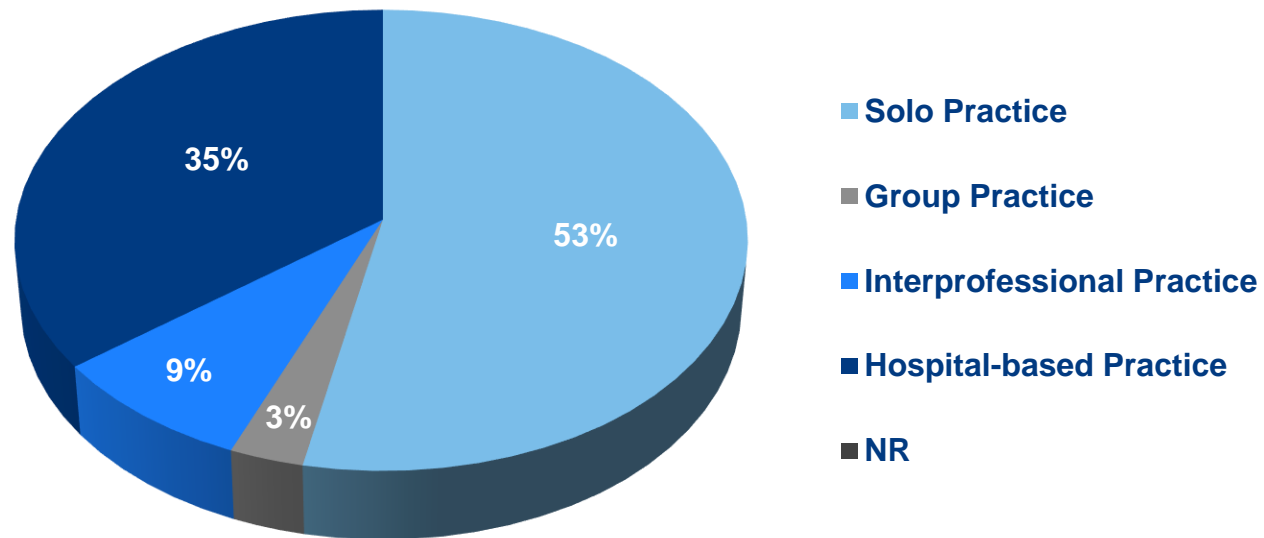


## Percentage by main work setting, 2017





## Percentage by practice organization, 2017





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

Activity	Hours worked per week
Direct patient care without teaching component	27.3
Direct patient care with teaching component	11.0
Teaching without patient care	1.8
Indirect patient care	6.2
Health facility committees	0.8
Administration	2.6
Research	1.1
Managing practice	1.9
Continued professional development	2.1
Other	0.8
<b>TOTAL HOURS PER WEEK</b>	<b>55.5</b>



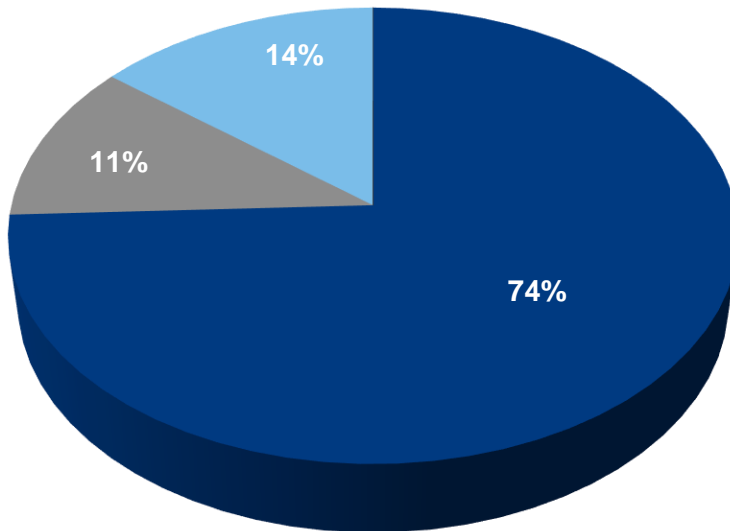
## On-call duty hours per month, 2017

- 81% provide on-call services
- On-call hours = 136 hours/month
- On-call hours spent in direct patient care = 37 hours/month



## Percentage by remuneration method

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



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

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

Average gross fee-for-service payment per physician for Plastic Surgery in 2015/16 (those earning at least \$60,000) = \$391,425<sup>2</sup>

Average percent overhead reported by Plastic Surgeons in 2017 = 31%<sup>3</sup>

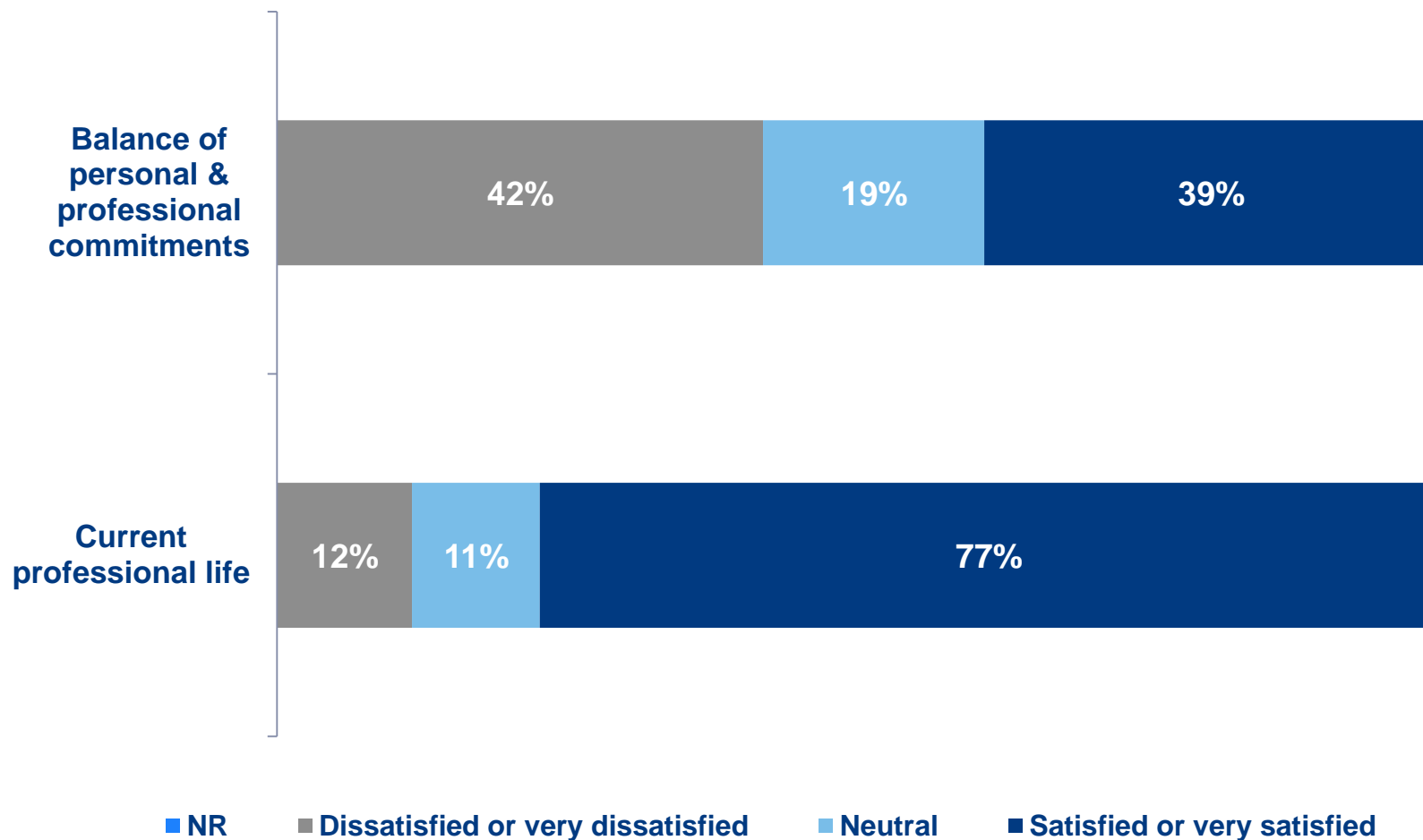
<sup>1</sup> 2017 CMA Workforce Survey. Canadian Medical Association

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

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



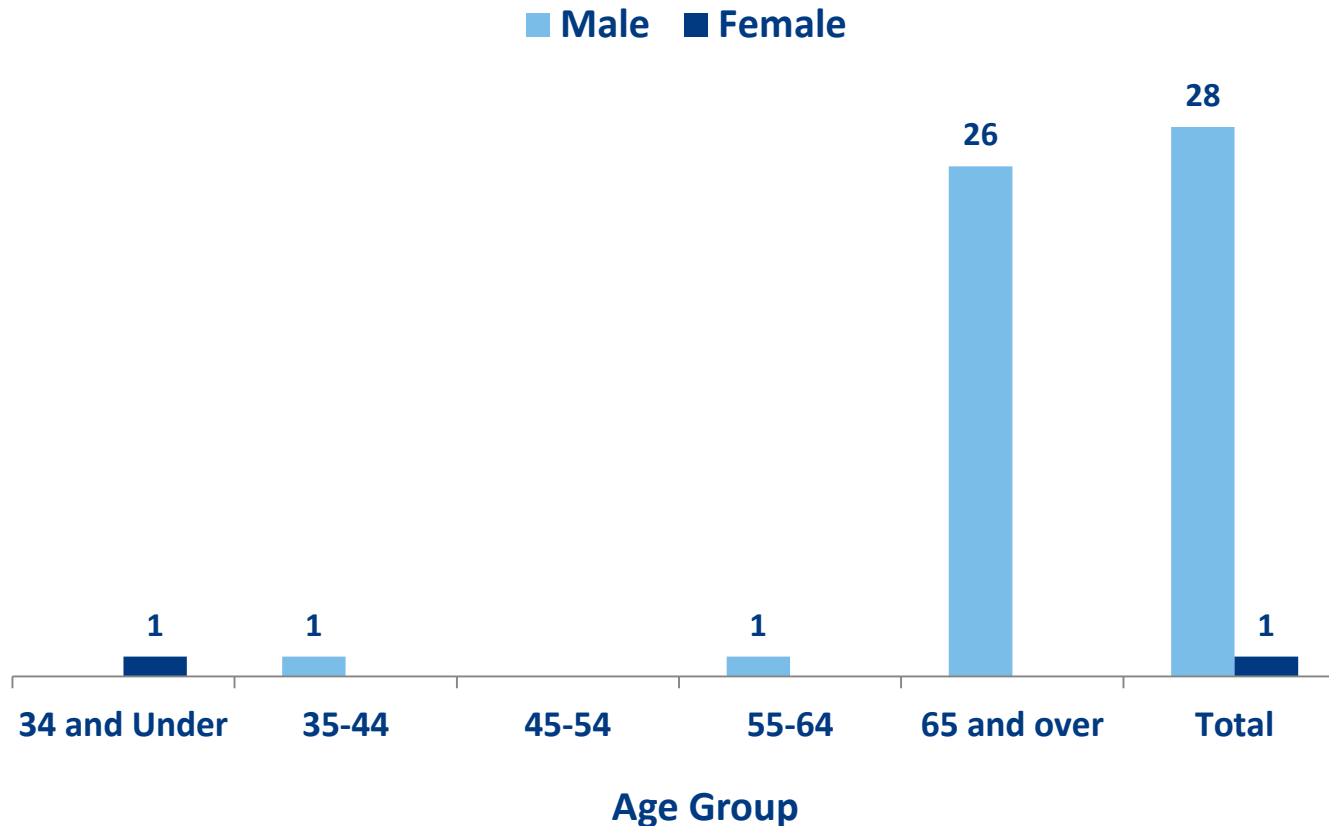
## Professional & work-life balance satisfaction, 2017







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

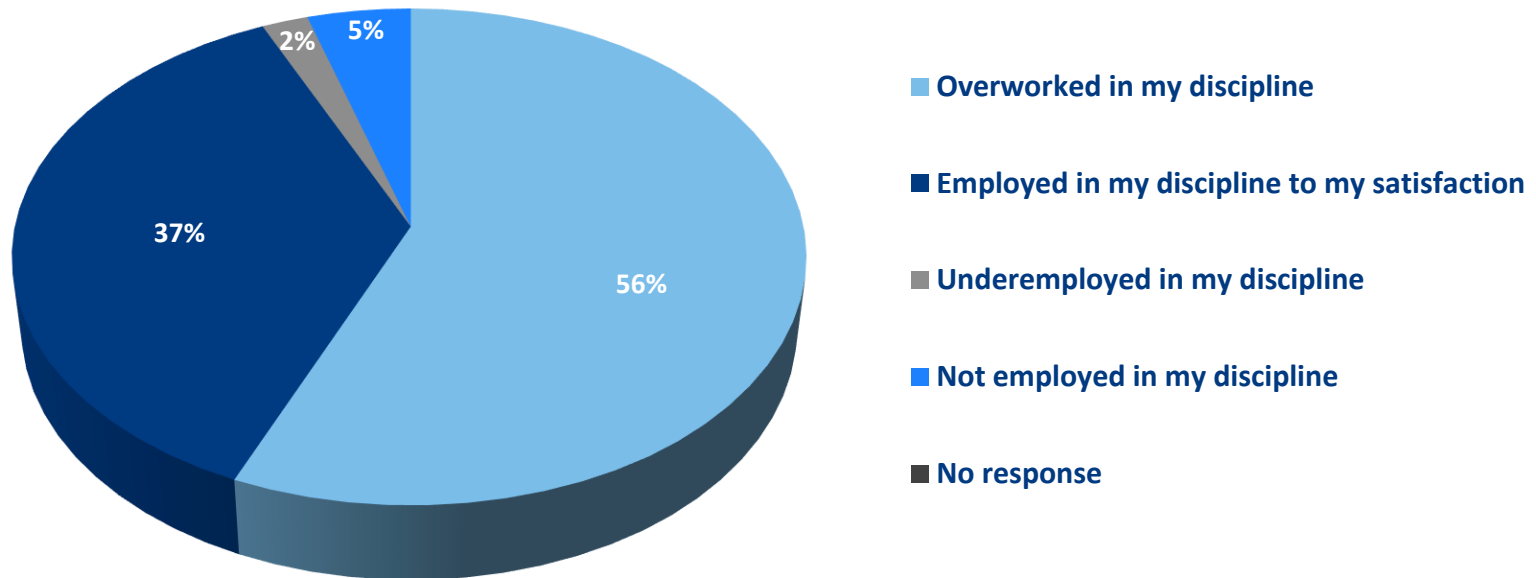


**Source: CMA Masterfile – year over year comparisons**

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](#)