Urology Profile
# TABLE OF CONTENTS

- **General Information**
  - Total number & number/100,000 population by province, 2018
  - Number/100,000 population, 1995-2018
  - Number by gender & year, 1995-2018
  - Percentage by gender & age, 2018
  - Number by gender & age, 2018
  - Percentage by main work setting, 2017
  - Percentage by practice organization, 2017
  - Hours worked per week (excluding on-call), 2017
  - On-call duty hours per month, 2017
  - Percentage by remuneration method
  - Professional & work-life balance satisfaction, 2017
  - Number of retirees during the three year period of 2014-2016
  - Employment situation, 2017
  - Links to additional resources

Updated August 2018
GENERAL INFORMATION

Urology is a surgical subspecialty that focuses on the medical and surgical treatment of disorders and diseases of the female urinary tract and the male urogenital system. It involves diagnosis, endoscopy, surgery and lithotripsy. The most common clinical encounters involve prostate disease, renal dysfunction particular to surgical management (colic, stones), bladder dysfunction and urinary tract infections.

A urologist must understand the normal function and the pathological processes and diseases that affect the adrenal gland, the kidneys, ureters, bladder, urethra in the male and female, and the prostate and external genitalia of the male. This includes an understanding, appropriate to the practice of urology of normal development and embryology, biochemistry and pharmacology, physiology, anatomy, and gross and microscopic pathology of the genito-urinary tract. Emergency care is less often a feature of urology compared to other surgical specialties. Excellent surgical skills, manual dexterity and good hand-eye coordination are important to this specialty.

Source: Pathway evaluation program
GENERAL INFORMATION

Upon completion of medical school, to become certified in urology requires a minimum of 5 years of Royal College-approved training. This period must include:

• 2 years of core training in surgery;
• 3 years of approved residency training in urology, 1 year of which must be in a senior residency position. Senior residency is defined as a year in which the resident is regularly entrusted with the responsibility for pre-operative, operative and post-operative care, including the most difficult problems in urology. The senior resident shall be in charge of a urological unit: no other resident shall intervene between the senior resident and the attending staff urologist;
• Three clinical years in urology are required to allow residents to become proficient in both open and endoscopic procedures;
• Experience at a community-based teaching unit should be undertaken during the residency.

Source: Pathway evaluation program
GENERAL INFORMATION

For further details on training requirements please go to:

Royal College of Physicians and Surgeons of Canada

Canadian Urological Association

Source: Pathway evaluation program
### Total number & number/100,000 population by province, 2018

<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>11</td>
<td>2.1</td>
</tr>
<tr>
<td>Prince Edward Island</td>
<td>3</td>
<td>2.0</td>
</tr>
<tr>
<td>Nova Scotia</td>
<td>25</td>
<td>2.6</td>
</tr>
<tr>
<td>New Brunswick</td>
<td>22</td>
<td>2.9</td>
</tr>
<tr>
<td>Quebec</td>
<td>192</td>
<td>2.3</td>
</tr>
<tr>
<td>Ontario</td>
<td>267</td>
<td>1.9</td>
</tr>
<tr>
<td>Manitoba</td>
<td>24</td>
<td>1.8</td>
</tr>
<tr>
<td>Saskatchewan</td>
<td>18</td>
<td>1.5</td>
</tr>
<tr>
<td>Alberta</td>
<td>61</td>
<td>1.4</td>
</tr>
<tr>
<td>British Columbia</td>
<td>93</td>
<td>1.9</td>
</tr>
<tr>
<td>Territories</td>
<td>0</td>
<td>0.0</td>
</tr>
<tr>
<td><strong>CANADA</strong></td>
<td><strong>716</strong></td>
<td><strong>1.9</strong></td>
</tr>
</tbody>
</table>

*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**
- Male: 89%
- Female: 11%

**Age Group**
- <35: 7%
- 35 - 44: 28%
- 45 - 54: 29%
- 55 - 64: 21%
- 65+: 15%
- <35: 7%

Excludes those where gender or age is unknown.
Source: 2018 CMA Masterfile
Number by gender & age, 2018

<table>
<thead>
<tr>
<th>Age Group</th>
<th>Female</th>
<th>Male</th>
</tr>
</thead>
<tbody>
<tr>
<td>&lt;35</td>
<td>13</td>
<td>35</td>
</tr>
<tr>
<td>35-44</td>
<td>33</td>
<td>156</td>
</tr>
<tr>
<td>45-54</td>
<td>19</td>
<td>179</td>
</tr>
<tr>
<td>55-64</td>
<td>13</td>
<td>134</td>
</tr>
<tr>
<td>65+</td>
<td>106</td>
<td></td>
</tr>
</tbody>
</table>

Excludes those where gender or age is unknown.

Source: 2018 CMA Masterfile
Percentage by main work setting, 2017

- Academic Health Sciences Centre: 36%
- Community Hospital: 34%
- Private Office/Clinic: 16%
- Admin/Corp office: 7%
- Non-AHSC Teaching Hospital: 5%
- Other Hospital: 2%

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

- Solo Practice: 33%
- Group Practice: 25%
- Interprofessional Practice: 40%
- Hospital-based Practice: 2%
- NR

Source: 2017 CMA Workforce Survey. Canadian Medical Association
### Hours worked per week (excluding on-call), 2017

<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>26.5</td>
</tr>
<tr>
<td>Direct patient care with teaching component</td>
<td>10.6</td>
</tr>
<tr>
<td>Teaching without patient care</td>
<td>2.0</td>
</tr>
<tr>
<td>Indirect patient care</td>
<td>7.0</td>
</tr>
<tr>
<td>Health facility committees</td>
<td>1.0</td>
</tr>
<tr>
<td>Administration</td>
<td>2.6</td>
</tr>
<tr>
<td>Research</td>
<td>1.3</td>
</tr>
<tr>
<td>Managing practice</td>
<td>1.4</td>
</tr>
<tr>
<td>Continued professional development</td>
<td>2.5</td>
</tr>
<tr>
<td>Other</td>
<td>0.9</td>
</tr>
<tr>
<td><strong>TOTAL HOURS PER WEEK</strong></td>
<td><strong>55.9</strong></td>
</tr>
</tbody>
</table>

Source: 2017 CMA Workforce Survey. Canadian Medical Association
On-call duty hours per month, 2017

- 95% provide on-call services
- On-call hours = 163 hrs./month
- On-call hours spent in direct patient care = 46 hrs./month

Source: 2017 CMA Workforce Survey. Canadian Medical Association
Percentage by remuneration method

Primary payment method in 2017

- 61% 90% + fee-for-service
- 13% 90% + salary
- 1% 90% + other*
- 25% Blended
- NR

* Other includes capitation, sessional, contract and other methods

Average gross fee-for-service payment per physician for Urology in 2015/16 (those earning at least $60,000) = $462,688

Average percent overhead reported by Urologists in 2017 = 25%

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1 2017 CMA Workforce Survey. Canadian Medical Association
2 National Physician Database, 2015/16, CIHI
3 2017 CMA Workforce Survey. Canadian Medical Association
Professional & work-life balance satisfaction, 2017

Balance of personal & professional commitments
- 34% NR
- 35% Dissatisfied or very dissatisfied
- 31% Satisfied or very satisfied

Current professional life
- 15% NR
- 14% Dissatisfied or very dissatisfied
- 71% Satisfied or very satisfied

Source: 2017 CMA Workforce Survey. Canadian Medical Association
Number of retirees during the three year period of 2014-2016

<table>
<thead>
<tr>
<th>Age Group</th>
<th>Male</th>
<th>Female</th>
</tr>
</thead>
<tbody>
<tr>
<td>34 and Under</td>
<td>1</td>
<td></td>
</tr>
<tr>
<td>35-44</td>
<td></td>
<td></td>
</tr>
<tr>
<td>45-54</td>
<td></td>
<td></td>
</tr>
<tr>
<td>55-64</td>
<td>2</td>
<td>2</td>
</tr>
<tr>
<td>65 and over</td>
<td>33</td>
<td></td>
</tr>
<tr>
<td>Total</td>
<td>36</td>
<td>2</td>
</tr>
</tbody>
</table>

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: 7%
- Employed in my discipline to my satisfaction: 32%
- Underemployed in my discipline: 13%
- Not employed in my discipline: 48%
- No response: 13%

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