

POSTGRADUATE MEDICAL EDUCATION AT DALHOUSIE

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Postgraduate Medical Education

Objectives

- At the end of this presentation the participant will be able to:
 - Describe the different types of postgraduate medical trainees and their respective funding sources
 - Discuss the differential funding of postgraduate training positions by provinces
 - List some challenges for the future of PGME

Types of Trainees

- **Direct Entry Resident** – A postgraduate trainee who enters a program leading to certification in a specialty, subspecialty or family medicine directly out of medical school
 - Eg. Internal Medicine, Orthopedics, Ophthalmology, General Surgery, Family Med
 - But also - Neurology

Types of Trainees

- **Subspecialty Resident** – A postgraduate trainee who enters a program leading to certification in a subspecialty after having completed at least 3 years of the base specialty
 - Usually apply to medicine and pediatrics
 - Eg Cardiology, Endocrinology
 - Can apply to other trainees
 - Eg Obstetrics and Maternal-Fetal Medicine

Types of Trainees

- **Fellows** – A term often applied incorrectly to subspecialty residents. A fellow is a medical trainee who has completed his/her formal education/residency training in a specialty and/or subspecialty and is and is interested in post-certification training in a specific area.

Types of Trainees

- **Diploma trainees** – A new category of certification for those seeking special competence in a sub-subspecialty that has been recognized as a Certified Diploma Program by the RCPSC. Diploma trainees are a specific type of Fellow.
 - Eg Cardiac electrophysiology

Funding for Different Trainee Types

Type of Trainee	Ministry of Health	AFP or Practice Plan	Private Donors	Health Foundations
Direct Entry Resident	+			
Subspecialty Resident	+	+	+	+
Fellows	(+)	+	+	+
Diploma Trainees				

(+) not paid via allocation but some paid via fee-for-service billings

What are the numbers?

Summary of Match Results 2012 First and Second Iteration R-1 Match

	Participation			Matched			Unmatched		
	2012	prev	total	2012	prev	total	2012	Prev	total
CMG	2626	91	2717	2557	65	2622	69	26	95
IMG	323	1833	2156	141	266	407	182	1567	1749
United States Medical School	41	6	47	30	1	31	11	5	16
Total	2990	1930	4920	2728	332	3060	262	1598	1860

Where are students applying?

Discipline	First Choice Discipline (#)	% of All 1st Choices
Anatomical Pathology	15	0.6
Anesthesiology	130	4.9
Cardiac Surgery	4	0.1
Dermatology	48	1.8
Diagnostic Radiology	114	4.3
Emergency Medicine	88	3.3
Family Medicine	902	33.8
Family Medicine MOTP-MMTP	21	0.8
General Pathology	1	0.0
General Surgery	112	4.2
Hematological Pathology	1	0.0
Internal Medicine	397	14.9
Laboratory Medicine	12	0.4
Medical Biochemistry	1	0.0
Medical Genetics	1	0.0

Medical Microbiology	7	0.3
Neurology	40	1.5
Neurology - Pediatric	9	0.3
Neuropathology	0	0.0
Neurosurgery	23	0.9
Nuclear Medicine	6	0.2
Obstetrics & Gynecology	105	3.9
Ophthalmology	62	2.3
Orthopedic Surgery	83	3.1
Otolaryngology	41	1.5
Pediatrics	174	6.5
Physical Med & Rehab	21	0.8
Plastic Surgery	45	1.7
Psychiatry	135	5.1
Public Health and Preventive Medicine	12	0.4
Radiation Oncology	12	0.4
Urology	35	1.3
Vascular Surgery	15	0.6
Total	2672	100.0

Who pays for what?

New Brunswick	
Description	Positions
Family Med (10+4 for MUN)	14
Family Med IMG	1
Fam Med Integrated ER	2
Royal College	11
Royal College (Medicine) IMG	1
Total	29

Who pays for what?...2

Prince Edward Island	
Description	Positions
Family Medicine	4
Family Medicine IMG	1
Royal College	2
Total	7

5 = 71.4% - FM
2 = 28.6% - RC

Who pays for what?...3

Nova Scotia	
Description	Positions
Family Medicine CMG	29
Family Medicine IMG	2
Royal College CMG	60
Royal College IMG	4
Total	95

53 FM 78 RCPSC

31 = 32.6% - FM
64 = 67.4% - RC

2012 Allocation – Family Medicine

Program	Quota	
	CMG	IMG
Family Medicine		
Sydney	5	1
Halifax	15 (+1)	1
Annapolis	4	1
Northumberland (Moncton)	6	1
Fredericton	6 (+1)	1
St John	4	1
Integrated FM-Emerg	2	
PEI	4	1
Total	48	7

2012 Allocation – Royal College

Program	Quota	
	CMG	IMG
Anaesthesia	5	1
Cardiac Surgery	1	
Diagnostic Imaging	4	
RC Emergency Medicine	2	
Internal Medicine (Halifax site)	12	1
Internal Medicine (St John site)	2	1
General Surgery	6	
Laboratory Medicine (Pathology)	3	
Neurology (adult)	1	
Neurosurgery	1	

2012 Allocation – Royal College (2)

Program	Quota	
	CMG	IMG
Obstetrics and Gynecology	5	
Ophthalmology	2	
Orthopedics	3	
Otolaryngology	2	
Pediatrics	5	
Physical Medicine and Rehab	1	
Urology	2	
Psychiatry	7	
Plastic Surgery	2	
Radiation Oncology	1	

Allocation Process

- Review previous years allocations
- Discuss needs with DoHW (Lynda Campbell)
 - Eg no Psychiatry IMG this year
- Discuss capacity with Program
 - Eg 4 not 5 in Diagnostic Radiology this year
- Review transfers in and out last year
- Associate Dean assigns allocation

FM Extended Programs

- Family Care of the Elderly – 1 resident– PEI funded
- Palliative Care – 1 resident – PEI funded
- FM – Emergency Medicine
 - 4 residents NS funded



Medicine and Pediatric Sub-Speciality

- Cardiology
- Critical Care Medicine – 2 dedicated
- Clinical Immun. & Allergy
- Endocrinology
- Gastroenterology
- Geriatric Medicine
- Hematology
- Infectious Diseases
- Medical Microbiology
- Medical Oncology
- Nephrology
- Rheumatology
- Respiratory Medicine
- Neonatal Perinatal Medicine
- Pediatric Cardiology
- Pediatric Emergency
- Pediatric Hematology
- Pediatric Infectious Diseases
- Pediatric Nephrology
- Pediatric Neurology
- Pediatric Surgery
- Transfusion Medicine
- Palliative Care

Medicine Subspecialty Funding

- Each resident funded for 5 years
- Can “double count” 4th year for internal medicine and subspecialty
- Allocate as many positions as there are 3rd years + any extras (transfers, etc)
- Critical Care funded separately (2 positions)
- Neurology and PM&R are separate (direct)

Pediatrics Subspecialty Funding

- One position is funded
- Joint pediatric subspecialty resident committee chooses ranking of applicants to all programs from among the single applicants programs bring forward
- Other funding is by Board of Directors or other endowments, etc.

Other Sub-specialty Programs

- Maternal Fetal Medicine
- Gynecologic Reproductive Endocrinology & Infertility
- Gynecological Oncology

- Neuroradiology

- Clinical Investigator Program – 1 assigned / year (2 years of funding)

Challenges for the Future

- Competency-based education



- More time for evaluation
- More remediation
- More time for preparation

Challenges for the Future

- Lack of Capacity



- Even if we fund the positions, where will the new students go?

Challenges for the Future

- Canadians Studying Abroad



SABA School of Medicine

- Increasing lobby efforts to accept fewer VISA trainees and more CSA's

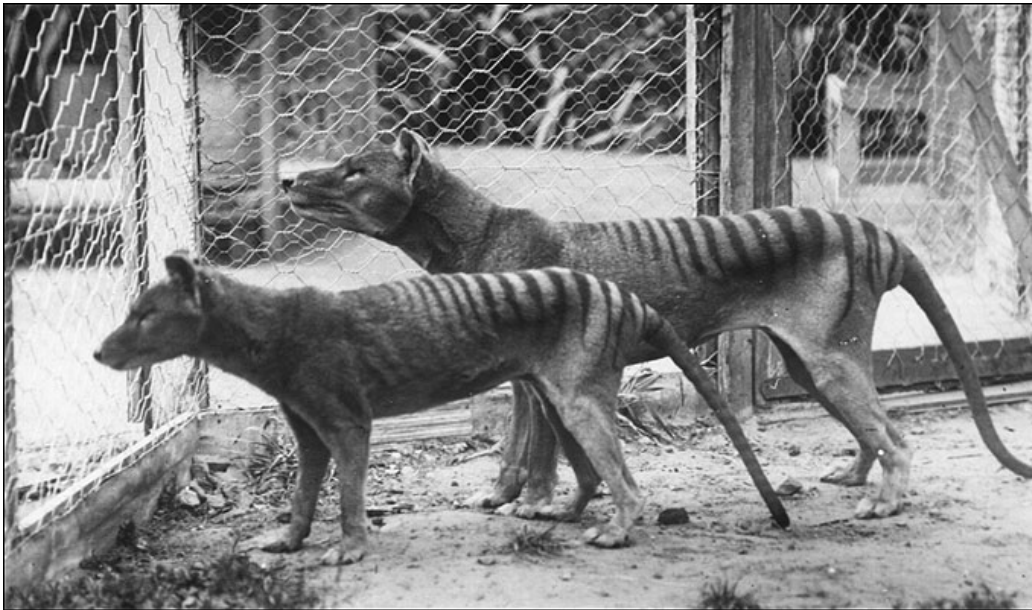
Service Provision



- Without residents to provide service, how will hospitals function?
- Where will funding for this come from

Challenges for the Future

- Avoiding extinction



Tasmanian Tigers

- Smaller programs provide specialists and subspecialists to Nova Scotia
- Failure of funding will lead to extinction

Challenges for the Future

- Faculty Recruitment and Retention

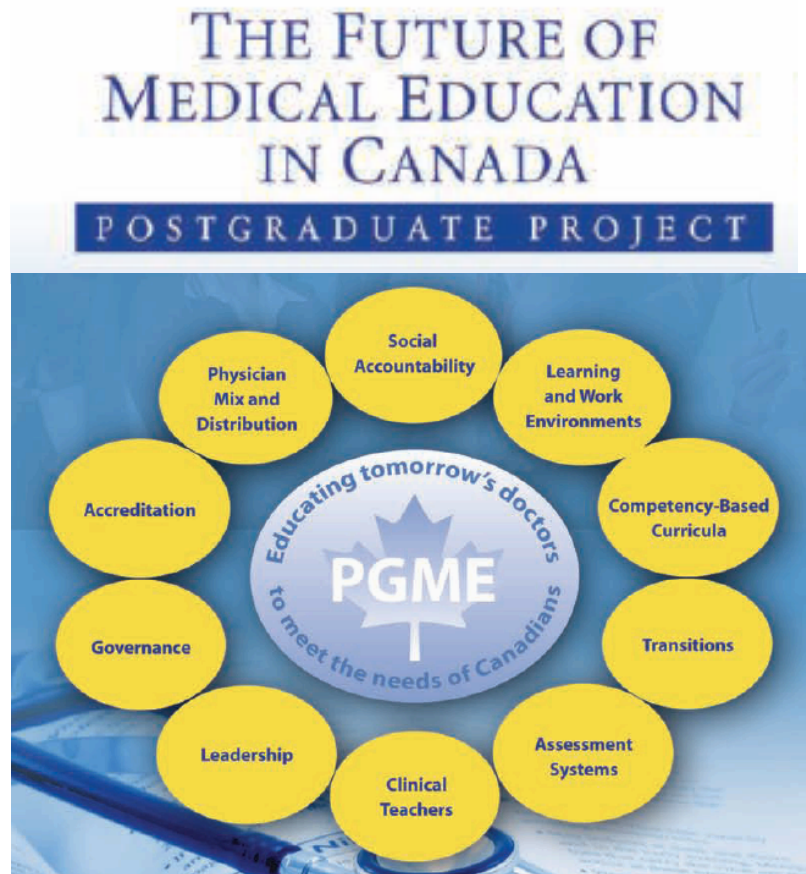


- Faculty are attracted by training programs
- Fewer programs may mean the loss of some faculty

Options

- Develop focus areas for smaller residency programs at each university
 - Eg. Neurosurgery in Halifax, Physical Medicine and Rehab in Toronto
- Promote programs to Visa Trainees to “fill the gaps”
- Fund programs in alternate years
- Others?

National Efforts



- Recommendation #1
Ensure the Right Mix,
Distribution, and Number of
Physicians to Meet Societal
Needs
- Sal Spadafora leading
National group
- Workshop held at ICRE
- No concrete info to date

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