



Residency Training Outcomes by Specialty in 2002 for New York: *A Summary of Responses to the 2002 New York Resident Exit Survey*



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PREFACE

This report summarizes the results of the Survey of Residents Completing Training in New York in 2002 (2002 Exit Survey) conducted by the New York Center for Health Workforce Studies (the Center) in the Spring and Summer of 2002. This survey, administered annually with the cooperation and assistance of residency program directors and hospitals' GME administrators across the state, consists of 32 questions covering four general topical areas: demographic and background characteristics of respondents, post-graduation plans, characteristics of post-graduation employment (for respondents with confirmed practice plans), and experiences in searching for a job and impressions of the physician job market (for respondents who had searched for a job).

The primary goal of the Exit Survey is to assist the medical education community in New York State in their efforts to train physicians consistent with the needs of the state and the nation. To achieve this goal, the Center provides residency programs, teaching hospitals and medical education community with information on the demand for new physicians and on outcomes of residency training by specialty based on the results of the survey. The year 2002 was the fifth year of the survey.

This report was prepared by David P. Armstrong and Gaetano J. Forte. Funding for the data analysis was provided by the federal Bureau of the Health Professions of the Health Resources and Services Foundation (HRSA).

The New York Center for Health Workforce Studies is a not-for-profit research center operating under the auspices of the School of Public Health at the University at Albany, State University of New York, and Health Research, Incorporated (HRI). The ideas expressed in this report are those of the Center, and do not necessarily represent the views or positions of the University at Albany, State University of New York, the School of Public Health, HRI, the Bureau of Health Professions, or HRSA.





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EXECUTIVE SUMMARY BACKGROUND

The Center for Health Workforce Studies conducts a survey of all physicians in the state completing a residency or fellowship training program. The goal is to provide the medical education community with useful information on outcomes of training and the demand for new physicians. The survey instrument (Appendix B) was developed by the Center in consultation with the teaching hospitals in the state.

In Spring, the Center distributes the surveys to GME administrators at the teaching hospitals in New York. In most cases, the surveys are then forwarded to individual programs who assume responsibility for having their graduating residents fill out the surveys in the weeks prior to program completion. Completed surveys are then returned to the Center for data entry and analysis. Through the excellent collaboration of teaching hospitals, in 2002 a total of 3,094 of the estimated 4,461 physicians completing a residency or fellowship training program completed the Exit Survey (69% response rate). The year 2002 marked the fifth consecutive year of the survey. For the five years the survey had been conducted (1998, 1999, 2000, 2001, and 2002) an aggregated total of 15,262 of the 22,614 graduates have completed the survey (67% response rate). Comparison of the demographic and educational characteristics of survey respondents with those of all residents completing training in New York from the AMA's GME database indicates that respondents are representative of all residents completing training in New York for each of these years.

The statewide results, by specialty, are presented in this report. Many of the questions on the Exit Survey are designed to assess the demand for physicians in general and by specialty. The results for the graduates of programs in New York State may not reflect the experiences of all graduates across the country. In addition, the Exit Survey provides a snapshot of the marketplace at a specific point in time that may or may not be indicative of future supply and demand. However, by conducting the survey every other year, it is possible to observe trends in the marketplace which are useful in projecting future demand.



KEY FINDINGS

Overall, the job market for new physicians in New York continues to be good. Despite the rich physician supply in New York, based on the responses to several questions used to measure demand, the opportunities for New York graduates in 2002 were fairly strong overall.

- ⊙ In 2002, less than 1% of respondents who had actively searched for a practice position had not received any job offers at the time they completed the survey.
- ⊙ While close to one-third (30%) of respondents reported some difficulty finding a satisfactory practice position, only 16% of these attributed their difficulty to an overall lack of jobs. Forty-three percent (43%) attributed their difficulty to a lack of jobs in desired locations.
- ⊙ The median starting income of graduates was up 7.3% from 2001 to 2002, accelerating from the 1.3% increase from 2000 to 2001. The average increase over the last four years of the survey was 5%.
- ⊙ Graduates' views of both the regional and national job markets were positive and optimistic for each of the last four years of the survey.

Demand for primary care physicians¹ (generalists) continues to be weaker than for non-primary care physicians (specialists). In 2002, demand for generalists was significantly weaker than for specialists. After adjusting for citizenship status:

- ⊙ In 2002, generalists were more likely than specialists to report difficulty finding a satisfactory practice position (44% versus 22%) and to have to change plans due to limited practice opportunities (21% versus 14%).
- ⊙ In 2002, generalists received fewer job offers (mean of 2.66 versus 4.30) and were less optimistic in their view of the regional job market (average Likert Score of 0.48 versus 1.03 on scale of +2 indicating "Many Jobs" to -2 indicating "No Jobs") and in their view of the national job market (1.40 versus 1.60).
- ⊙ The trends for most of the demand indicators were less positive for generalists than for specialists. The following examples illustrate this point:
 - ✧ The average annual increase in median starting income from 1999 to 2002 was 2.6% for generalists as compared to 5.0% for specialists (for all specialties, this average was 5.1%).

¹ In this report, Primary Care includes Family Practice, General Internal Medicine, General Pediatrics, and Combined Internal Medicine and Pediatrics. Non-primary care includes all other specialties.

- ✧ The percent of generalists who had to change plans due to limited job opportunities has been stable from 1999 to 2002 (22%, 25%, 24%, 22%). By contrast, fewer specialists found they had to change their plans over this period (14%, 15%, 13%, 14%).
- ✧ The mean number of job offers received by generalists has been flat from 1999 to 2002 (3.0, 2.8, 2.8, 2.6), this has also been the case for specialists until the last two years (4.1, 4.2, 4.2, 4.3).

There were significant differences in the job market experiences and assessments for different specialties. Although the overall marketplace appears relatively good for new graduates, there were significant differences by specialty. By assessing responses in a particular specialty in relation to all specialties, it was possible to identify specialties for which demand is weak or strong in relation to all others.

- ⊙ Based on a variety of indicators, the demand for Anesthesiology-General, Gastroenterology, Cardiology, Child and Adolescent Psychiatry, Radiology, Urology, and Dermatology appears to be very strong..
- ⊙ Pathology, Pediatrics-General, Pediatric Subspecialties, Internal Medicine-General, Internal Medicine and Pediatrics (Combined), and Ophthalmology experienced weak demand.

International medical school graduates (IMGs) with temporary visas (J-1, J-2, H-1, H-2, or H-3) had a significantly more difficult time in the job market than either U.S. medical graduates (USMGs) or IMGs with permanent citizenship status. With few exceptions, physicians on temporary visas can remain in the U.S. only if they practice in a Health Professionals Shortage Area or continuing training. Not surprisingly, these individuals experienced more difficulty finding employment and were more likely to subspecialize than either USMGs or IMGs with permanent citizenship status.

Fifty percent of the graduates with confirmed practice plans were staying in New York to begin practice, although there were significant differences by specialty. The in-state retention rate has been relatively flat over the last four years of the survey. For graduates in 2002 who were subspecializing, 53% were planning to do so in New York, up from 52% in 2001.

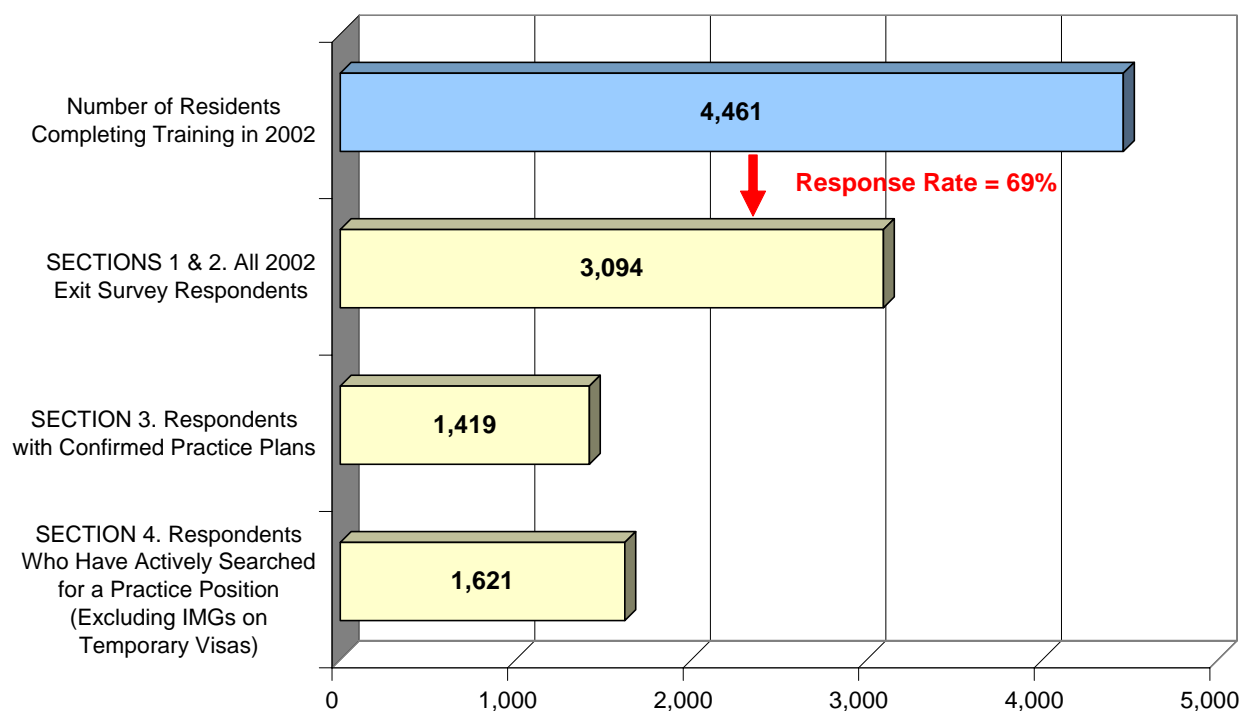
More than one-third (35%) of respondents were subspecializing. However, there were sharp differences in subspecialization rates for IMGs on temporary visas as compared with respondents with permanent citizenship.



SUBGROUPS OF RESPONDENTS USED IN EACH SECTION OF REPORT

Figure 1 illustrates the subgroups of respondents considered in each section of this report. The survey was completed by 3,094 of the estimated 4,451 residents completing training in 2002 (a 68% response rate). Sections 1 and 2 of this report contain background characteristics of all survey respondents and outlines their planned activities following the completion of their current training program. Section 3 pertains to respondents who are entering patient care/clinical practice and had confirmed practice plans (i.e., they have accepted a job offer or will be self-employed) at the time they completed the survey. Section 4 summarizes the responses to several questions used to measure demand and relating to respondents' experiences in searching for a practice position. This section excludes respondents who had not yet searched for a practice position and IMGs on temporary visas because these individuals experienced significantly more difficulty due to their visa status. Appendix A presents response rates by specialty and region, and illustrates how specialties are grouped in this report. Appendix B is the 2002 Exit Survey instrument.

Figure 1. 2002 Exit Survey Response Rate and Subgroups Used for Each Section of Report





Section I

Background Characteristics of All Respondents

Table 1.1 presents background characteristics of all Exit Survey respondents in the year 2002. This information is presented because these variables are known to be associated with several outcome variables of interest. For example, IMGs, particularly those on temporary visas, are much more likely to report difficulty finding a satisfactory practice position. Thus, the proportion of IMGs in each specialty confounds (i.e., biases) the results when making comparisons across specialties.



Figure 1.1 Percentage of Female Respondents by Specialty Group (All 2002 Exit Survey Respondents)

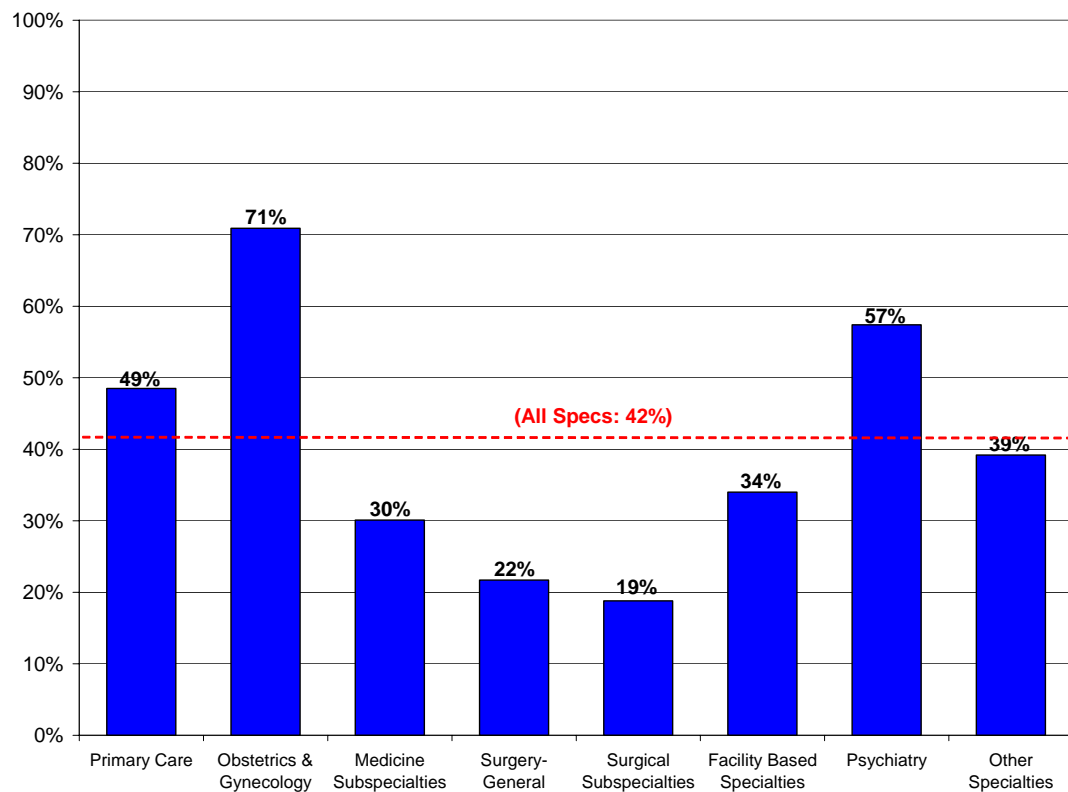


Figure 1.2 Percentage of Under-represented Minorities by Specialty Group (All 2002 Exit Survey Respondents)

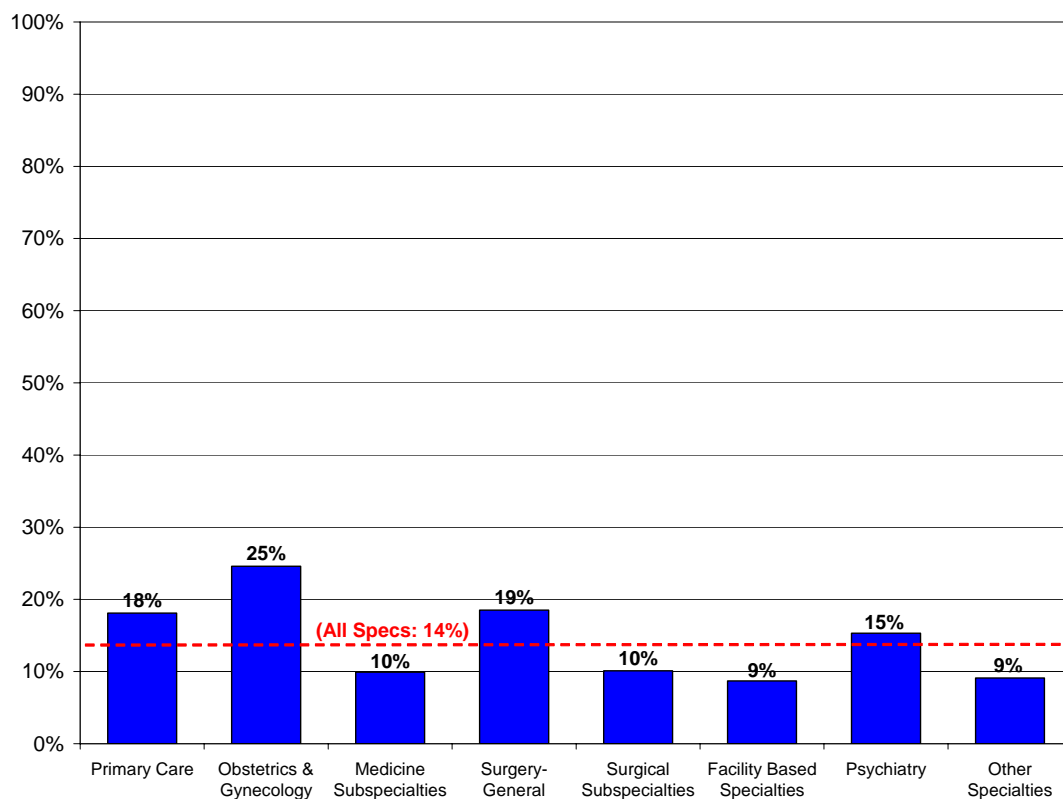




Figure 1.3 Location of Medical School and Citizenship Status (All 2002 Exit Survey Respondents)

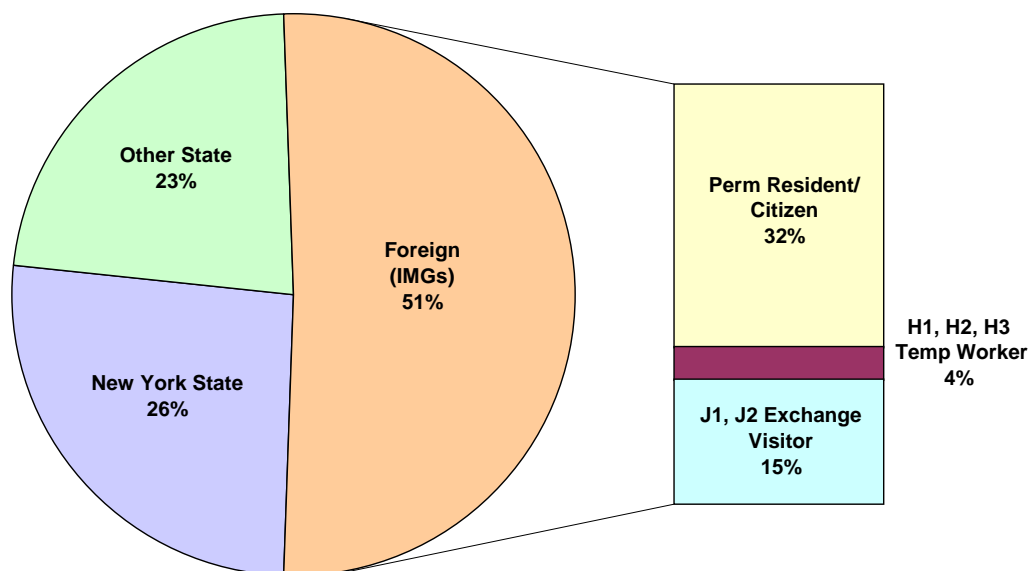


Figure 1.4 Percentage of Respondents who are IMGs by Specialty Group, (All 2001 & 2002 Exit Survey Respondents)

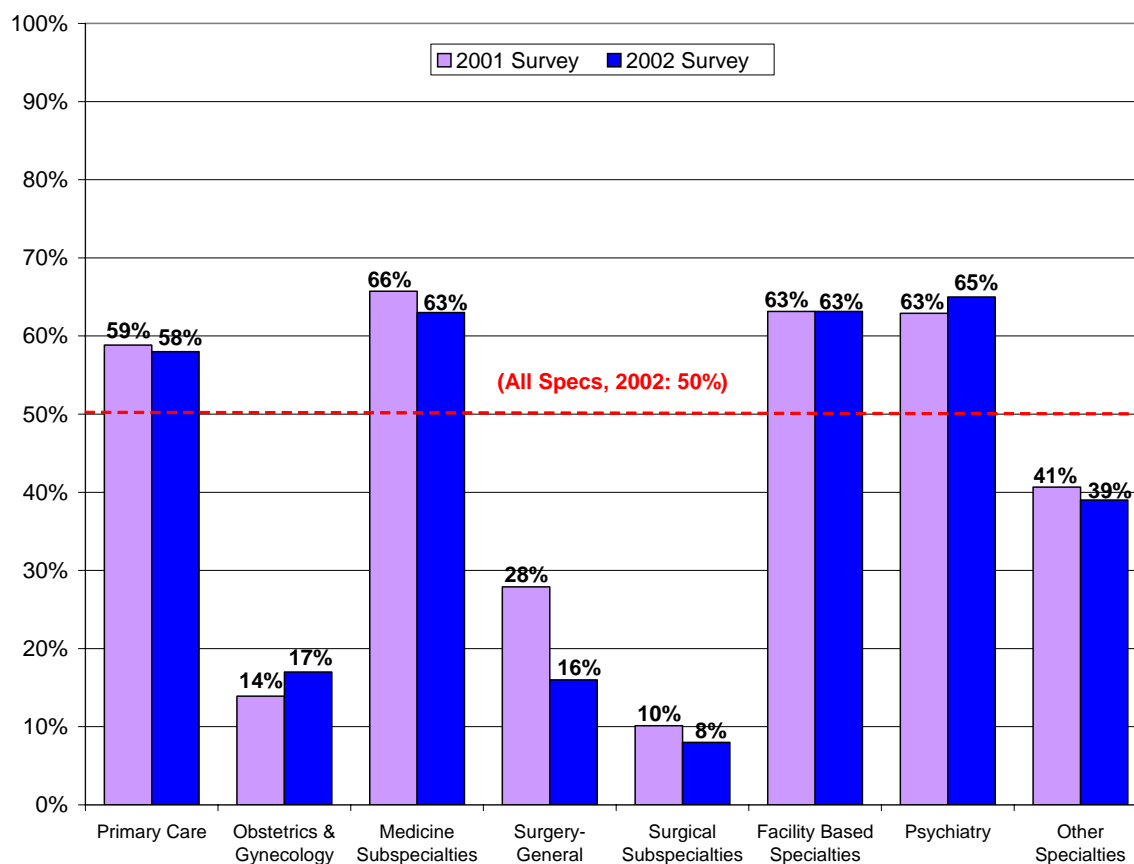


Table 1.1 Background Characteristics of Respondents (All 2002 Exit Survey Respondents)

Specialty²	Number of Resp (N)	% Female	% Under-rep Minorities³	% IMG⁴	% Temp Visa Holders⁵
Primary Care	1313	49%	18%	58%	21%
Family Practice	171	53%	27%	40%	10%
Internal Medicine-General	810	42%	15%	66%	27%
Pediatrics-General	304	64%	20%	51%	12%
IM & Peds (Combined)	28	46%	21%	21%	7%
Obstetrics/Gynecology	127	71%	25%	17%	4%
Medicine Subspecialties	366	30%	10%	63%	26%
Cardiology	87	20%	8%	52%	17%
Gastroenterology	44	12%	9%	56%	23%
Geriatrics	51	47%	6%	69%	18%
Infectious Disease	28	46%	25%	64%	39%
Nephrology	31	19%	7%	48%	14%
Surgery-General	93	22%	19%	16%	10%
Surgical Subspecialties	245	19%	10%	8%	1%
Ophthalmology	57	30%	9%	18%	2%
Orthopedics	81	12%	9%	4%	1%
Otolaryngology	22	5%	5%	0%	0%
Urology	29	24%	7%	0%	0%
Facility Based	363	34%	9%	63%	17%
Anesthesiology-General	99	32%	8%	75%	17%
Pathology	68	50%	8%	85%	19%
Radiology	159	28%	10%	43%	13%
Psychiatry	192	57%	15%	65%	12%
Adult Psychiatry	125	58%	15%	62%	10%
Child & Adolescent Psych	35	56%	17%	69%	29%
Other	395	40%	9%	38%	15%
Dermatology	30	43%	7%	7%	0%
Emergency Medicine	126	31%	11%	7%	1%
Neurology	90	36%	9%	51%	23%
Pediatric Subspecialties	61	51%	7%	75%	50%
Physical Medicine & Rehab	56	46%	9%	71%	6%
All Specialties, 2002 (2001)	3094 (2842)	42% (40%)	14% (13%)	50% (51%)	17% (20%)

²Specialties with small numbers of respondents are not shown but are included in subgroup totals and overall total.

Appendix A gives response rates for all specialties listed on the survey and shows how each specialty has been grouped in the tables presented in this report.

³Under-represented minority includes Black/African American, Hispanic/Latino, and Native American.

⁴IMG = International (Foreign) Medical Graduate.

⁵Temporary Visa Holder refers to respondents with temporary citizenship status. This includes J1 or J2 Exchange Visitors and H1, H2, or H3 Temporary Workers.



Section II

Planned Activities After Completion of Current Training Program (All Respondents)

Table 2.1 summarizes the planned primary activity of all survey respondents following completion of their current training program. Respondents were given the following choices: patient care/clinical practice, subspecializing/continuing training, chief residency, teaching/research, and other. Respondents indicating they were entering patient care/clinical practice were asked if they had actively searched for a job and if they had secured a position. Only those respondents who had accepted a job offer and those who would be self-employed (i.e., in solo practice or a partnership) were included in the subgroup "Patient Care with Confirmed Practice Plans" studied in Section 3 of this report.

Figure 2.1 Primary Activity After Completion of Current Training Program (All 2002 Exit Survey Respondents)

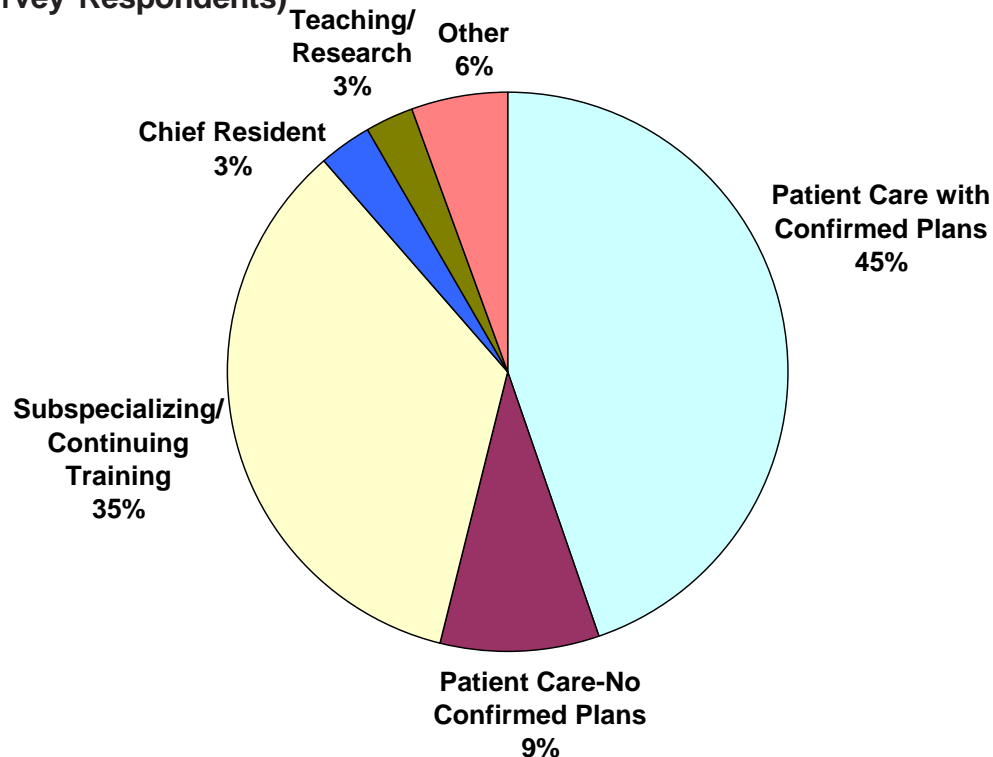


Figure 2.2 Percent of Respondents Planning to Enter Patient Care/Clinical Practice by Specialty Group, (All 2001 & 2002 Exit Survey Respondents)

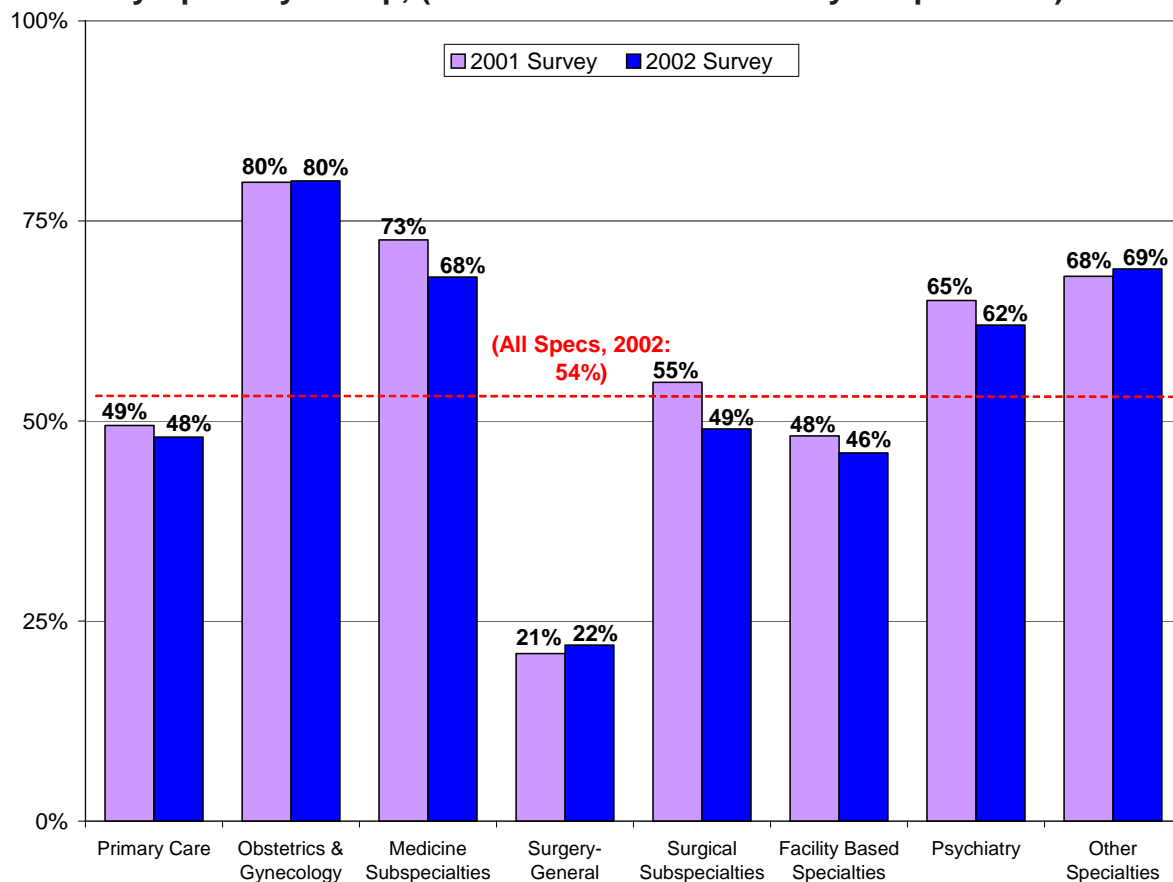




Figure 2.3 Rank of Percentage of Respondents Entering Patient Care/Clinical Practice by Specialty (All 2002 Exit Survey Respondents)

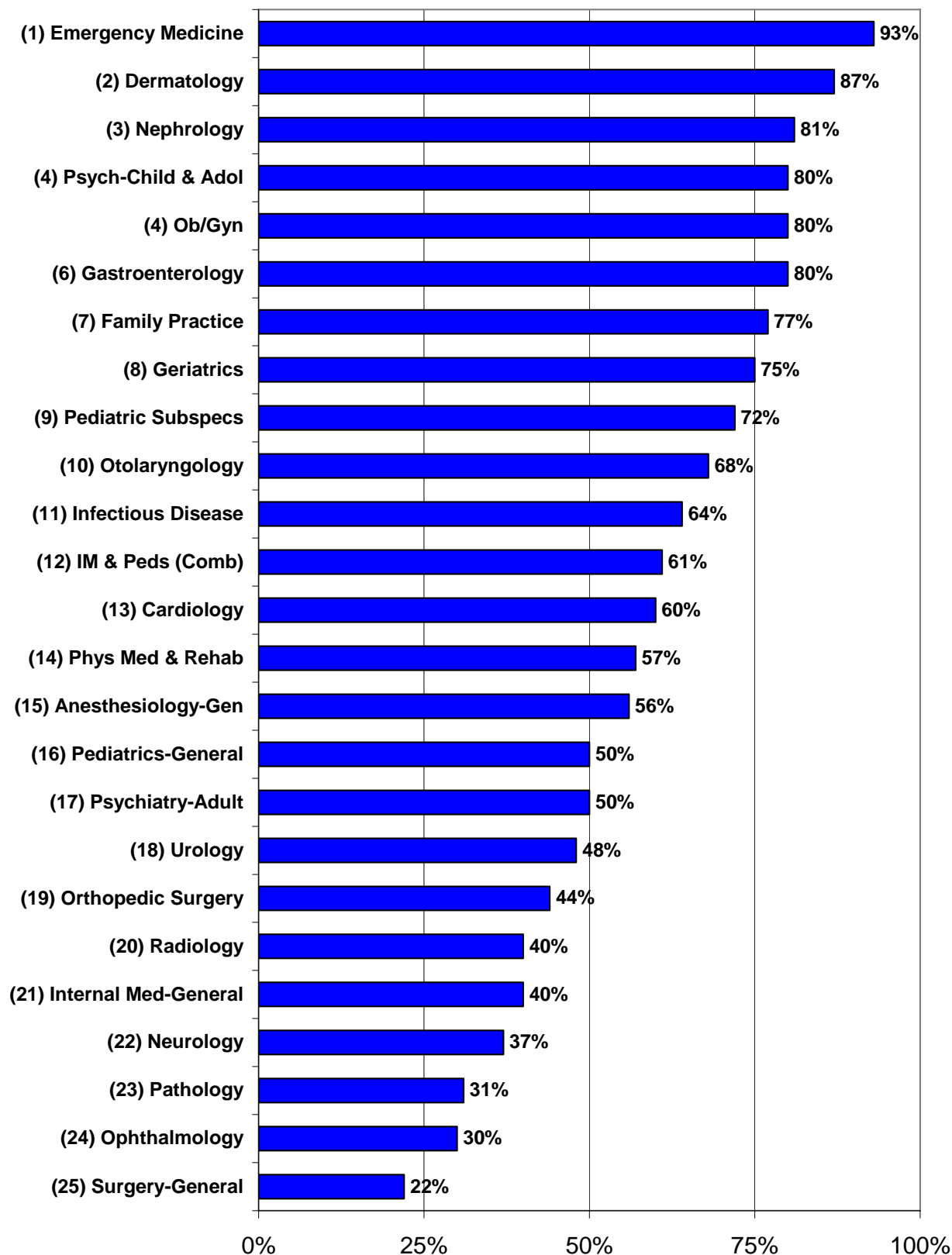


Table 2.1 Primary Activity After Completion of Current Training Program (All 2002 Exit Survey Respondents)

<u>Specialty</u>	<u>Patient Care/ Clinical Practice</u>	<u>Subspecializing/ Cont. Training</u>	<u>Chief Resident</u>	<u>Teaching/ Research</u>	<u>Other</u>
Primary Care	48%	39%	6%	2%	7%
Family Practice	77%	8%	2%	2%	11%
Internal Medicine-General	40%	45%	7%	2%	7%
Pediatrics-General	50%	40%	5%	0%	5%
IM & Peds (Combined)	61%	25%	11%	0%	4%
Obstetrics/Gynecology	80%	13%	1%	2%	5%
Medicine Subspecialties	68%	18%	1%	7%	6%
Cardiology	60%	32%	1%	8%	0%
Gastroenterology	80%	14%	0%	5%	2%
Geriatrics	75%	10%	2%	6%	8%
Infectious Disease	64%	4%	4%	7%	21%
Nephrology	81%	10%	0%	3%	7%
Surgery-General	22%	72%	1%	2%	3%
Surgical Subspecialties	49%	49%	0%	2%	1%
Ophthalmology	30%	65%	0%	2%	4%
Orthopedics	44%	54%	0%	1%	0%
Otolaryngology	68%	27%	0%	5%	0%
Urology	48%	52%	0%	0%	0%
Facility Based	46%	46%	0%	2%	6%
Anesthesiology-General	56%	34%	0%	2%	8%
Pathology	31%	63%	0%	3%	2%
Radiology	40%	56%	2%	1%	4%
Psychiatry	62%	31%	1%	2%	4%
Adult Psychiatry	50%	45%	1%	1%	4%
Child & Adolescent Psych	80%	9%	0%	3%	9%
Other	69%	23%	0%	6%	3%
Dermatology	87%	13%	0%	0%	1%
Emergency Medicine	93%	5%	0%	2%	1%
Neurology	37%	52%	0%	10%	7%
Pediatric Subspecialties	72%	10%	0%	12%	5%
Physical Medicine & Rehab	57%	36%	0%	2%	6%
All Specialties, 2002 (2001)	54% (56%)	35% (34%)	3% (2%)	3% (3%)	5% (6%)



Section III

Practice Plans of Respondents with Confirmed Plans to Enter Patient Care/Clinical Practice

This section summarizes several characteristics of the practice plans of survey respondents *with confirmed plans to enter patient care/clinical practice*.

3.1 Practice Location

Table 3.1 gives the practice location of respondents with confirmed practice plans. This is a subset of "All Respondents" so the number in this subgroup is presented for each specialty in the first column. A total of 1,404 respondents had confirmed practice plans. Two percent of respondents were planning to practice outside the U.S. These physicians have been excluded from all other subsections within Section 3 of this report.

Figure 3.1 Location of Upcoming Practice (for 2002 Exit Survey Respondents with Confirmed Practice Plans)

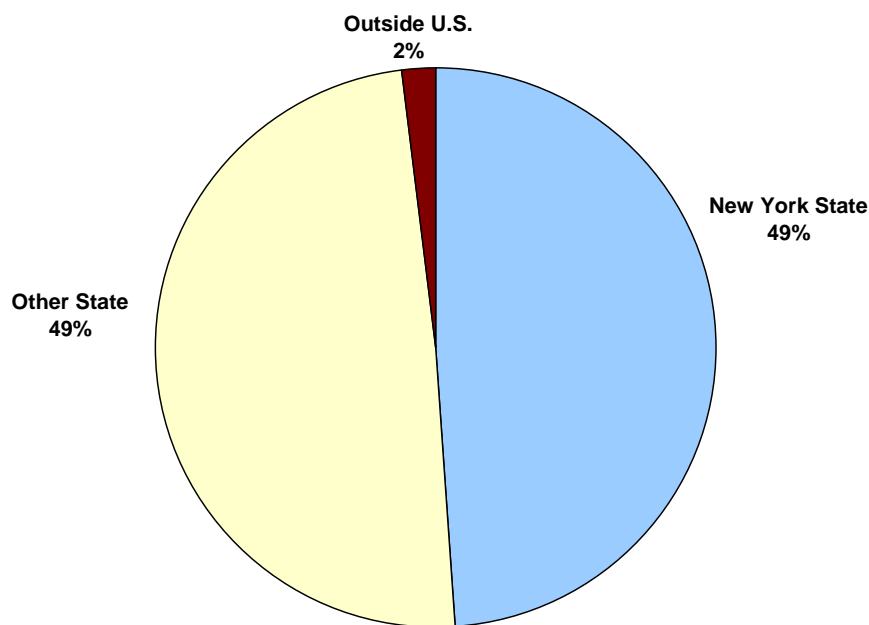


Figure 3.2 Trends in In-State Retention Rates by Specialty Group (for Exit Survey Respondents with Confirmed Practice Plans)

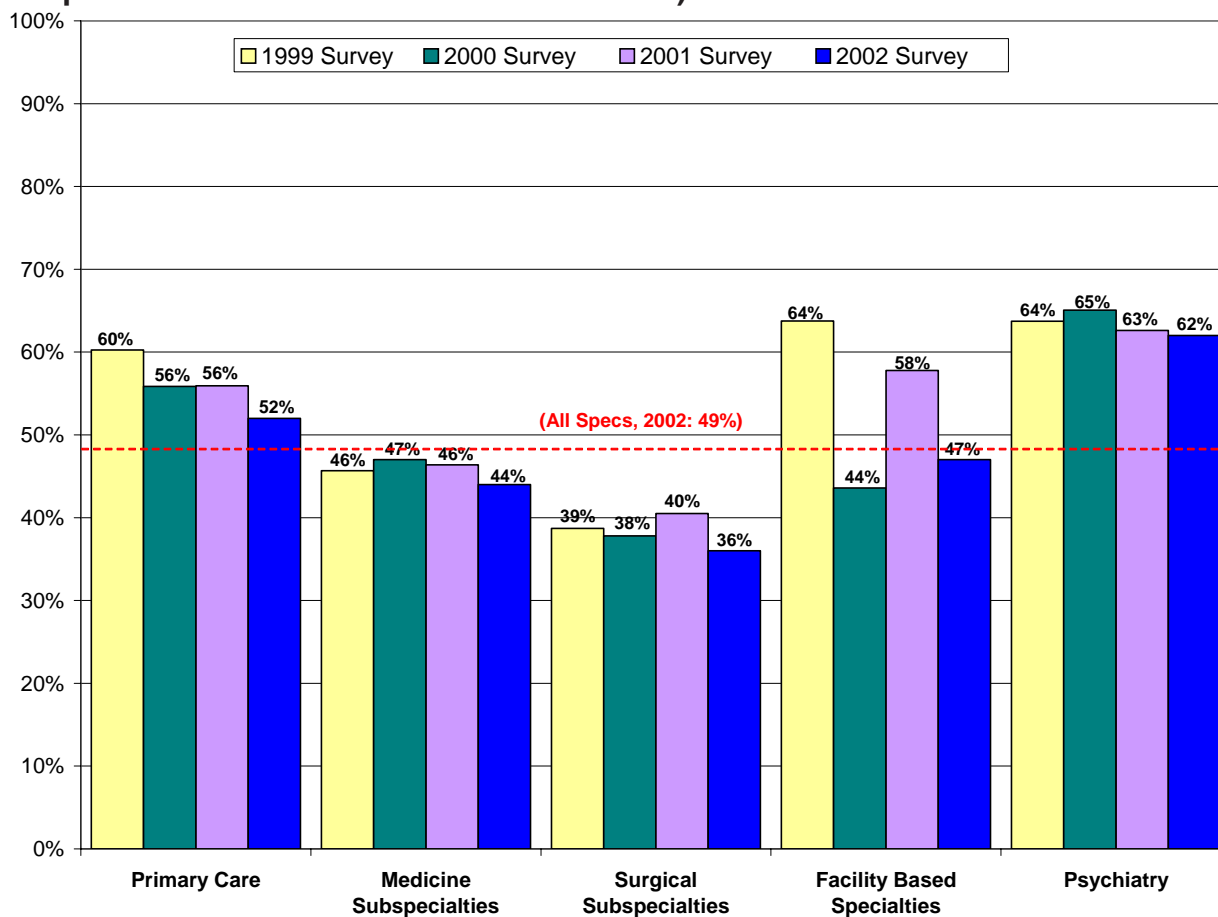




Figure 3.3 Rank of In-State Retention Rates by Specialty (for 2002 Exit Survey Respondents with Confirmed Practice Plans)

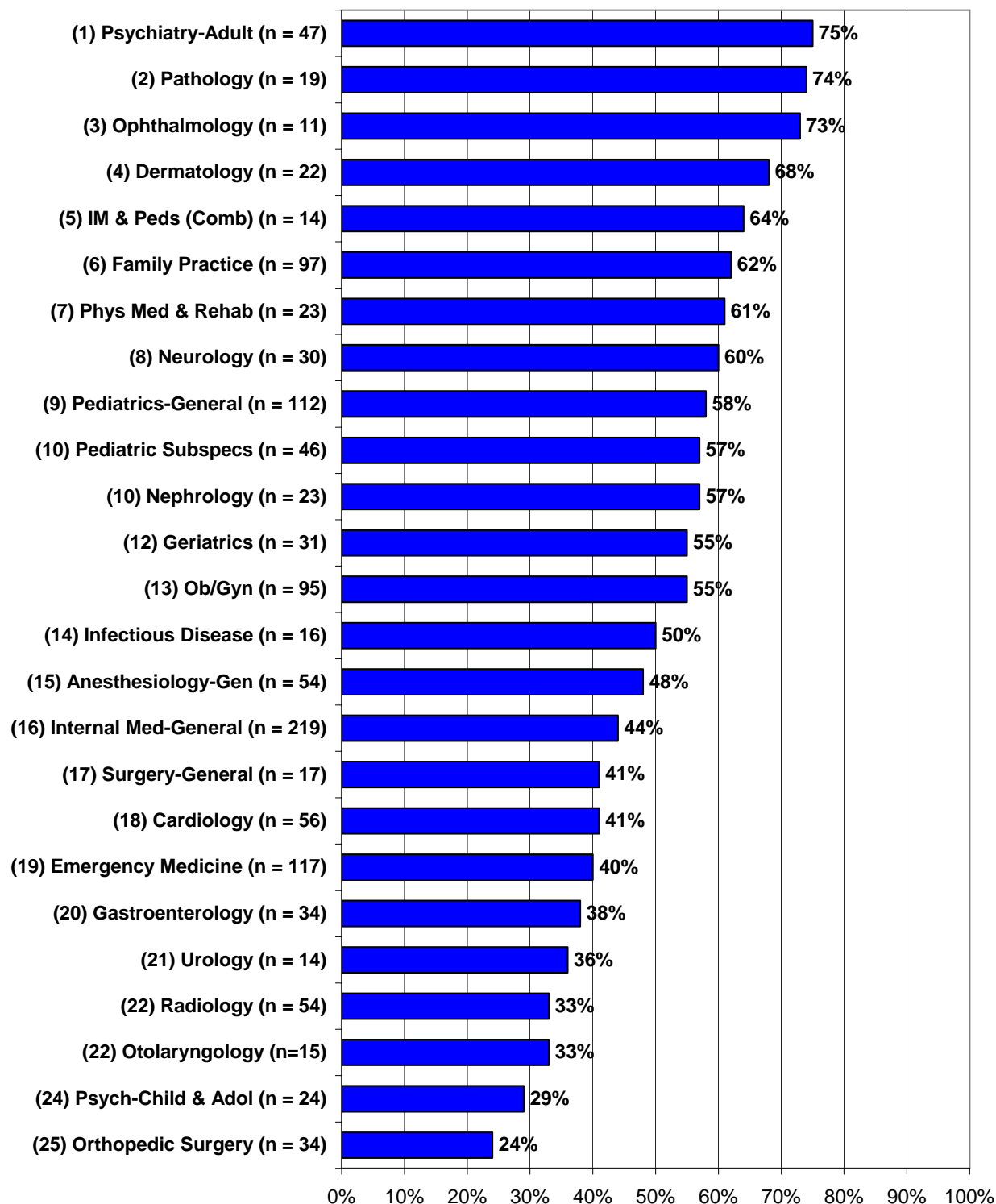


Table 3.1 Number of Respondents with Confirmed Practice Plans and Location of Upcoming Practice (for 2002 Exit Survey Respondents with Confirmed Practice Plans)

<u>Specialty</u>	<u>Number with Confirmed Practice Plans⁶</u>	<u>LOCATION OF UPCOMING PRACTICE</u>			
		<u>Within New York State</u>	<u>Other State</u>	<u>Outside U.S.⁷</u>	
		<u>Same Region</u>	<u>Other Area</u>		
Primary Care	442	47%	5%	46%	2%
Family Practice	97	56%	6%	37%	1%
Internal Medicine-General	219	41%	3%	54%	2%
Pediatrics-General	112	52%	6%	41%	1%
IM & Peds (Combined)	14	50%	14%	36%	0%
Obstetrics/Gynecology	95	50%	5%	45%	0%
Medicine Subspecialties	235	40%	4%	55%	1%
Cardiology	56	39%	2%	60%	0%
Gastroenterology	34	35%	3%	59%	3%
Geriatrics	31	45%	10%	45%	0%
Infectious Disease	16	50%	0%	50%	0%
Nephrology	23	52%	4%	44%	0%
Surgery-General	17	35%	6%	53%	6%
Surgical Subspecialties	110	29%	7%	63%	1%
Ophthalmology	11	45%	27%	27%	0%
Orthopedics	34	20%	3%	74%	3%
Otolaryngology	15	33%	0%	67%	0%
Urology	14	21%	14%	64%	0%
Facility Based	152	44%	3%	47%	6%
Anesthesiology-General	54	44%	4%	50%	2%
Pathology	19	74%	0%	21%	5%
Radiology	54	30%	4%	54%	13%
Psychiatry	98	55%	7%	36%	2%
Adult Psychiatry	47	64%	11%	23%	2%
Child & Adolescent Psych	24	30%	0%	67%	4%
Other	255	47%	3%	50%	0%
Dermatology	22	64%	5%	32%	0%
Emergency Medicine	117	38%	3%	60%	0%
Neurology	30	57%	3%	37%	3%
Pediatric Subspecialties	46	54%	2%	44%	0%
Physical Medicine & Rehab	23	57%	4%	39%	0%
All Specialties, 2002 (2001)	1404 (1301)	45% (48%)	5% (4%)	49% (45%)	2% (2%)

⁶This subgroup (i.e. respondents with confirmed practice plans) includes respondents who indicated they were entering patient care/clinical practice and had accepted an offer for a practice position.

⁷This subgroup (i.e. respondents leaving the U.S.) has been excluded from all other tables within Section 3 of this report.



3.2 Principal Practice Setting

Table 3.2 shows the practice setting of graduate's upcoming principal practice. The "Other" category includes "freestanding health center/clinic", "HMO", "military", and "other". On the 2002 survey, a question asked graduates about the level of ownership they would have in their upcoming practice. Responses to this question are summarized in Figure 3.5.

Figure 3.4 Practice Setting of Respondent's Upcoming Principal Practice (for 2002 Exit Survey Respondents with Confirmed Practice Plans)

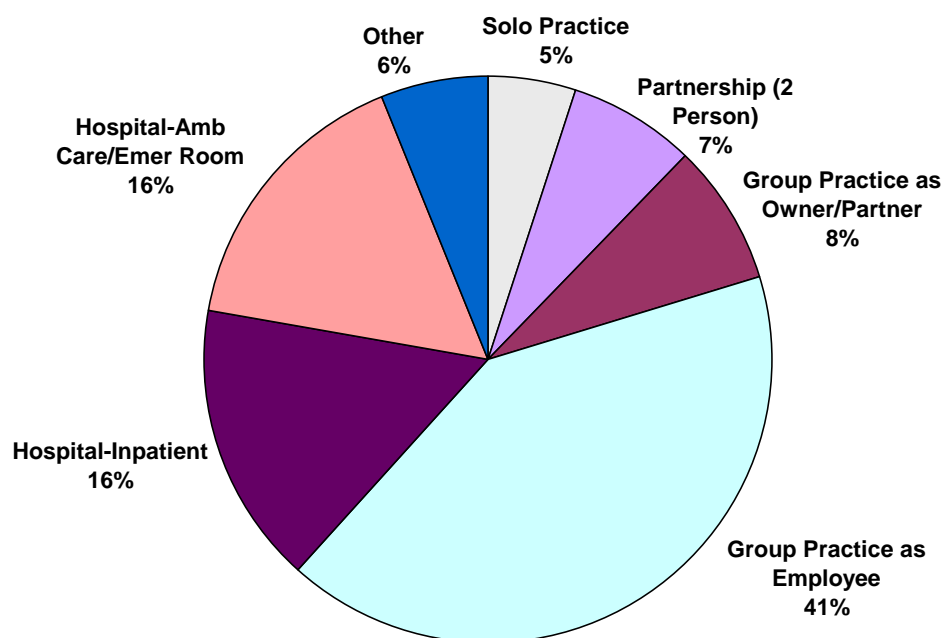


Figure 3.5 Respondent's Level of Ownership in Upcoming Principal Practice (for 2002 Exit Survey Respondents with Confirmed Practice Plans)

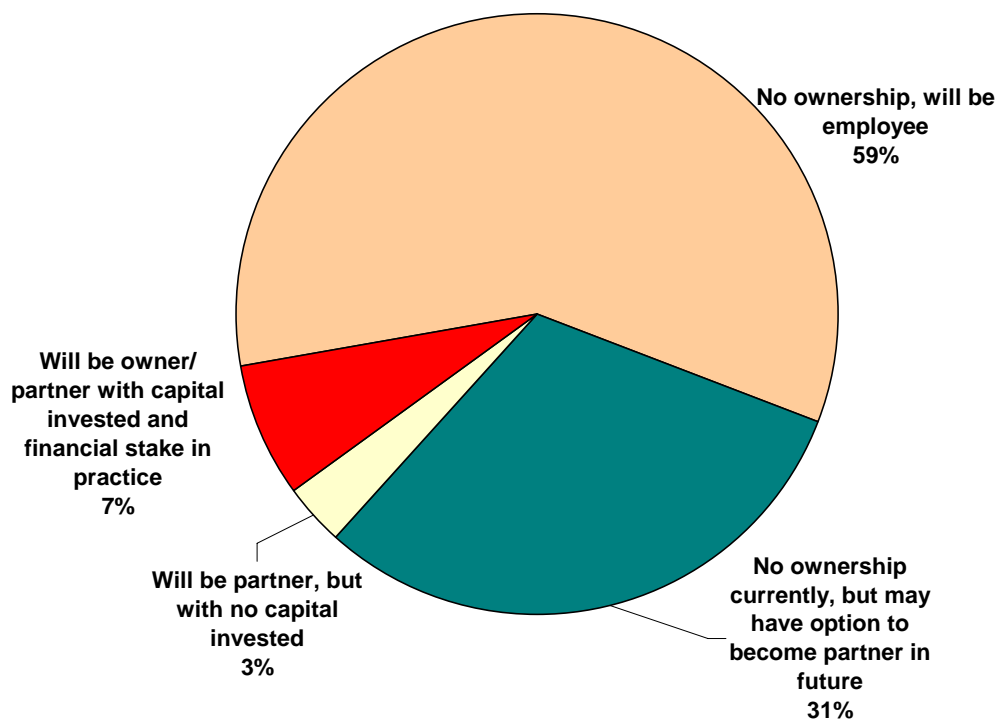




Table 3.2 Practice Setting of Respondent's Upcoming Principal Practice (for 2002 Exit Survey Respondents with Confirmed Practice Plans)

Specialty	Solo Practice	Partner-ship (2 Person)	GROUP PRACTICE		HOSPITAL			Other
			As Owner/ Partner	As Em- ployee	In- patient	Amb. Care	Emer. Room	
Primary Care	6%	8%	6%	47%	15%	10%	2%	6%
Family Practice	9%	9%	2%	52%	2%	12%	0%	14%
Internal Medicine-General	7%	3%	7%	40%	24%	11%	4%	4%
Pediatrics-General	1%	17%	6%	55%	10%	9%	0%	3%
IM & Peds (Combined)	13%	13%	7%	40%	7%	7%	7%	7%
Obstetrics/Gynecology	7%	13%	8%	52%	13%	5%	0%	3%
Medicine Subspecialties	3%	9%	9%	50%	17%	9%	0%	3%
Cardiology	0%	13%	17%	52%	17%	2%	0%	0%
Gastroenterology	9%	12%	6%	46%	15%	6%	0%	6%
Geriatrics	4%	11%	0%	37%	22%	15%	0%	11%
Infectious Disease	0%	7%	0%	43%	7%	36%	0%	7%
Nephrology	5%	0%	14%	73%	9%	0%	0%	0%
Surgery-General	12%	0%	6%	70%	0%	0%	0%	12%
Surgical Subspecialties	8%	12%	20%	47%	9%	0%	0%	3%
Ophthalmology	0%	36%	9%	55%	0%	11%	0%	0%
Orthopedics	3%	0%	29%	59%	6%	0%	0%	3%
Otolaryngology	13%	13%	20%	47%	7%	0%	0%	0%
Urology	14%	7%	21%	57%	0%	0%	0%	0%
Facility Based	2%	3%	19%	45%	25%	5%	0%	1%
Anesthesiology-General	0%	4%	13%	62%	15%	4%	0%	2%
Pathology	0%	0%	29%	43%	29%	0%	0%	0%
Radiology	2%	0%	30%	34%	26%	9%	0%	0%
Psychiatry	7%	1%	1%	10%	38%	24%	9%	11%
Adult Psychiatry	12%	2%	2%	7%	33%	26%	12%	7%
Child & Adolescent Psych	0%	0%	0%	26%	30%	30%	0%	13%
Other	3%	6%	6%	30%	13%	6%	36%	1%
Dermatology	5%	23%	9%	59%	0%	5%	0%	0%
Emergency Medicine	0%	0%	5%	15%	1%	0%	77%	2%
Neurology	7%	11%	7%	39%	25%	11%	0%	0%
Pediatric Subspecialties	0%	2%	2%	29%	46%	20%	0%	0%
Physical Medicine & Rehab	18%	0%	0%	47%	18%	18%	0%	0%
All Specialties, 2002	5%	7%	9%	42%	17%	8%	8%	4%
(All Specialties, 2001)	(3%)	(9%)	(8%)	(40%)	(17%)	(10%)	(7%)	(7%)



3.3 Demographics of Practice Location

Table 3.3 summarizes the responses to two questions relating to the demographics of the respondent's upcoming practice location. The first five columns give the demographics of the principal practice location and the last column gives the percentage of graduates entering practice in federally designated Health Professional Shortage Areas (HPSAs). It should be noted that (as is true with all data presented in this report) these numbers are based on self-reporting by respondents. It should also be noted that a large percentage said they "didn't know" if their upcoming practice fell within a federal HPSA.



Figure 3.6 Percentage of Respondents Entering Practice in Rural and Inner City Areas by Location of Medical School & Citizenship Status (for 2002 Exit Survey Respondents from Primary Care Specialties with Confirmed Practice Plans)

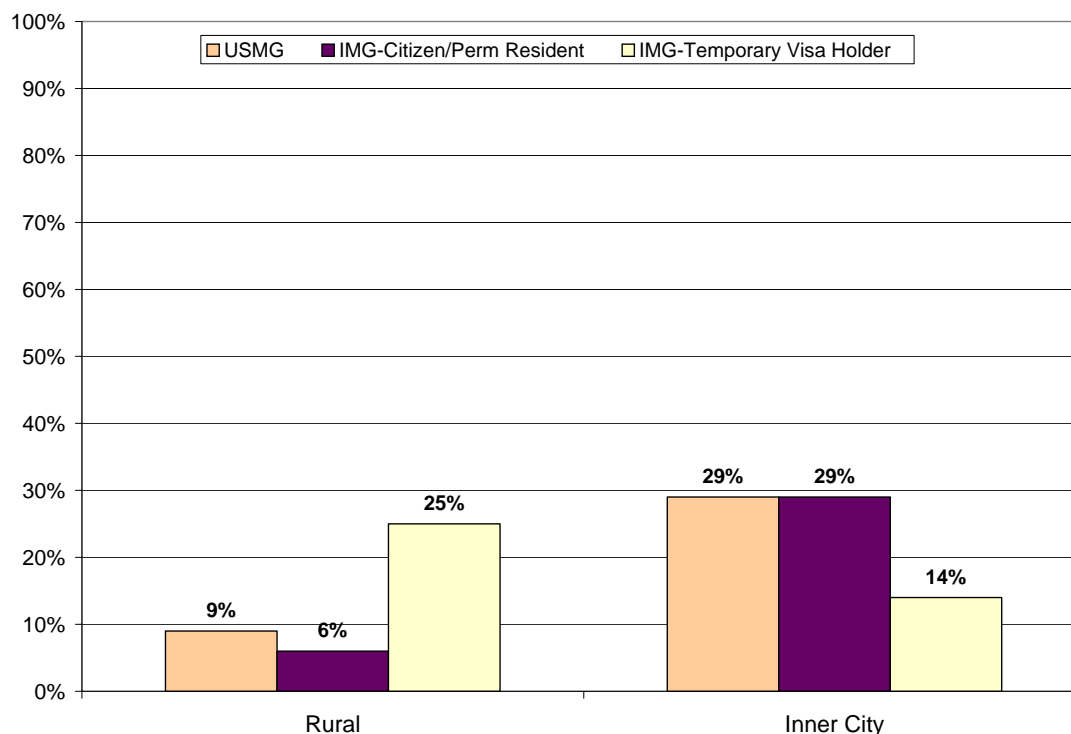


Figure 3.7 Trends in Percentage of Respondents Entering Practice in a Federal HPSA by Location of Medical School & Citizenship Status (for 2002 Exit Survey Respondents from Primary Care Specialties with Confirmed Practice Plans)

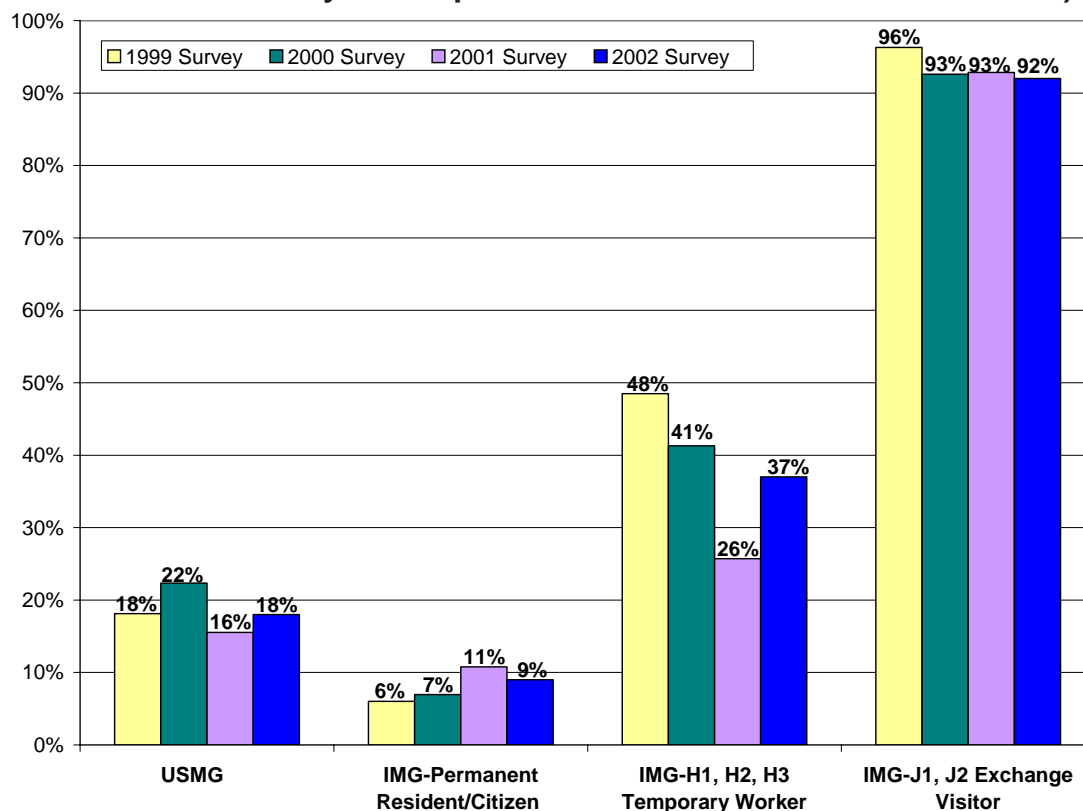


Table 3.3 Demographics of Practice Location (for 2002 Exit Survey Respondents with Confirmed Practice Plans)

<u>Specialty</u>	<u>DEMOGRAPHICS</u>					<u>% Practicing in a Federal HPSA⁸</u>
	<u>Inner City</u>	<u>Other Area in Major City</u>	<u>Suburban</u>	<u>Small City</u>	<u>Rural</u>	
Primary Care	27%	15%	32%	16%	11%	21%
Family Practice	30%	10%	23%	19%	18%	31%
Internal Medicine-General	24%	20%	30%	17%	9%	19%
Pediatrics-General	29%	11%	43%	11%	6%	16%
IM & Peds (Combined)	20%	13%	27%	13%	27%	27%
Obstetrics/Gynecology	32%	19%	34%	7%	7%	16%
Medicine Subspecialties	23%	24%	31%	16%	6%	16%
Cardiology	18%	23%	46%	9%	4%	11%
Gastroenterology	27%	23%	35%	6%	9%	12%
Geriatrics	32%	26%	16%	19%	7%	17%
Infectious Disease	43%	14%	21%	7%	14%	40%
Nephrology	10%	24%	52%	10%	5%	5%
Surgery-General	13%	25%	38%	13%	13%	7%
Surgical Subspecialties	22%	20%	47%	11%	1%	2%
Ophthalmology	0%	8%	75%	17%	0%	0%
Orthopedics	21%	18%	46%	15%	0%	0%
Otolaryngology	18%	6%	63%	13%	0%	0%
Urology	21%	36%	36%	0%	7%	0%
Facility Based	29%	25%	25%	16%	6%	8%
Anesthesiology-General	22%	16%	33%	16%	12%	2%
Pathology	31%	38%	19%	13%	0%	13%
Radiology	32%	26%	21%	19%	2%	2%
Psychiatry	30%	30%	22%	12%	6%	17%
Adult Psychiatry	35%	35%	15%	9%	7%	13%
Child & Adolescent Psych	17%	21%	33%	21%	8%	22%
Other	29%	22%	32%	15%	2%	10%
Dermatology	23%	9%	59%	9%	0%	5%
Emergency Medicine	26%	24%	30%	20%	1%	7%
Neurology	40%	13%	33%	7%	7%	11%
Pediatric Subspecialties	36%	26%	17%	19%	2%	26%
Physical Medicine & Rehab	40%	20%	28%	12%	0%	0%
All Specialties, 2002 (2001)	27% (27%)	21% (21%)	32% (29%)	15% (16%)	7% (6%)	15% (17%)

⁸HPSA = Health Professionals Shortage Area.



3.4 Expected Starting Income

Table 3.4 presents descriptive statistics for respondents' expected income in their first year of practice. Each individual's starting income was computed by summing their base salary and their expected additional/incentive income. The number of respondents (N) is given because many specialties had a relatively small number of respondents. Finally, specialties are ranked in descending order (i.e., 1 is highest, 25 is lowest) by both mean and median expected starting income.

Figure 3.8 Descriptive Statistics for Starting Income (in \$1,000s) by Specialty Group (for 2002 Exit Survey Respondents with Confirmed Practice Plans)

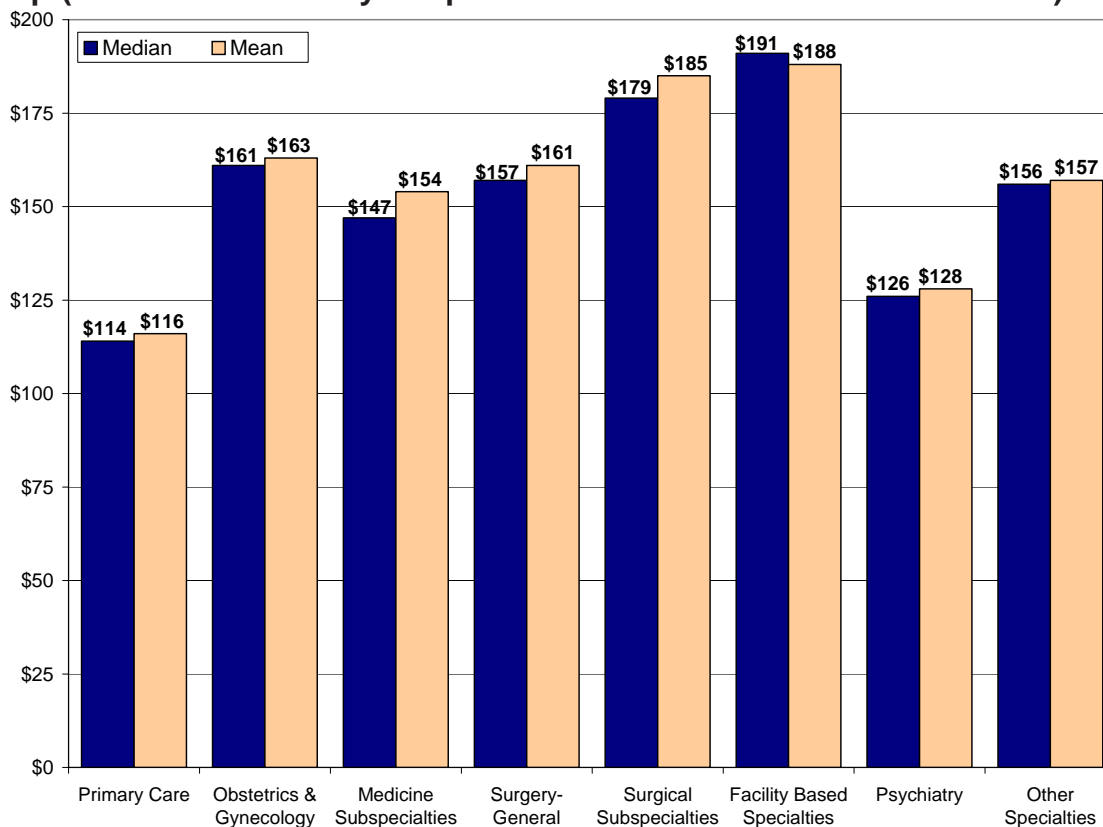


Figure 3.9 Distribution of Starting Income by Primary Care vs. Non-Primary Care (for 2002 Exit Survey Respondents with Confirmed Practice Plans)

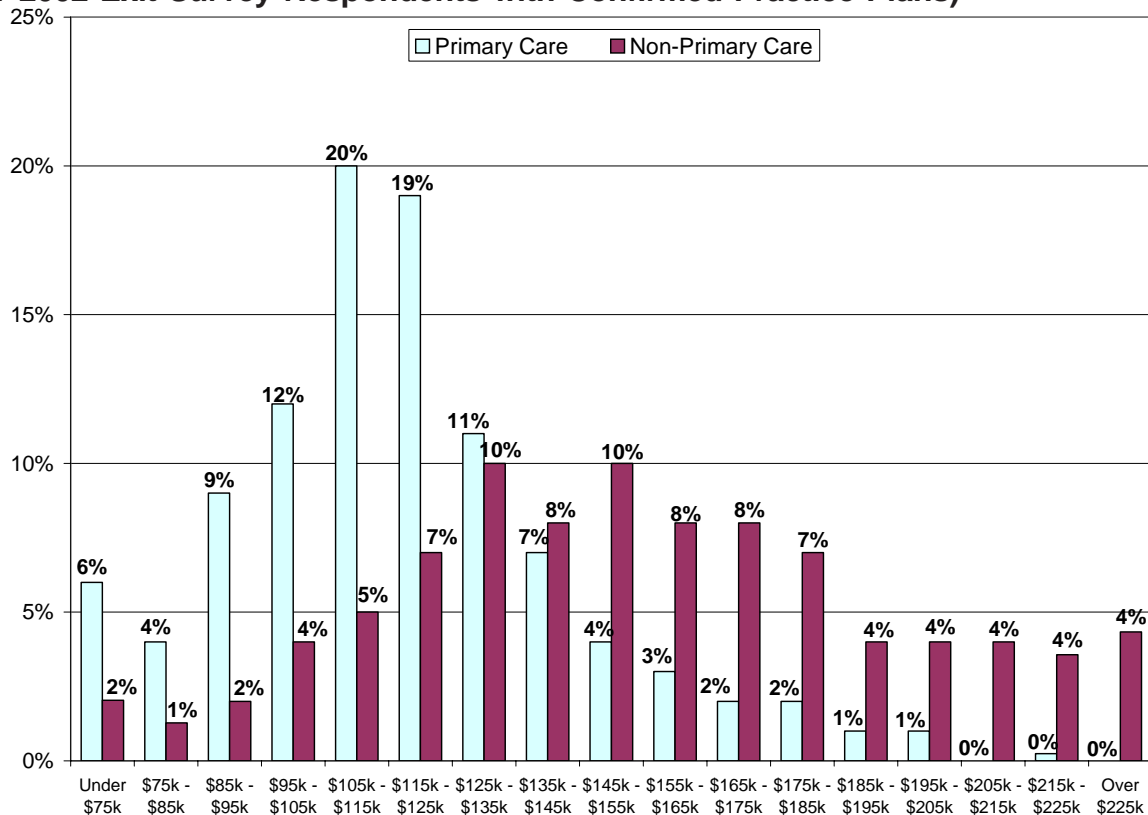




Figure 3.10 Rank of Median Starting Income (in 1,000s) by Specialty (for 2002 Exit Survey Respondents with Confirmed Practice Plans)

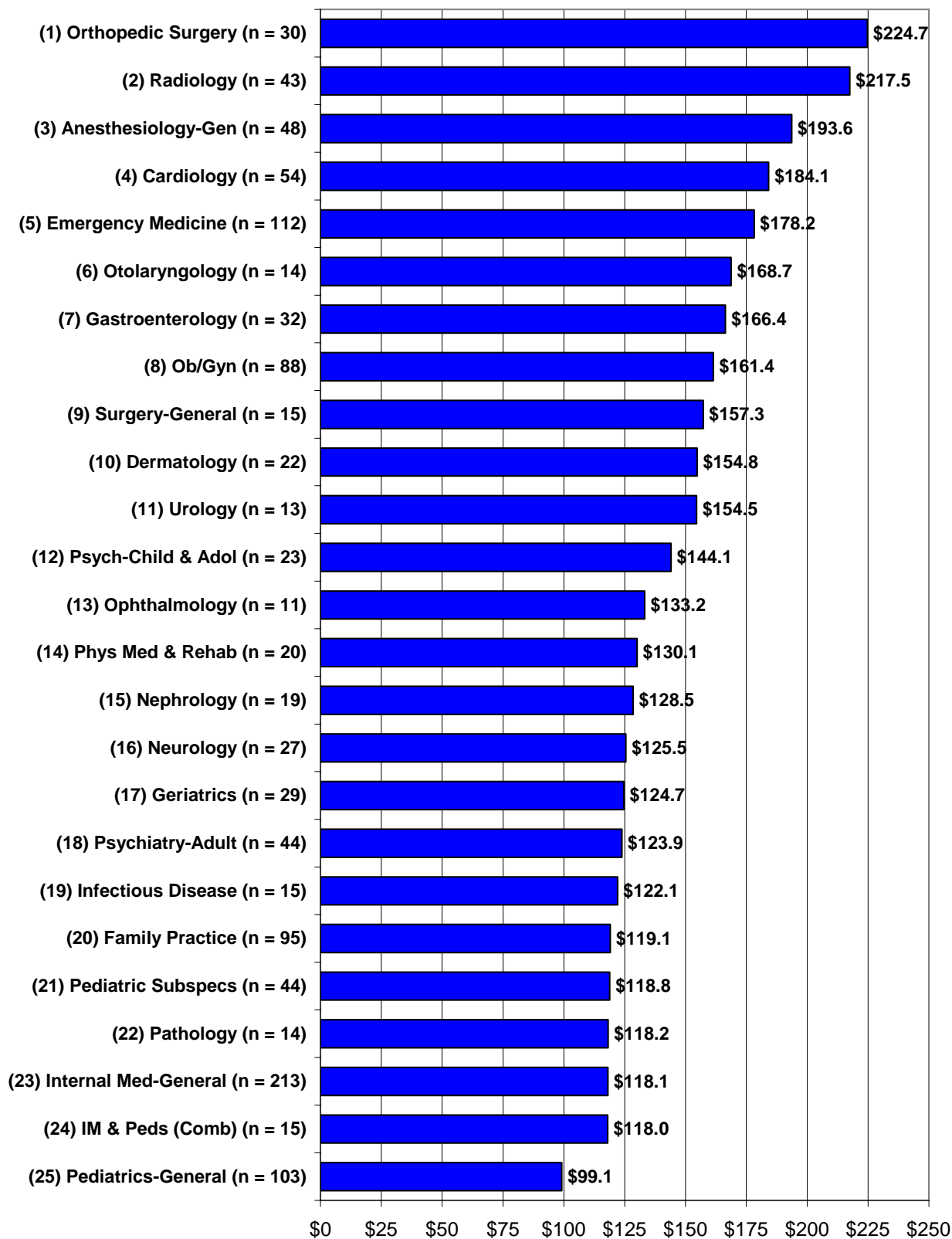


Table 3.4 Descriptive Statistics for Respondent's Expected Starting Income (for 2002 Exit Survey Respondents with Confirmed Practice Plans)

<u>Specialty</u>	<u>N</u>	<u>MEAN</u>	<u>RANK⁹</u> <u>(of 25)</u>	<u>MEDIAN</u>	<u>RANK</u> <u>(of 25)</u>
Primary Care	426	\$115,900	N/A	\$114,400	N/A
Family Practice	95	\$120,200	23	\$119,100	20
Internal Medicine-General	213	\$121,300	22	\$118,100	23
Pediatrics-General	103	\$99,000	25	\$99,100	25
IM & Peds (Combined)	15	\$126,100	17	\$118,000	24
Obstetrics/Gynecology	88	\$162,500	9	\$161,400	8
Medicine Subspecialties	215	\$154,400	N/A	\$146,600	N/A
Cardiology	54	\$186,100	4	\$184,100	4
Gastroenterology	32	\$173,600	7	\$166,400	7
Geriatrics	29	\$121,900	20	\$124,700	17
Infectious Disease	15	\$127,200	16	\$122,100	19
Nephrology	19	\$133,600	14	\$128,500	15
Surgery-General	15	\$161,400	10	\$157,300	9
Surgical Subspecialties	103	\$184,700	N/A	\$178,800	N/A
Ophthalmology	11	\$121,800	21	\$133,200	13
Orthopedics	30	\$214,600	1	\$224,700	1
Otolaryngology	14	\$179,500	6	\$168,700	6
Urology	13	\$168,600	8	\$154,500	11
Facility Based	129	\$188,500	N/A	\$191,900	N/A
Anesthesiology-General	48	\$194,300	3	\$193,600	3
Pathology	14	\$118,000	24	\$118,200	22
Radiology	43	\$209,300	2	\$217,500	2
Psychiatry	94	\$127,500	N/A	\$126,600	N/A
Adult Psychiatry	44	\$126,000	18	\$123,900	18
Child & Adolescent Psych	23	\$135,100	12	\$144,100	12
Other	241	\$156,600	N/A	\$155,100	N/A
Dermatology	22	\$161,100	11	\$154,800	10
Emergency Medicine	112	\$181,700	5	\$178,200	5
Neurology	27	\$132,500	15	\$125,500	16
Pediatric Subspecialties	44	\$122,500	19	\$118,800	21
Physical Medicine & Rehab	20	\$134,900	13	\$130,100	14
Total (All Specialties)	1311	\$146,700	N/A	\$138,200	N/A

⁹Rank based on 25 specialties, ranked in descending order (i.e. specialty with the highest income ranked #1, lowest income ranked #25).



3.5 Expected Weekly Number of Patient Care/Clinical Practice Hours

Respondents were asked about the number of hours per week they expected to spend in patient care/clinical practice activities in their upcoming practice position. While new physicians may not know exactly how many hours they will be working, they are likely to know to within the 10 hour intervals provided as choices on the survey. It is important to know how many hours graduates will be working in their upcoming practices because this variable has an impact on issues related to workforce planning and compensation.

Table 3.5 presents data on the number of hours per week graduates expected to be spending in patient care/clinical practice activities. Gender has been found to be a significant factor in predicting the number of hours an individual will be working with females averaging fewer hours than males. Therefore, it is important to control for this factor in making comparisons across specialties. The data presented in Table 3.5 is an aggregation of all responses to this from both the 2001 and 2002 surveys. This provided a large enough number of respondents to allow for stratification by gender in most specialties.

Figure 3.11 Rank of Expected Number of Weekly Patient Care/Clinical Practice Hours by Specialty (for 2001 and 2002 Exit Survey Respondents with Confirmed Practice Plans)

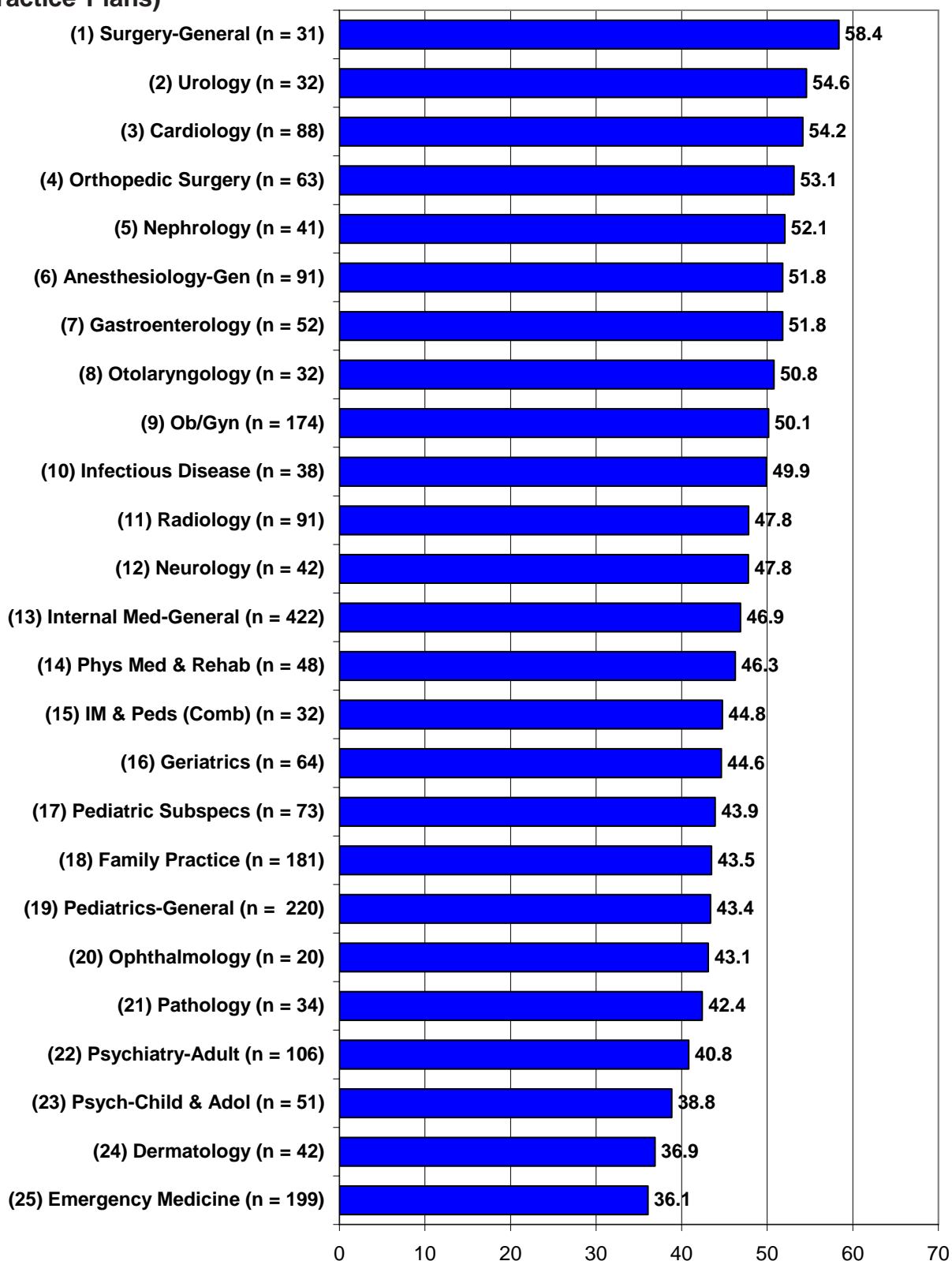




Table 3.5 Respondent's Expected Weekly Number of Patient Care/Clinical Practice Hours by Gender (for 2001 and 2002 Exit Survey Respondents with Confirmed Practice Plans)

Specialty	Male Respondents	Female Respondents	All Respondents
Primary Care	46.3	44.0	45.2
Family Practice	43.6	43.4	43.5
Internal Medicine-General	47.6	45.8	46.9
Pediatrics-General	45.5	42.1	43.4
IM & Peds (Combined)	46.2	43.1	44.8
Obstetrics/Gynecology	51.6	49.5	50.1
Medicine Subspecialties	51.5	45.6	49.7
Cardiology	55.1	49.8	54.2
Gastroenterology	51.7	54.7 (n = 6)	51.8
Geriatrics	47.7	41.4	44.6
Infectious Disease	50.8	47.4	49.9
Nephrology	51.7	53.9 (n = 7)	52.1
Surgery-General	57.6	61.0 (n = 7)	58.4
Surgical Subspecialties	53.4	55.3	53.7
Ophthalmology	44.7	28.5 (n = 2)	43.1
Orthopedics	53.0	54.0 (n = 7)	53.1
Otolaryngology	50.3	66.0 (n = 1)	50.8
Urology	54.9	50.0 (n = 2)	54.6
Facility Based	50.6	46.0	49.2
Anesthesiology-General	52.2	50.4	51.8
Pathology	46.7	39.0	42.4
Radiology	49.1	43.6	47.8
Psychiatry	41.9	38.5	40.2
Adult Psychiatry	42.9	38.6	40.8
Child & Adolescent Psych	40.2	37.8	38.8
Other	39.7	40.1	39.9
Dermatology	39.6	34.7	36.9
Emergency Medicine	36.5	35.0	36.1
Neurology	48.6	45.5	47.8
Pediatric Subspecialties	42.6	45.0	43.9
Physical Medicine & Rehab	45.0	47.3	46.3
Total (All Specialties)	47.7	44.3	46.3

¹⁰Patient care/clinical practice hours has been stratified by gender in any specialties with enough respondents to do so. The number of respondents (n) is given if n is less than 10. The data presented in this table is for respondents to both the 2001 and 2002 surveys to increase the number of respondents by specialty allowing more specialties to be stratified by gender. Patient care/clinical practice hours has been stratified by gender because females expected to work significantly fewer hours than males.



Section IV

Experiences in Searching for a Practice Position (IMGs on Temporary Visas Excluded)

This section summarizes the responses to several questions on residents' experiences in searching for a practice position and their general perceptions of the job market for their specialty. Any respondent who was entering or who considered entering patient care/clinical practice was asked to complete this section of the survey. The responses of IMGs on temporary visas have been excluded from this section because they had significantly more difficulty due to their visa status. Figure 4.1 illustrates the differences between temporary visa holders and other respondents in terms of the difficulty they faced in finding a job. Respondents indicating that they had not yet actively searched for a practice position were also excluded.

Each subsection within Section IV summarizes the responses to a question on: the 2002 survey, the aggregated total of all respondents for the 2001 and 2002 surveys and either the aggregated total of all respondents for the last four years the survey has been conducted or a trend over the last four years the survey has been conducted. For each item, specialties are ranked to determine where each specialty stands relative to all 25 specialties. In Section 4.7, composite measures of demand are computed using all demand variables to measure the relative demand for each specialty.

4.1 Percent of Respondents Having Difficulty Finding a Satisfactory Practice Position

Table 4.1 gives the percent of respondents who reported difficulty finding a practice position with which they were satisfied. As noted above, this table summarizes the responses for the 2002 survey, the aggregated total of responses for 2001 and 2002, and the aggregated responses for the last four years of the survey.



Figure 4.1 Percentage of Respondents Having Difficulty Finding a Satisfactory Practice Position and Percentage Having to Change Plans Due to Limited Practice Opportunities by Location of Medical School & Citizenship Status (of 2002 Exit Survey Respondents Who Have Searched for a Job)

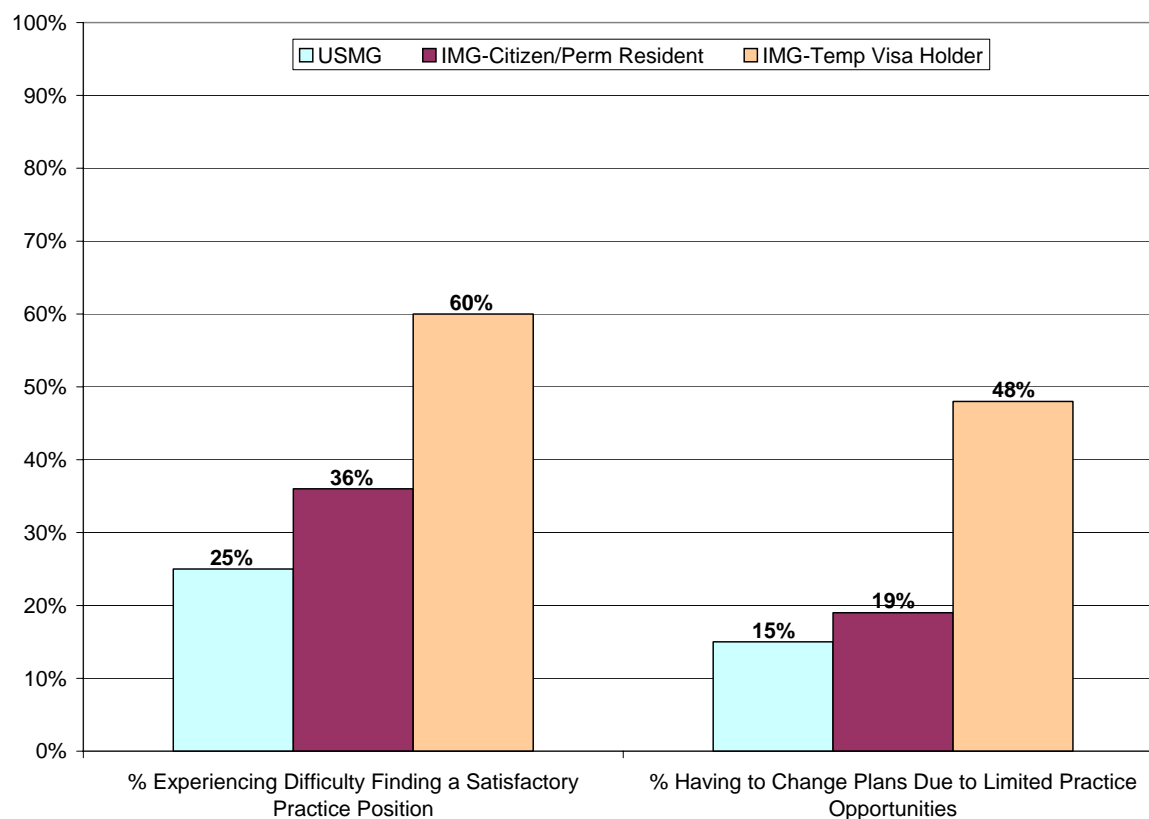


Figure 4.2 Main Reason for Difficulty Finding a Satisfactory Practice Position (of 2002 Exit Survey Respondents Who Reported Having Difficulty, IMGs on Temporary Visas Excluded)

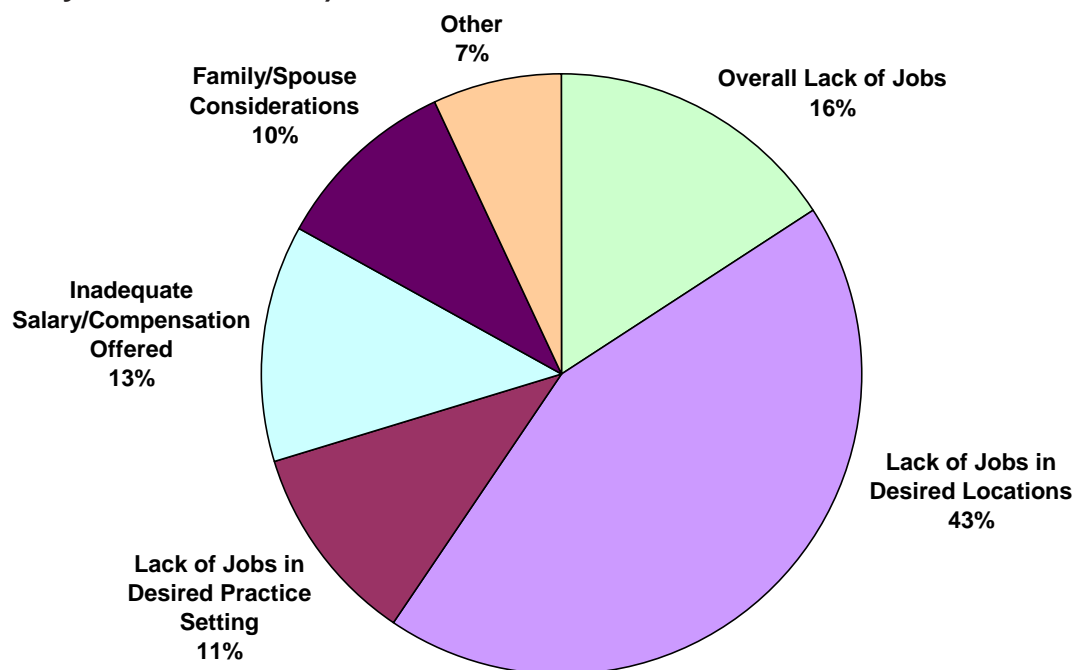




Figure 4.3 Trends in Percentage of Respondents Having Difficulty Finding a Satisfactory Practice Position by Specialty Group (of Exit Survey Respondents who have Searched for a Job, IMGs on Temporary Visas Excluded)

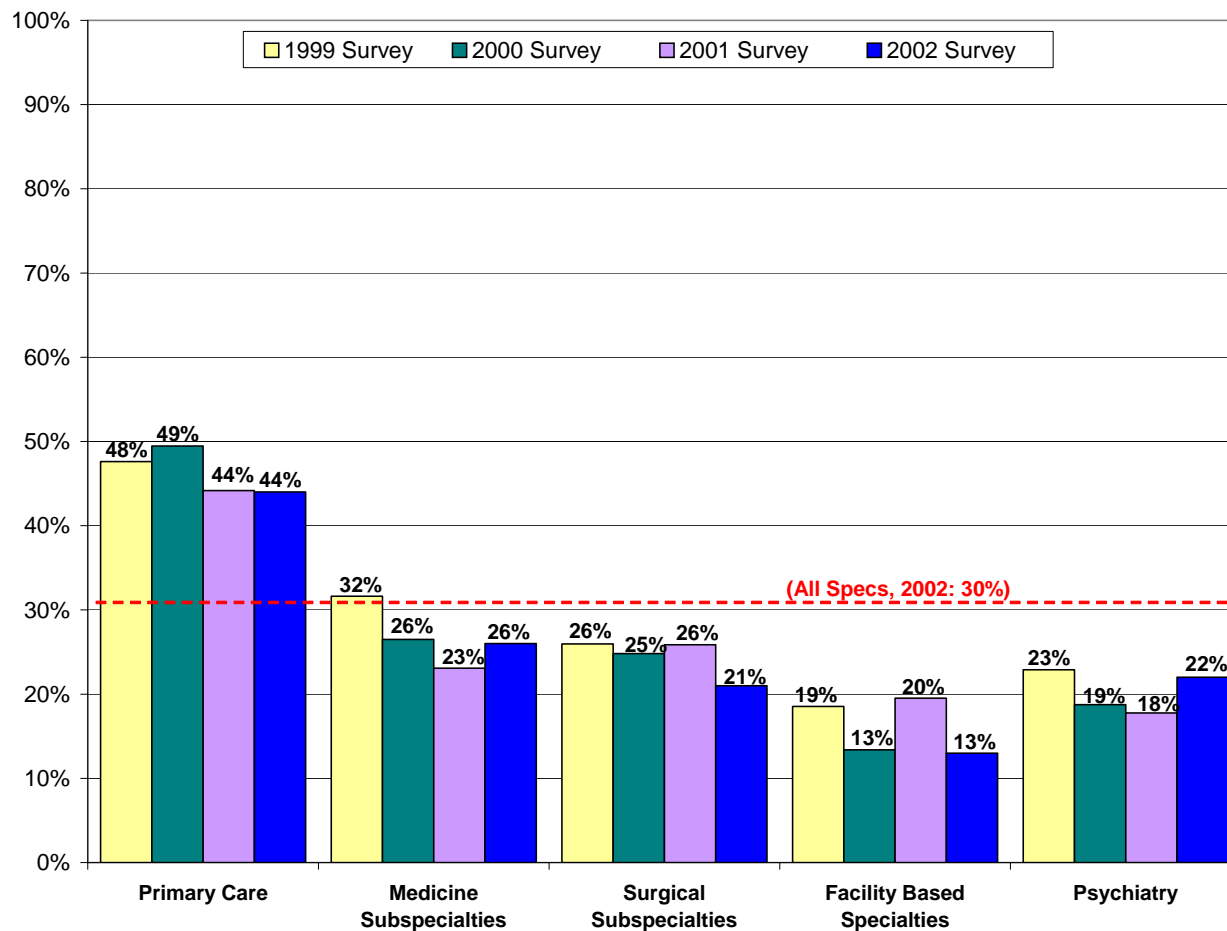


Figure 4.4 Rank of Percentage of Respondents Having Difficulty Finding a Satisfactory Practice Position by Specialty (of 2002 Exit Survey Respondents who have Searched for a Job, IMGs on Temporary Visas Excluded)

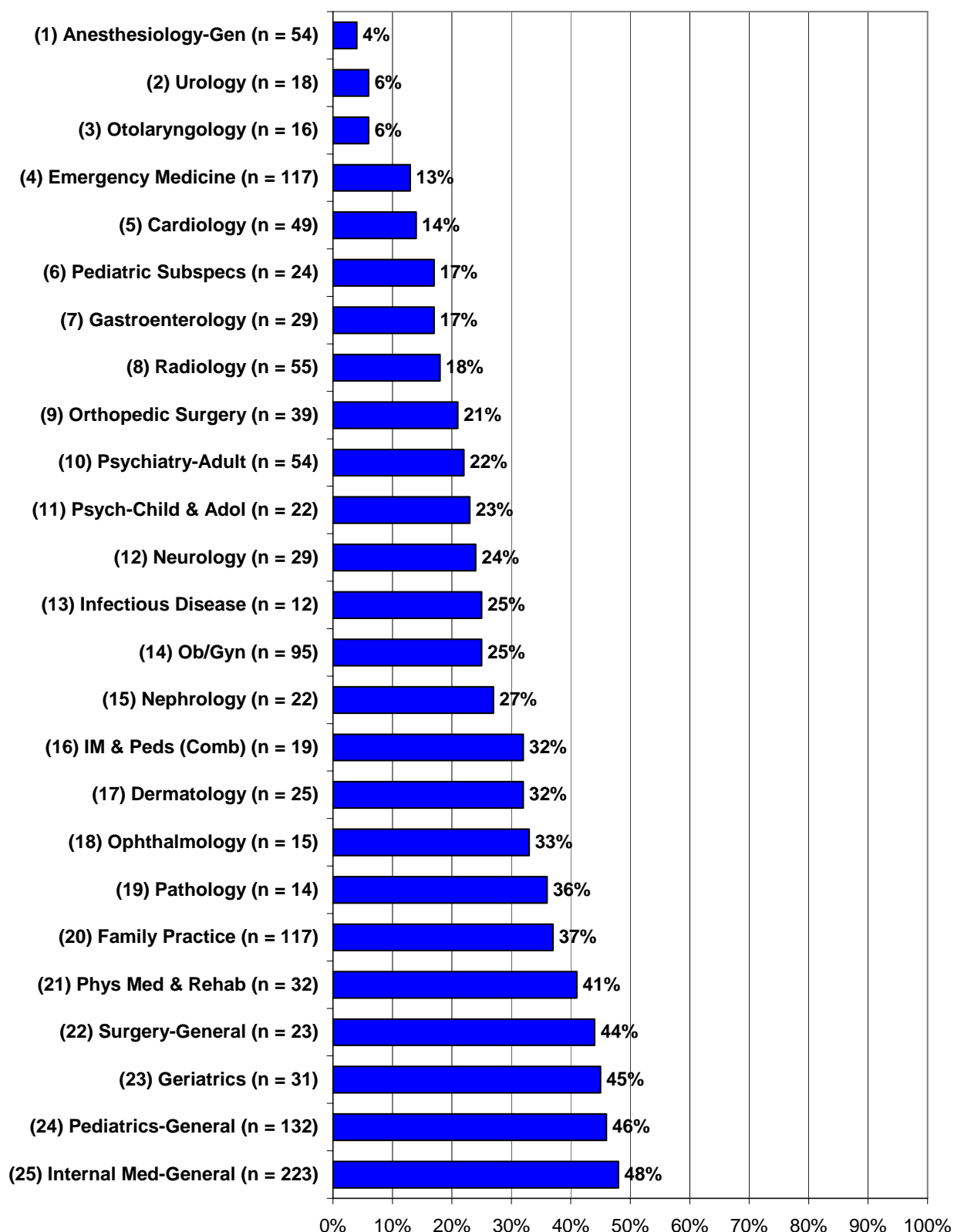




Table 4.1 Percentage of Respondents Having Difficulty Finding a Satisfactory Practice Position (of Respondents who have Searched for a Job, IMGs on Temporary Visas Excluded*)

<u>Specialty</u>	<u>2002 Respondents</u>	<u>RANK (of 25)</u>	<u>Aggregated Respondents: 2001 and 2002</u>	<u>RANK (of 25)</u>	<u>All Respondents (Aggregated: 1999 thru 2002)</u>	<u>RANK (of 25)</u>
Primary Care	44%	N/A	44%	N/A	46%	N/A
Family Practice	37%	20	37%	18	41%	19
Internal Medicine-General	48%	25	50%	25	51%	24
Pediatrics-General	46%	24	41%	19	45%	21
IM & Peds (Combined)	32%	16	42%	20	33%	17
Obstetrics/Gynecology	25%	14	27%	16	27%	15
Medicine Subspecialties	26%	N/A	25%	N/A	27%	N/A
Cardiology	14%	5	14%	4	18%	5
Gastroenterology	17%	7	15%	5	21%	10
Geriatrics	45%	23	46%	23	44%	20
Infectious Disease	25%	13	24%	14	21%	9
Nephrology	27%	15	23%	11	30%	16
Surgery-General	44%	22	44%	22	48%	22
Surgical Subspecialties	21%	N/A	24%	N/A	25%	N/A
Ophthalmology	33%	18	33%	17	37%	18
Orthopedics	21%	9	21%	9	19%	7
Otolaryngology	6%	3	16%	7	22%	11
Urology	6%	2	14%	3	15%	4
Facility Based	13%	N/A	16%	N/A	16%	N/A
Anesthesiology-General	4%	1	8%	1	7%	1
Pathology	36%	19	49%	24	51%	25
Radiology	18%	8	16%	6	13%	3
Psychiatry	22%	N/A	20%	N/A	20%	N/A
Adult Psychiatry	22%	10	18%	8	19%	8
Child & Adolescent Psych	23%	11	23%	12	23%	13
Other	21%	N/A	20%	N/A	22%	N/A
Dermatology	33%	17	23%	13	18%	6
Emergency Medicine	13%	4	10%	2	13%	2
Neurology	24%	12	24%	15	23%	12
Pediatric Subspecialties	17%	6	22%	10	26%	14
Physical Medicine & Rehab	41%	21	43%	21	49%	23
Total (All Specialties)	30%	N/A	30%	N/A	32%	N/A

*This section refers to the job market experiences and perceptions of U.S. citizens and permanent residents who have actively searched for a practice position.

4.2 Percentage of Respondents Having to Change Plans Due to Limited Practice Opportunities

Table 4.2 gives the percent of respondents who had to change their plans due to limited practice opportunities. The three columns in this table are analogous to those presented in Table 4.1.

Figure 4.5 Trends in Percentage of Respondents Having to Change Plans Due to Limited Practice Opportunities by Specialty Group (of Exit Survey Respondents who have Searched for a Job, IMGs on Temporary Visas Excluded)

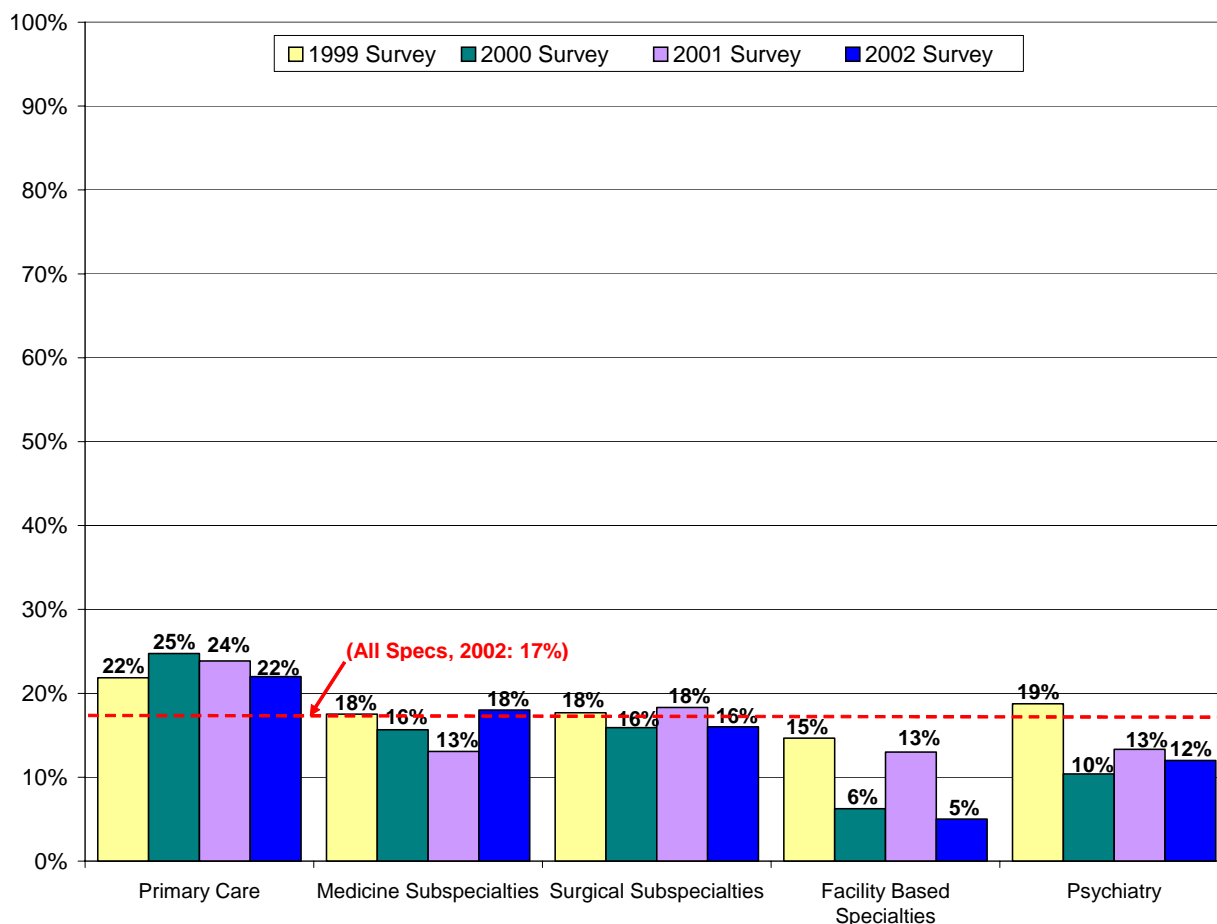




Figure 4.6 Rank of Percentage of Respondents Having to Change Plans Due to Limited Practice Opportunities by Specialty (of 2002 Exit Survey Respondents who have Searched for a Job, IMGs on Temporary Visas Excluded)

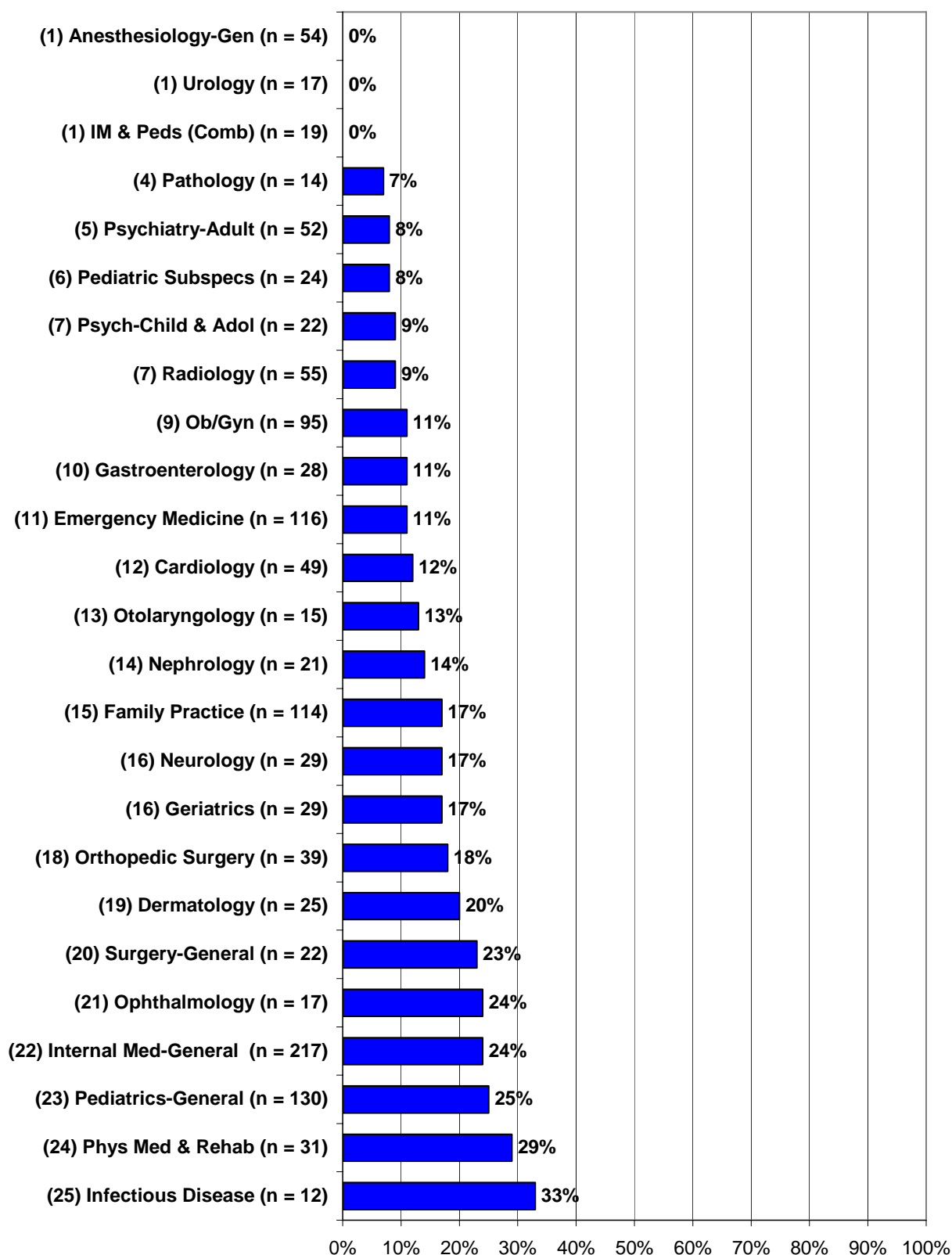


Table 4.2 Percentage of Respondents Having to Change Plans Due to Limited Practice Opportunities (of Exit Survey Respondents who have Searched for a Job, IMGs on Temporary Visas Excluded)

Specialty	2002 Respondents	RANK (of 25)	Aggregated Respondents: 2001 and 2002	RANK (of 25)	All Respondents (Aggregated: 1999 thru 2002)	RANK (of 25)
Primary Care	22%	N/A	23%	N/A	23%	N/A
Family Practice	17%	15	22%	20	21%	18
Internal Medicine-General	24%	22	24%	23	25%	21
Pediatrics-General	25%	23	21%	19	22%	20
IM & Peds (Combined)	0%	1	19%	17	17%	13
Obstetrics/Gynecology	11%	9	12%	9	13%	10
Medicine Subspecialties	18%	N/A	16%	N/A	16%	N/A
Cardiology	12%	12	10%	7	9%	5
Gastroenterology	11%	10	9%	4	12%	7
Geriatrics	17%	16	19%	16	22%	19
Infectious Disease	33%	25	24%	22	20%	17
Nephrology	14%	14	16%	13	17%	15
Surgery-General	23%	20	23%	21	25%	23
Surgical Subspecialties	16%	N/A	17%	N/A	17%	N/A
Ophthalmology	24%	21	34%	25	25%	22
Orthopedics	18%	18	18%	15	17%	13
Otolaryngology	13%	13	8%	3	18%	16
Urology	0%	1	3%	1	6%	2
Facility Based	5%	N/A	9%	N/A	10%	N/A
Anesthesiology-General	0%	1	4%	2	5%	1
Pathology	7%	4	20%	18	28%	24
Radiology	9%	7	10%	8	8%	3
Psychiatry	12%	N/A	13%	N/A	14%	N/A
Adult Psychiatry	8%	5	9%	5	13%	8
Child & Adolescent Psych	9%	7	14%	11	11%	6
Other	16%	N/A	14%	N/A	14%	N/A
Dermatology	20%	19	15%	12	14%	11
Emergency Medicine	11%	11	9%	6	9%	4
Neurology	17%	16	18%	14	13%	9
Pediatric Subspecialties	8%	6	12%	10	15%	12
Physical Medicine & Rehab	29%	24	25%	24	30%	25
Total (All Specialties)	17%	N/A	17%	N/A	18%	N/A



4.3 Number of Job Offers Received

Table 4.3 gives the mean number of offers for employment/practice opportunities (i.e., job offers) received by graduates. This variable provides a good measure of demand because whereas other demand indicators (with the exception of income) may be influenced by graduates' expectations, the total of job offers provides a concrete number, and is less subject to this bias. Job offers, along with starting income trends, were double weighted in computing the composite measure of demand.

Figure 4.7 Trends in Mean Number of Job Offers Received by Respondents by Specialty Group (of Exit Survey Respondents who have Searched for a Job, IMGs on Temporary Visas Excluded)

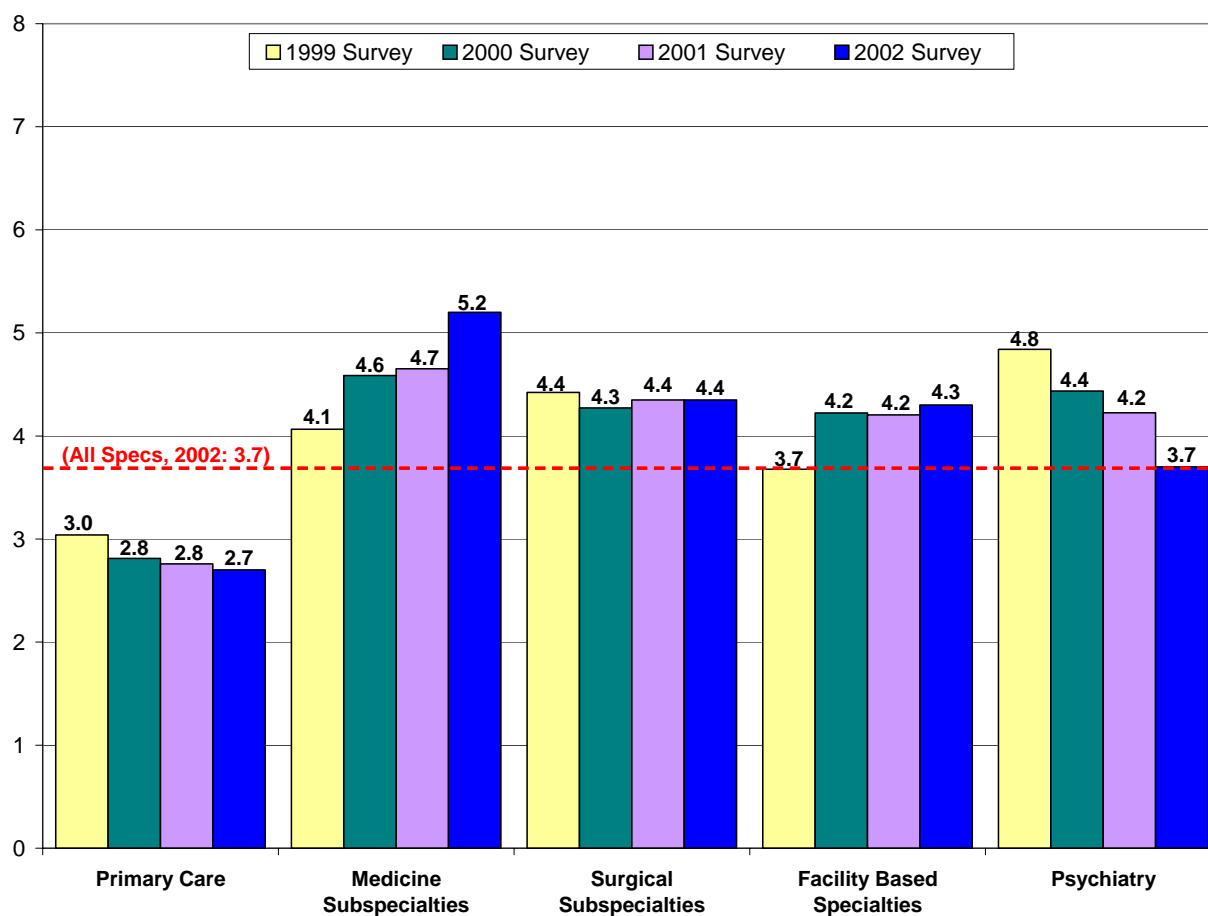


Figure 4.8 Rank of Mean Number of Job Offers Received by Respondents by Specialty (of 2002 Exit Survey Respondents who have Searched for a Job, IMGs on Temporary Visas Excluded)

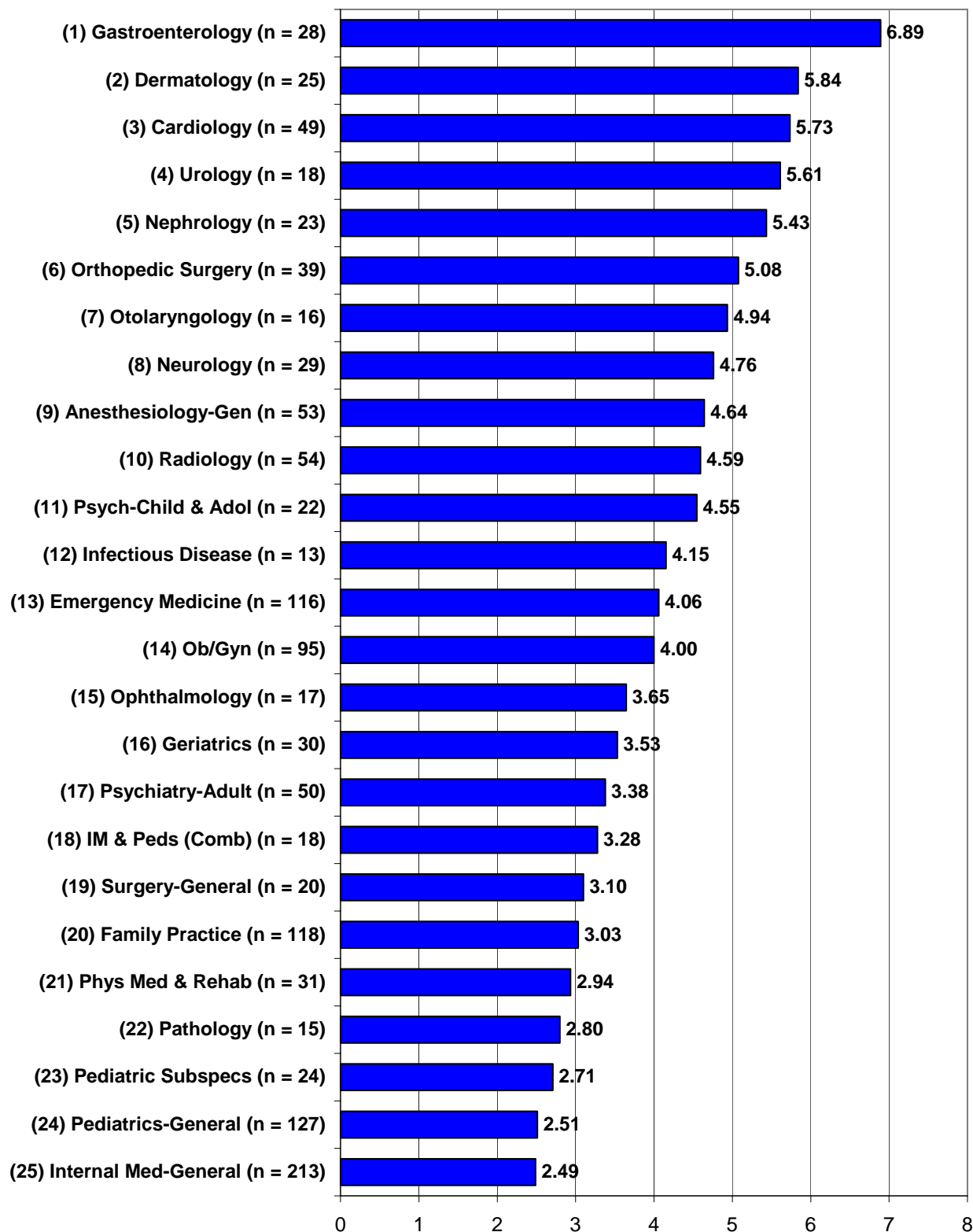




Table 4.3 Mean Number of Job Offers Received by Respondents (of Exit Survey Respondents who have Searched for a Job, IMGs on Temporary Visas Excluded)

<u>Specialty</u>	<u>2002 Respondents</u>	<u>RANK (of 25)</u>	<u>Aggregated Respondents: 2001 and 2002</u>	<u>RANK (of 25)</u>	<u>Trend (Average Annual Change: 1999 to 2002)</u>	<u>RANK (of 25)</u>
Primary Care	2.66	N/A	2.71	N/A	-4%	N/A
Family Practice	3.03	20	3.05	21	-7%	24
Internal Medicine-General	2.49	25	2.52	23	-5%	23
Pediatrics-General	2.51	24	2.62	22	-1%	20
IM & Peds (Combined)	3.28	18	3.46	14	6%	10
Obstetrics/Gynecology	4.00	14	3.85	13	2%	17
Medicine Subspecialties	5.24	N/A	4.97	N/A	9%	N/A
Cardiology	5.73	3	5.94	2	7%	9
Gastroenterology	6.89	1	7.00	1	13%	2
Geriatrics	3.53	16	3.40	16	0%	19
Infectious Disease	4.15	12	3.38	18	10%	5
Nephrology	5.43	5	4.93	6	12%	4
Surgery-General	3.10	19	3.21	19	3%	16
Surgical Subspecialties	4.41	N/A	4.36	N/A	0%	N/A
Ophthalmology	3.65	15	3.06	20	12%	3
Orthopedics	5.08	6	4.95	5	3%	15
Otolaryngology	4.94	7	4.72	8	5%	11
Urology	5.61	4	4.89	7	9%	6
Facility Based	4.28	N/A	4.25	N/A	5%	N/A
Anesthesiology-General	4.64	9	4.56	11	8%	7
Pathology	2.80	22	2.11	25	27%	1
Radiology	4.59	10	4.64	10	4%	13
Psychiatry	3.67	N/A	3.94	N/A	-9%	N/A
Adult Psychiatry	3.38	17	3.43	15	-10%	25
Child & Adolescent Psych	4.55	11	4.95	4	-2%	21
Other	3.93	N/A	3.98	N/A	-2%	N/A
Dermatology	5.84	2	5.62	3	4%	12
Emergency Medicine	4.06	13	4.12	12	-2%	22
Neurology	4.76	8	4.64	9	7%	8
Pediatric Subspecialties	2.71	23	2.51	24	1%	18
Physical Medicine & Rehab	3.92	21	3.39	17	3%	14
Total (All Specialties)	3.74	N/A	3.72	N/A	1%	N/A



4.4 Perceptions of the Regional Job Market

Table 4.4 presents respondents' perceptions of the job market for their specialty within 50 miles of the site at which they trained (i.e. the regional job market). Respondents were asked to give their assessment of the regional job market by choosing from a five point scale ranging from "Many Jobs" to "No Jobs." In order to allow comparisons to be made, the following Likert Scale was developed: "Many Jobs" = +2, "Some Jobs" = +1, "Few Jobs" = 0, "Very Few Jobs" = -1, and "No Jobs" = -2. A composite score was then computed for each specialty by multiplying the Likert Score for each respondent by the proportion of responses falling in that category.



Figure 4.9 Respondents' Perceptions of the Regional Job Market (of 2002 Exit Survey Respondents who have Searched for a Job, IMGs on Temporary Visas Excluded)

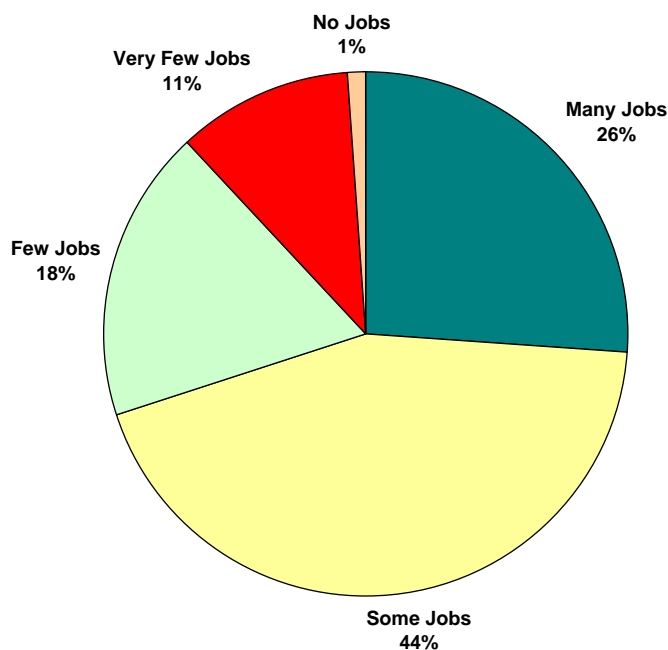


Figure 4.10 Trends in Mean Likert Scores for Respondents' Perceptions of the Regional Job Market by Specialty Group (of Exit Survey Respondents who have Searched for a Job, IMGs on Temporary Visas Excluded)

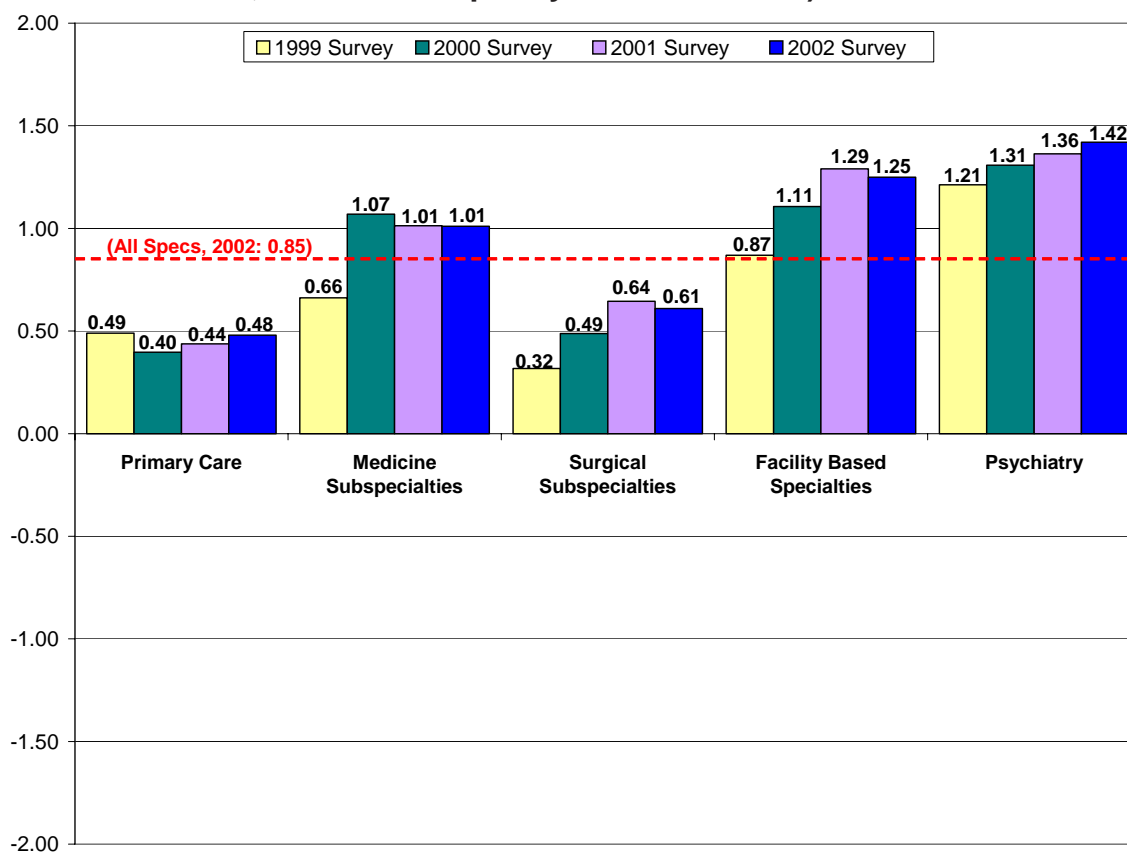


Figure 4.11 Rank of Mean Likert Scores for Respondents' Perceptions of the Regional Job Market by Specialty (of 2002 Exit Survey Respondents who have Searched for a Job, IMGs on Temporary Visas Excluded)

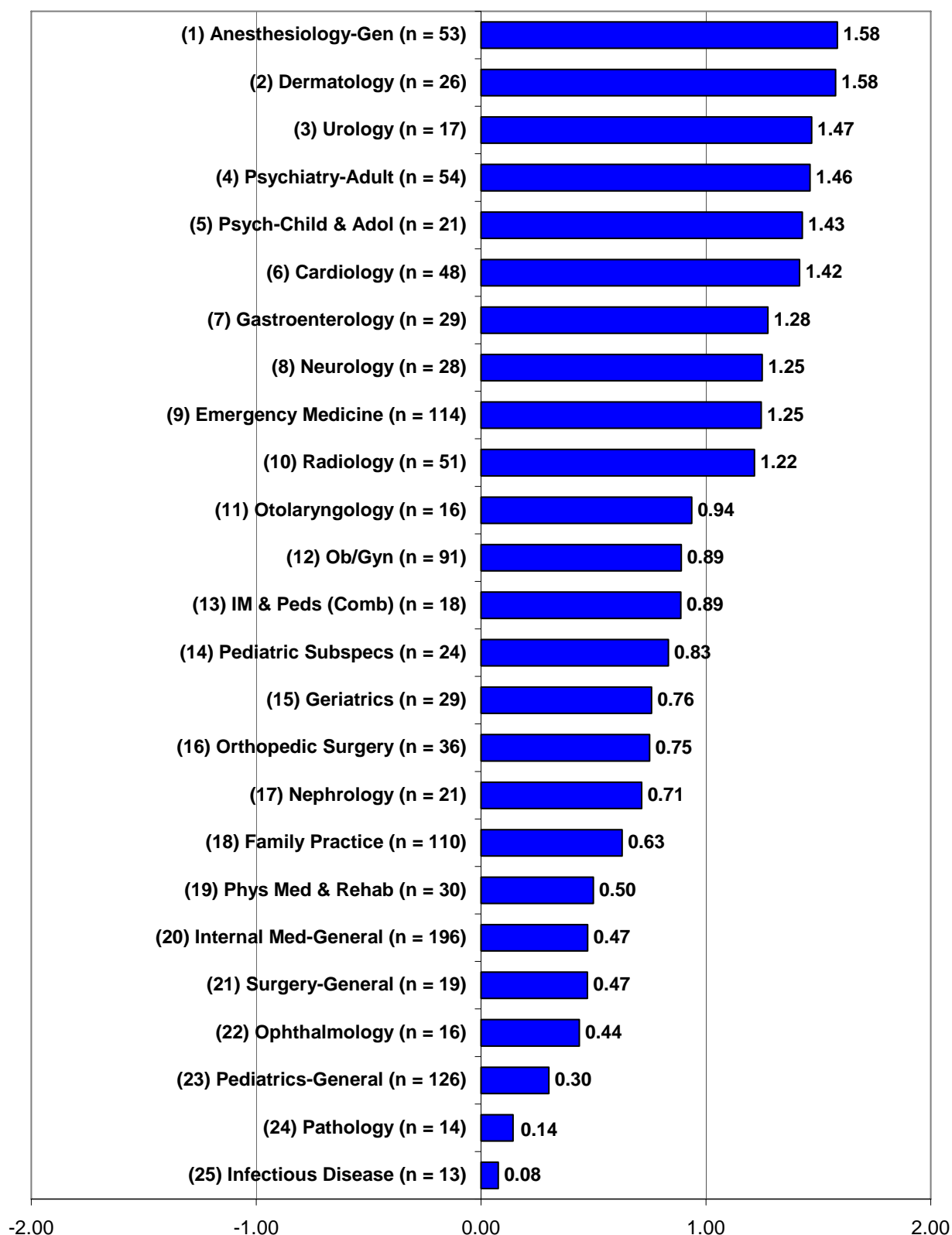




Table 4.4 Rank of Likert Scores for Respondents' Perceptions of the Regional Job Market¹³ (of 2002 Exit Survey Respondents who have Searched for a Job, IMGs on Temporary Visas Excluded)

<u>Specialty</u>	<u>2002 Respondents</u>	<u>RANK (of 25)</u>	<u>Aggregated Respondents: 2001 and 2002</u>	<u>RANK (of 25)</u>	<u>All Respondents (Aggregated: 1999 thru 2002)</u>	<u>RANK (of 25)</u>
Primary Care	0.48	N/A	0.46	N/A	0.45	N/A
Family Practice	0.63	18	0.62	16	0.61	16
Internal Medicine-General	0.47	20	0.41	21	0.40	21
Pediatrics-General	0.30	23	0.41	22	0.39	22
IM & Peds (Combined)	0.89	13	0.53	18	0.58	17
Obstetrics/Gynecology	0.89	12	0.95	12	0.86	13
Medicine Subspecialties	1.01	N/A	1.01	N/A	0.94	N/A
Cardiology	1.42	6	1.44	3	1.26	6
Gastroenterology	1.28	7	1.35	5	1.23	7
Geriatrics	0.76	15	0.56	17	0.53	18
Infectious Disease	0.08	25	0.62	15	0.64	15
Nephrology	0.71	17	0.84	14	0.92	11
Surgery-General	0.47	21	0.32	23	0.28	23
Surgical Subspecialties	0.61	N/A	0.63	N/A	0.52	N/A
Ophthalmology	0.44	22	0.30	24	0.22	24
Orthopedics	0.75	16	0.85	13	0.71	14
Otolaryngology	0.94	11	1.08	11	0.89	12
Urology	1.47	3	1.20	10	0.96	10
Facility Based	1.25	N/A	1.27	N/A	1.12	N/A
Anesthesiology-General	1.58	1	1.56	1	1.51	1
Pathology	0.14	24	0.29	25	-0.10	25
Radiology	1.22	10	1.32	6	1.18	8
Psychiatry	1.42	N/A	1.39	N/A	1.33	N/A
Adult Psychiatry	1.46	4	1.44	4	1.36	3
Child & Adolescent Psych	1.43	5	1.31	7	1.29	5
Other	1.06	N/A	1.06	N/A	1.03	N/A
Dermatology	1.58	2	1.48	2	1.49	2
Emergency Medicine	1.25	9	1.30	8	1.30	4
Neurology	1.25	8	1.21	9	1.00	9
Pediatric Subspecialties	0.83	14	0.51	19	0.41	20
Physical Medicine & Rehab	0.50	19	0.48	20	0.42	19
Total (All Specialties)	0.85	N/A	0.84	N/A	0.77	N/A

¹¹Likert Score computed using the following Likert Scale: "Many Jobs" = +2, "Some Jobs" = +1, "Few Jobs" = 0, "Very Few Jobs" = -1, "No Jobs" = -2.



4.5 Perceptions of the National Job Market

Table 4.5 presents the perceptions of survey respondents concerning the national job market for their specialty. The response choices and composite scores are the same as was used in Table 4.4 (referring to the regional job market). As one might expect, there was a high degree of correlation between the respondent's view of the regional and national job markets. In general, however, the national job market was viewed more positively than was the job market in New York.



Figure 4.12 Respondents' Perceptions of the National Job Market (of 2002 Exit Survey Respondents who have Searched for a Job, IMGs on Temporary Visas Excluded)

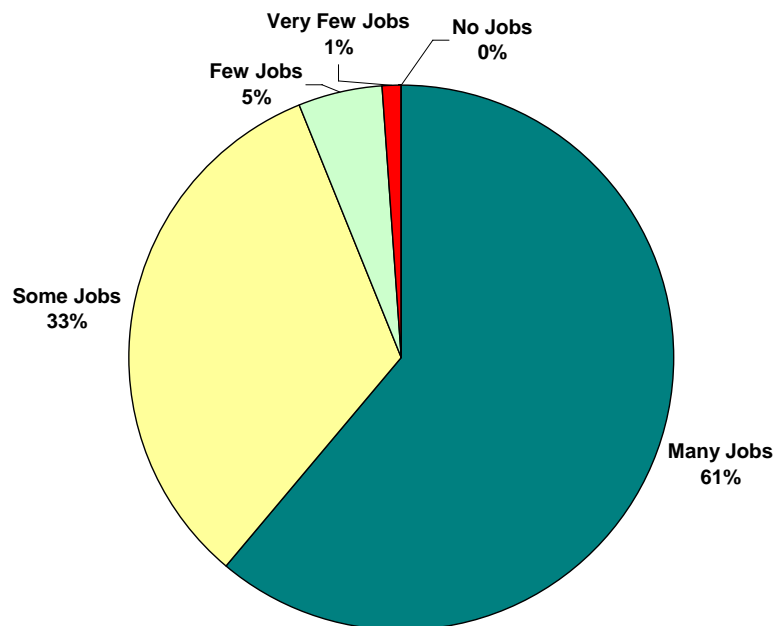


Figure 4.13 Trends in Mean Likert Scores for Respondents' Perceptions of the National Job Market by Specialty Group (of Exit Survey Respondents who have Searched for a Job, IMGs on Temporary Visas Excluded)

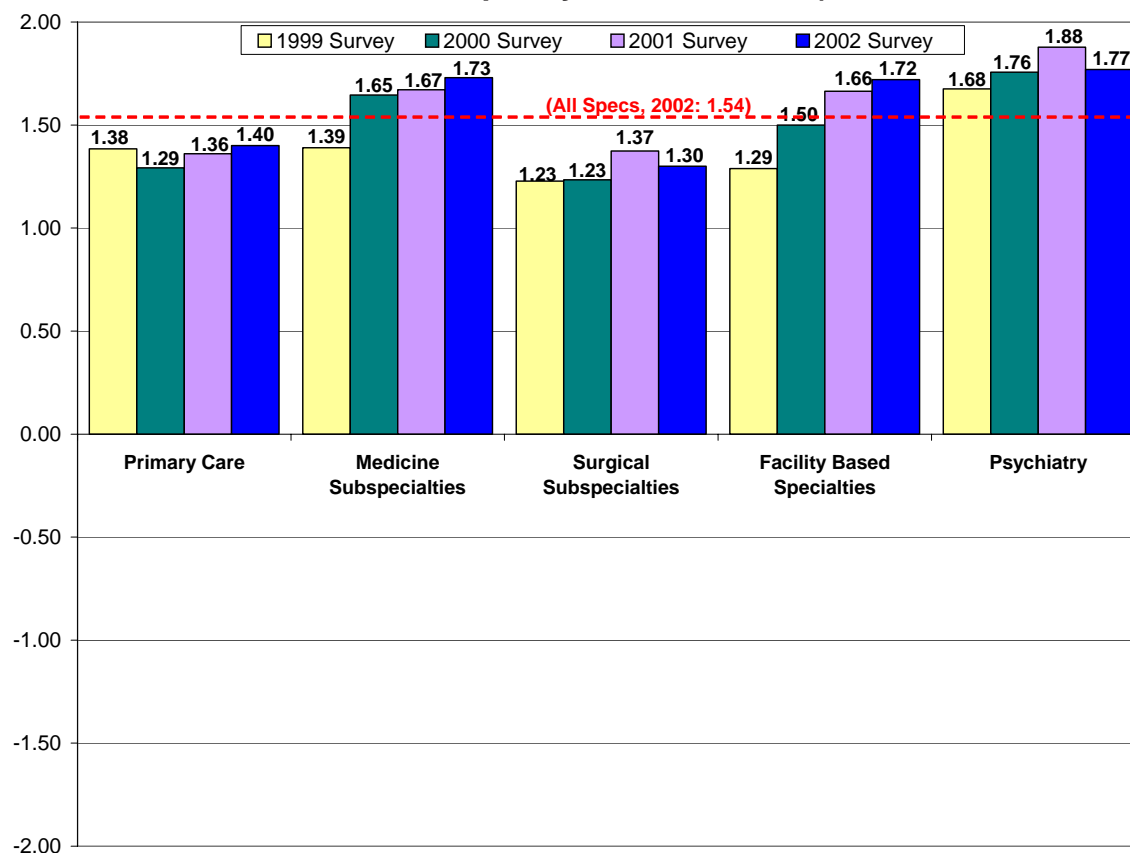


Figure 4.14 Rank of Likert Scores for Respondents' Perceptions of the National Job Market, by Specialty (of 2002 Exit Survey Respondents who have Searched for a Job, IMGs on Temporary Visas Excluded)

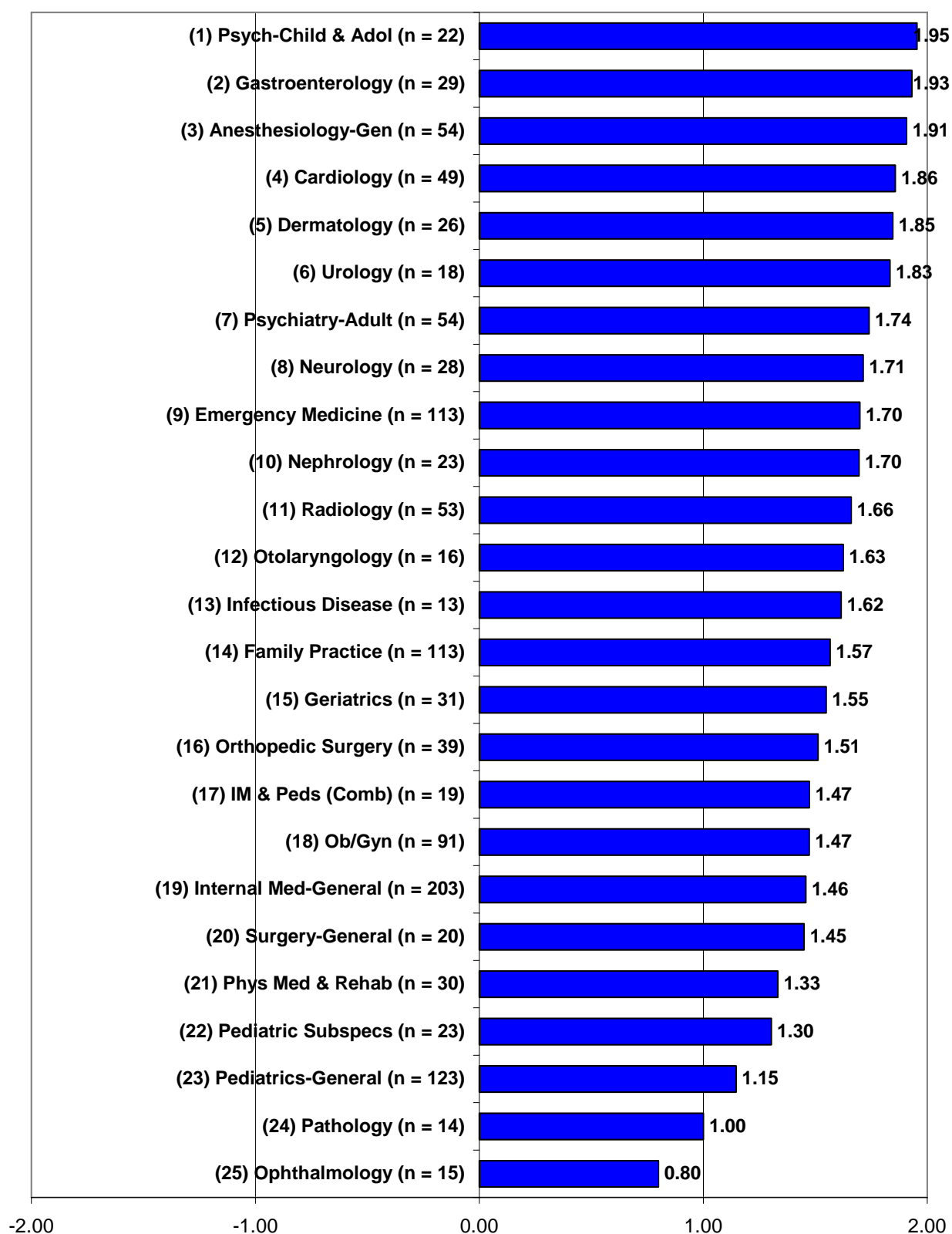




Table 4.5 Likert Scores for Respondents' Perceptions of the National Job Market¹³ (of Exit Survey Respondents who have Searched for a Job, IMGs on Temporary Visas Excluded)

Specialty	2002 Respondents	RANK (of 25)	Aggregated Respondents: 2001 and 2002	RANK (of 25)	All Respondents (Aggregated: 1999 thru 2002)	RANK (of 25)
Primary Care	1.40	N/A	1.38	N/A	1.36	N/A
Family Practice	1.57	14	1.55	14	1.56	14
Internal Medicine-General	1.46	19	1.42	19	1.33	19
Pediatrics-General	1.15	23	1.14	23	1.21	21
IM & Peds (Combined)	1.47	17	1.47	18	1.47	17
Obstetrics/Gynecology	1.47	18	1.53	16	1.54	15
Medicine Subspecialties	1.73	N/A	1.70	N/A	1.62	N/A
Cardiology	1.86	4	1.83	7	1.71	8
Gastroenterology	1.93	2	1.90	2	1.71	7
Geriatrics	1.55	15	1.53	17	1.51	16
Infectious Disease	1.62	13	1.62	13	1.57	12
Nephrology	1.70	10	1.78	8	1.77	4
Surgery-General	1.45	20	1.41	20	1.25	20
Surgical Subspecialties	1.30	N/A	1.34	N/A	1.29	N/A
Ophthalmology	0.80	25	0.77	25	0.74	24
Orthopedics	1.51	16	1.55	15	1.42	18
Otolaryngology	1.62	12	1.70	12	1.58	11
Urology	1.83	6	1.83	4	1.68	9
Facility Based	1.72	N/A	1.70	N/A	1.54	N/A
Anesthesiology-General	1.91	3	1.85	3	1.77	5
Pathology	1.00	24	1.00	24	0.51	25
Radiology	1.66	11	1.71	11	1.65	10
Psychiatry	1.77	N/A	1.82	N/A	1.78	N/A
Adult Psychiatry	1.74	7	1.83	5	1.78	2
Child & Adolescent Psych	1.95	1	1.93	1	1.84	1
Other	1.58	N/A	1.58	N/A	1.54	N/A
Dermatology	1.85	5	1.83	6	1.77	3
Emergency Medicine	1.70	9	1.72	10	1.72	6
Neurology	1.71	8	1.77	9	1.56	13
Pediatric Subspecialties	1.30	22	1.15	22	1.07	23
Physical Medicine & Rehab	1.33	21	1.27	21	1.14	22
Total (All Specialties)	1.54	N/A	1.53	N/A	1.47	N/A

¹¹Likert Score computed using the following Likert Scale: "Many Jobs" = +2, "Some Jobs" = +1, "Few Jobs" = 0, "Very Few Jobs" = -1, "No Jobs" = -2.



4.6 Trends in Starting Income

Table 4.6 presents median starting income levels for 2002 graduates, for all graduates from the last four surveys, and the average annual change (i.e., trend) in median starting income from the last four surveys. Income levels are often used to measure demand. Physicians are somewhat atypical in this regard because their income levels are largely determined by historic reimbursement amounts rather than by the demand for their services at any given point in time.

Although income levels may not accurately determine demand, trends in income will provide a good indicator. If physicians practicing in a given specialty are in short supply relative to the demand for their services, employers will have to increase compensation levels to attract applicants causing income levels to trend higher. Conversely, if there is a rich supply of physicians in a certain specialty, employers will not need to pay as much to fill positions, resulting in flat or negative trends in income.

Figure 4.15 Trends in Median Starting Income (in \$1,000s) by Specialty Group (for Exit Survey Respondents with Confirmed Practice Plans)

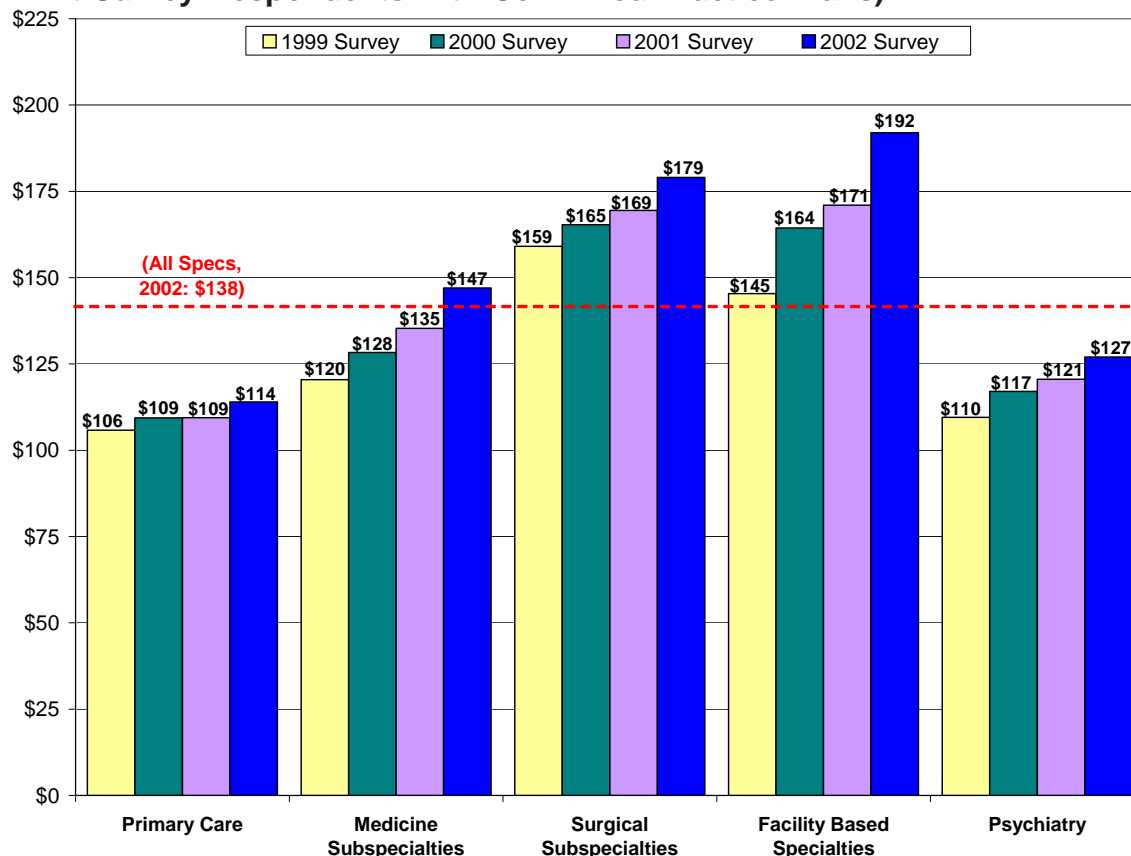


Figure 4.16 Trends in Median Starting Income (in \$1,000s) by Primary Care vs. Non-Primary Care, (for Exit Survey Respondents with Confirmed Practice Plans)

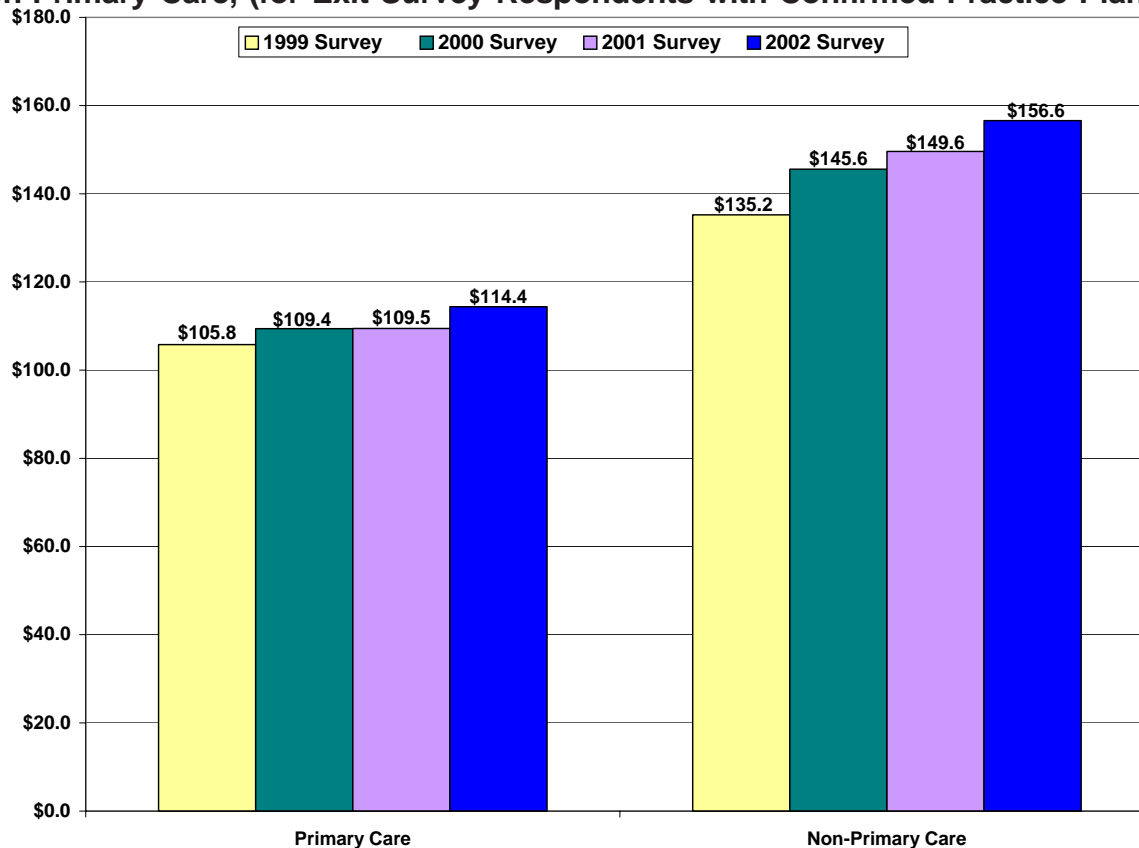


Figure 4.17 Rank of Average Annual Percent Change in Median Starting Income (from 1999 to 2002) by Specialty (for Exit Survey Respondents with Confirmed Practice Plans)

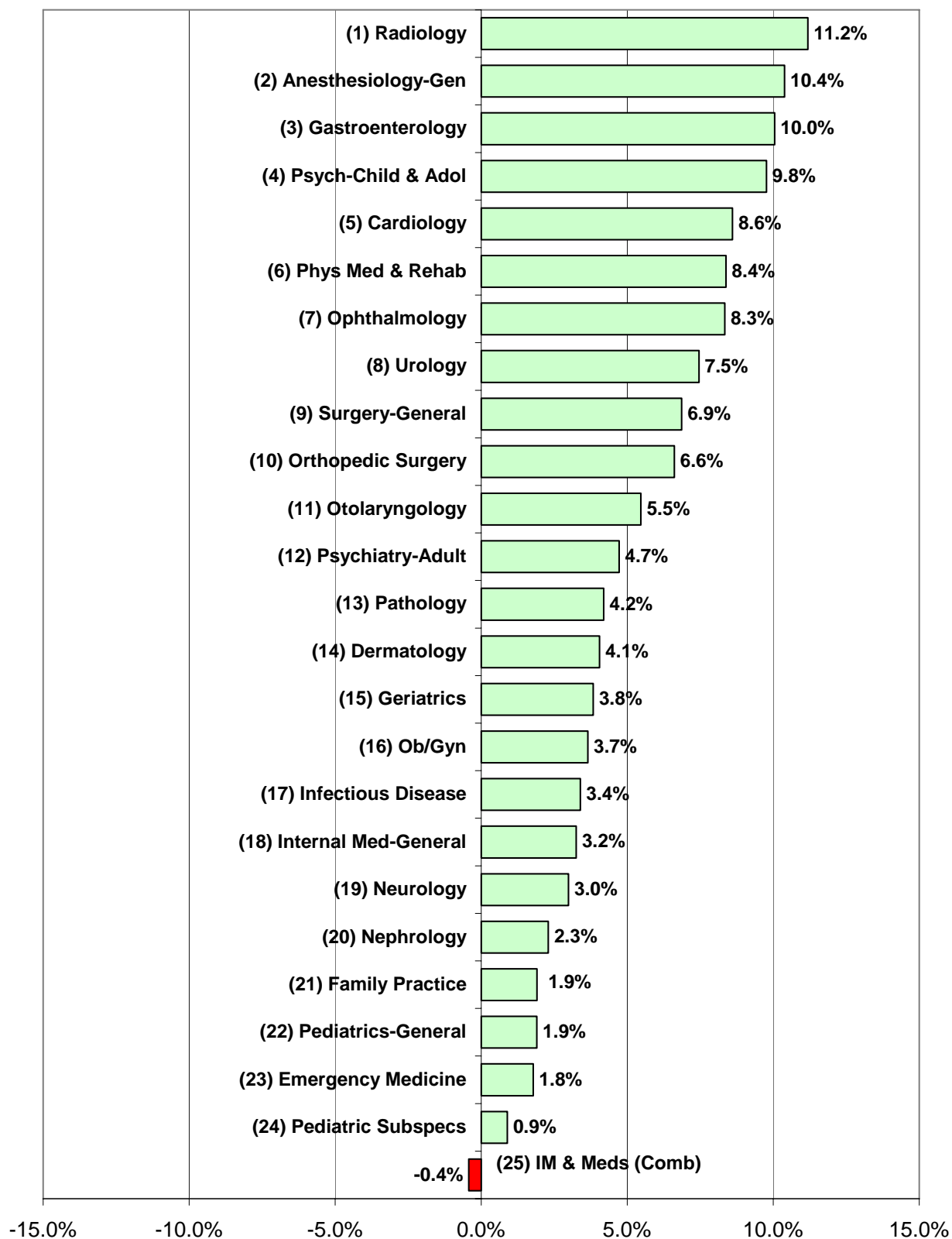




Table 4.6 Median Expected Starting Income (of Exit Survey Respondents with Confirmed Practice Plans)

Specialty	2002 Respondents	RANK (of 25)	Aggregated Respondents: 2001 and 2002	RANK (of 25)	Trend (Average Annual Change: 1999 to 2002)	RANK (of 25)
Primary Care	\$114,400	N/A	\$112,200	N/A	3%	N/A
Family Practice	\$119,100	20	\$115,100	24	2%	21
Internal Medicine-General	\$118,100	23	\$117,200	22	3%	18
Pediatrics-General	\$99,100	25	\$98,700	25	2%	22
IM & Peds (Combined)	\$118,000	24	\$117,200	20	0%	25
Obstetrics/Gynecology	\$161,400	8	\$154,700	11	4%	16
Medicine Subspecialties	\$146,600	N/A	\$141,500	N/A	7%	N/A
Cardiology	\$184,100	4	\$170,900	5	9%	5
Gastroenterology	\$166,400	7	\$166,700	6	10%	3
Geriatrics	\$124,700	17	\$120,800	21	4%	15
Infectious Disease	\$122,100	19	\$122,200	18	3%	17
Nephrology	\$128,500	15	\$133,900	12	2%	20
Surgery-General	\$157,300	9	\$157,300	10	7%	9
Surgical Subspecialties	\$178,800	N/A	\$173,100	N/A	4%	N/A
Ophthalmology	\$133,200	13	\$134,200	15	8%	7
Orthopedics	\$224,700	1	\$201,900	1	7%	10
Otolaryngology	\$168,700	6	\$154,000	7	5%	11
Urology	\$154,500	11	\$153,100	8	7%	8
Facility Based	\$191,900	N/A	\$182,300	N/A	10%	N/A
Anesthesiology-General	\$193,600	3	\$182,200	3	10%	2
Pathology	\$118,200	22	\$114,900	23	4%	13
Radiology	\$217,500	2	\$202,700	2	11%	1
Psychiatry	\$126,600	N/A	\$123,900	N/A	5%	N/A
Adult Psychiatry	\$123,900	18	\$121,100	17	5%	12
Child & Adolescent Psych	\$144,100	12	\$132,100	16	10%	4
Other	\$155,100	N/A	\$157,400	N/A	0%	N/A
Dermatology	\$154,800	10	\$158,600	9	4%	14
Emergency Medicine	\$178,200	5	\$176,200	4	2%	23
Neurology	\$125,500	16	\$121,900	13	3%	19
Pediatric Subspecialties	\$118,800	21	\$120,100	19	1%	24
Physical Medicine & Rehab	\$130,100	14	\$126,000	14	8%	6
Total (All Specialties)	\$138,200	N/A	\$133,000	N/A	5%	N/A

4.7 Assessment of Relative Demand by Specialty

To measure demand, a composite demand was computed by taking an average of the ranks (i.e., where each specialty stood relative to all 25 specialties) scored by each specialty on each of the demand indicators for data from 2002, for an aggregated data set containing all data collected over the past two years (2001 and 2002), and for the last four years the survey has been conducted (1999 through 2002). This methodology gave a higher weighting to data collected from the 2002 survey (approximately twice that of the three previous years) in assessing the current demand for each specialty.



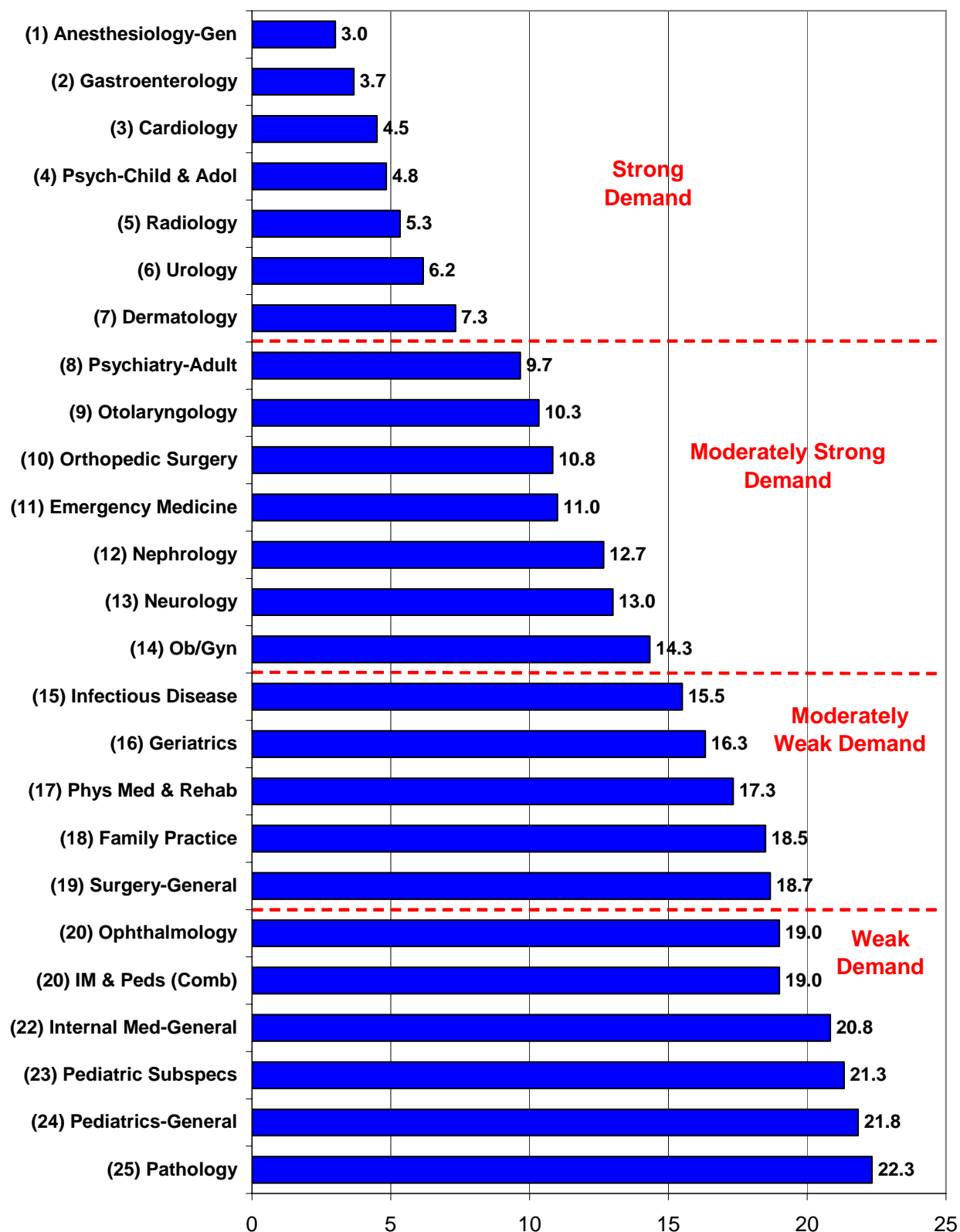
The following variables were used as indicators of demand in the calculations described above:

- ◆ percentage of respondents with difficulty finding a satisfactory practice position
- ◆ percentage of respondents having to change plans due to limited practice opportunities
- ◆ mean number of job offers received by respondents
- ◆ respondents' views of the regional job market
- ◆ respondents' views of the national job market
- ◆ trends in median starting income

Each of these variables is an imperfect measure of demand. However, taken together, they provide a good picture of relative demand, by specialty. There was a high degree of correlation between the “% with difficulty” variable and the “% having to change plans” variable (i.e., a respondent reporting difficulty was much more likely to report having to change plans). There was also a high degree of correlation between respondents' assessments of the regional and national job market. For this reason, the “job offers” and “trends in starting income” variables were double counted in computing a composite measure of demand.



Figure 4.18 Assessment of Current Relative Demand by Specialty (Average Rank on Demand Related Variables)





Appendix A

2002 Exit Survey Response Rates by Specialty and Region



Table A-1. 2002 Exit Survey Response Rates by Specialty* and Region**

Specialty	UPSTATE NY PROGRAMS				GREATER NY PROGRAMS				NEW YORK STATE (TOTAL)			
	Grads	Returned	Resp Rate		Grads	Returned	Resp Rate		Grads	Returned	Resp Rate	
Primary Care	279	233	84%		1,605	1,080	67%		1,884	1,313	70%	
Family Practice	88	68	77%		139	103	74%		227	171	75%	
Internal Medicine-General	127	109	86%		1,043	701	67%		1,170	810	69%	
Pediatrics-General	52	45	87%		400	259	65%		452	304	67%	
IM & Peds (Combined)	12	11	92%		23	17	74%		35	28	80%	
Obstetrics/Gynecology	32	28	88%		123	99	80%		155	127	82%	
Internal Medicine Specialties	67	48	72%		501	318	63%		568	366	64%	
Cardiology	13	11	85%		112	76	68%		125	87	70%	
Gastroenterology	5	5	100%		56	38	68%		61	43	70%	
Geriatrics	9	8	89%		64	43	67%		73	51	70%	
Hematology/Oncology	11	6	55%		57	29	51%		68	35	51%	
Nephrology	8	4	50%		44	27	61%		52	31	60%	
Other IM Specialties	21	14	67%		168	105	63%		189	119	63%	
Critical Care Medicine*	2	1	50%		23	15	65%		25	16	64%	
Endocrinology & Metab.*	3	3	100%		23	15	65%		26	18	69%	
Infectious Disease*	6	4	67%		40	24	60%		46	28	61%	
Pulmonary Disease*	7	5	71%		64	38	59%		71	43	61%	
Rheumatology*	3	1	33%		18	13	72%		21	14	67%	
Surgery (General)	29	26	90%		118	67	57%		147	93	63%	
Surgery (Subspecialties)	76	65	86%		277	180	65%		353	245	69%	
Ophthalmology	12	11	92%		63	46	73%		75	57	76%	
Orthopedics	24	22	92%		98	59	60%		122	81	66%	
Otolaryngology	10	9	90%		22	13	59%		32	22	69%	
Urology	8	6	75%		28	23	82%		36	29	81%	
Other Surgical Subspecs	22	17	77%		66	39	59%		88	56	64%	
Neurosurgery*	5	2	40%		13	9	69%		18	11	61%	
Plastic Surgery*	4	4	100%		18	13	72%		22	17	77%	
Thoracic Surgery*	5	5	100%		13	4	31%		18	9	50%	
All Other Surg Subspecs*	8	6	75%		22	13	59%		30	19	63%	

	<u>UPSTATE NY PROGRAMS</u>				<u>GREATER NY PROGRAMS</u>				<u>NEW YORK STATE (TOTAL)</u>			
Facility Based	76	71	93%		431	292	68%		507	363	72%	
Anesthesiology	32	28	88%		169	108	64%		201	136	68%	
Anesthesiology-General	21	19	90%		132	80	61%		153	99	65%	
Pain Management	6	6	100%		21	14	67%		27	20	74%	
Other Anes Subspecs*	5	3	60%		16	14	88%		21	17	81%	
Pathology	13	13	100%		94	55	59%		107	68	64%	
Pathology (General)*	9	9	100%		59	48	81%		68	57	84%	
Pathology Subspecialties*	4	4	100%		35	7	20%		39	11	28%	
Radiology	31	30	97%		168	129	77%		199	159	80%	
Radiology (Diagnostic)*	26	25	96%		139	114	82%		165	139	84%	
Radiology (Therapeutic)*	2	2	100%		15	7	47%		17	9	53%	
Nuclear Medicine*	3	3	100%		14	8	57%		17	11	65%	
Psychiatry	25	19	76%		250	173	69%		275	192	70%	
Psychiatry (General)	19	14	74%		152	111	73%		171	125	73%	
Child & Adolescent Psych	2	2	100%		53	33	62%		55	35	64%	
Other Psych Subspecs*	4	3	75%		45	29	64%		49	32	65%	
Other	85	75	88%		487	320	66%		572	395	69%	
Dermatology	5	5	100%		49	25	51%		54	30	56%	
Emergency Medicine	37	33	89%		146	93	64%		183	126	69%	
Neurology	18	15	83%		93	75	81%		111	90	81%	
Pediatric Specialties	9	8	89%		95	53	56%		104	61	59%	
Physical Medicine & Rehab	9	7	78%		74	49	66%		83	56	67%	
Other*	7	7	100%		30	25	83%		37	32	86%	
Allergy & Immunology*	6	6	100%		13	11	85%		19	17	89%	
Preventive Medicine*	1	1	100%		10	7	70%		11	8	73%	
All Other**	0	0	N/A		7	7	100%		7	7	100%	
Total (All Specialties)	669	565	84%		3,792	2,529	67%		4,461	3,094	69%	

*Specialties shaded in grey are not broken out in this report because of the small number of respondents. Instead their numbers have been aggregated into groups as shown in this table.

**Greater NY includes New York City, Long Island, and Westchester County. Upstate NY includes the rest of the state.





Appendix B

2002 Exit Survey Instrument

