2023 New York Residency Training Outcomes:

A Summary of Responses to the 2023 New York Resident Exit Survey

CHWS
Center *for* Health Workforce Studies

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April 2024

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This report summarizes the results of the annual Survey of Residents Completing Training in New York conducted by the Center for Health Workforce Studies (CHWS) in the spring and summer of 2023.

DEMAND

Demand for new physicians in primary care specialties* remains strong

- Physicians in primary care specialties were less likely than physicians in other specialties to report difficulty finding a satisfactory practice position (14% vs 18%) and having to change plans due to limited opportunities (5% vs 11%)
- Physicians in primary care specialties received slightly more job offers than physicians in other specialties (mean of 3.51 vs 3.34)

IN-STATE RETENTION

Over half (53%) of new physicians planned to stay in New York to practice after completing training

- Among those staying in New York, 91% planned to remain in the same region where they trained
- For those leaving New York, the top reasons for leaving were: to be closer to family (34%), better salary offered outside New York (15%), and cost of living in New York (9%)

UNDERSERVED AREAS

Few physicians reported plans to practice in rural areas

- Only 4% of physicians completing training in New York reported plans to practice in a rural area

DIVERSITY

Gender diversity of new physicians is comparable to the US population but racial/ethnic diversity is not

- Forty-seven percent (47% compared to 48% in 2014) of new physicians were female, similar to the US population (50%)[†]
- Fifteen percent (15% compared to 15% in 2014) of new physicians were underrepresented minorities (URMs),[‡] vs 34% of the US population[†]

* Primary care includes: family medicine, general internal medicine, and general pediatrics.

† US population data (% female and % URM) were obtained at https://www.census.gov/quickfacts/. Accessed March 22, 2024.

‡ URMs include Black/African Americans, Hispanic/Latinos, and American Indians.

PREFACE

This report summarizes the results of the Survey of Residents Completing Training in New York (Exit Survey) conducted by the Center for Health Workforce Studies (CHWS) in the spring and summer of 2023. This survey, administered annually with the cooperation and assistance of residency program directors and hospitals' graduate medical education (GME) administrators across the state, consists of questions covering the following general topical areas: residents' demographic and background characteristics, residents' post-graduation plans, characteristics of post-graduation employment (for residents with confirmed practice plans), residents' experiences in searching for a job, and their impressions of the physician job market (for residents who had searched for a job).

The primary goal of the Exit Survey is to assist the medical education community and policy makers in New York in their efforts to train physicians to meet the needs of the state and the nation. To achieve this goal, CHWS provides residency programs, teaching hospitals, and the medical education community with information about the demand for new physicians and the outcomes of residency training by specialty based on the results of the survey.

This report was prepared by CHWS staff Jinman Pang, David Armstrong, and Sage Shirey. Funding for the 2023 Exit Survey and analysis was provided by the New York State Department of Health.

Established in 1996, CHWS is an academic research center, based at the School of Public Health, University at Albany, State University of New York (SUNY). The mission of CHWS is to provide timely, accurate information and conduct policy-relevant research about the health workforce. The research conducted by CHWS supports and promotes health workforce planning and policymaking at local, regional, state, and national levels. Today, CHWS is a national leader in the field of health workforce studies.

The views expressed in this report are those of CHWS and do not necessarily represent positions or policies of the School of Public Health, University at Albany, SUNY, or the New York State Department of Health.

April 2024

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BACKGROUND

The Center for Health Workforce Studies (CHWS) conducts an annual survey of all physicians completing a residency or fellowship training program in New York (the Exit Survey). The goal is to provide the medical education community with useful information about the outcomes of training and the demand for new physicians. The survey instrument (Appendix B) was developed by CHWS in consultation with the state's teaching hospitals and other key stakeholders.

Each year in the spring, CHWS distributes the Exit Survey to graduate medical education (GME) administrators at teaching hospitals in New York. The survey is then forwarded to individual programs where graduating residents and fellows are asked to complete a questionnaire in the weeks prior to finishing their program. Completed questionnaires are returned to CHWS for data entry and analysis. In 2023, with the participation of teaching hospitals, a total of 2,000 of the estimated 5,206 physicians finishing a residency or fellowship training program completed the Exit Survey (38% response rate). Over the 23 years the survey has been conducted (1998-2003, 2005, 2007-2019, 2021-2023), 67,367 of 115,593 graduates have completed the survey (58% cumulative response rate).

A summary of the 2023 survey results is 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. While the experiences of graduates of training programs in New York may not reflect the experiences of all graduates around the country, they are illustrative of the marketplace for new physicians. By conducting the survey annually, it is possible to observe trends in the marketplace, which can be useful in projecting future demand.

KEY FINDINGS

Overall, the job market for physicians completing training in New York in 2023 was strong.

Based on the responses to several questions used to measure demand, the opportunities for New York's graduating physicians in 2023 were comparable to those in 2022.

- Ninety-five percent (95%) of respondents who had actively searched for a practice position had received at least 1 job offer at the time they completed the survey.

- Seventeen percent (17%) of respondents reported difficulty finding a satisfactory practice position; 16% of them contributed their difficulty to an overall lack of jobs and 31% contributed their difficulty to a lack of jobs in desired locations.

- Only 10% of respondents indicated that they had to change plans due to limited job opportunities.

- The median starting income of respondents was $302,600, a 7% increase from 2022.

Demand for physicians in primary care specialties* was stronger than the demand for physicians in other specialties according to most indicators.

- Physicians in primary care specialties were less likely than physicians in other specialties to report difficulty finding a satisfactory practice position (14% vs 18%) and having to change plans due to limited opportunities (5% vs 11%).

- Physicians in primary care specialties had a more favorable view of the regional job market (1.53 vs 1.20) and national job market (1.77 vs 1.63) (based on a scale of -2.00, indicating "No Jobs" to +2.00, indicating "Many Jobs").

- Physicians in primary care specialties received slightly more job offers than physicians in other specialties (mean of 3.51 vs 3.34).

There were important differences in the demand for individual specialties.

- Based on a variety of indicators[†] the demand for physicians in anesthesiology, gastroenterology, child and adolescent psychiatry, obstetrics/gynecology, adult psychiatry, and family medicine was strongest.

- Physicians in emergency medicine, general surgery, pathology, and physical medicine and rehabilitation experienced the weakest demand relative to other specialties.

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* In this report primary care includes the following specialties: family medicine, general internal medicine, and general pediatrics. Non-primary care includes all other specialties. See Appendix A for a complete taxonomy of specialties.

† The indicators included having difficulty finding a job, having to change plans due to limited practice opportunities, mean number of job offers, view of the regional market, view of the national job market, and trends in median starting income.

Gender diversity of new physicians is comparable to the US population but racial/ethnic diversity is not.

- Forty-seven percent (47%) of new physicians were female, similar to the US population (50%).[‡]

- Fifteen percent (15%) of physicians completing training in New York were underrepresented minorities (URMs).[§] In comparison, 34% of the US population are URMs.[‡]

Fifty-three percent (53%) of the physicians completing training in New York planned to enter patient care/clinical practice. Thirty-nine percent (39%) of respondents reported plans to subspecialize or pursue additional training.

More than half (53%) of new physicians planned to stay in New York to practice after completing training.

- When respondents who had plans to leave New York were asked about the main reason for leaving, the most common reasons reported were proximity to family (34%), better salary offered outside New York (15%), and cost of living in New York (9%).

Few physicians reported plans to practice in underserved areas.

- Fourteen percent (14%) of respondents indicated that they would be practicing in a federally designated Health Professional Shortage Area (HPSA).

- Only 4% of physicians completing training in New York reported plans to practice in a rural area.

[‡] US population data (% female and % URM) were obtained at https://www.census.gov/quickfacts/. Accessed March 22, 2024.

[§] URMs include Black/African Americans, Hispanic/Latinos, and American Indians.

Center for Health Workforce Studies

GENERAL RESULTS

Characteristics of 2023 Respondents

- Forty-seven (47%) of survey respondents were women.
  - The specialties with the most women were: endocrinology and metabolism (88%), obstetrics/gynecology (85%), general pediatrics (72%), and infectious disease (67%).

- Underrepresented minorities (URMs) comprised 15% of all respondents.
  - The specialties with the most URMs were: general pediatrics (25%), pulmonary disease (23%), family medicine (22%), and obstetrics/gynecology (22%).

- Twenty-eight percent (28%) of respondents were New Yorkers.[II]
  - Forty-nine percent (49%) of respondents were from other states and 21% were from other countries (not including Canada).

- Thirty-one percent (31%) of respondents were IMGs.
  - The specialties with the highest concentrations of IMGs were: critical care medicine (65%), pathology (65%), cardiology (61%), and general internal medicine (55%).
  - The specialties with the fewest IMGs included anesthesiology (5%), dermatology (5%), ophthalmology (6%), orthopedics (7%), and emergency medicine (7%).

- Thirteen percent (13%) of respondents were IMGs on temporary visas.
  - The specialties with the highest concentrations of IMGs on temporary visas were: infectious disease (43%), cardiology (39%), critical care medicine (35%), and general internal medicine (28%).
  - Ophthalmology (0%), child and adolescent psychiatry (0%), and anesthesiology (0%) had no temporary visa holders.

- The median education debt of respondents (US citizens only) was $178,600.
  - Specialties with the highest median education debt were family medicine ($272,250), general surgery ($233,500), and general pediatrics ($229,200).
  - Cardiology ($0), child and adolescent psychiatry ($0), endocrinology and metabolism ($4,000), and pathology ($28,850) were the specialties with the lowest education debt.

II New Yorkers are defined as individuals who graduated from a high school in New York.

Planned Activities After Completion of Current Training Program

- Fifty-three percent (53%) of all respondents reported plans to enter patient care practice following completion of their current training program.
  - Of these, 94% had confirmed practice plans (ie, they had accepted an offer for a job/ practice position) when they completed the survey.
- Thirty-nine percent (39%) of respondents reported plans to subspecialize or pursue further training.
- The remainder reported plans to work as chief residents (2%), to begin a teaching/research position (1%), and to engage in other activities (2%).

Practice Plans of Respondents Entering Patient Care

- Fifty-three percent (53%) of respondents with confirmed plans reported plans to enter practice in New York.
  - The vast majority of these respondents (91%) reported confirmed plans to remain in the same region they had trained.
- In-state retention of physicians was highest in the following specialties: general surgery (88%), anesthesiology (75%), and adult psychiatry (74%).
- In-state retention of physicians was lowest in the following specialties: ophthalmology (0%), orthopedics (22%), and cardiology (30%).
- Respondents who graduated from a high school and a medical school in New York were the most likely (74%) to report confirmed plans to practice in New York after completing training.
- When respondents who had plans to leave New York to practice were asked about the main reason for leaving, the most common reasons reported were proximity to family (34%), better salary outside New York (15%), and cost of living in New York (9%).
- Seven percent (7%) of respondents indicated that they had never intended to practice in New York.
- Few respondents reported that the principal reason for practicing outside of New York was the cost of malpractice insurance in New York (0%), the cost of starting a practice in New York (0%), climate/weather in New York (1%), or taxes in New York (2%).
- Thirty-six percent (36%) of respondents reported plans to practice in inner-city locations, while only 4% were going to rural locations.
- Respondents in the following specialties were most likely to report plans to enter practice in inner city locations: hematology/oncology (59%), pathology (55%), radiology (55%), and infectious disease (50%).

- Fourteen percent (14%) of respondents reported that they would be practicing in a federally designated HPSA.

- The respondents most likely to report plans to practice in HPSAs were in the specialties of cardiology (45%), general pediatrics (44%), and critical care medicine (33%).

- Fifty-seven percent (57%) of respondents reported plans to practice in hospitals.
  - Of these respondents, 56% reported plans to practice in inpatient settings, 26% in ambulatory care settings within the hospital, and 18% in emergency departments.

- Thirty-seven (37%) of respondents reported plans to join group practices.
  - Of these respondents, 84% reported plans to join group practices as employees.

Expected Starting Income[#]

Differences in income between specialties can reflect dissimilarities in demand. They also reflect historical reimbursement policies for the kinds of services provided in various specialties. As such, trends in income provide a better indicator of demand than income levels at any particular point in time.

Although the expected income in the first year of practice (ie, starting income) of recent graduates is likely to be much lower than that of experienced, practicing physicians, the differences in income among new graduates across specialties are assumed to be generally consistent with the differences by specialty among practicing physicians, and thus provide some insight into the rank ordering of demand across specialties.

- Although there was some overlap in the salary distributions of primary care and non-primary care physicians, non-primary care physicians generally reported higher incomes.

- Respondents in the following specialties reported the highest median starting incomes: anesthesiology ($446,100), orthopedics ($435,600), and cardiology ($423,600).

- General pediatrics had the lowest median starting income of all specialties ($190,650).
  - Other specialties with low reported starting incomes included infectious disease ($227,200) and endocrinology and metabolism ($233,000).

- Most specialties experienced moderate growth in starting incomes from 2018 to 2023.

- Ophthalmology (+13%), obstetrics/gynecology (+8%), neurology (+8%), hematology/oncology (+8%), gastroenterology (+8%), and anesthesiology (+7%) experienced the strongest growth in income between 2018 and 2023.

- Physical medicine and rehabilitation (0%) was the only specialty that experienced no income growth during this time period.

[#] Expected starting income includes both reported base salary and expected incentive income as reported on the Exit Survey. While the graduates with confirmed practice plans for salaried positions were likely to know their base salary with certainty, those entering solo practice and those expecting incentive income were likely to be less accurate.

Expected Weekly Patient Care/Clinical Practice Hours

- Overall, respondents expected to spend an average of 43.3 hours per week in patient care/clinical practice activities.

- Respondents in the following specialties reported expectations to work the highest patient care/clinical practice hours per week: general surgery (53.5 hours), anesthesiology (53.0 hours), and cardiology (51.7 hours).

- Respondents in the following specialties reported expectations to work the fewest patient care/clinical practice hours per week: emergency medicine (34.5 hours), child and adolescent psychiatry (35.8 hours), and pediatric subspecialties (36.6 hours).

Experiences Searching for a Practice Position

The Exit Survey includes several questions related to experiences searching for a practice position for any respondent who reported confirmed plans to enter or who considered entering patient care/clinical practice. Responses from IMGs on temporary visas have been excluded because they have more restrictions on where they can practice compared to other physicians. Respondents who indicated they had not yet actively searched for a position were also excluded.

- Seventeen percent (17%) of respondents reported difficulty finding satisfactory positions.

- The most often cited main reason for difficulty finding a satisfactory practice position was lack of jobs in desired locations (31%) and inadequate salary/compensation offered (24%), followed by lack of jobs in desired practice setting (20%) and an overall lack of jobs (16%).

- The specialties with the highest percentage of respondents having difficulty finding a satisfactory practice position in 2023 were: critical care medicine (40%), ophthalmology (40%), physical medicine and rehabilitation (39%), and general surgery (36%).

- The specialties with the lowest percentage of respondents having difficulty finding a satisfactory practice position in 2023 were: endocrinology and metabolism (0%), anesthesiology (5%), adult psychiatry (7%), and emergency medicine (9%).

- Ten percent (10%) of respondents reported having to change their plans due to limited practice opportunities in 2023.

- The specialties with the highest percentage of respondents who had to change plans due to limited practice opportunities in 2023 were: pathology (21%), critical care medicine (20%), general surgery (20%), ophthalmology (20%), and child and adolescent psychiatry (19%).

- The specialties with the lowest percentage of respondents who had to change plans due to limited practice opportunities in 2023 were: dermatology (0%), infectious disease (0%), anesthesiology (3%), adult psychiatry (4%), and family medicine (4%).

- The average number of job offers received by respondents was 3.4.
  - Respondents in the following specialties received the most job offers: anesthesiology (5.04), obstetrics/gynecology (4.56), and child and adolescent psychiatry (4.45).
  - Respondents in the following specialties received the fewest job offers: physical medicine and rehabilitation (1.92), pathology (2.26), and critical care medicine (2.67).

Assessment of the Job Market for New Physicians

- Overall, respondents viewed the regional job market positively, with an average score of +1.26 (on a scale of -2.00, indicating "No Jobs" to +2.00, indicating "Many Jobs").
  - Respondents in the following specialties received the most positive views of the regional job market: child and adolescent psychiatry (+2.00), anesthesiology (+1.91), and adult psychiatry (+1.78).
  - Respondents in the following specialties had the least positive views of the regional job market: pathology (+0.39), pediatric subspecialties (+0.56), orthopedics (+0.56), and physical medicine and rehabilitation (+0.77).
- Respondents assessed the national job market (+1.66) more positively than the regional job market (+1.26).
  - Respondents in the following specialties reported the most positive views of the national job market: child and adolescent psychiatry (+2.00), infectious disease (+2.00), endocrinology and metabolism (+2.00), anesthesiology (+1.96), adult psychiatry (+1.96), and hematology/oncology (+1.94).
  - Respondents in the following specialties reported the least positive views of the national job market: pathology (+1.00), physical medicine and rehabilitation (+1.23), and orthopedics (+1.36).
- Demand for physicians in primary care specialties was comparable to the demand for physicians in other specialties.
  - Physicians in primary care specialties were somewhat less likely than physicians in other specialties to report difficulty finding satisfactory practice positions (14% and 18%, respectively) and having to change plans due to limited practice opportunities (5% and 11%, respectively).
  - Physicians in primary care specialties received a similar number of job offers to physicians in other specialties (mean of 3.51 and 3.34 respectively).
  - Physicians in primary care specialties had a more positive view than physicians in other specialties of the regional job market (average score of 1.53 vs 1.20, respectively) and national job market (1.77 vs 1.63).

- The average annual increase in median starting income from 2018 to 2023 was 4% for primary care physicians and 5% for other physicians.

- Based on an aggregation of all demand indicators from the last 4 years of the survey, demand for physicians was strongest in the following specialties: anesthesiology, gastroenterology, child and adolescent psychiatry, obstetrics/gynecology, adult psychiatry, and family medicine.

- Demand for physicians was weakest in the following specialties: emergency medicine, general surgery, pathology, and physical medicine and rehabilitation.

TECHNICAL REPORT

SUBGROUPS OF RESPONDENTS

Figure 1 illustrates the subgroups of respondents considered in each section of this report. The survey was completed by 2,000 of the estimated 5,206 residents who completed training in 2023 (38% response rate). Sections 1 and 2 of this report describe the characteristics of all survey respondents and outlines of their planned activities following completion of their current training programs. Section 3 describes respondents who are entering patient care/clinical practice and had confirmed practice plans (ie, they had 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 relate respondents' experiences searching for practice positions. This section excludes respondents who had not yet searched for a practice position and international medical graduates (IMGs) on temporary visas as they have more restrictions on where they can practice compared to other physicians. Appendix A presents response rates by specialty and region and illustrates how specialties are grouped in this report. Appendix B contains the 2023 Exit Survey instrument.

FIGURE 1. 2023 Exit Survey Response Rates and Subgroups Used in Each Section of This Report
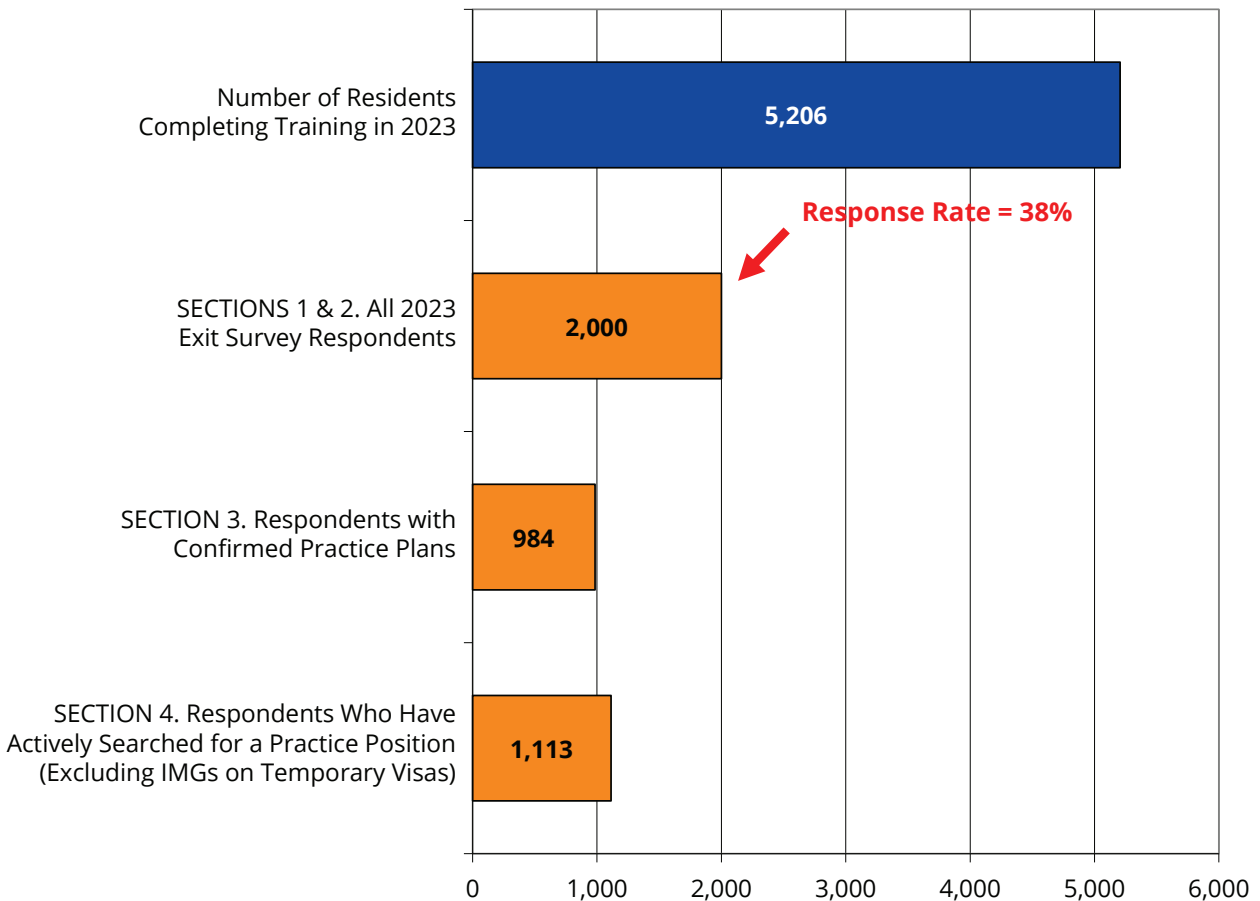
SECTION 1: CHARACTERISTICS OF ALL RESPONDENTS

1.1 Background Characteristics

Table 1.1 describes the characteristics of all 2023 Exit Survey respondents. This information is presented because these characteristics are known to be associated with several outcomes of interest. For example, IMGs were much more likely to report difficulty finding a satisfactory practice position. Thus, the proportion of IMGs in each specialty is important to consider when comparing outcomes of interest across specialties.

Highlights

- Forty-seven percent (47%) of survey respondents were women.
  - The specialties with the most women were: endocrinology and metabolism (88%), obstetrics/gynecology (85%), general pediatrics (72%), and infectious disease (67%).
  - The specialties with the fewest women were: pain management (7%), orthopedics (18%), and cardiology (19%).
- Underrepresented minorities (URMs)* comprised 15% of respondents in 2023.
  - The specialties with the most URMs were: general pediatrics (25%), pulmonary disease (23%), family medicine (22%), and obstetrics/gynecology (22%).
  - The specialties with the fewest URMs were: endocrinology and metabolism (6%), neurology (8%), and emergency medicine (10%).
- Twenty-eight percent (28%) of respondents were New Yorkers.[†]
  - Forty-nine percent (49%) of respondents were from other states and 21% were from other countries (not including Canada).
- Thirty-one percent (31%) of 2023 respondents were IMGs.
  - The specialties with the highest concentrations of IMGs were: critical care medicine (65%), pathology (65%), cardiology (61%), and general internal medicine (55%).
  - The specialties with the fewest IMGs included: anesthesiology (5%), dermatology (5%), ophthalmology (6%), orthopedics (7%), and emergency medicine (7%).
- Thirteen percent (13%) of respondents were IMGs on temporary visas.
  - The specialties with the highest concentrations of IMGs on temporary visas were: infectious disease (43%), cardiology (39%), critical care medicine (35%), and general internal medicine (28%).
  - The specialties with the fewest temporary visa holders were: ophthalmology (0%), child and adolescent psychiatry (0%), anesthesiology (0%), emergency medicine (1%), obstetrics/gynecology (4%), and orthopedics (4%).

* URMs include Blacks/African Americans, Hispanic/Latinos, and American Indians.
[†] New Yorkers are defined as individuals who graduated from a high school in New York.

FIGURE 1.1. Percentage of Females by Specialty Group (All 2023 Exit Survey Respondents)
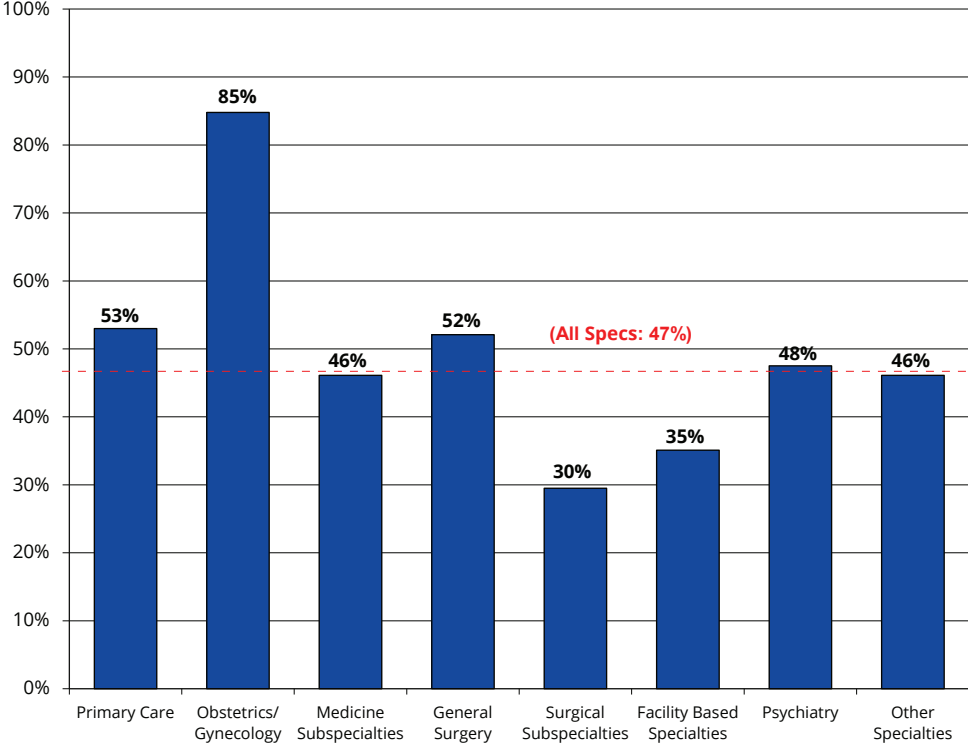
FIGURE 1.2. Percentage of Underrepresented Minorities by Specialty Group (All 2023 Exit Survey Respondents)
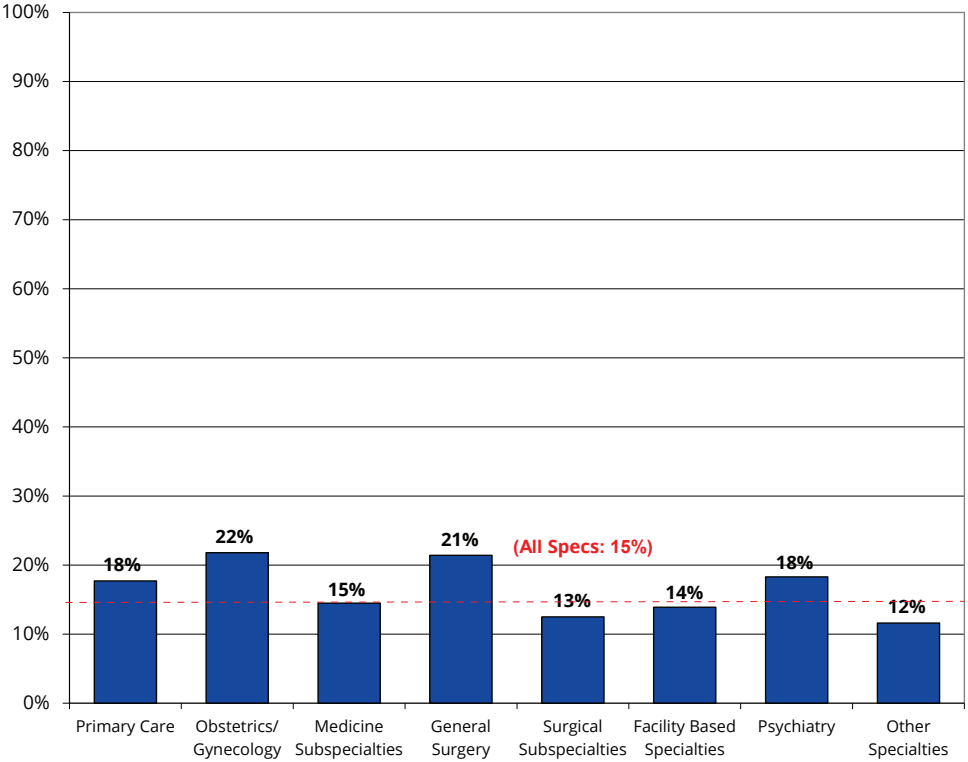
FIGURE 1.3. Location of High School Attended (All 2023 Exit Survey Respondents)

- Other Country 21%
- New York 28%
- Canada 3%
- Other US 49%
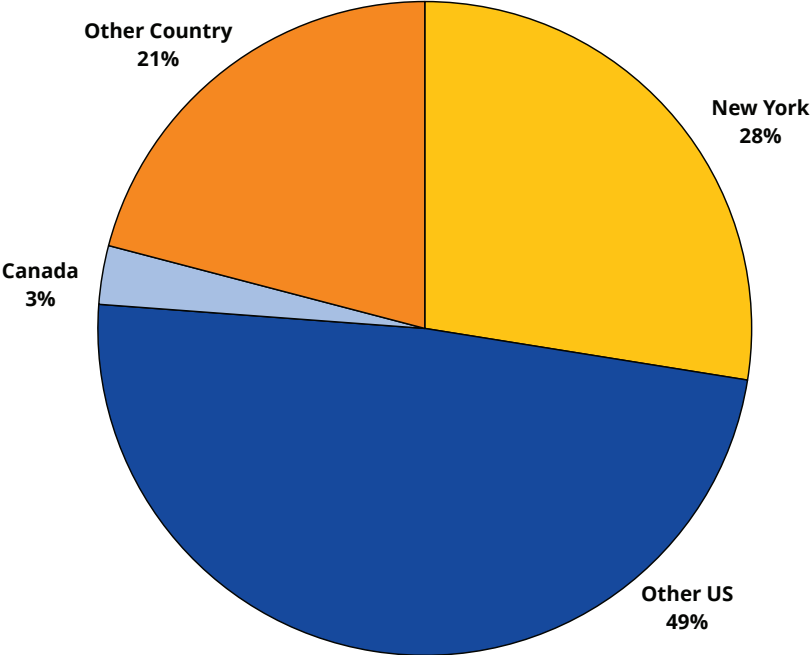
FIGURE 1.4. Location of Medical School and Citizenship Status (All 2023 Exit Survey Respondents)

- Other State 40%
- IMGs 31%
- New York 29%
- Permanent Resident/Citizen 18%
- H1, H2, H3 Temp Worker 4%
- J1, J2 Exchange Visitor 9%
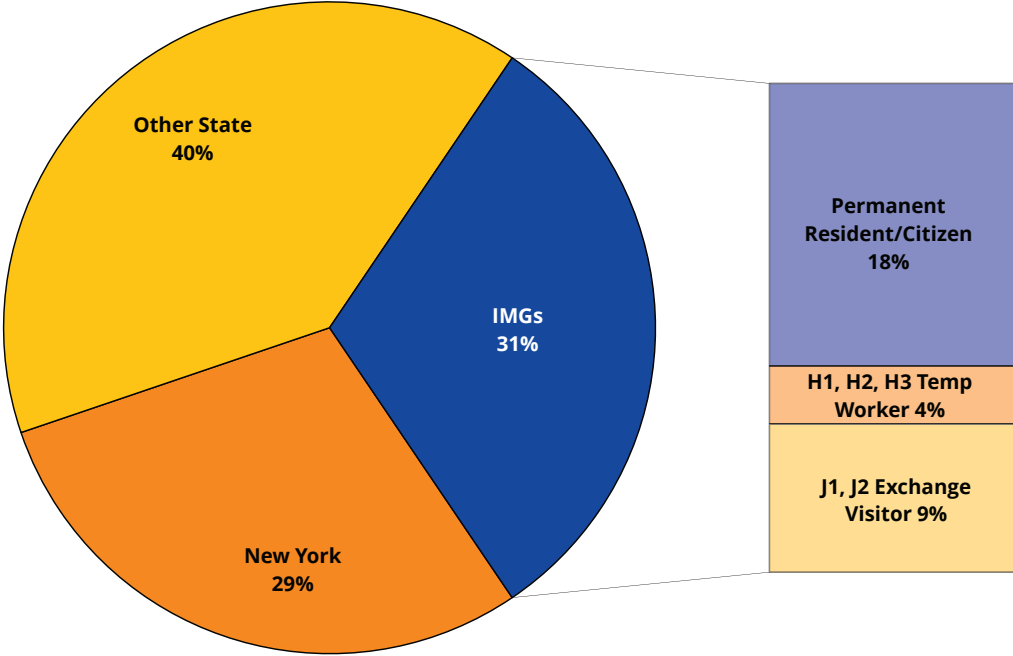
TABLE 1.1. Background Characteristics by Specialty (All 2023 Exit Survey Respondents)

Specialty	Number of Resp (N)[a]	% Female	% URM[b]	% New Yorkers[c]	% IMG[d]	% Temp Visa Holders[e]
Primary Care	**543**	**53%**	**18%**	**31%**	**49%**	**23%**
Family Medicine	65	55%	22%	55%	29%	6%
General Internal Medicine	369	47%	15%	28%	55%	28%
General Pediatrics	103	72%	25%	27%	43%	19%
Obstetrics/Gynecology	**79**	**85%**	**22%**	**25%**	**13%**	**4%**
Medicine Subspecialties	**281**	**46%**	**15%**	**25%**	**47%**	**23%**
Cardiology	59	19%	15%	20%	61%	39%
Critical Care Medicine	17	35%	12%	35%	65%	35%
Endocrinology & Metabolism	16	88%	6%	44%	31%	7%
Gastroenterology	24	44%	14%	35%	17%	9%
Hematology/Oncology	25	52%	13%	21%	40%	12%
Infectious Disease	21	67%	14%	19%	52%	43%
Pulmonary Disease	36	50%	23%	34%	43%	11%
General Surgery	**73**	**52%**	**21%**	**23%**	**19%**	**7%**
Surgical Subspecialties	**208**	**30%**	**13%**	**23%**	**9%**	**3%**
Ophthalmology	34	52%	15%	27%	6%	0%
Orthopedics	72	18%	14%	13%	7%	4%
Facility Based	**289**	**35%**	**14%**	**26%**	**22%**	**7%**
Anesthesiology	100	35%	13%	38%	5%	0%
Pain Management	15	7%	13%	40%	13%	7%
Pathology	51	45%	16%	8%	65%	22%
Radiology	95	33%	13%	21%	20%	7%
Psychiatry	**141**	**48%**	**18%**	**28%**	**33%**	**9%**
Adult Psychiatry	88	44%	18%	28%	27%	7%
Child and Adolescent Psych	26	56%	17%	36%	20%	0%
Other	**386**	**46%**	**12%**	**30%**	**18%**	**9%**
Dermatology	19	53%	11%	21%	5%	5%
Emergency Medicine	140	37%	10%	34%	7%	1%
Neurology	65	42%	8%	29%	19%	6%
Pediatric Subspecialties	64	63%	18%	23%	38%	16%
Physical Medicine and Rehab	34	50%	12%	35%	12%	0%
All Specialties, 2023 (2022)	**2,000 (2,301)**	**47% (46%)**	**15% (16%)**	**28% (27%)**	**31% (36%)**	**13% (16%)**

[a] Specialties 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.

[b] Underrepresented minority includes Black/African American, Hispanic/Latino, and American Indian.

[c] Individuals who graduated high school in New York are described as New Yorkers in this report.

[d] IMG = International Medical Graduate.

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

1.2 Education Debt

Table 1.2 presents descriptive statistics for respondents' education debt. Only respondents who were US citizens are included, because non-US citizens often have their medical education paid for by their home country's government. The number of respondents (N) is indicated as many specialties had small numbers of respondents. Finally, specialties are ranked in descending order (ie, 1 is highest, 25 is lowest) by both mean and median education debt.

Highlights

- The median education debt of 2023 respondents was $178,600.
  - Specialties with the highest median education debt were family medicine ($272,250), general surgery ($233,500), and general pediatrics ($229,200).
  - The specialties with median education debt of less than $50,000 were cardiology ($0), child and adolescent psychiatry ($0), endocrinology and metabolism ($4,000), pathology ($28,850), and dermatology ($29,000).

FIGURE 1.5. Median Education Debt (in $1,000s) by Specialty and Race/Ethnicity (All 2023 Exit Survey Respondents, US Citizens Only)
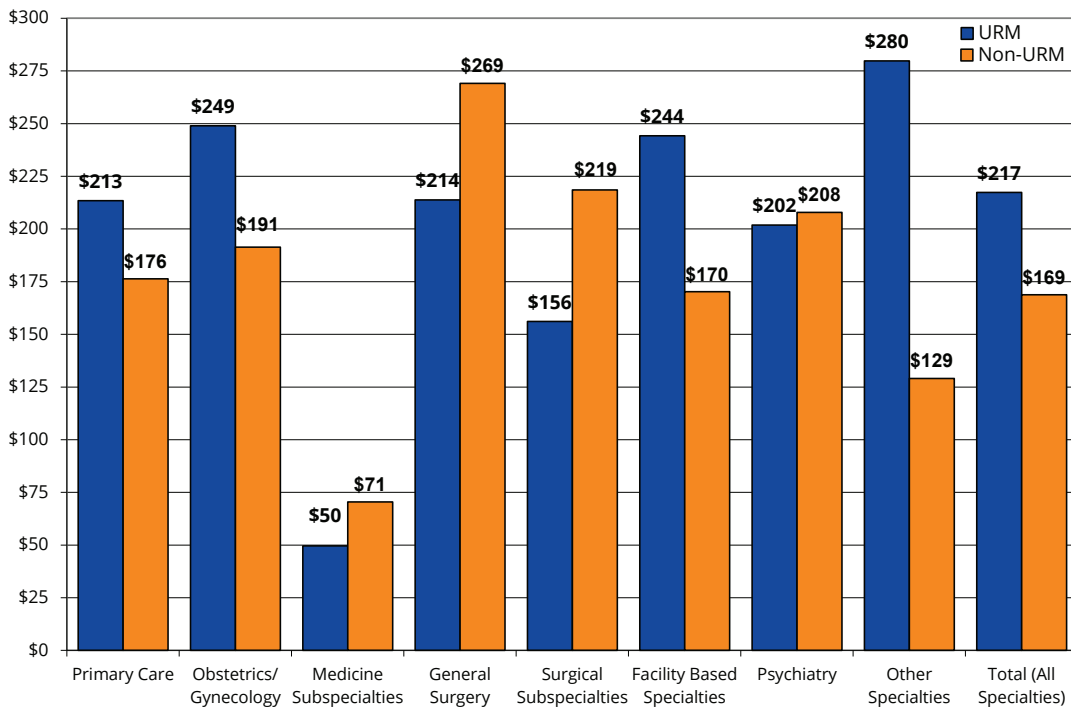
TABLE 1.2. Education Debt by Specialty (All 2023 Exit Survey Respondents, US Citizens Only)

Specialty	N	MEAN	RANK[a] (of 25)	MEDIAN	RANK (of 25)
Primary Care	**362**	**$182,698**	N/A	**$190,250**	N/A
Family Medicine	59	$252,796	1	$272,250	1
General Internal Medicine	225	$156,129	15	$101,950	17
General Pediatrics	116	$211,616	2	$229,200	3
Obstetrics/Gynecology	**74**	**$206,499**	**4**	**$207,150**	**7**
Medicine Subspecialties	**195**	**$128,476**	N/A	**$69,000**	N/A
Cardiology	38	$111,106	23	$0	24
Critical Care Medicine	19	$177,680	11	$191,250	9
Endocrinology & Metabolism	25	$87,050	25	$4,000	23
Gastroenterology	10	$116,800	22	$71,900	19
Hematology/Oncology	30	$121,842	21	$58,700	20
Infectious Disease	13	$133,317	18	$110,250	16
Pulmonary Disease	23	$186,617	9	$179,900	11
General Surgery	**64**	**$210,555**	**3**	**$233,500**	**2**
Surgical Subspecialties	**193**	**$192,711**	N/A	**$209,800**	N/A
Ophthalmology	67	$153,431	16	$117,050	15
Orthopedics	18	$184,352	10	$197,000	8
Facility Based	**242**	**$180,567**	N/A	**$177,050**	N/A
Anesthesiology	79	$187,990	8	$213,300	6
Pain Management	18	$166,786	13	$183,200	10
Pathology	40	$124,103	20	$28,850	22
Radiology	80	$191,027	7	$174,100	13
Psychiatry	**115**	**$185,060**	N/A	**$207,100**	N/A
Adult Psychiatry	76	$199,766	5	$216,300	5
Child and Adolescent Psych	21	$131,187	19	$0	24
Other	**307**	**$174,001**	N/A	**$161,300**	N/A
Dermatology	23	$94,788	24	$29,000	21
Emergency Medicine	123	$199,143	6	$219,100	4
Neurology	48	$163,886	14	$175,600	12
Pediatric Subspecialties	42	$151,131	17	$98,100	18
Physical Medicine and Rehab	36	$168,894	12	$132,500	14
Total (All Specialties)	**1,552**	**$177,536**	N/A	**$178,600**	N/A

[a] Rank based on 25 specialties, ranked in descending order (ie, highest debt ranked #1, lowest debt ranked #25).

1.3 Marital Status and Dependent Children

Figure 1.6 displays the percentage of respondents who were married and Figure 1.7 displays the percentage of respondents that have dependent children. Table 1.3 summarizes this information by specialty.

Highlights

- Overall, 52% of respondents indicated that they were married, and of those who were married, 34% were married to another physician.
  - The specialties with the most married respondents were gastroenterology (78%), orthopedics (69%), pulmonary disease (66%), and pediatric subspecialties (66%).
  - The specialties with the fewest married respondents were pain management (33%), emergency medicine (35%), and family medicine (41%).
- Twenty-five percent (25%) of respondents reported that they had dependent children.
  - The specialties with the most respondents with dependent children respondents were orthopedics (42%), hematology/oncology (40%), pulmonary disease (40%), cardiology (40%), and endocrinology and metabolism (38%).
  - The specialties with the fewest respondents with dependent children were emergency medicine (9%), family medicine (9%), ophthalmology (12%), and anesthesiology (19%).

FIGURE 1.6. **Percentage of Respondents Who Were Married, by Specialty Group (All 2023 Exit Survey Respondents)**
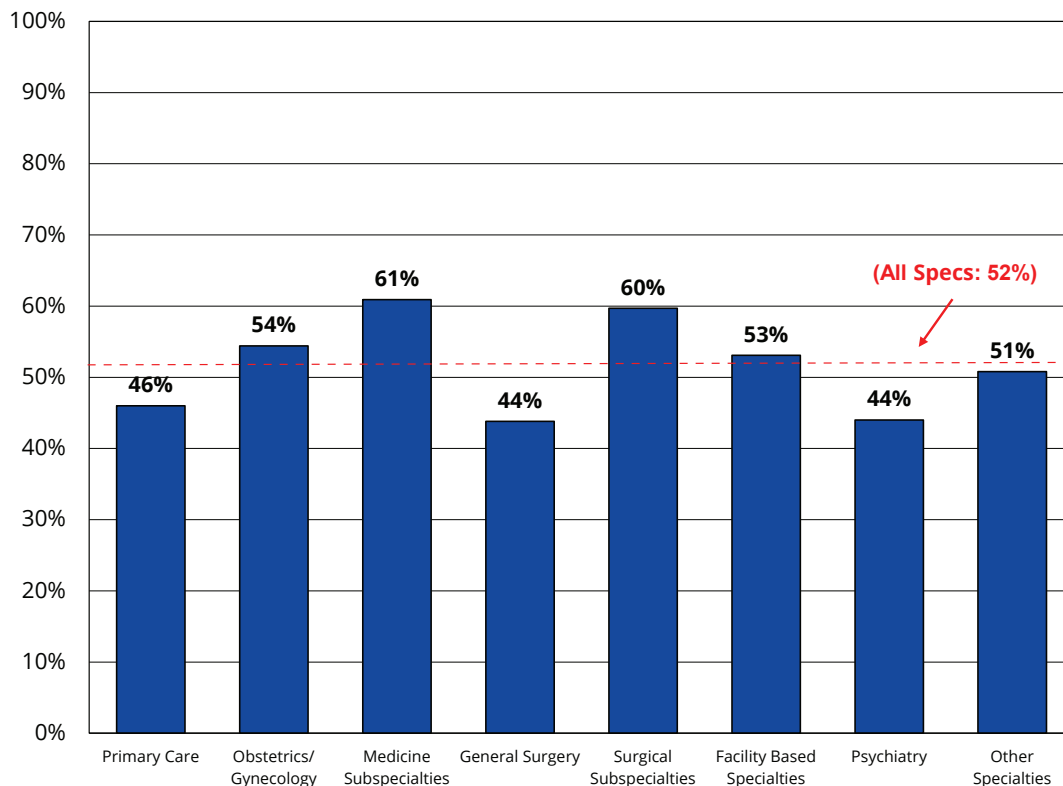
FIGURE 1.7. Percentage of Respondents With Dependent Children by Specialty Group (All 2023 Exit Survey Respondents)
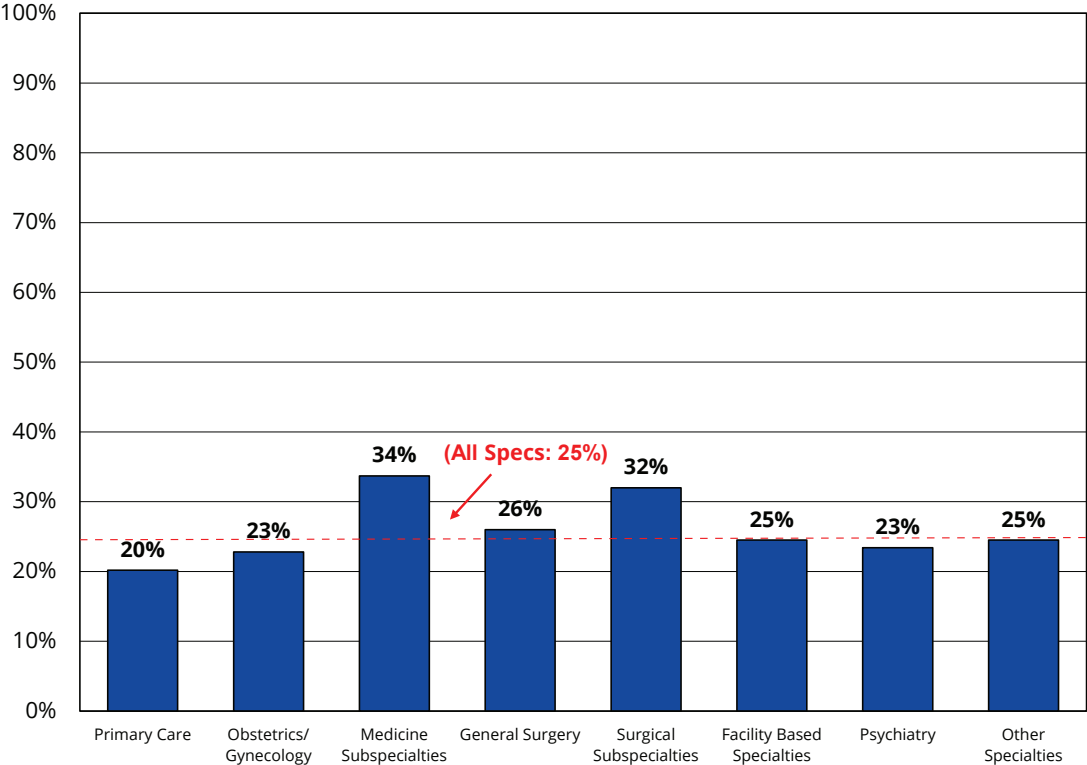
TABLE 1.3. Marital Status and Dependent Children (All 2023 Exit Survey Respondents)

Specialty	% Married	% Who Had Dependent Children
Primary Care	**46%**	**20%**
Family Medicine	41%	9%
General Internal Medicine	47%	20%
General Pediatrics	50%	30%
Obstetrics/Gynecology	**54%**	**23%**
Medicine Subspecialties	**61%**	**34%**
Cardiology	61%	40%
Critical Care Medicine	65%	25%
Endocrinology & Metabolism	56%	38%
Gastroenterology	78%	26%
Hematology/Oncology	60%	40%
Infectious Disease	43%	24%
Pulmonary Disease	66%	40%
General Surgery	**44%**	**26%**
Surgical Subspecialties	**60%**	**32%**
Ophthalmology	50%	12%
Orthopedics	69%	42%
Facility Based	**53%**	**25%**
Anesthesiology	53%	19%
Pain Management	33%	20%
Pathology	55%	34%
Radiology	56%	23%
Psychiatry	**44%**	**23%**
Adult Psychiatry	46%	25%
Child and Adolescent Psych	50%	25%
Other	**51%**	**25%**
Dermatology	58%	26%
Emergency Medicine	35%	9%
Neurology	60%	32%
Pediatric Subspecialties	66%	38%
Physical Medicine and Rehab	50%	27%
All Specialties, 2023 (2022)	**52% (53%)**	**25% (27%)**

SECTION 2: PLANNED ACTIVITES AFTER COMPLETION OF CURRENT TRAINING PROGRAM

Table 2.1 summarizes the planned primary activities of 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. Activities varied considerably by specialty.

Highlights

- Fifty-three percent (53%) of respondents reported plans to enter patient care following completion of their current training program.
  - Of these, 94% had confirmed practice plans (ie, they had accepted an offer for a job/ practice position) at the time they completed the survey.

- Thirty-nine percent (39%) of respondents reported plans to subspecialize or pursue further training.

- The remainder reported plans to: work as chief residents (2%), to begin a teaching/research position (1%), or engage in other activities (2%).

- Respondents in the following specialties most frequently reported plans to enter patient care/ clinical practice: pain management (93%), critical care medicine (88%), child and adolescent psychiatry (88%), hematology/oncology (88%), and infectious disease (80%).

- Respondents in the following specialties most frequently reported plans to subspecialize or continue training: ophthalmology (79%), general surgery (68%), and neurology (64%).

- Respondents in the following specialties most frequently reported plans to take positions as chief residents: general internal medicine (7%), general pediatrics (5%), and pulmonary disease (3%).

- Respondents in the following specialties most frequently reported plans to enter teaching or research positions: gastroenterology (8%), hematology/oncology (8%), endocrinology and metabolism (7%), and infectious disease (5%).

FIGURE 2.1. Primary Activity After Completion of Current Training Program (All 2023 Exit Survey Respondents)

Teaching/Research 1%
Other 2%
Chief Resident 2%
Patient Care With Confirmed Plans 50%
Subspecializing/Cont. Training 39%
Patient Care With No Confirmed Plans 3%
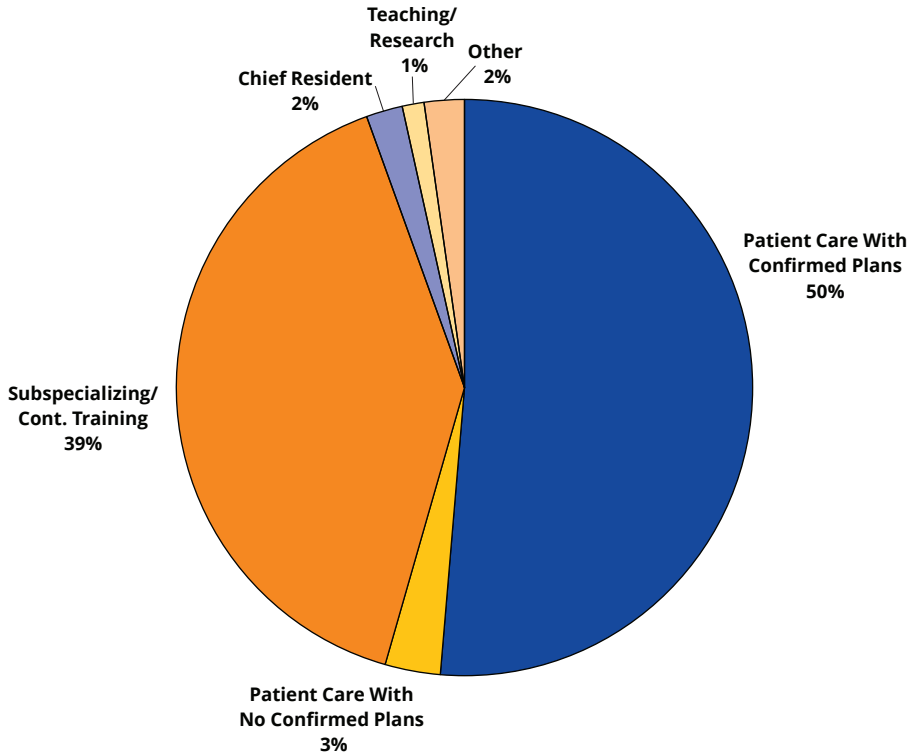
FIGURE 2.2. Percentage of Respondents Entering Patient Care by Specialty Group (All 2023 Exit Survey Respondents)

Specialty Group	2023 Survey	2022 Survey
Primary Care	46%	46%
Obstetrics/Gynecology	66%	75%
Medicine Subspecialties	71%	67%
General Surgery	14%	10%
Surgical Subspecialties	42%	41%
Facility Based Specialties	52%	42%
Psychiatry	65%	66%
Other Specialties	59%	55%

(All Specs, 2023: 51%)
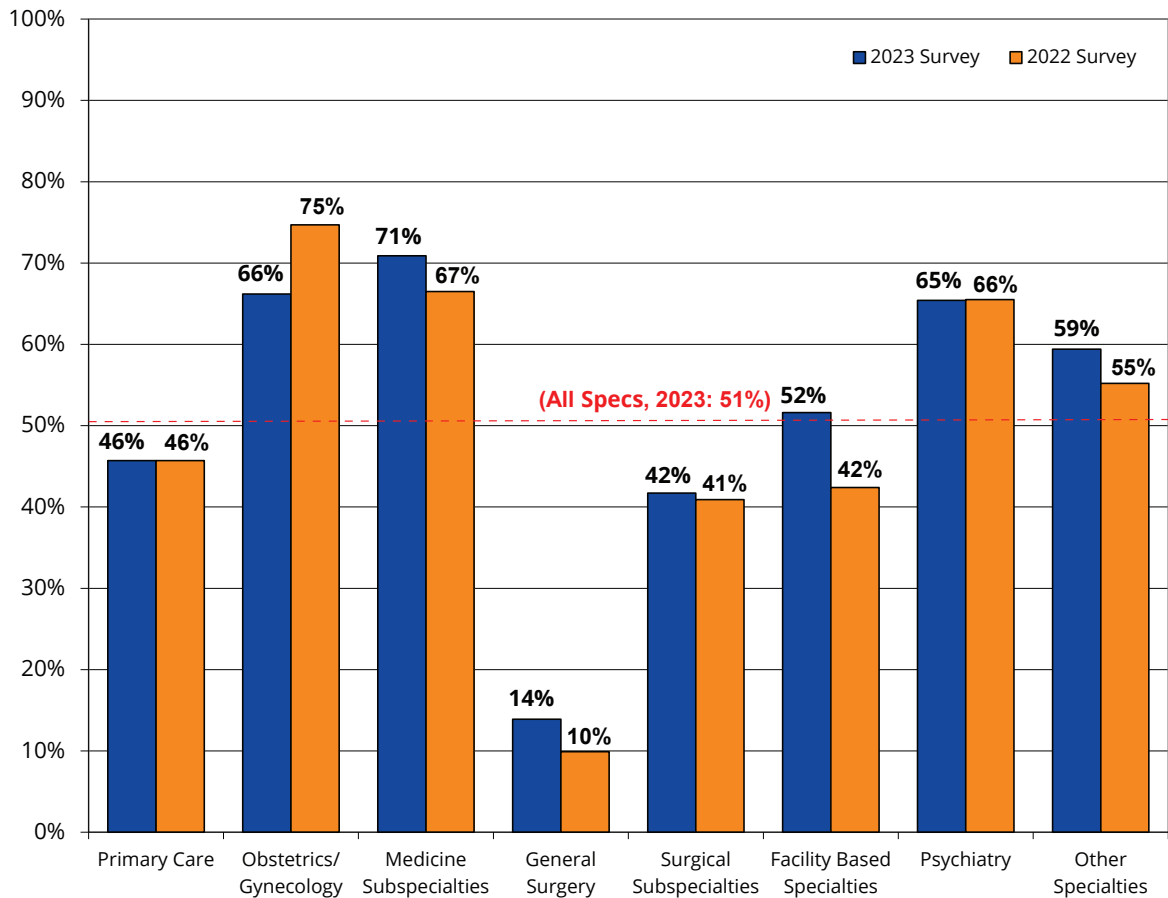
FIGURE 2.3. Rank of Percentage Entering Patient Care by Specialty (All 2023 Exit Survey Respondents)

Specialty	Percentage
(1) Pain Management	93%
(2) Critical Care Medicine	88%
(3) Child and Adolescent Psychiatry	88%
(4) Hematology/Oncology	88%
(5) Infectious Disease	80%
(6) Family Medicine	75%
(7) Pulmonary Disease	74%
(8) Pediatric Subspecialties	73%
(9) Gastroenterology	71%
(10) Dermatology	68%
(11) Endocrinology & Metabolism	67%
(12) Obstetrics/Gynecology	66%
(13) Emergency Medicine	64%
(14) Adult Psychiatry	55%
(15) Anesthesiology	54%
(16) General Pediatrics	51%
(17) Cardiology	48%
(18) Pathology	42%
(19) Physical Medicine and Rehabilitation	41%
(20) General Internal Medicine	39%
(21) Neurology	37%
(22) Radiology	36%
(23) Orthopedics	32%
(24) Ophthalmology	21%
(25) General Surgery	14%

TABLE 2.1. Primary Activity After Completion of Current Training Program by Specialty (All 2023 Exit Survey Respondents)

Specialty	Patient Care/ Clinical Practice	Subspecializing/ Cont. Training	Chief Resident	Teaching/ Research	Other
Primary Care	**46%**	**44%**	**6%**	**0%**	**4%**
Family Medicine	75%	15%	0%	0%	9%
General Internal Medicine	39%	49%	7%	1%	4%
General Pediatrics	51%	43%	5%	0%	2%
Obstetrics/Gynecology	**66%**	**29%**	**1%**	**3%**	**1%**
Medicine Subspecialties	**71%**	**23%**	**0%**	**3%**	**4%**
Cardiology	48%	48%	0%	0%	5%
Critical Care Medicine	88%	6%	0%	0%	6%
Endocrinology & Metabolism	67%	20%	0%	7%	7%
Gastroenterology	71%	21%	0%	8%	0%
Hematology/Oncology	88%	4%	0%	8%	0%
Infectious Disease	80%	5%	0%	5%	10%
Pulmonary Disease	74%	23%	3%	0%	0%
General Surgery	**14%**	**68%**	**1%**	**4%**	**13%**
Surgical Subspecialties	**42%**	**53%**	**1%**	**1%**	**4%**
Ophthalmology	21%	79%	0%	0%	0%
Orthopedics	32%	62%	0%	1%	4%
Facility Based	**52%**	**43%**	**1%**	**1%**	**3%**
Anesthesiology	54%	44%	1%	0%	1%
Pain Management	93%	0%	0%	0%	7%
Pathology	42%	54%	2%	2%	0%
Radiology	36%	55%	0%	2%	6%
Psychiatry	**65%**	**27%**	**0%**	**2%**	**7%**
Adult Psychiatry	55%	38%	0%	1%	6%
Child and Adolescent Psych	88%	12%	0%	0%	0%
Other	**59%**	**35%**	**0%**	**1%**	**4%**
Dermatology	68%	26%	0%	0%	5%
Emergency Medicine	64%	35%	0%	1%	1%
Neurology	37%	64%	0%	0%	0%
Pediatric Subspecialties	73%	19%	0%	3%	5%
Physical Medicine and Rehab	41%	50%	0%	3%	6%
All Specialties, 2023 (2022)	**53% (51%)**	**39% (41%)**	**2% (2%)**	**1% (2%)**	**4% (4%)**

SECTION 3: CONFIRMED PRACTICE PLANS OF RESPONDENTS ENTERING PATIENT CARE PRACTICE

This section summarizes the characteristics of the practice plans of survey respondents with confirmed plans to enter patient care/clinical practice. Respondents who indicated 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 (ie, in solo practice or a partnership) are included in this section of the report.

3.1 Practice Location

Table 3.1 displays the practice locations of respondents with confirmed practice plans. A total of 984 respondents reported confirmed practice plans. One percent (1%) of these respondents reported confirmed plans to leave the US. Physicians with plans to leave the US have been excluded from all other subsections within Section 3.

Highlights

- Fifty-three percent (53%) of respondents with confirmed plans reported plans to enter practice in New York.
    - The vast majority of these respondents (91%) reported confirmed plans to remain in the same region they had trained.
- In-state retention of physicians was highest in the following specialties: general surgery (88%), anesthesiology (75%), and adult psychiatry (74%).
- In-state retention of physicians was lowest in the following specialties: ophthalmology (0%), orthopedics (22%), and cardiology (30%).
- Respondents who graduated from a high school and a medical school in New York were the most likely to report confirmed plans to practice in New York after completing training (74%).
- When respondents who had plans to leave New York to practice were asked about the main reason for leaving, the most common reasons reported were: proximity to family (34%), better salary outside New York (15%), and cost of living in New York (9%).
- Seven percent (7%) of respondents indicated that they had never intended to practice in New York.
- Few respondents reported that the principal reason for practicing outside of New York was the cost of malpractice insurance in New York (0%), the cost of starting a practice in New York (0%), climate/weather in New York (1%), or taxes in New York (2%).

FIGURE 3.1. Location of Upcoming Practice (for 2023 Respondents With Confirmed Practice Plans)
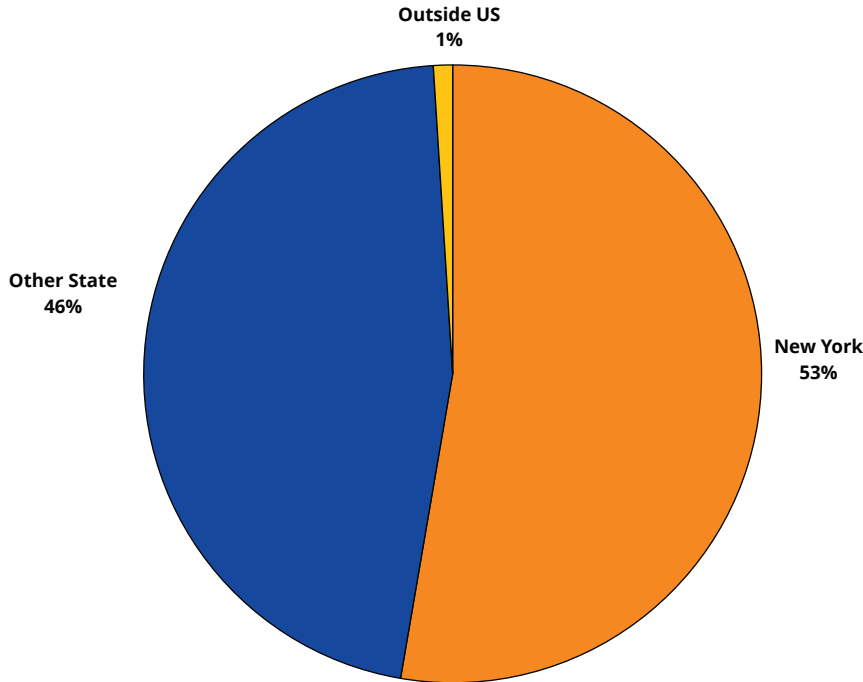
FIGURE 3.2. Percentage Entering Practice in New York by Specialty Group (for Respondents With Confirmed Practice Plans)
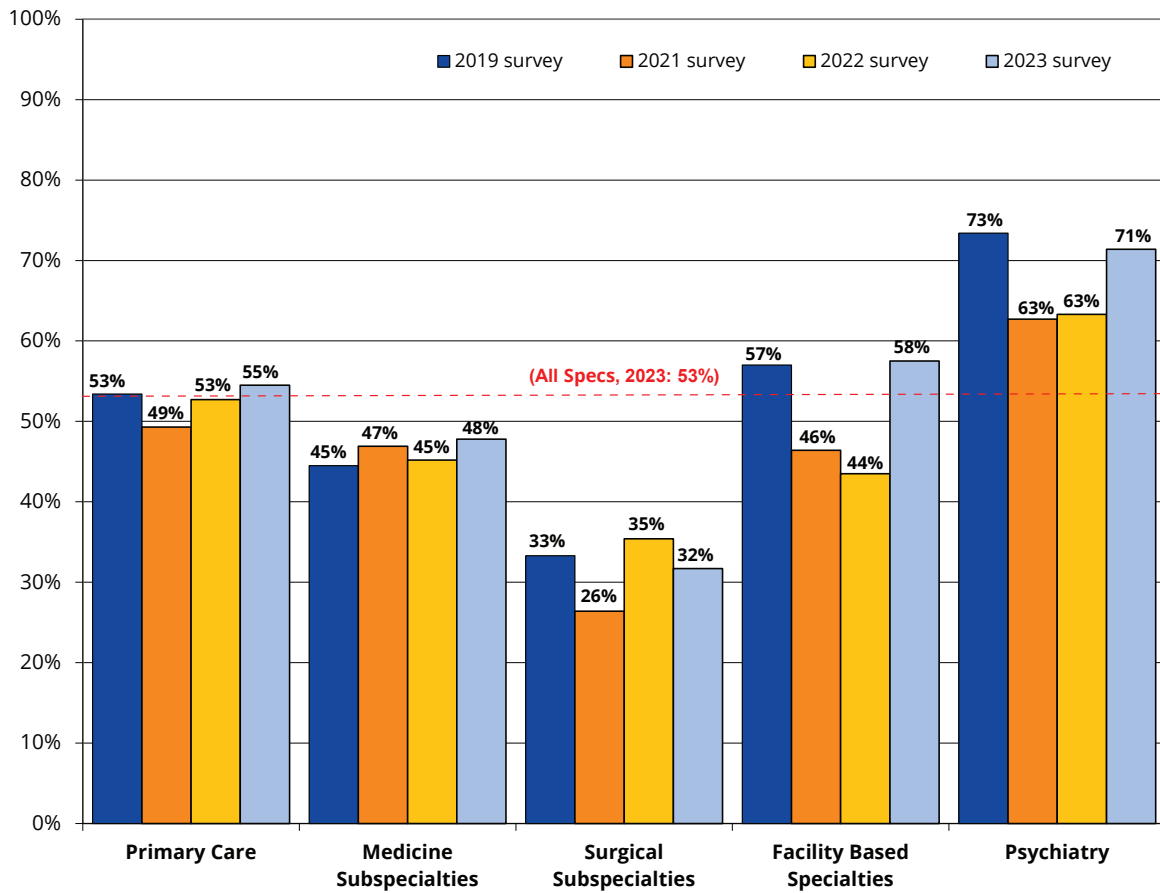
TABLE 3.1. Number of Respondents With Confirmed Practice Plans and Location of Upcoming Practice (for 2023 Respondents With Confirmed Practice Plans)

Specialty	Number with Confirmed Practice Plans[a]	LOCATION OF UPCOMING PRACTICE			
		Within New York		Other State	Outside US[b]
		Same Region	Other Area		
Primary Care	**222**	**51%**	**4%**	**45%**	**1%**
Family Medicine	47	64%	2%	32%	2%
General Internal Medicine	128	48%	3%	48%	0%
General Pediatrics	45	44%	4%	49%	2%
Obstetrics/Gynecology	**49**	**47%**	**4%**	**49%**	**0%**
Medicine Subspecialties	**184**	**44%**	**4%**	**50%**	**2%**
Cardiology	23	30%	0%	65%	4%
Critical Care Medicine	13	42%	8%	50%	0%
Endocrinology & Metabolism	11	55%	0%	46%	0%
Gastroenterology	16	50%	6%	44%	0%
Hematology/Oncology	23	39%	4%	57%	0%
Infectious Disease	17	53%	0%	41%	6%
Pulmonary Disease	25	48%	4%	48%	0%
General Surgery	**8**	**75%**	**13%**	**13%**	**0%**
Surgical Subspecialties	**82**	**26%**	**6%**	**66%**	**2%**
Ophthalmology	7	0%	0%	100%	0%
Orthopedics	23	22%	0%	74%	4%
Facility Based	**147**	**49%**	**9%**	**42%**	**1%**
Anesthesiology	53	62%	14%	25%	0%
Pain Management	14	29%	14%	57%	0%
Pathology	21	62%	0%	33%	5%
Radiology	34	41%	3%	56%	0%
Psychiatry	**85**	**70%**	**1%**	**29%**	**0%**
Adult Psychiatry	43	72%	2%	26%	0%
Child and Adolescent Psych	22	67%	0%	33%	0%
Other	**207**	**48%**	**4%**	**48%**	**1%**
Dermatology	13	46%	0%	54%	0%
Emergency Medicine	86	50%	5%	45%	0%
Neurology	23	48%	4%	48%	0%
Pediatric Subspecialties	47	36%	4%	57%	2%
Physical Medicine and Rehab	14	46%	0%	54%	0%
All Specialties, 2023 (2022)	**984 (1,070)**	**48% (43%)**	**5% (5%)**	**46% (50%)**	**1% (2%)**

[a] This subgroup (ie, 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.

[b] This subgroup (ie, respondents leaving the US) has been excluded from all other tables within Section 3 of this report.

FIGURE 3.3. Rank of In-State Retention Rates by Specialty (for 2023 Respondents With Confirmed Practice Plans)

Specialty	Retention Rate
(1) General Surgery (n = 8)	88%
(2) Anesthesiology (n = 52)	75%
(3) Adult Psychiatry (n = 43)	74%
(4) Child and Adolescent Psychiatry (n = 21)	67%
(5) Family Medicine (n = 47)	66%
(6) Pathology (n = 21)	62%
(7) Gastroenterology (n = 16)	56%
(8) Emergency Medicine (n = 86)	55%
(9) Endocrinology & Metabolism (n = 11)	55%
(10) Infectious Disease (n = 17)	53%
(11) Neurology (n = 23)	52%
(12) Pulmonary Disease (n = 25)	52%
(13) General Internal Medicine (n = 128)	52%
(14) Obstetrics/Gynecology (n = 49)	51%
(15) Critical Care Medicine (n = 12)	50%
(16) General Pediatrics (n = 45)	49%
(17) Physical Medicine and Rehabilitation (n = 13)	46%
(18) Dermatology (n = 13)	46%
(19) Radiology (n = 34)	44%
(20) Hematology/Oncology (n = 23)	44%
(21) Anesthesiology - Pain Management (n = 14)	43%
(22) Pediatric Subspecialties (n = 47)	40%
(23) Cardiology (n = 23)	30%
(24) Orthopedics (n = 23)	22%
(25) Ophthalmology (n = 7)	0%

FIGURE 3.4. Percentage With Confirmed Practice Plans in New York by Location of High School, Location of Medical School, and Citizenship Status (for 2023 Respondents With Confirmed Practice Plans)
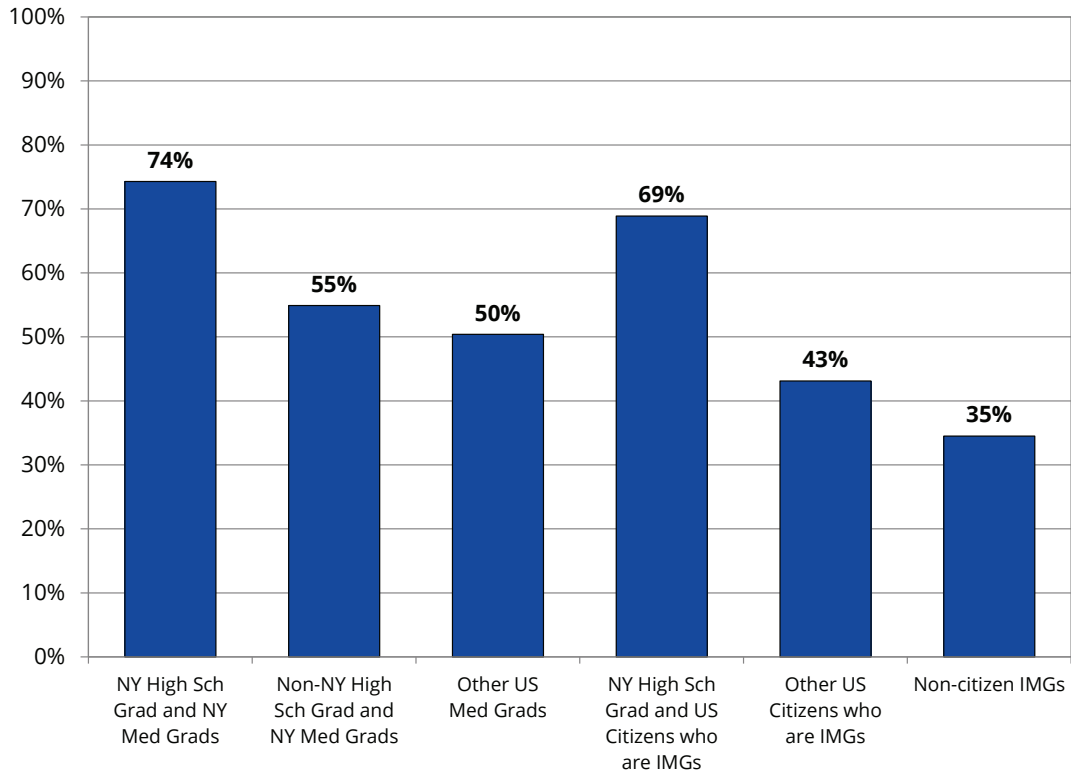
FIGURE 3.5. Principal Reason for Practicing Outside New York (for 2023 Respondents With Confirmed Practice Plans)
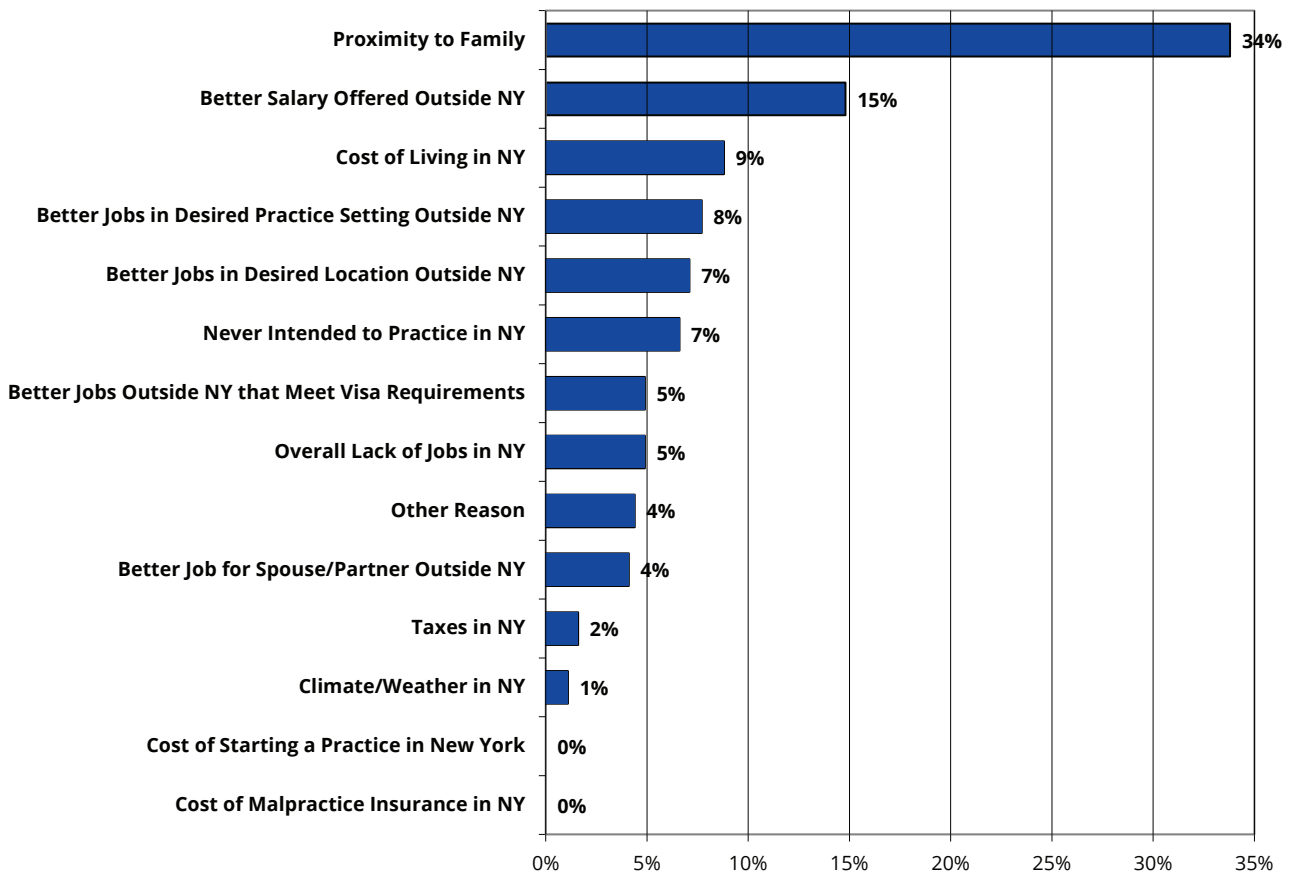
3.2 Recruitment Incentives

New physicians may receive a number of incentives to accept practice positions. These include income guarantees, career development opportunities, visa sponsorship/waivers, education loan repayment, spouse/partner job transition assistance, relocation allowances, sign-on bonuses, and payment for on-call time. Figure 3.6 displays the most influential incentives New York's graduating physicians received for accepting a practice position.

Highlights

- The 2 most influential incentives for accepting a practice position reported by respondents were income guarantees (37%) and career development opportunities (28%).
  - The next most influential incentive was other reason, reported by 7% of respondents, followed by J-1 visa waiver (7%), sign-on bonus (4%), and education loan repayment (4%).
- Less than 3% of respondents indicated that support for continuing medical education (2%), spouse/partner job transition assistance (2%), on-call payments (1%), or relocation allowances (1%) was the most influential incentive.

FIGURE 3.6. Most Influential Incentive Received for Accepting a Practice Position (for 2023 Respondents With Confirmed Practice Plans)
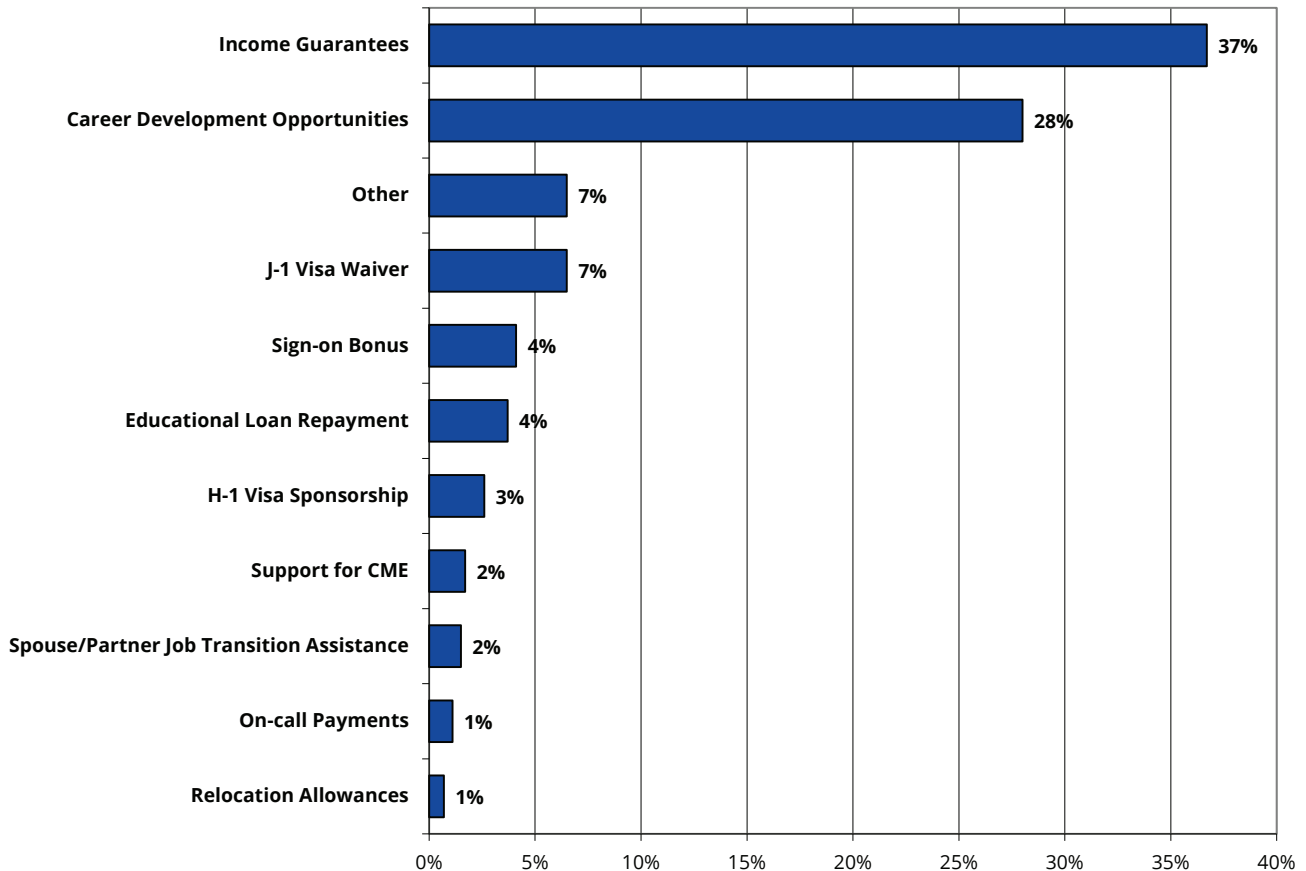
3.3 Demographics of Practice Location

Table 3.2 summarizes the responses to 2 questions relating to the demographics of respondents' upcoming practice locations. The first 5 columns give the demographics of principal practice locations 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 with all data presented in this report) these numbers are based on self-reporting by respondents, and that a large percentage said they "didn't know" if their upcoming practice fell within a HPSA.

Citizenship has a strong influence on a physician's likelihood of practicing in a HPSA. IMGs with J-1 or J-2 exchange visas are required to practice in underserved areas or return to their native country upon completion of their graduate medical education. Thus, a high proportion of respondents with exchange visas report plans to enter practice in HPSAs.

Highlights

- Thirty-six percent (36%) of respondents reported confirmed plans to enter practice in inner-city locations, while only 4% had plans to practice in rural locations.

- Respondents in the following specialties were the most likely to report plans to enter practice in inner city locations: hematology/oncology (59%), pathology (55%), radiology (55%), and infectious disease (50%).

- Respondents in the following specialties were the most likely to report plans to enter practice in rural areas: family medicine (16%), cardiology (14%), and general pediatrics (10%).

- Fourteen percent (14%) reported that they would be practicing in a HPSA.

- Respondents in the following specialties were the most likely to report plans to enter practice in HPSAs: cardiology (45%), general pediatrics (44%), and critical care medicine (33%).

- IMGs who are permanent residents or citizens were slightly more likely to report plans to enter practice in HPSAs than were United States medical graduates (USMGs) (15% compared to 14%, respectively, among respondents in primary care specialties).

FIGURE 3.7. Respondents Entering Practice in Rural and Inner-City Areas by Location of Medical School and Citizenship Status (for 2023 Respondents From Primary Care Specialties With Confirmed Practice Plans)
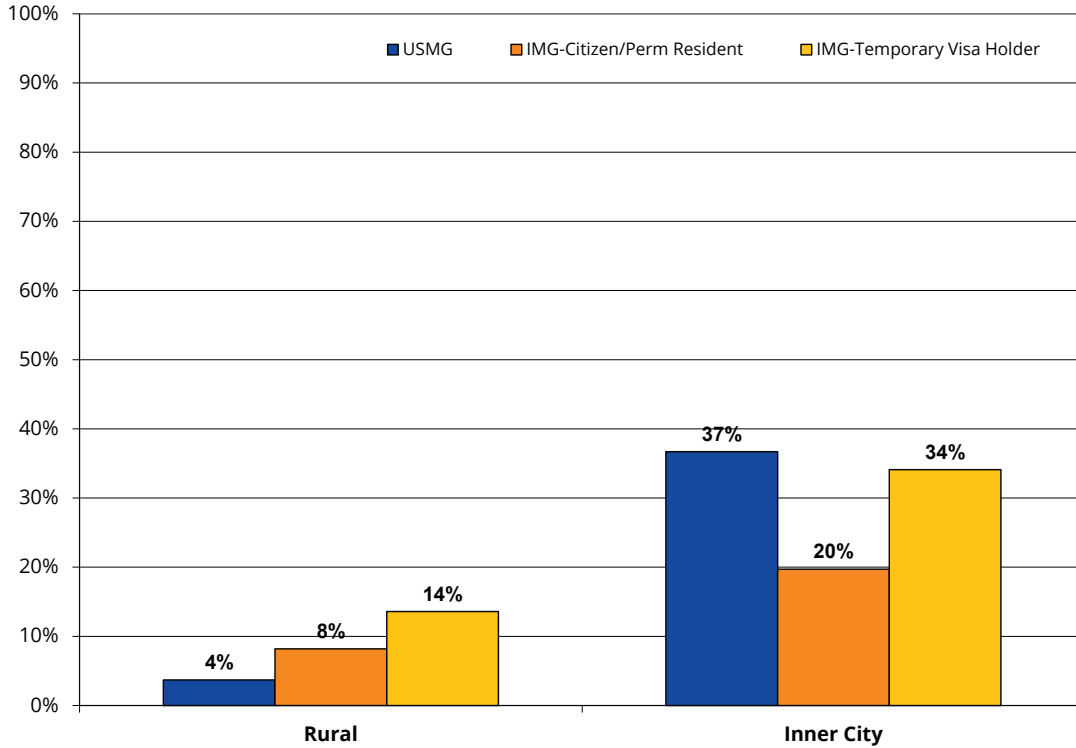
FIGURE 3.8. Percentage of Respondents Entering Practice in a Federal HPSA by Location of Medical School and Citizenship Status (for Respondents From Primary Care Specialties With Confirmed Practice Plans)
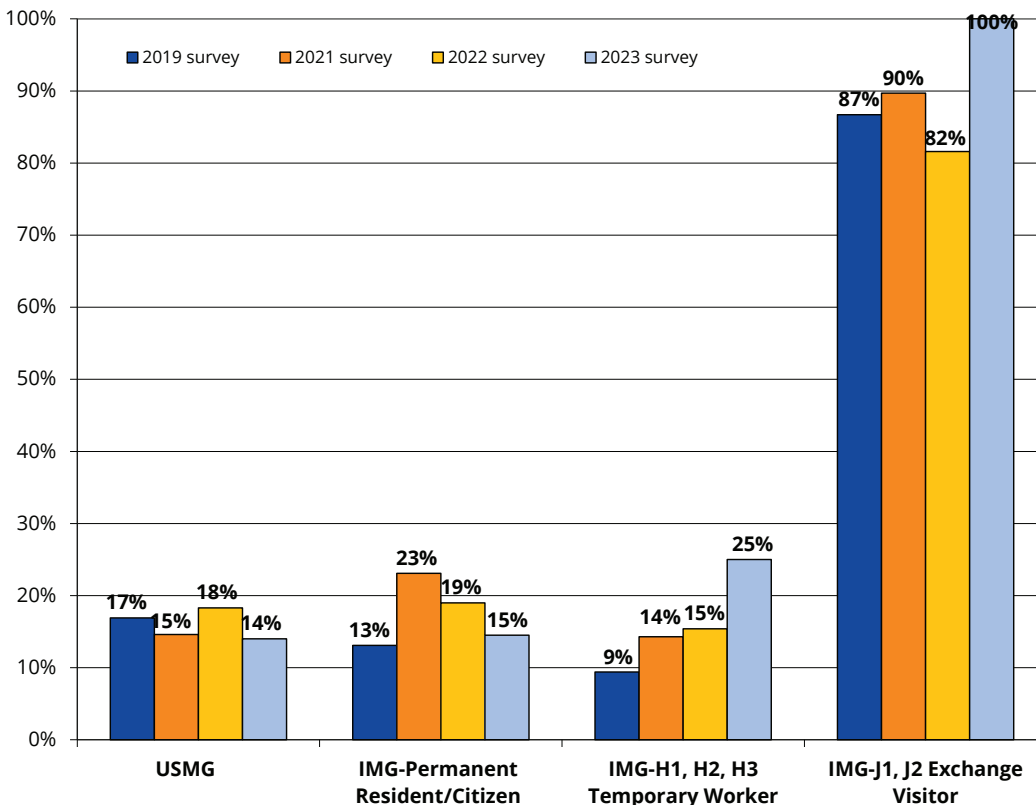
TABLE 3.2. Demographics of Practice Location (for 2023 Respondents With Confirmed Practice Plans)

Specialty	Inner City	Other Area in Major City	Suburban	Small City	Rural	% Practicing in a Federal HPSA[a]
Primary Care	**32%**	**17%**	**36%**	**8%**	**7%**	**25%**
Family Medicine	11%	16%	47%	11%	16%	21%
General Internal Medicine	39%	18%	32%	8%	3%	20%
General Pediatrics	33%	12%	38%	7%	10%	44%
Obstetrics/Gynecology	**25%**	**25%**	**41%**	**10%**	**0%**	**13%**
Medicine Subspecialties	**35%**	**20%**	**32%**	**10%**	**3%**	**15%**
Cardiology	14%	14%	38%	19%	14%	45%
Critical Care Medicine	46%	18%	9%	18%	9%	33%
Endocrinology & Metabolism	18%	27%	55%	0%	0%	0%
Gastroenterology	20%	40%	27%	13%	0%	0%
Hematology/Oncology	59%	14%	18%	9%	0%	5%
Infectious Disease	50%	13%	38%	0%	0%	25%
Pulmonary Disease	32%	12%	40%	16%	0%	8%
General Surgery	**29%**	**14%**	**29%**	**29%**	**0%**	**17%**
Surgical Subspecialties	**27%**	**19%**	**43%**	**9%**	**3%**	**5%**
Ophthalmology	14%	14%	43%	29%	0%	14%
Orthopedics	29%	5%	52%	10%	5%	0%
Facility Based	**46%**	**16%**	**29%**	**8%**	**1%**	**6%**
Anesthesiology	49%	14%	27%	10%	0%	0%
Pain Management	8%	0%	85%	8%	0%	15%
Pathology	55%	15%	20%	10%	0%	5%
Radiology	55%	21%	18%	3%	3%	6%
Psychiatry	**40%**	**21%**	**31%**	**5%**	**4%**	**17%**
Adult Psychiatry	37%	17%	34%	7%	5%	15%
Child and Adolescent Psych	43%	24%	33%	0%	0%	15%
Other	**40%**	**25%**	**30%**	**3%**	**3%**	**11%**
Dermatology	33%	17%	50%	0%	0%	8%
Emergency Medicine	38%	22%	31%	2%	7%	11%
Neurology	30%	22%	44%	4%	0%	13%
Pediatric Subspecialties	43%	32%	25%	0%	0%	16%
Physical Medicine and Rehab	17%	42%	33%	8%	0%	8%
All Specialties, 2023 (2022)	**36% (32%)**	**20% (22%)**	**33% (34%)**	**7% (9%)**	**4% (4%)**	**14% (19%)**

[a] HPSA = Health Professional Shortage Area.

3.4 Principal Practice Setting

Table 3.3 shows the practice settings of respondents' upcoming principal practices. The "Other" category includes freestanding health center or clinic, nursing home, and other setting.

Highlights

- Thirty-seven (37%) of respondents were entering group practices.
  - Of these, 84% reported plans to join group practices as employees.
- Only 2% of all respondents reported plans to enter solo practice.
  - Adult psychiatry (12%) and ophthalmology (14%) were the only specialties in which more than 10% planned to enter solo practice.
- Fifty-seven percent (57%) of respondents reported plans to practice in hospitals.
  - Of these respondents, 56% reported plans to practice in inpatient settings, 26% in ambulatory care settings within the hospital, and 18% in emergency departments.

FIGURE 3.9. Upcoming Principal Practice Setting (for 2023 Respondents With Confirmed Practice Plans)

Solo Practice 2%
Partnership (2 Person) 1%
Other 4%
Group Practice as Owner/Partner 6%
Hospital-Amb Care/Emer Room 25%
Group Practice as Employee 31%
Hospital-Inpatient 32%
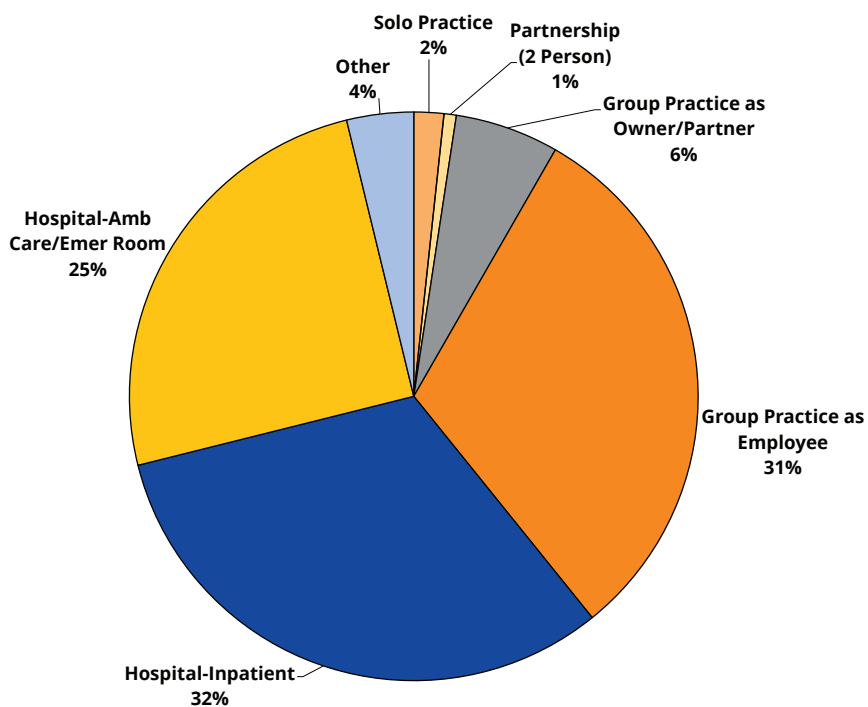
FIGURE 3.10. Upcoming Principal Practice Setting (for Respondents With Confirmed Practice Plans)
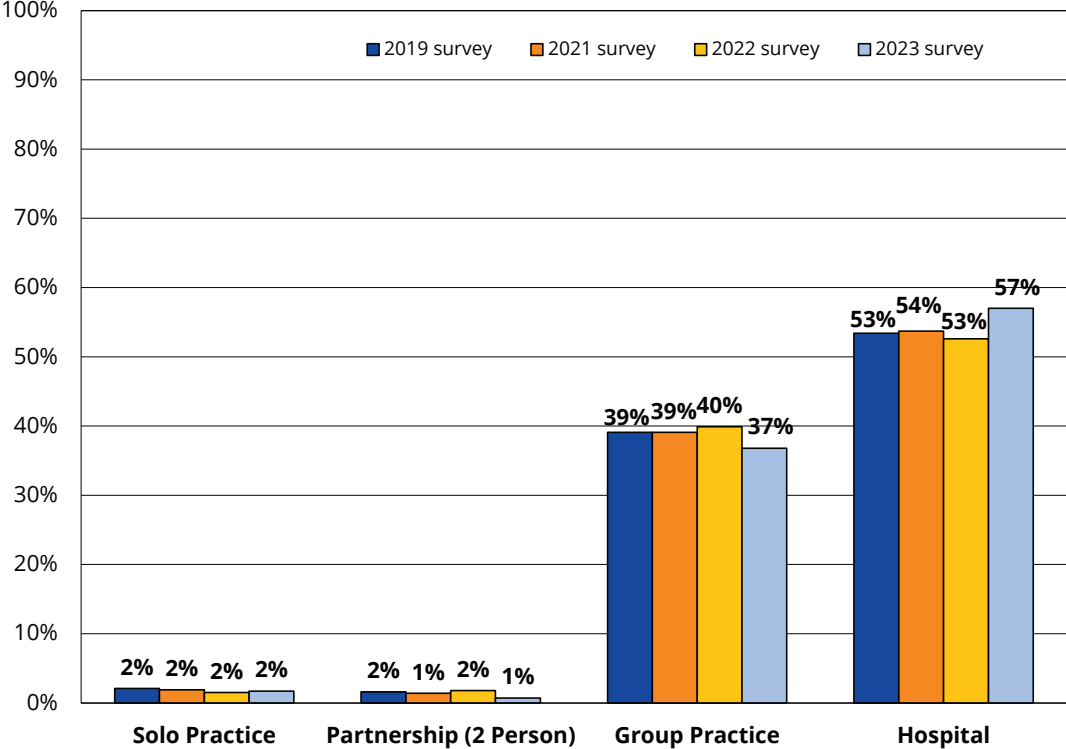
TABLE 3.3. Upcoming Principal Practice Setting by Specialty (for 2023 Respondents With Confirmed Practice Plans)

Specialty	Solo Practice	Partnership (2 Person)	GROUP PRACTICE As Owner/ Partner	As Employee	HOSPITAL In-Patient	Amb. Care	Emer. Room	Other
Primary Care	**1%**	**0%**	**5%**	**29%**	**45%**	**14%**	**1%**	**7%**
Family Medicine	0%	0%	11%	58%	7%	13%	0%	11%
General Internal Medicine	2%	0%	2%	15%	68%	11%	0%	2%
General Pediatrics	0%	0%	5%	38%	17%	24%	2%	14%
Obstetrics/Gynecology	**0%**	**2%**	**10%**	**67%**	**2%**	**12%**	**0%**	**6%**
Medicine Subspecialties	**2%**	**1%**	**7%**	**30%**	**39%**	**19%**	**1%**	**1%**
Cardiology	5%	0%	10%	35%	45%	5%	0%	0%
Critical Care Medicine	0%	0%	8%	8%	83%	0%	0%	0%
Endocrinology & Metabolism	0%	0%	9%	36%	9%	46%	0%	0%
Gastroenterology	0%	0%	7%	40%	20%	33%	0%	0%
Hematology/Oncology	5%	5%	0%	33%	5%	52%	0%	0%
Infectious Disease	0%	0%	7%	27%	53%	0%	0%	13%
Pulmonary Disease	0%	0%	8%	28%	64%	0%	0%	0%
General Surgery	**0%**	**0%**	**14%**	**29%**	**57%**	**0%**	**0%**	**0%**
Surgical Subspecialties	**3%**	**4%**	**16%**	**44%**	**25%**	**8%**	**0%**	**1%**
Ophthalmology	14%	14%	14%	29%	0%	14%	0%	14%
Orthopedics	0%	0%	23%	41%	32%	5%	0%	0%
Facility Based	**3%**	**0%**	**7%**	**43%**	**36%**	**6%**	**1%**	**4%**
Anesthesiology	4%	0%	6%	40%	40%	4%	0%	6%
Pain Management	8%	0%	0%	62%	23%	8%	0%	0%
Pathology	0%	0%	6%	35%	41%	0%	0%	18%
Radiology	0%	0%	13%	40%	27%	17%	3%	0%
Psychiatry	**6%**	**1%**	**0%**	**13%**	**32%**	**29%**	**13%**	**6%**
Adult Psychiatry	12%	0%	0%	15%	27%	20%	17%	10%
Child and Adolescent Psych	0%	5%	0%	15%	25%	35%	15%	5%
Other	**0%**	**1%**	**3%**	**19%**	**18%**	**16%**	**42%**	**2%**
Dermatology	0%	0%	8%	85%	0%	8%	0%	0%
Emergency Medicine	0%	0%	2%	7%	1%	0%	89%	0%
Neurology	0%	0%	0%	17%	30%	52%	0%	0%
Pediatric Subspecialties	0%	2%	2%	22%	44%	13%	13%	2%
Physical Medicine and Rehab	0%	0%	0%	31%	15%	31%	8%	15%
All Specialties, 2023	**2%**	**1%**	**6%**	**31%**	**32%**	**15%**	**10%**	**4%**
(All Specialties, 2022)	**(2%)**	**(2%)**	**(7%)**	**(33%)**	**(29%)**	**(14%)**	**(9%)**	**(4%)**

3.5 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 provided as some specialties had a relatively small number of respondents. Finally, specialties are ranked in descending order (ie, 1 is highest, 25 is lowest) by both mean and median expected starting incomes.

Highlights

- In 2023, the mean expected starting salary for new physicians was $323,271 and the median expected starting salary for new physicians was $302,600.

- Although there was some overlap in the salary distributions of primary care and non-primary care physicians, non-primary care physicians generally reported higher incomes.

- Respondents in the following specialties reported the highest median starting incomes: anesthesiology ($446,100), orthopedics ($435,600), and cardiology ($423,600).

- General pediatrics had the lowest median starting income of all specialties ($190,650).
  - Other specialties with lower starting incomes included infectious disease ($227,200) and endocrinology and metabolism ($233,000).

FIGURE 3.11. **Expected Starting Income (in $1,000s) by Specialty Group (for 2023 Respondents With Confirmed Practice Plans)**
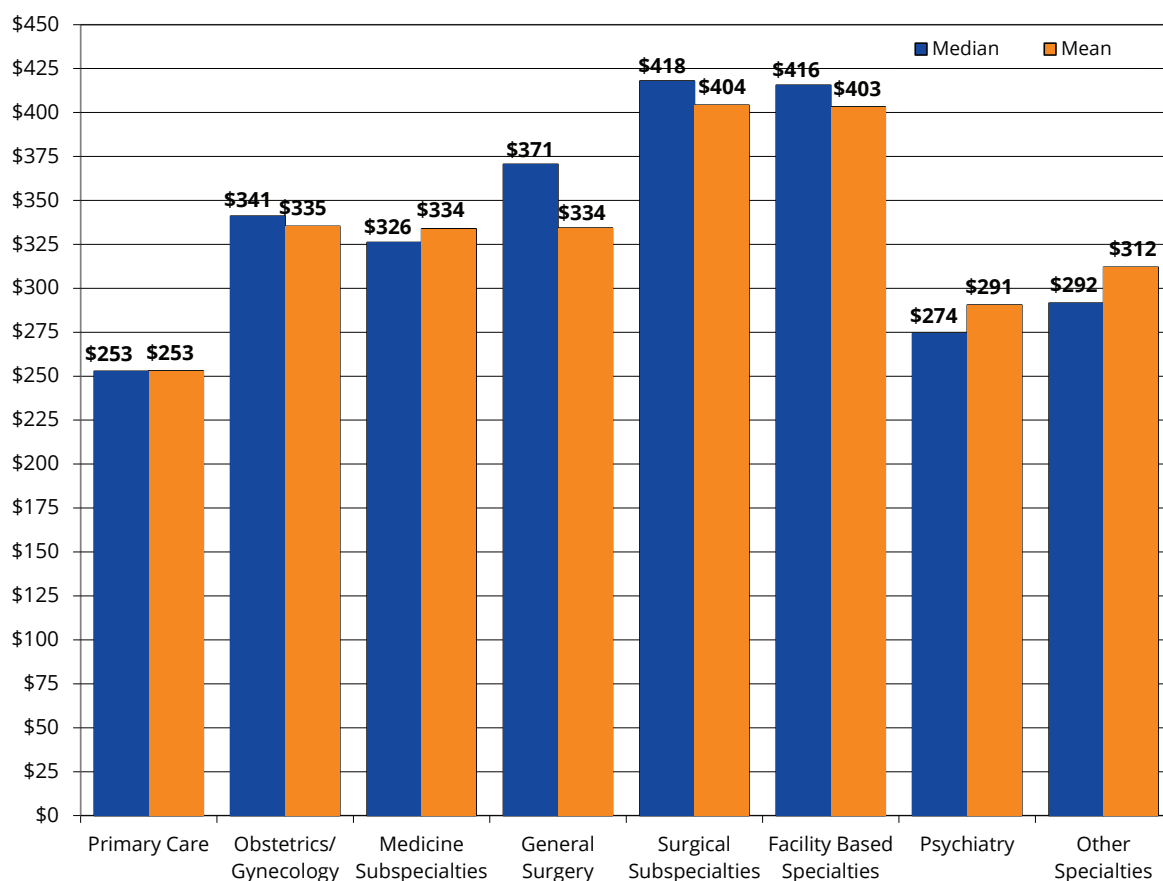
FIGURE 3.12. Distribution of Starting Income Among Primary Care and Non-Primary Care Physicians (for 2023 Respondents With Confirmed Practice Plans)
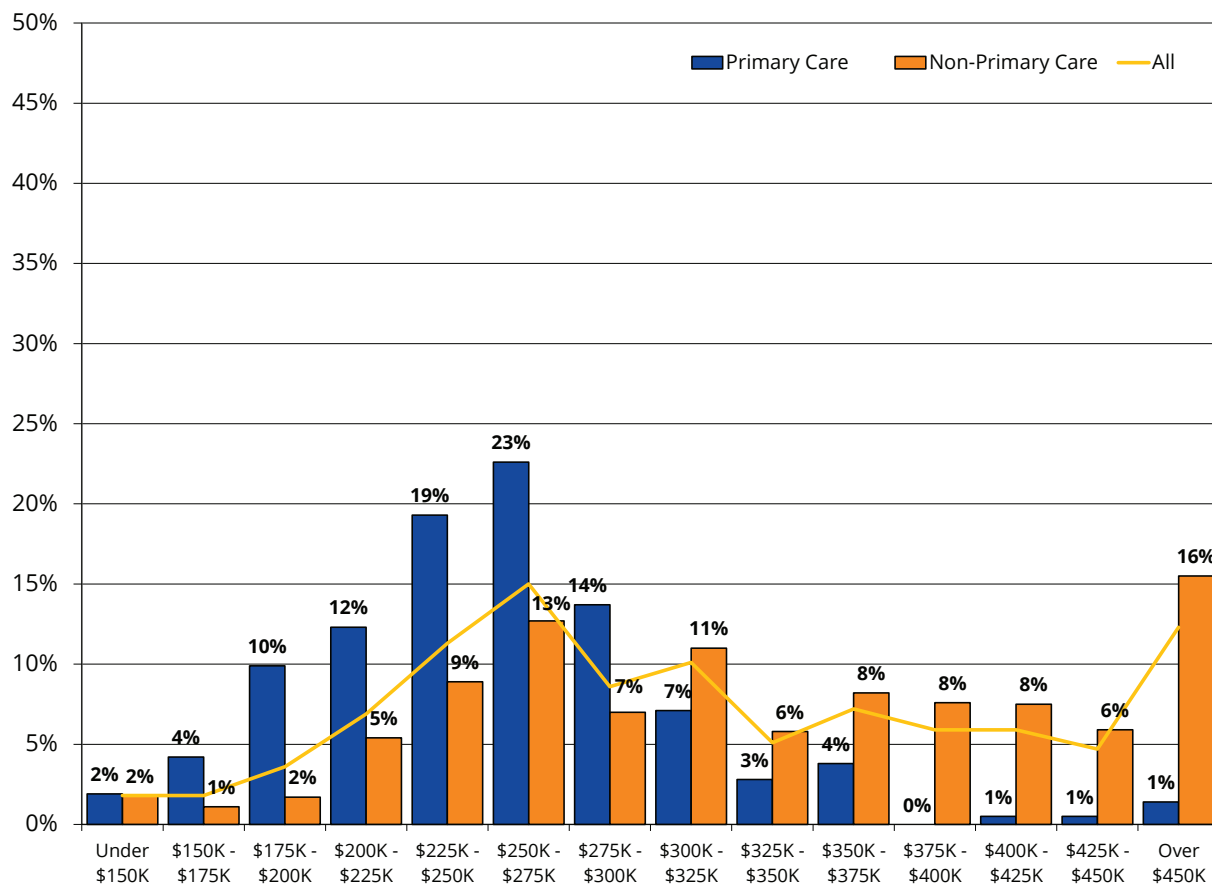
FIGURE 3.13. Rank of Median Starting Income (in $1,000s) by Specialty (for 2023 Respondents With Confirmed Practice Plans)

Specialty	Median Starting Income
(1) Anesthesiology (n = 49)	$446
(2) Orthopedics (n = 21)	$436
(3) Cardiology (n = 22)	$424
(4) Radiology (n = 32)	$414
(5) Gastroenterology (n = 12)	$402
(6) Hematology/Oncology (n = 20)	$400
(7) Critical Care Medicine (n = 12)	$387
(8) Anesthesiology - Pain Management (n = 13)	$384
(9) Dermatology (n = 12)	$384
(10) General Surgery (n = 7)	$371
(11) Ophthalmology (n = 6)	$362
(12) Pulmonary Disease (n = 25)	$361
(13) Obstetrics/Gynecology (n = 48)	$341
(14) Emergency Medicine (n = 84)	$308
(15) Neurology (n = 22)	$298
(16) Adult Psychiatry (n = 41)	$282
(17) Child and Adolescent Psychiatry (n = 19)	$273
(18) Physical Medicine and Rehabilitation (n = 12)	$264
(19) Pathology (n = 20)	$262
(20) General Internal Medicine (n = 122)	$262
(21) Family Medicine (n = 44)	$257
(22) Pediatric Subspecialties (n = 44)	$234
(23) Endocrinology & Metabolism (n = 11)	$233
(24) Infectious Disease (n = 15)	$227
(25) General Pediatrics (n = 44)	$191

TABLE 3.4. Expected Starting Income by Specialty (for 2023 Respondents With Confirmed Practice Plans)

Specialty	N	MEAN	RANK (of 25)	MEDIAN	RANK (of 25)
Primary Care	**212**	**$253,044**	N/A	**$252,850**	N/A
Family Medicine	44	$259,132	21	$257,400	21
General Internal Medicine	122	$269,389	19	$261,800	20
General Pediatrics	44	$202,450	25	$190,650	25
Obstetrics/Gynecology	**48**	**$335,273**	13	**$341,050**	13
Medicine Subspecialties	**168**	**$333,897**	N/A	**$326,100**	N/A
Cardiology	22	$418,123	4	$423,600	3
Critical Care Medicine	12	$374,417	9	$387,050	7
Endocrinology & Metabolism	11	$233,609	23	$233,000	23
Gastroenterology	12	$397,517	5	$401,550	5
Hematology/Oncology	20	$381,140	7	$399,600	6
Infectious Disease	15	$225,947	24	$227,200	24
Pulmonary Disease	25	$349,668	12	$361,300	12
General Surgery	**7**	**$334,314**	14	**$370,500**	10
Surgical Subspecialties	**76**	**$404,242**	N/A	**$417,900**	N/A
Ophthalmology	6	$368,450	10	$361,850	11
Orthopedics	21	$441,205	1	$435,600	2
Facility Based	**138**	**$403,153**	N/A	**$415,550**	N/A
Anesthesiology	49	$434,514	2	$446,100	1
Pain Management	13	$393,315	6	$384,200	8
Pathology	20	$259,750	20	$262,400	19
Radiology	32	$424,197	3	$413,850	4
Psychiatry	**77**	**$290,517**	N/A	**$274,300**	N/A
Adult Psychiatry	41	$292,698	17	$282,000	16
Child and Adolescent Psych	19	$293,058	16	$273,000	17
Other	**196**	**$312,017**	N/A	**$291,550**	N/A
Dermatology	12	$376,483	8	$383,750	9
Emergency Medicine	84	$362,571	11	$308,050	14
Neurology	22	$296,559	15	$298,200	15
Pediatric Subspecialties	44	$240,643	22	$234,450	22
Physical Medicine and Rehab	12	$274,433	18	$264,050	18
Total (All Specialties)	**922**	**$323,271**	N/A	**$302,600**	N/A

3.6 Expected Weekly Patient Care/Clinical Practice Hours

Respondents were asked to estimate the number of hours per week they expected to spend in patient care/clinical practice activities in their upcoming practice positions. It is important to know how many hours new physicians anticipate they will work 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 spend in patient care/clinical practice activities. Gender has been found to be a significant factor in predicting the number of hours an individual may work, with females averaging fewer hours than males. Therefore, it was 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 question from both the 2022 and 2023 surveys. These data provided a large enough number of respondents to allow for stratification by gender in most specialties.

Highlights

- Overall, respondents reported expectations to spend an average of 43.3 hours per week in patient care/clinical practice activities.

- Female respondents expected to work 7% fewer patient care hours than male respondents (41.8 hours per week compared to 44.7 hours per week, respectively).
  - This gender difference was greatest in physical medicine and rehabilitation, with female respondents expecting to work 9.5 fewer patient hours per week than male respondents.
  - Female respondents reported expectations to work more hours than males in some specialties including ophthalmology (8.1 hours per week), endocrinology and metabolism (2.2 hours per week), and neurology (2.1 hours per week).

- Respondents in the following individual specialties reported expectations to work the highest patient care/clinical practice hours per week: general surgery (53.5 hours), anesthesiology (53.0 hours), and cardiology (51.7 hours).

- Respondents in the following specialties reported expectations to work the fewest patient care/clinical practice hours per week: emergency medicine (34.5 hours), child and adolescent psychiatry (35.8 hours), and pediatric subspecialties (36.6 hours).

FIGURE 3.14. Rank of Expected Weekly Patient Care/Clinical Practice Hours by Specialty (2022 and 2023 Respondents With Confirmed Practice Plans)

Specialty	Hours
(1) General Surgery (n = 14)	53.5
(2) Anesthesiology (n = 95)	53.0
(3) Cardiology (n = 44)	51.7
(4) Orthopedics (n = 36)	49.5
(5) Critical Care Medicine (n = 35)	48.2
(6) Pulmonary Disease (n = 56)	47.8
(7) Anesthesiology - Pain Management (n = 29)	47.3
(8) General Internal Medicine (n = 288)	46.9
(9) Ophthalmology (n = 12)	46.1
(10) Infectious Disease (n = 30)	44.8
(11) Gastroenterology (n = 37)	44.7
(12) Obstetrics/Gynecology (n = 105)	44.4
(13) Radiology (n = 61)	43.8
(14) Neurology (n = 41)	42.9
(15) Hematology/Oncology (n = 51)	41.0
(16) Family Medicine (n = 96)	40.4
(17) Endocrinology & Metabolism (n = 29)	40.4
(18) Physical Medicine and Rehabilitation (n = 24)	40.2
(19) General Pediatrics (n = 100)	39.9
(20) Pathology (n = 35)	39.5
(21) Dermatology (n = 25)	38.4
(22) Adult Psychiatry (n = 90)	36.9
(23) Pediatric Subspecialties (n = 84)	36.6
(24) Child and Adolescent Psychiatry (n = 42)	35.8
(25) Emergency Medicine (n = 173)	34.5

TABLE 3.5. Expected Weekly Patient Care/Clinical Practice Hours by Gender[a] (2022 and 2023) Respondents With Confirmed Practice Plans)

Specialty	Male Respondents	Female Respondents	All Respondents
Primary Care	**45.8**	**42.7**	**44.1**
Family Medicine	40.2	40.8	40.4
General Internal Medicine	48.2	45.5	46.9
General Pediatrics	40.0	39.8	39.9
Obstetrics/Gynecology	**45.1**	**44.4**	**44.4**
Medicine Subspecialties	**47.8**	**43.8**	**45.8**
Cardiology	51.1	52.9	51.7
Critical Care Medicine	50.8	44.8	48.2
Endocrinology & Metabolism	38.7	40.8	40.4
Gastroenterology	45.5	43.8	44.7
Hematology/Oncology	43.4	38.5	41.0
Infectious Disease	45.1	44.3	44.8
Pulmonary Disease	50.2	42.9	47.8
General Surgery	**55.3**	********	**53.5**
Surgical Subspecialties	**48.6**	**46.3**	**47.9**
Ophthalmology	42.7	50.8	46.1
Orthopedics	50.8	43.7	49.5
Facility Based	**48.8**	**46.6**	**48.2**
Anesthesiology	53.3	52.2	53.0
Pain Management	47.0	****	47.3
Pathology	43.1	35.6	39.5
Radiology	43.7	43.3	43.8
Psychiatry	**37.5**	**37.1**	**37.0**
Adult Psychiatry	36.7	37.1	36.9
Child and Adolescent Psych	37.4	36.5	35.8
Other	**37.5**	**36.4**	**36.9**
Dermatology	40.4	37.0	38.4
Emergency Medicine	35.3	33.5	34.5
Neurology	42.0	44.1	42.9
Pediatric Subspecialties	36.2	36.9	36.6
Physical Medicine and Rehab	45.7	36.2	40.2
All Specialties, 2023	**44.7**	**41.8**	**43.3**

[a] Patient care/clinical practice hours has been stratified by gender in any specialty with enough respondents to do so. If the number of respondents is less than 5, the hours worked are shown as ****. The data presented in this table are for respondents to both the 2022 and 2023 surveys. Patient care/clinical practice hours has been stratified by gender because females expected to work fewer hours than males.

SECTION 4: EXPERIENCES SEARCHING FOR A PRACTICE POSITION

This section summarizes the responses to several questions about residents' experiences searching for a practice position and their general perceptions of the job market in their specialty. Any respondent who reported plans to enter or who considered entering patient care/clinical practice was asked to complete these questions. The responses of IMGs on temporary visas were excluded from this section (except for Tables 4.1 and Figure 4.1) because they have more restrictions on where they can practice compared to other physicians. With few exceptions, physicians on temporary visas can remain in the US only if they practice in a state or federally designated Health Professional Shortage Area (HPSA) or continue graduate medical training. Figure 4.1 illustrates the differences between temporary visa holders and other respondents in terms of the difficulty they faced finding a job. Respondents who indicated they had not yet actively searched for a practice position have also been excluded from this section of the report.

Each subsection within Section 4 summarizes the responses to: 1) a question on the 2023 survey, 2) the aggregated total of all respondents for the 2022 and 2023 surveys, and 3) either the aggregated total of all respondents for the last 4 years the survey has been conducted or a trend over the last 4 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 4.8, a composite measure of demand is computed using all demand indicators to measure the relative demand for each specialty.

4.1 Important Job Characteristics

Table 4.1 displays respondents' assessment of how important it is to have control over certain job characteristics. Respondents were asked to give their assessment by choosing from a 4-point Likert scale. In order to make comparisons across specialties the following Likert scale was developed: "Not Important at All" = 1, "Of Little Importance" = 2, "Important" = 3, and "Very Important" = 4.

Highlights

- Overall, respondents indicated that having control over the frequency of overnight calls (score of 3.52) and weekend duties (score of 3.51) was most important, followed by length of each workday (score of 3.36), and predictable start and end time each workday (3.30).

TABLE 4.1. Mean Likert Scores for Importance of Control Over Certain Job Characteristics by Specialty (for 2023 Respondents Who Had Searched for a Job)

Specialty	Predictable Start and End Time Each Day	Length of Each Workday	Frequency of Overnight Calls	Frequency of Weekend Duties
Primary Care	**3.35**	**3.35**	**3.60**	**3.52**
Family Medicine	3.37	3.37	3.59	3.59
General Internal Medicine	3.33	3.31	3.60	3.49
General Pediatrics	3.39	3.43	3.59	3.52
Obstetrics/Gynecology	**3.26**	**3.26**	**3.55**	**3.59**
Medicine Subspecialties	**3.39**	**3.39**	**3.56**	**3.56**
Cardiology	3.37	3.47	3.58	3.68
Critical Care Medicine	3.20	3.20	3.10	3.10
Endocrinology & Metabolism	3.73	3.73	4.00	3.91
Gastroenterology	3.40	3.47	3.67	3.67
Hematology/Oncology	3.43	3.33	3.52	3.43
Infectious Disease	3.40	3.50	3.50	3.70
Pulmonary Disease	3.28	3.20	3.56	3.56
General Surgery	**2.91**	**3.00**	**3.18**	**3.09**
Surgical Subspecialties	**3.19**	**3.22**	**3.30**	**3.32**
Ophthalmology	3.70	3.70	3.80	3.70
Orthopedics	3.30	3.35	3.35	3.35
Facility Based	**3.37**	**3.41**	**3.61**	**3.61**
Anesthesiology	3.33	3.42	3.61	3.63
Pain Management	3.79	3.71	3.79	3.86
Pathology	3.15	3.20	3.30	3.25
Radiology	3.50	3.52	3.73	3.70
Psychiatry	**3.61**	**3.62**	**3.82**	**3.81**
Adult Psychiatry	3.57	3.56	3.80	3.81
Child and Adolescent Psych	3.82	3.77	3.91	3.82
Other	**3.11**	**3.30**	**3.36**	**3.34**
Dermatology	3.54	3.54	3.77	3.77
Emergency Medicine	2.84	3.18	3.07	3.06
Neurology	3.48	3.48	3.74	3.65
Pediatric Subspecialties	3.24	3.30	3.48	3.46
Physical Medicine and Rehab	3.40	3.53	3.80	3.73
All Specialties, 2023 (2022)	**3.30 (3.24)**	**3.36 (3.32)**	**3.52 (3.50)**	**3.51 (3.48)**

4.2 Difficulty Finding a Satisfactory Practice Position

Table 4.2 shows the percent of respondents who reported difficulty finding a satisfactory practice position. As noted above, this table summarizes the responses for the 2023 survey, the aggregated total of responses for 2022 and 2023, and the aggregated responses for the last 4 years of the survey.

Highlights

- Seventeen percent (17%) of respondents reported difficulty finding a satisfactory position in 2023.

- The most often cited main reason for difficulty finding a satisfactory practice position was lack of jobs in desired locations (31%), followed by inadequate salary/compensation offered (24%), and lack of jobs in desired practice setting (20%).

- The specialties with the highest percentage of respondents having difficulty finding a satisfactory practice position in 2023 were: critical care medicine (40%), ophthalmology (40%), physical medicine and rehabilitation (39%), and general surgery (36%).

- The specialties with the lowest percentage of respondents having difficulty finding a satisfactory practice position in 2023 were: endocrinology and metabolism (0%), anesthesiology (5%), adult psychiatry (7%), and emergency medicine (9%).

- The specialties with the highest percentage of respondents reporting difficulty finding a satisfactory position for the last 2 years of the survey (2022 and 2023 aggregated) were: pain management (38%), general surgery (36%), and physical medicine and rehabilitation (32%).

- The specialties with the highest percentage of respondents reporting difficulty finding a satisfactory position for the last 4 years of the survey were: pain management (42%), general surgery (39%), and endocrinology and metabolism (37%).

Figure 4.1 presents the differences in job market experiences of respondents based on their citizenship status and location of medical school. Historically, IMGs on temporary visas have experienced much greater difficulty due to their visa status compared to USMGs and IMG citizens and permanent residents.

FIGURE 4.1. Percentage Having Difficulty Finding a Satisfactory Practice Position and Having to Change Plans Due to Limited Practice Opportunities by Location of Medical School and Citizenship Status (for 2023 Respondents Who Had Searched for a Job)
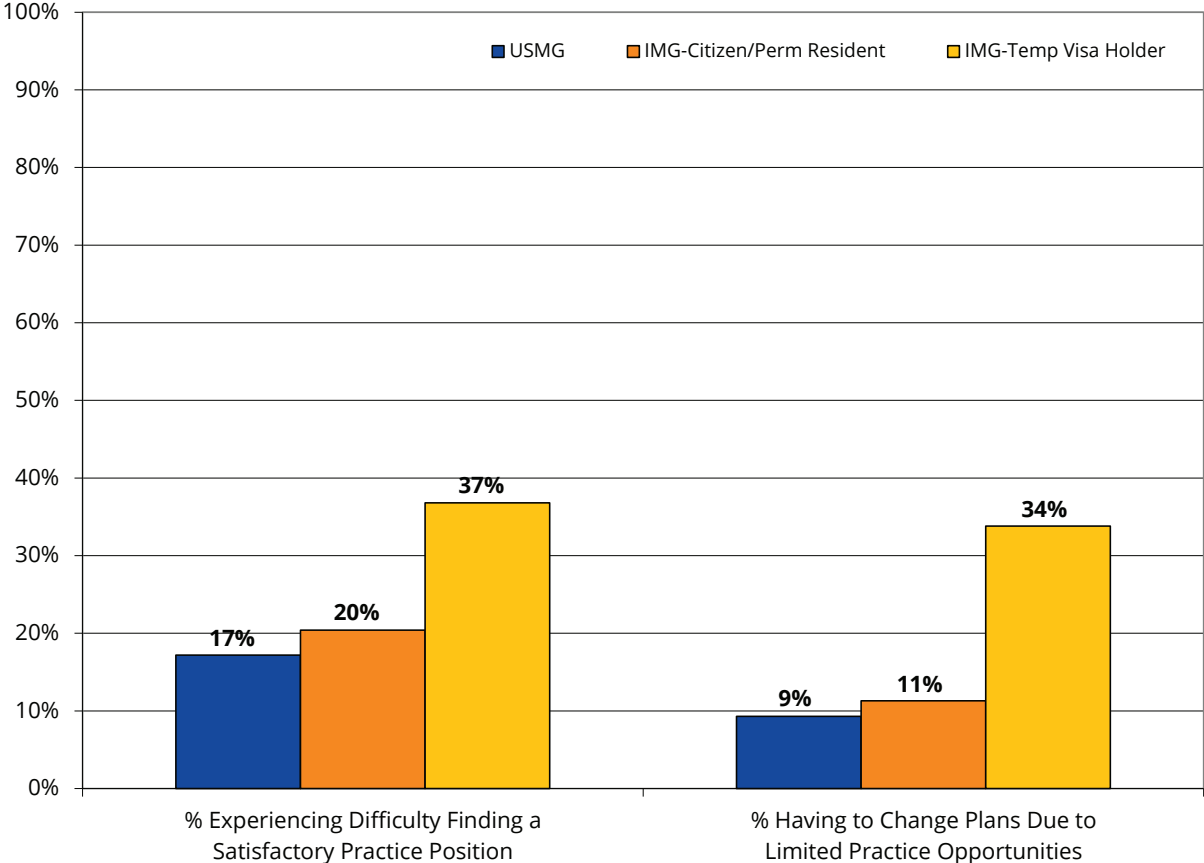
FIGURE 4.2. Main Reason for Difficulty Finding a Satisfactory Practice Position (for 2023 Respondents Who Had Searched for a Job, IMGs on Temporary Visas Excluded)

- Other 10%
- Overall Lack of Jobs 16%
- Inadequate Salary/Compensation Offered 24%
- Lack of Jobs in Desired Locations 31%
- Lack of Jobs in Desired Practice Setting 20%
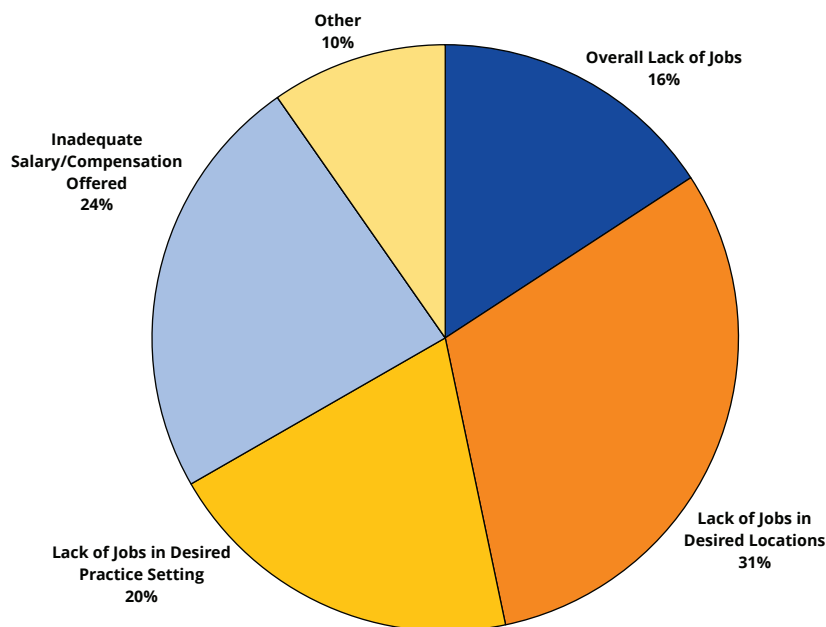
FIGURE 4.3. Percentage Having Difficulty Finding a Satisfactory Practice Position by Specialty Group (for Respondents Who Had Searched for a Job, IMGs on Temporary Visas Excluded)

Legend: ■ 2019 Survey ■ 2021 Survey ■ 2022 Survey ■ 2023 Survey

(All Specs, 2023: 17%)

Specialty	2019 Survey	2021 Survey	2022 Survey	2023 Survey
Primary Care	19%	34%	21%	14%
Medicine Subspecialties	27%	39%	18%	25%
Surgical Subspecialties	22%	34%	23%	22%
Facility Based Specialties	26%	28%	13%	11%
Psychiatry	14%	11%	7%	14%
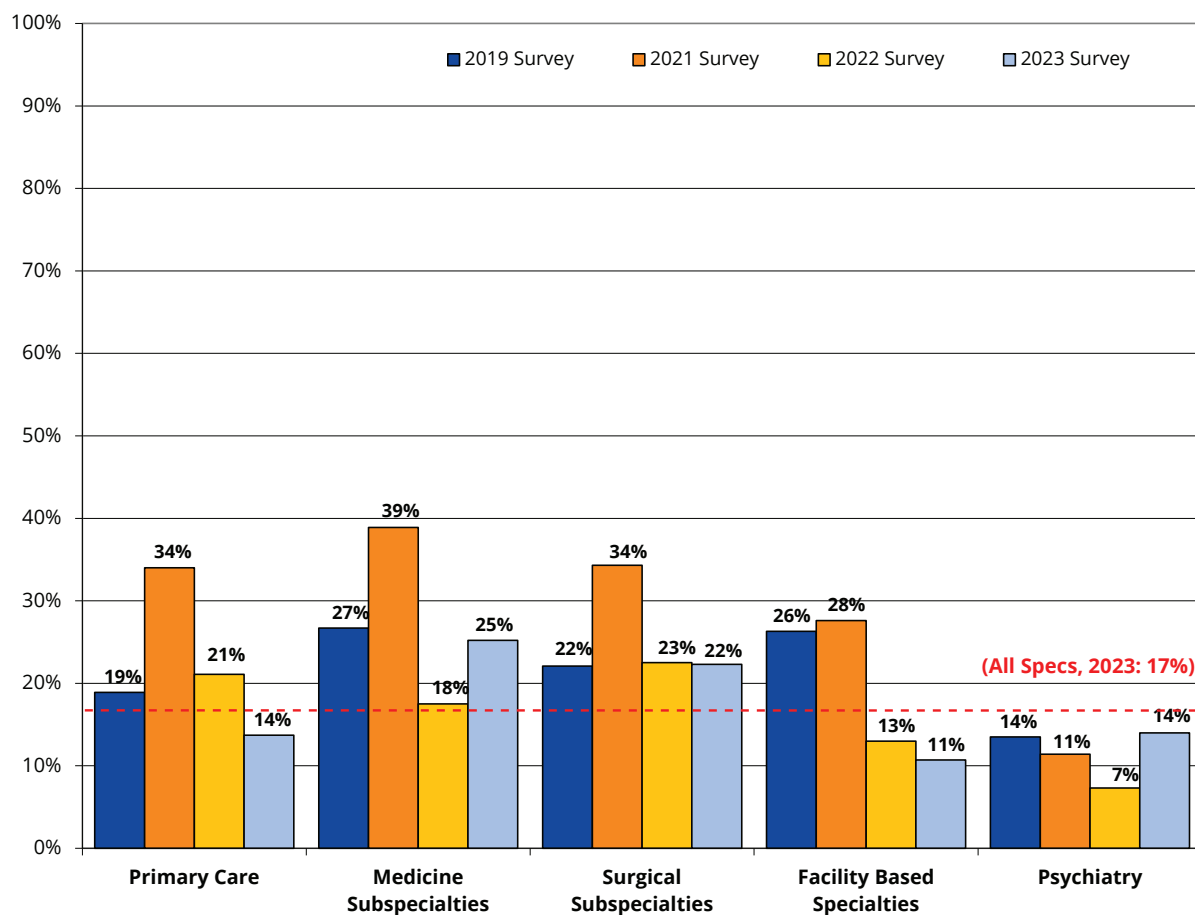
FIGURE 4.4. Rank of Percentage Having Difficulty Finding a Satisfactory Practice Position by Specialty (for 2023 Respondents Who Had Searched for a Job, IMGs on Temporary Visas Excluded)

Specialty	Percentage
(1) Endocrinology & Metabolism (n = 11)	0%
(2) Anesthesiology (n = 59)	5%
(2) Adult Psychiatry (n = 54)	7%
(4) Emergency Medicine (n = 103)	9%
(5) General Pediatrics (n = 40)	10%
(6) Radiology (n = 38)	11%
(7) Infectious Disease (n = 9)	11%
(8) Cardiology (n = 18)	11%
(9) Family Medicine (n = 46)	13%
(10) Obstetrics/Gynecology (n = 53)	13%
(10) Gastroenterology (n = 14)	14%
(10) General Internal Medicine (n = 109)	15%
(10) Hematology/Oncology (n = 19)	16%
(14) Pediatric Subspecialties (n = 42)	19%
(15) Pathology (n = 19)	21%
(16) Neurology (n = 23)	22%
(17) Orthopedics (n = 35)	23%
(18) Child and Adolescent Psychiatry (n = 21)	24%
(18) Dermatology (n = 11)	27%
(20) Anesthesiology - Pain Management (n = 13)	31%
(21) Pulmonary Disease (n = 25)	32%
(22) General Surgery (n = 11)	36%
(23) Physical Medicine and Rehab (n = 13)	39%
(24) Ophthalmology (n = 10)	40%
(25) Critical Care Medicine (n = 10)	40%

TABLE 4.2. Percent of Respondents Having Difficulty Finding a Satisfactory Practice Position (of Respondents Who Have Searched for a Job, IMGs on Temp Visas Excluded)

Specialty	2023 Respondents	RANK (of 25)	Aggregated Respondents: 2022 and 2023	RANK (of 25)	Aggregated Respondents: 2019-2023	RANK (of 25)
Primary Care	**14%**	N/A	**18%**	N/A	**21%**	N/A
Family Medicine	13%	9	16%	10	18%	10
General Internal Medicine	15%	12	17%	11	21%	11
General Pediatrics	10%	5	18%	13	24%	14
Obstetrics/Gynecology	**13%**	10	**15%**	9	**16%**	6
Medicine Subspecialties	**25%**	N/A	**21%**	N/A	**27%**	N/A
Cardiology	11%	7	10%	6	16%	4
Critical Care Medicine	40%	24	30%	22	33%	20
Endocrinology & Metabolism	0%	1	4%	1	37%	23
Gastroenterology	14%	11	12%	7	17%	7
Hematology/Oncology	16%	13	9%	5	17%	7
Infectious Disease	11%	7	14%	8	15%	3
Pulmonary Disease	32%	21	26%	20	30%	18
General Surgery	**36%**	22	**36%**	24	**39%**	24
Surgical Subspecialties	**22%**	N/A	**22%**	N/A	**25%**	N/A
Ophthalmology	40%	24	27%	21	24%	13
Orthopedics	23%	17	25%	19	25%	15
Facility Based	**11%**	N/A	**12%**	N/A	**19%**	N/A
Anesthesiology	5%	2	8%	4	11%	2
Pain Management	31%	20	38%	25	42%	25
Pathology	21%	15	19%	15	36%	22
Radiology	11%	6	8%	3	18%	9
Psychiatry	**14%**	N/A	**11%**	N/A	**12%**	N/A
Adult Psychiatry	7%	3	6%	2	8%	1
Child and Adolescent Psych	24%	18	18%	13	16%	4
Other	**17%**	N/A	**23%**	N/A	**28%**	N/A
Dermatology	27%	19	23%	16	27%	17
Emergency Medicine	9%	4	18%	12	26%	16
Neurology	22%	16	23%	16	23%	12
Pediatric Subspecialties	19%	14	25%	18	32%	19
Physical Medicine and Rehab	39%	23	32%	23	35%	21
Total (All Specialties)	**17%**	N/A	**19%**	N/A	**23%**	N/A

4.3 Changing Plans Due to Limited Practice Opportunities

Table 4.3 displays the percentage of respondents who had to change their plans due to limited practice opportunities. The columns in this table are analogous to those presented in Table 4.2.

Highlights

- Ten percent (10%) of respondents reported having to change their plans due to limited practice opportunities in 2023.

- The specialties with the highest percentage of respondents who had to change plans due to limited practice opportunities in 2023 were: pathology (21%), critical care medicine (20%), general surgery (20%), ophthalmology (20%), and child and adolescent psychiatry (19%).

- The specialties with the lowest percentage of respondents who had to change plans due to limited practice opportunities in 2023 were: dermatology (0%), infectious disease (0%), anesthesiology (3%), adult psychiatry (4%), and family medicine (4%).

- The specialties with the highest percentage of respondents who had to change their plans due to limited practice opportunities over the last 2 years (aggregated results from the 2022 and 2023 surveys) were: general surgery (24%), pathology (19%), and neurology (18%).

- The specialties with the lowest percentage of respondents who had to change their plans due to limited practice opportunities over the last 2 years (aggregated results from the 2022 and 2023 surveys) were: infectious disease (0%), adult psychiatry (2%), and dermatology (4%).

- The specialties with the highest percentage of respondents who had to change plans over the last 4 years of the survey were: general surgery (24%), pathology (24%), critical care medicine (23%), and physical medicine and rehabilitation (21%).

- The specialties with the lowest percentage of respondents who had to change plans over the last 4 years of the survey were: adult psychiatry (3%), infectious disease (5%), anesthesiology (5%), and family medicine (9%).

FIGURE 4.5. Percentage Having to Change Plans Due to Limited Practice Opportunities by Specialty Group (for Respondents Who Had Searched for a Job, IMGs on Temporary Visas Excluded)
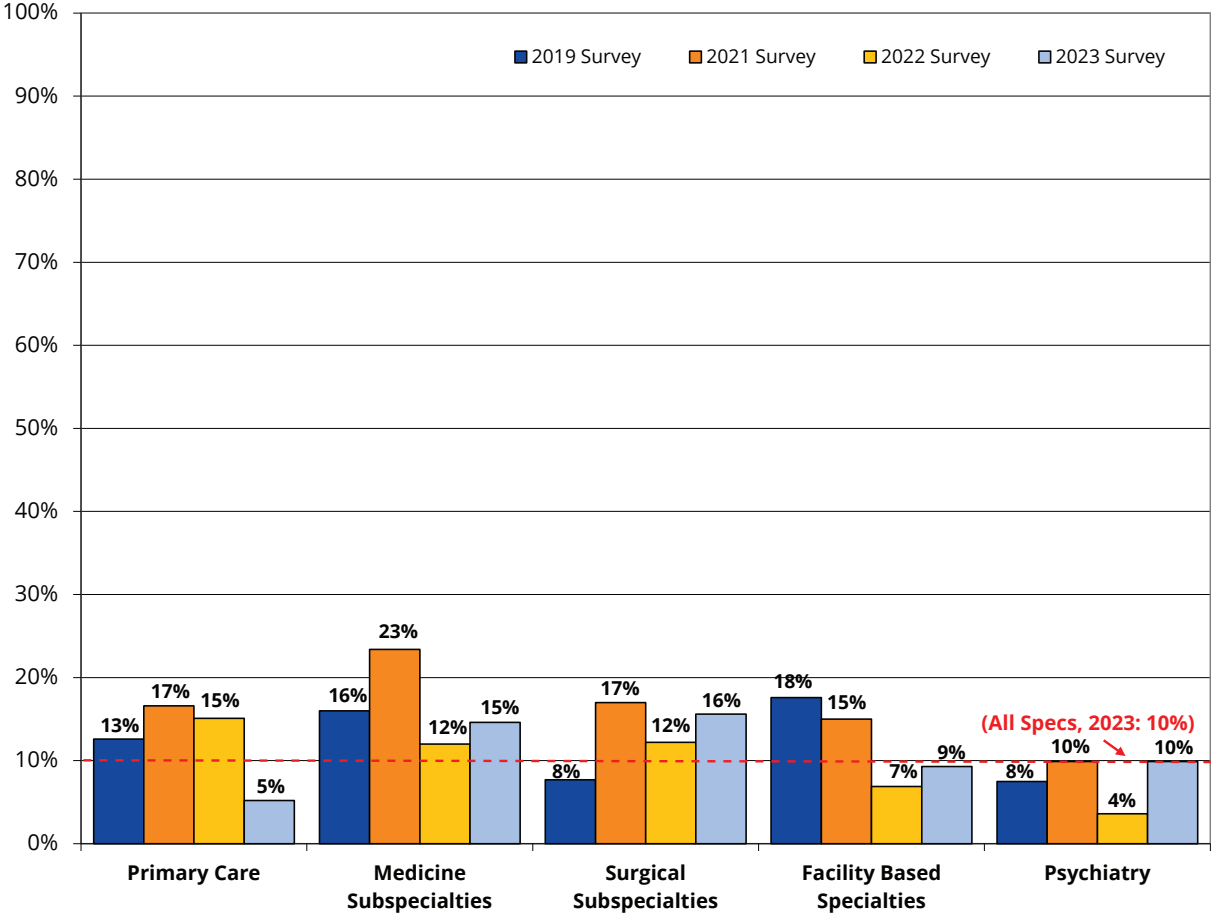
FIGURE 4.6. Rank of Percentage Having to Change Plans Due to Limited Practice Opportunities by Specialty (for 2023 Respondents Who Had Searched for a Job, IMGs on Temporary Visas Excluded)

Specialty	Percentage
(1) Dermatology (n = 11)	0%
(1) Infectious Disease (n = 9)	0%
(1) Anesthesiology (n = 59)	3%
(4) Adult Psychiatry (n = 52)	4%
(5) Family Medicine (n = 45)	4%
(6) General Pediatrics (n = 39)	5%
(7) Cardiology (n = 18)	6%
(8) General Internal Medicine (n = 107)	6%
(9) Obstetrics/Gynecology (n = 53)	6%
(10) Emergency Medicine (n = 103)	7%
(11) Physical Medicine and Rehab (n = 13)	8%
(12) Anesthesiology - Pain Management (n = 13)	8%
(13) Endocrinology & Metabolism (n = 11)	9%
(14) Hematology/Oncology (n = 19)	11%
(15) Pediatric Subspecialties (n = 42)	12%
(16) Pulmonary Disease (n = 25)	12%
(17) Radiology (n = 40)	13%
(18) Neurology (n = 23)	13%
(19) Gastroenterology (n = 14)	14%
(20) Orthopedics (n = 35)	17%
(21) Child and Adolescent Psychiatry (n = 21)	19%
(22) Ophthalmology (n = 10)	20%
(22) General Surgery (n = 10)	20%
(24) Critical Care Medicine (n = 10)	20%
(25) Pathology (n = 19)	21%

TABLE 4.3. Percentage Having to Change Plans Due to Limited Practice Opportunities by Specialty (for Respondents Who Had Searched for a Job, IMGs on Temporary Visas Excluded)

Specialty	2023 Respondents	RANK (of 25)	Aggregated Respondents: 2022 and 2023	RANK (of 25)	Aggregated Respondents: 2019-2023	RANK (of 25)
Primary Care	**5%**	N/A	**11%**	N/A	**13%**	N/A
Family Medicine	4%	5	8%	9	9%	4
General Internal Medicine	6%	7	11%	13	14%	13
General Pediatrics	5%	6	13%	17	14%	17
Obstetrics/Gynecology	**6%**	9	**10%**	12	**11%**	8
Medicine Subspecialties	**15%**	N/A	**13%**	N/A	**16%**	N/A
Cardiology	6%	7	7%	7	11%	9
Critical Care Medicine	20%	22	17%	22	23%	23
Endocrinology & Metabolism	9%	13	12%	16	16%	18
Gastroenterology	14%	19	9%	11	9%	5
Hematology/Oncology	11%	14	7%	6	14%	13
Infectious Disease	0%	1	0%	1	5%	2
Pulmonary Disease	12%	16	16%	21	20%	21
General Surgery	**20%**	25	**24%**	22	**24%**	21
Surgical Subspecialties	**16%**	N/A	**14%**	N/A	**13%**	N/A
Ophthalmology	20%	22	13%	19	10%	7
Orthopedics	17%	20	13%	18	12%	11
Facility Based	**9%**	N/A	**8%**	N/A	**12%**	N/A
Anesthesiology	3%	3	5%	4	5%	3
Pain Management	8%	11	7%	5	12%	10
Pathology	21%	25	19%	24	24%	24
Radiology	13%	17	9%	10	14%	15
Psychiatry	**10%**	N/A	**7%**	N/A	**8%**	N/A
Adult Psychiatry	4%	4	2%	2	3%	1
Child and Adolescent Psych	19%	21	16%	20	14%	15
Other	**9%**	N/A	**13%**	N/A	**18%**	N/A
Dermatology	0%	1	4%	3	10%	6
Emergency Medicine	7%	10	12%	15	18%	19
Neurology	13%	18	18%	23	13%	12
Pediatric Subspecialties	12%	15	12%	14	18%	20
Physical Medicine and Rehab	8%	11	8%	8	21%	22
Total (All Specialties)	**10%**	N/A	**11%**	N/A	**14%**	N/A

4.4 Job Offers

Table 4.4 shows the mean number of offers for employment/practice opportunities (ie, job offers) received by respondents. This indicator, like starting income, is a robust measure of demand as it represents an objective number, less subject to the bias respondents' expectations than the other indicators such as difficulty finding a practice opportunity or the respondents' assessment of the job market in a specialty. Job offers, along with starting income trends, are double-weighted in the composite measure of demand presented later in this section of the report.

Highlights

- The average number of job offers received by respondents in 2023 was 3.37.

- Respondents in the following specialties received the most job offers in 2023: anesthesiology (5.04), obstetrics/gynecology (4.56), and child and adolescent psychiatry (4.45).

- Respondents in the following specialties received the fewest job offers in 2023: physical medicine and rehabilitation (1.92), pathology (2.26), and critical care medicine (2.67).

- The following specialties received the most job offers for the last 2 years of the survey (2022 and 2023 aggregated): child and adolescent psychiatry (4.67), anesthesiology (4.59), and gastroenterology (4.48).

- The following specialties received the fewest job offers for the last 2 years of the survey (2022 and 2023 aggregated): pathology (2.25), physical medicine and rehabilitation (2.36), and emergency medicine (2.47).

- The following specialties experienced the greatest annual increases in job offers received over the past 5 years (2018-2019, 2021-2023): ophthalmology (+22%), child and adolescent psychiatry (+15%), and pathology (+12%).

- The following specialties experienced the greatest annual declines in job offers received over the past 5 years (2018-2019, 2021-2023): general internal medicine (-4%), pain management (-4%), adult psychiatry (-4%), physical medicine and rehabilitation (-3%), and dermatology (-2%).

FIGURE 4.7. Mean Number of Job Offers Received by Specialty Group (for Respondents Who Had Searched for a Job, IMGs on Temporary Visas Excluded)

Legend: 2019 Survey, 2021 Survey, 2022 Survey, 2023 Survey

(All Specs, 2023: 3.37)

Specialty Group	2019 Survey	2021 Survey	2022 Survey	2023 Survey
Primary Care	3.92	2.59	3.21	3.51
Medicine Subspecialties	3.57	3.29	3.60	3.33
Surgical Subspecialties	3.19	2.71	2.72	2.86
Facility Based Specialties	2.73	2.50	3.39	3.76
Psychiatry	3.74	3.74	4.43	3.59
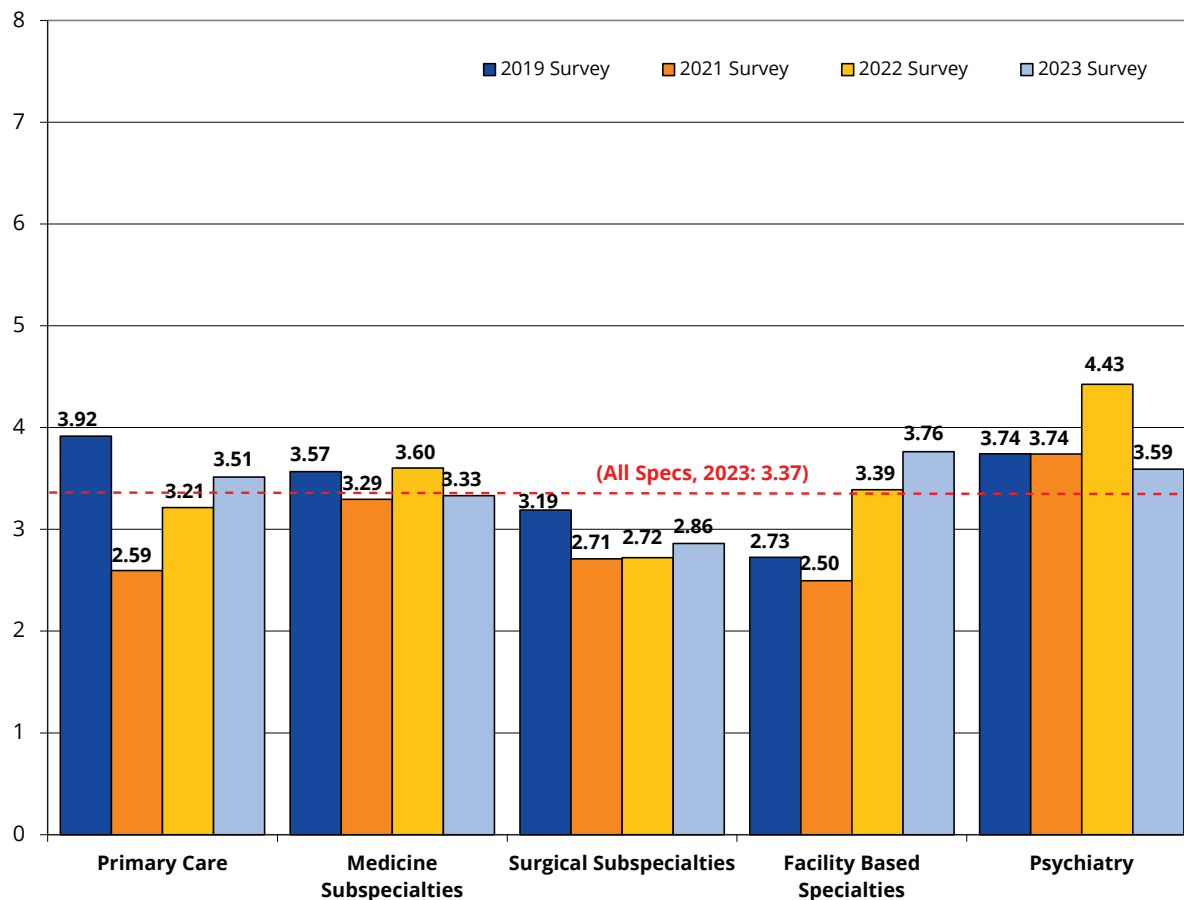
FIGURE 4.8. Rank of Mean Number of Job Offers Received by Specialty (for 2023 Respondents Who Had Searched for a Job, IMGs on Temporary Visas Excluded)

Specialty	Mean
(1) Anesthesiology (n = 55)	5.04
(2) Obstetrics/Gynecology (n = 54)	4.56
(3) Child and Adolescent Psychiatry (n = 20)	4.45
(4) Endocrinology & Metabolism (n = 11)	4.27
(5) Dermatology (n = 11)	4.09
(6) Family Medicine (n = 44)	4.02
(7) Cardiology (n = 17)	3.94
(8) Infectious Disease (n = 9)	3.89
(9) Neurology (n = 22)	3.86
(10) Anesthesiology - Pain Management (n = 13)	3.85
(11) General Pediatrics (n = 37)	3.76
(12) Hematology/Oncology (n = 19)	3.53
(13) Gastroenterology (n = 14)	3.50
(14) General Internal Medicine (n = 104)	3.22
(15) General Surgery (n = 9)	3.11
(16) Radiology (n = 40)	3.10
(17) Adult Psychiatry (n = 47)	3.04
(18) Pediatric Subspecialties (n = 40)	3.00
(19) Orthopedics (n = 35)	2.94
(20) Emergency Medicine (n = 100)	2.72
(21) Pulmonary Disease (n = 25)	2.68
(22) Ophthalmology (n = 9)	2.67
(23) Critical Care Medicine (n = 9)	2.67
(24) Pathology (n = 19)	2.26
(25) Physical Medicine and Rehabilitation (n = 13)	1.92

TABLE 4.4. Mean Number of Offers of Employment/Practice Opportunities by Specialty (for Respondents Who Had Searched for a Job, IMGs on Temporary Visas Excluded)

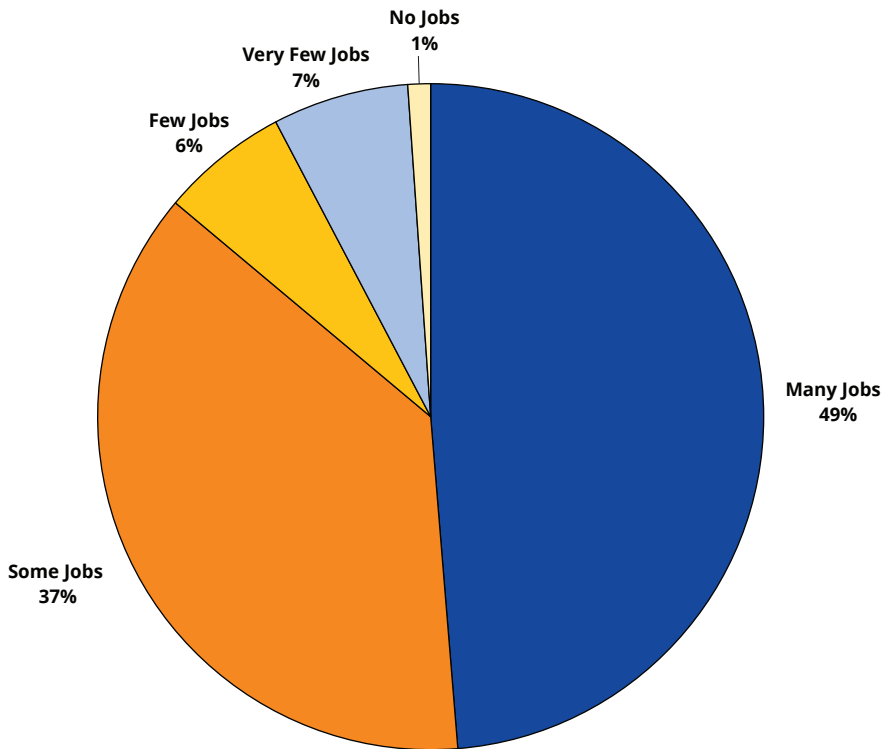| Specialty	2023 Respondents	RANK (of 25)	Aggregated Respondents: 2022 and 2023	RANK (of 25)	Trend (Average Annual Change: 2018 to 2023)	RANK (of 25)
Primary Care	**3.51**	N/A	**3.35**	N/A	**-2%**	N/A
Family Medicine	4.02	6	3.60	11	-2%	20
General Internal Medicine	3.22	14	3.26	16	-4%	25
General Pediatrics	3.76	11	3.29	15	9%	7
Obstetrics/Gynecology	**4.56**	2	**3.94**	6	**10%**	5
Medicine Subspecialties	**3.33**	N/A	**3.47**	N/A	**-1%**	N/A
Cardiology	3.94	7	3.92	7	5%	11
Critical Care Medicine	2.67	22	3.36	14	9%	6
Endocrinology & Metabolism	4.27	4	4.00	5	4%	13
Gastroenterology	3.50	13	4.48	3	0%	17
Hematology/Oncology	3.53	12	3.51	12	3%	15
Infectious Disease	3.89	8	3.85	8	5%	10
Pulmonary Disease	2.68	21	2.70	20	-1%	18
General Surgery	**3.11**	15	**2.56**	21	**7%**	8
Surgical Subspecialties	**2.86**	N/A	**2.80**	N/A	**2%**	N/A
Ophthalmology	2.67	22	3.14	18	22%	1
Orthopedics	2.94	19	2.56	21	2%	16
Facility Based	**3.76**	N/A	**3.59**	N/A	**7%**	N/A
Anesthesiology	5.04	1	4.59	2	10%	4
Pain Management	3.85	10	3.62	10	-4%	24
Pathology	2.26	24	2.25	25	12%	3
Radiology	3.10	16	3.17	17	7%	9
Psychiatry	**3.59**	N/A	**4.00**	N/A	**1%**	N/A
Adult Psychiatry	3.04	17	3.41	13	-4%	23
Child and Adolescent Psych	4.45	3	4.67	1	15%	2
Other	**2.89**	N/A	**2.75**	N/A	**-3%**	N/A
Dermatology	4.09	5	4.35	4	-2%	21
Emergency Medicine	2.72	20	2.47	23	-2%	19
Neurology	3.86	9	3.76	9	5%	12
Pediatric Subspecialties	3.00	18	2.75	19	4%	14
Physical Medicine and Rehab	1.92	25	2.36	24	-3%	22
Total (All Specialties)	**3.37**	N/A	**3.29**	N/A	**0%**	N/A

4.5 Perceptions of the Regional Job Market

Table 4.5 presents respondents' perceptions of the regional job market for their specialty (ie, within 50 miles of the site at which they trained). Respondents were asked to give their assessment of the regional job market by choosing from a 5-point scale. In order to make comparisons across specialties and across surveys, the following scoring scheme was developed: "No Jobs" = -2, "Very Few Jobs" = -1, "Few Jobs" = 0, "Some Jobs" = +1, and "Many Jobs" = +2. A composite score was then computed for each specialty by multiplying the score for each respondent by the proportion of responses in that category.

Highlights

- Overall, respondents assessed the regional job market positively, with an average score in 2023 of +1.26.

- Respondents in the following specialties reported the most positive views of the regional job market: child and adolescent psychiatry (+2.00), anesthesiology (+1.91), and adult psychiatry (+1.78).

- Respondents in the following specialties reported the least positive views of the regional job market: pathology (+0.39), pediatric subspecialties (+0.56), orthopedics (+0.56), and physical medicine and rehabilitation (+0.77).

- Over the past 2 years (2022, 2023), respondents in the following specialties reported the most positive views of the regional job market: child and adolescent psychiatry (+1.89), anesthesiology (+1.82), and adult psychiatry (+1.79).

- Over the past 2 years (2022, 2023), respondents in the following specialties reported the least positive views of the regional job market: general surgery (+0.33), pediatric subspecialties (+0.42), and pathology (+0.61).

- Over the past 4 years (2019, 2021-2023), respondents in the following specialties reported the most positive views of the regional job market: adult psychiatry (+1.82), child and adolescent psychiatry (+1.74), and anesthesiology (+1.68).

- Over the past 4 years (2019, 2021-2023), respondents in the following specialties reported the least positive views of the regional job market: general surgery (+0.02), pediatric subspecialties (+0.29), and pathology (+0.51).

FIGURE 4.9. Perceptions of the Regional Job Market (for 2023 Respondents Who Had Searched for a Job, IMGs on Temporary Visas Excluded)

Many Jobs
49%

Some Jobs
37%

Few Jobs
6%

Very Few Jobs
7%

No Jobs
1%

FIGURE 4.10. Mean Likert Scores for Perceptions of the Regional Job Market by Specialty Group (for Respondents Who Had Searched for a Job, IMGs on Temporary Visas Excluded)

(All Specs, 2023: 1.26)

Specialty Group	2019 Survey	2021 Survey	2022 Survey	2023 Survey
Primary Care	1.40	0.89	1.24	1.53
Medicine Subspecialties	0.92	0.71	0.99	1.18
Surgical Subspecialties	0.75	0.47	0.78	0.64
Facility Based Specialties	0.99	0.90	1.39	1.47
Psychiatry	1.69	1.68	1.75	1.81
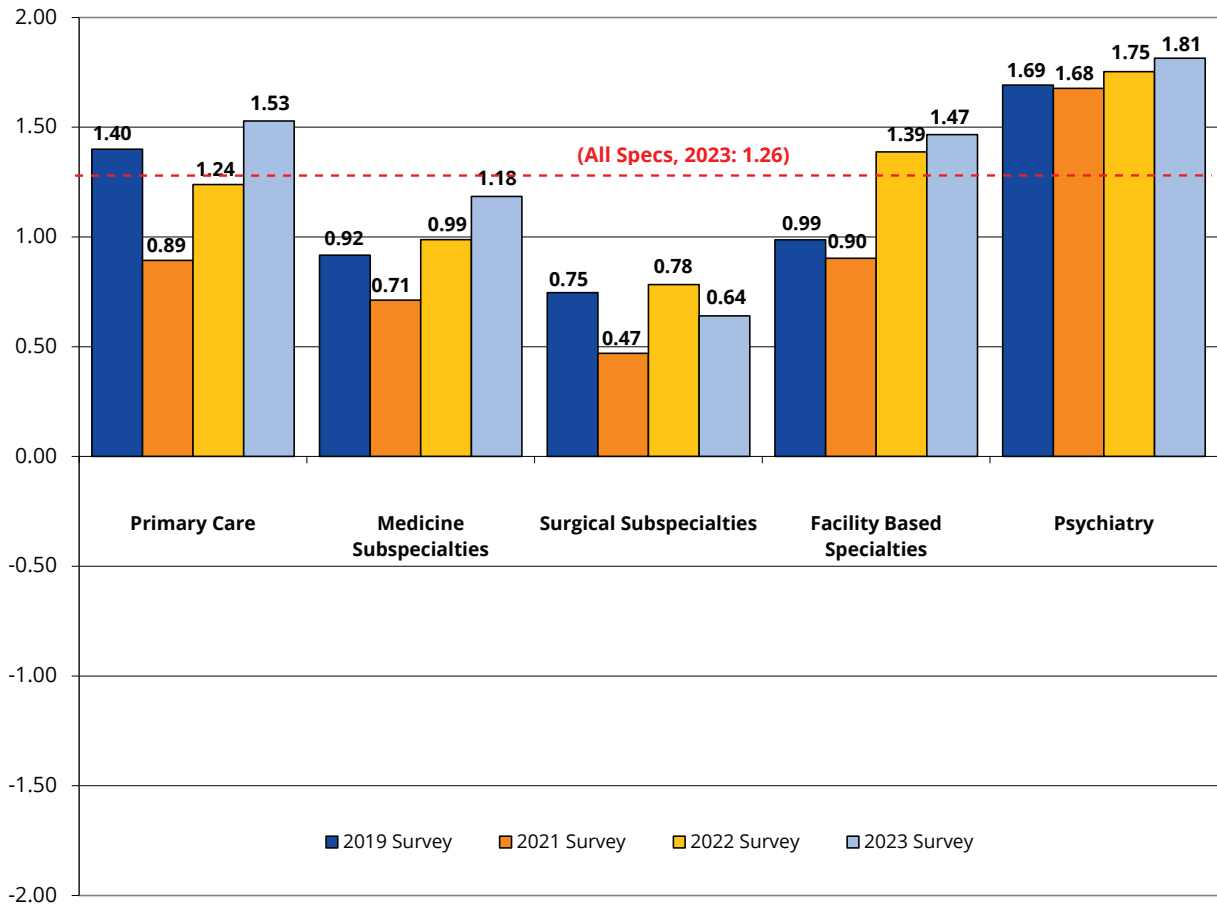
FIGURE 4.11. Rank of Likert Scores for Perceptions of the Regional Job Market by Specialty Group (for 2023 Respondents Who Had Searched for a Job, IMGs on Temporary Visas Excluded)

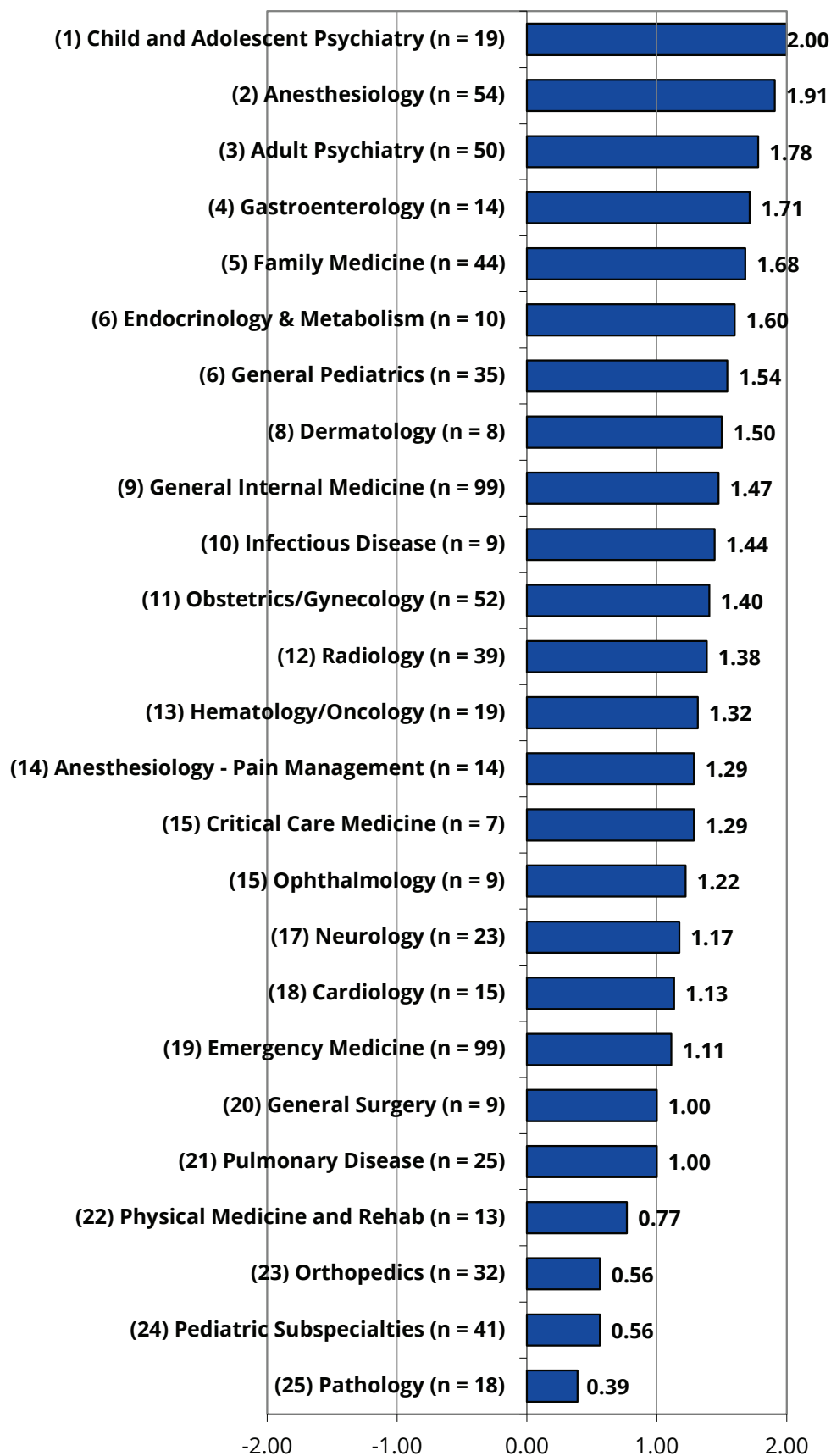**TABLE 4.5.** Likert Scores for Perceptions of the Regional Job Market by Specialty (for Respondents Who Had Searched for a Job, IMGs on Temporary Visas Excluded)[a]

Specialty	2023 Respondents	RANK (of 25)	Aggregated Respondents: 2022 and 2023	RANK (of 25)	Aggregated Respondents: 2019-2023	RANK (of 25)
Primary Care	**1.53**	N/A	**1.37**	N/A	**1.29**	N/A
Family Medicine	1.68	5	1.52	6	1.52	4
General Internal Medicine	1.47	9	1.40	8	1.25	8
General Pediatrics	1.54	7	1.20	13	1.18	11
Obstetrics/Gynecology	**1.40**	11	**1.47**	7	**1.33**	6
Medicine Subspecialties	**1.18**	N/A	**1.08**	N/A	**0.94**	N/A
Cardiology	1.13	18	1.16	15	0.95	16
Critical Care Medicine	1.29	14	1.04	18	0.88	17
Endocrinology & Metabolism	1.60	6	1.54	5	1.27	7
Gastroenterology	1.71	4	1.32	10	1.21	9
Hematology/Oncology	1.32	13	1.14	16	0.98	14
Infectious Disease	1.44	10	1.25	11	1.14	12
Pulmonary Disease	1.00	20	0.87	20	0.78	19
General Surgery	**1.00**	20	**0.33**	25	**0.02**	25
Surgical Subspecialties	**0.64**	N/A	**0.71**	N/A	**0.66**	N/A
Ophthalmology	1.22	16	1.21	12	0.82	18
Orthopedics	0.56	23	0.63	22	0.71	21
Facility Based	**1.47**	N/A	**1.43**	N/A	**1.19**	N/A
Anesthesiology	1.91	2	1.82	2	1.68	3
Pain Management	1.29	14	1.10	17	1.03	13
Pathology	0.39	25	0.61	23	0.51	23
Radiology	1.38	12	1.38	9	0.98	15
Psychiatry	**1.81**	N/A	**1.78**	N/A	**1.74**	N/A
Adult Psychiatry	1.78	3	1.79	3	1.82	1
Child and Adolescent Psych	2.00	1	1.89	1	1.74	2
Other	**0.99**	N/A	**0.84**	N/A	**0.74**	N/A
Dermatology	1.50	8	1.59	4	1.45	5
Emergency Medicine	1.11	19	0.87	19	0.75	20
Neurology	1.17	17	1.18	14	1.19	10
Pediatric Subspecialties	0.56	24	0.42	24	0.29	24
Physical Medicine and Rehab	0.77	22	0.72	21	0.71	22
Total (All Specialties)	**1.26**	N/A	**1.18**	N/A	**1.06**	N/A

[a] Likert Score computed using the following Likert Scale: "No Jobs" = -2, "Very Few Jobs" = -1, "Few Jobs" = 0, "Some Jobs" = +1, "Many Jobs" = +2.
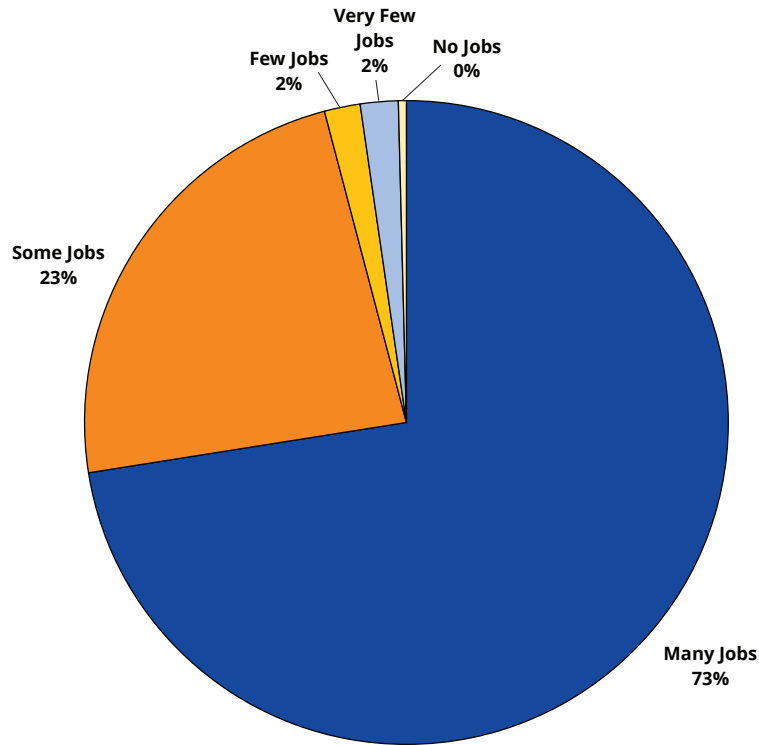
4.6 Perceptions of the National Job Market

Table 4.6 presents the perceptions of survey respondents concerning the national job market for their specialty. The response choices and composite scores were the same as those used in Table 4.5 (referring to the regional job market). There was a high degree of correlation between respondents' views of the regional and the national job markets. In general, however, the national job market was viewed more positively than the regional job market.
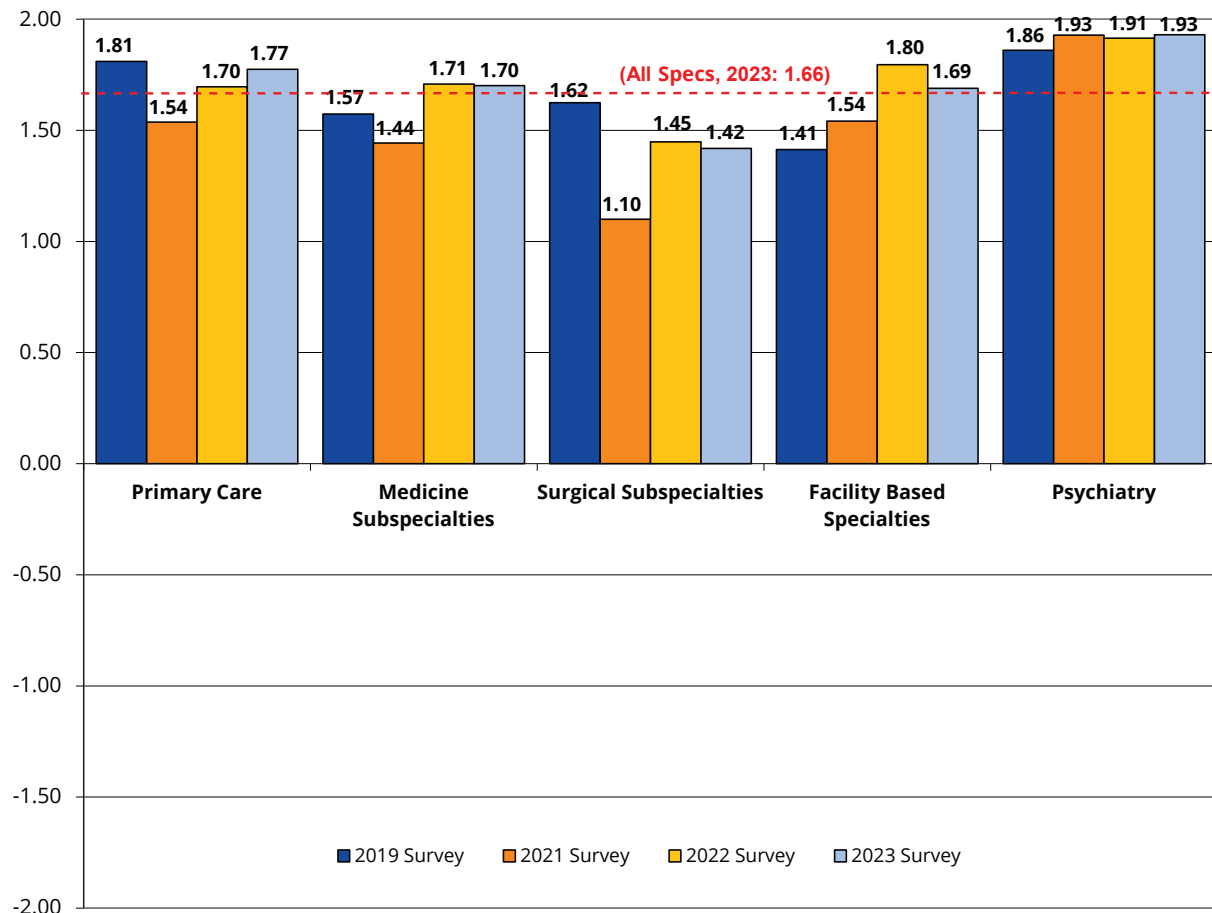
Highlights

- Overall, respondents had very positive perceptions of the national job market.
  - Seventy-three percent (73%) reported that there were "Many Jobs" in their specialty, and 0% reported that there were "No Jobs."
- Respondents assessed the national job market (average score of +1.66) more positively than the regional job market (average score of +1.26).
- Respondents in the following specialties reported the most positive views of the national job market: child and adolescent psychiatry (+2.00), infectious disease (+2.00), endocrinology and metabolism (+2.00), anesthesiology (+1.96), adult psychiatry (+1.96), and hematology/oncology (+1.94).
- Respondents in the following specialties reported the least positive views of the national job market: pathology (+1.00), physical medicine and rehabilitation (+1.23), and orthopedics (+1.36).
- Over the past 2 years (2022, 2023), respondents in the following specialties reported the most positive views of the national job market: child and adolescent psychiatry (+1.97), adult psychiatry (+1.96), and infectious disease (+1.95).
- Over the past 2 years (2022, 2023), respondents in the following specialties reported the least positive views of the national job market: general surgery (1.00), emergency medicine (+1.16), and pediatric subspecialties (+1.25).
- Over the past 4 years (2019, 2021-2023), respondents in the following specialties reported the most positive views of the national job market: adult psychiatry (+1.97), child and adolescent psychiatry (+1.95), and family medicine (+1.85).
- Over the past 4 years (2019, 2021-2023), respondents in the following specialties reported the least positive views of the national job market: emergency medicine (+1.10), pediatric subspecialties (+1.10), general surgery (+1.17), and pathology (+1.20).

FIGURE 4.12. Perceptions of the National Job Market (for 2023 Respondents Who Had Searched for a Job, IMGs on Temporary Visas Excluded)

Few Jobs 2%
Very Few Jobs 2%
No Jobs 0%
Some Jobs 23%
Many Jobs 73%

FIGURE 4.13. Mean Likert Scores for Perceptions of the National Job Market by Specialty Group (for Respondents Who Had Searched for a Job, IMGs on Temporary Visas Excluded)

(All Specs, 2023: 1.66)

	2019 Survey	2021 Survey	2022 Survey	2023 Survey
Primary Care	1.81	1.54	1.70	1.77
Medicine Subspecialties	1.57	1.44	1.71	1.70
Surgical Subspecialties	1.62	1.10	1.45	1.42
Facility Based Specialties	1.41	1.54	1.80	1.69
Psychiatry	1.86	1.93	1.91	1.93

FIGURE 4.14. Rank of Likert Scores for Perceptions of the National Job Market by Specialty (for 2023 Respondents Who Had Searched for a Job, IMGs on Temporary Visas Excluded)

Specialty	Score
(1) Child and Adolescent Psychiatry (n = 19)	2.00
(2) Infectious Disease (n = 9)	2.00
(3) Endocrinology & Metabolism (n = 10)	2.00
(4) Anesthesiology (n = 55)	1.96
(5) Adult Psychiatry (n = 50)	1.96
(6) Hematology/Oncology (n = 18)	1.94
(7) Gastroenterology (n = 13)	1.92
(8) Cardiology (n = 14)	1.86
(9) General Pediatrics (n = 36)	1.83
(10) Dermatology (n = 10)	1.80
(11) Family Medicine (n = 44)	1.80
(12) Neurology (n = 22)	1.77
(13) General Internal Medicine (n = 100)	1.77
(14) Obstetrics/Gynecology (n = 53)	1.74
(15) Ophthalmology (n = 7)	1.71
(16) Critical Care Medicine (n = 7)	1.71
(17) Pulmonary Disease (n = 25)	1.60
(18) Radiology (n = 39)	1.59
(19) Anesthesiology - Pain Management (n = 14)	1.57
(20) General Surgery (n = 9)	1.56
(21) Emergency Medicine (n = 97)	1.48
(22) Pediatric Subspecialties (n = 41)	1.46
(23) Orthopedics (n = 33)	1.36
(24) Physical Medicine and Rehab (n = 13)	1.23
(25) Pathology (n = 19)	1.00

TABLE 4.6. Mean Likert Scores for Perceptions of the National Job Market by Specialty (for Respondents Who Had Searched for a Job, IMGs on Temporary Visas Excluded)[a]

Specialty	2023 Respondents	RANK (of 25)	Aggregated Respondents: 2022 and 2023	RANK (of 25)	Aggregated Respondents: 2019-2023	RANK (of 25)
Primary Care	**1.77**	N/A	**1.73**	N/A	**1.73**	N/A
Family Medicine	1.80	11	1.83	8	1.85	3
General Internal Medicine	1.77	13	1.76	12	1.73	10
General Pediatrics	1.83	9	1.59	17	1.61	15
Obstetrics/Gynecology	**1.74**	14	**1.82**	9	**1.75**	9
Medicine Subspecialties	**1.70**	N/A	**1.71**	N/A	**1.60**	N/A
Cardiology	1.86	8	1.67	15	1.62	14
Critical Care Medicine	1.71	15	1.50	19	1.50	18
Endocrinology & Metabolism	2.00	1	1.92	4	1.72	11
Gastroenterology	1.92	7	1.87	6	1.79	7
Hematology/Oncology	1.94	6	1.83	7	1.75	8
Infectious Disease	2.00	1	1.95	3	1.65	13
Pulmonary Disease	1.60	17	1.61	16	1.56	16
General Surgery	**1.56**	20	**1.00**	25	**1.17**	23
Surgical Subspecialties	**1.42**	N/A	**1.43**	N/A	**1.42**	N/A
Ophthalmology	1.71	15	1.75	13	1.70	12
Orthopedics	1.36	23	1.42	20	1.41	20
Facility Based	**1.69**	N/A	**1.74**	N/A	**1.61**	N/A
Anesthesiology	1.96	4	1.91	5	1.80	6
Pain Management	1.57	19	1.55	18	1.50	18
Pathology	1.00	25	1.32	21	1.20	22
Radiology	1.59	18	1.70	14	1.54	17
Psychiatry	**1.93**	N/A	**1.92**	N/A	**1.91**	N/A
Adult Psychiatry	1.96	5	1.96	2	1.97	1
Child and Adolescent Psych	2.00	1	1.97	1	1.95	2
Other	**1.49**	N/A	**1.28**	N/A	**1.25**	N/A
Dermatology	1.80	10	1.79	10	1.80	5
Emergency Medicine	1.48	21	1.16	24	1.10	25
Neurology	1.77	12	1.79	11	1.80	4
Pediatric Subspecialties	1.46	22	1.25	23	1.10	24
Physical Medicine and Rehab	1.23	24	1.32	22	1.37	21
Total (All Specialties)	**1.66**	N/A	**1.61**	N/A	**1.56**	N/A

[a] Likert Score computed using the following Likert Scale: "No Jobs" = -2, "Very Few Jobs" = -1, "Few Jobs" = 0, "Some Jobs" = +1, "Many Jobs" = +2.
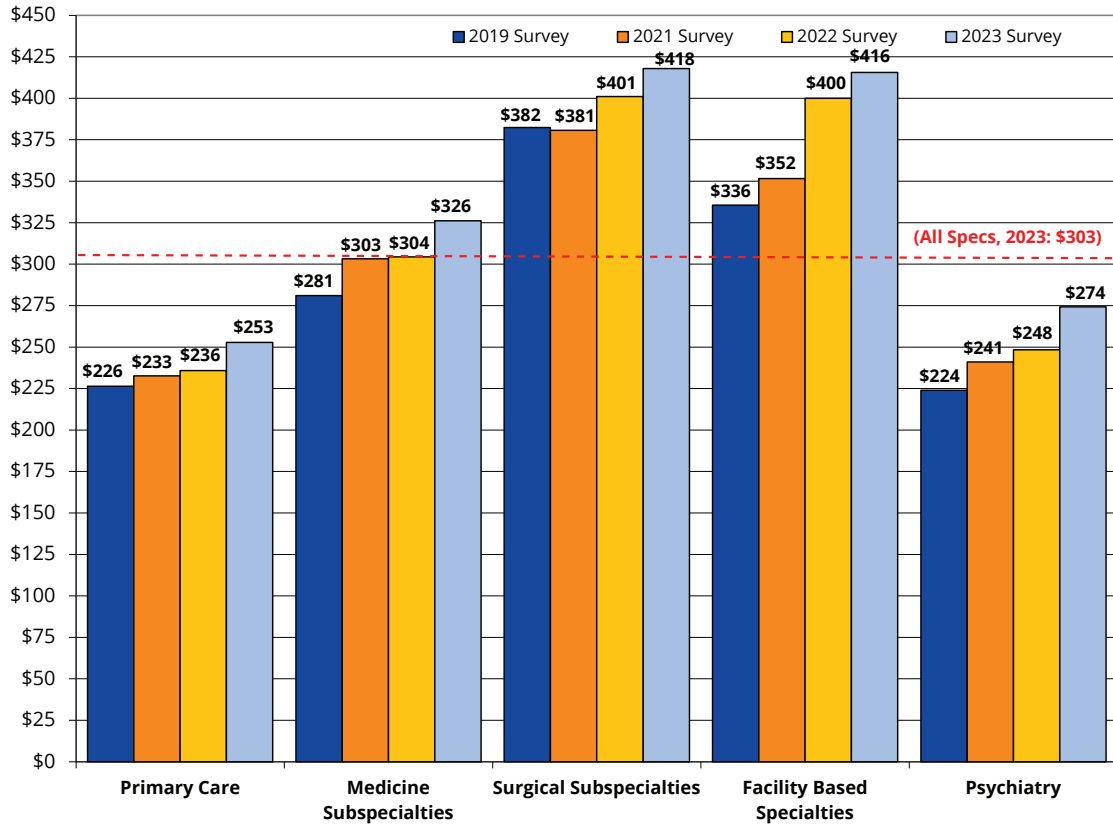
4.7 Trends in Starting Income

Table 4.7 presents median starting income levels for 2023 respondents, for all respondents from the last 2 surveys (2022 and 2023), and the average annual change (ie, trend) in median starting income from the last 5 surveys (2018-2019, 2021-2023). 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 be completely accurate in determining demand, trends in income 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.

Highlights

- The median starting income of 2023 respondents was $302,600.
  - Median starting income in 2023 was 7% higher than in 2022.
  - The average annual increase in income for new physicians from 2018 to 2023 was 5%.
- Most specialties experienced moderate growth in starting incomes from 2018 to 2023.
- The following specialties experienced the largest annual increases in income between 2018 and 2023: ophthalmology (13%), obstetrics/gynecology (8%), neurology (8%), hematology/oncology (8%), gastroenterology (8%), and anesthesiology (7%).
- The following specialties experienced the least growth in starting income during this time period: physical medicine and rehabilitation (0%), emergency medicine (1%), endocrinology and metabolism (1%), and general pediatrics (2%).

FIGURE 4.15. Median Starting Income (in $1,000s) by Specialty Group (for Respondents With Confirmed Practice Plans)
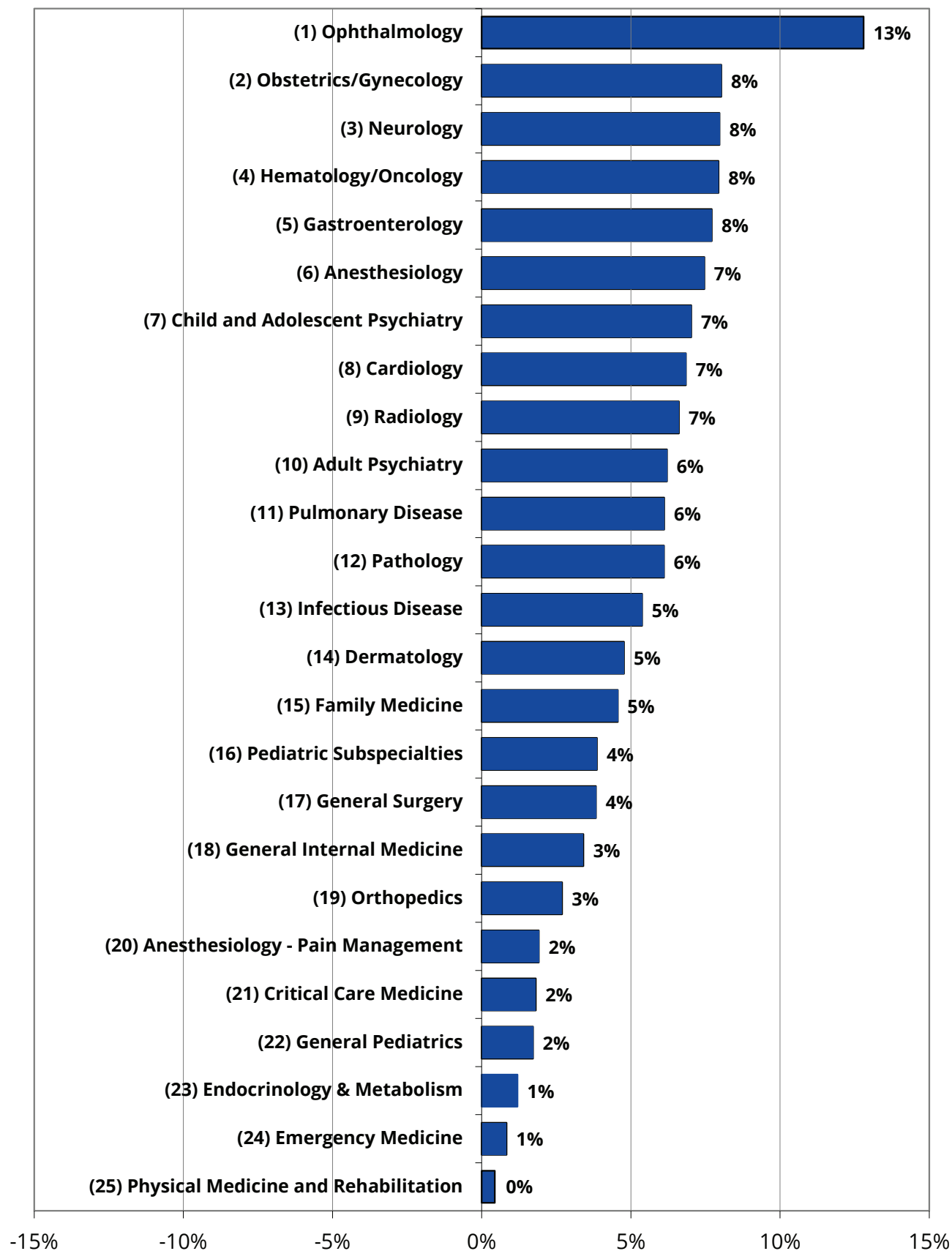

FIGURE 4.16. Trends in Median Starting Income (in $1,000s) Among Physicians in Primary Care Specialties and Physicians in Non-Primary Care Specialties (for Respondents With Confirmed Practice Plans)
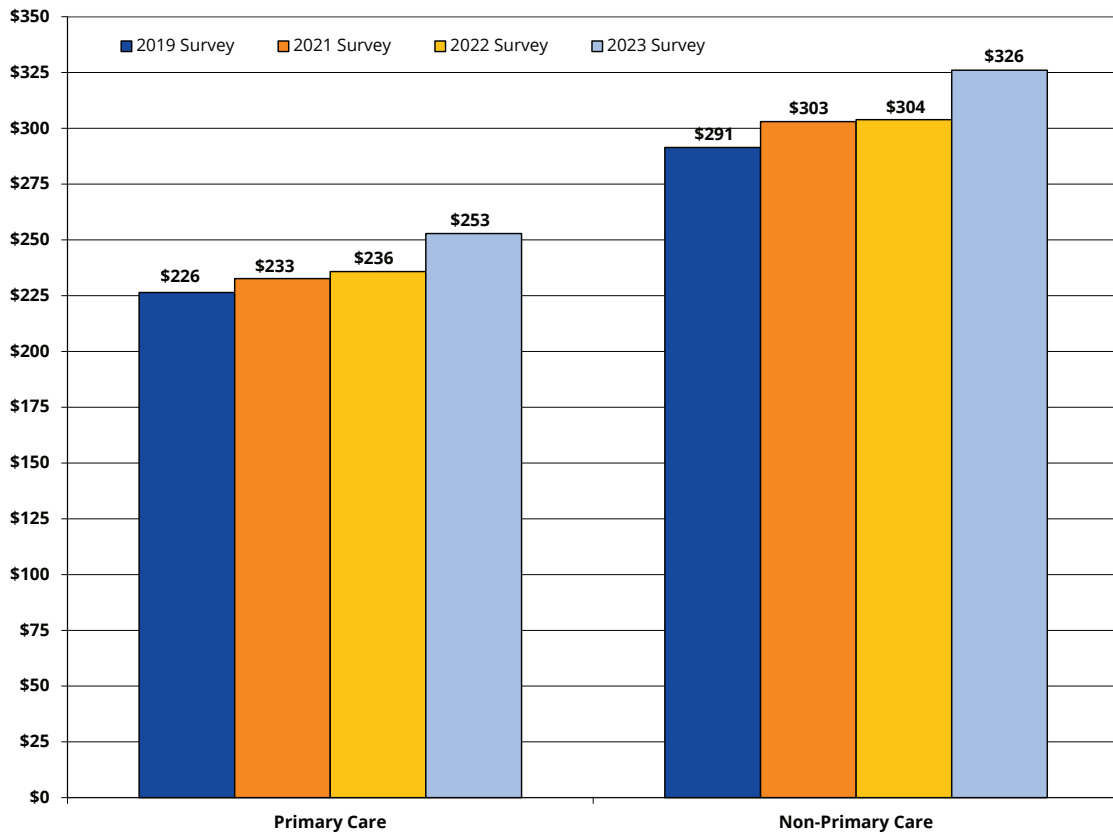
FIGURE 4.17. Rank of Average Percent Change in Median Starting Income (from 2018 to 2023) by Specialty (for Respondents With Confirmed Practice Plans)

Specialty	Percent Change
(1) Ophthalmology	13%
(2) Obstetrics/Gynecology	8%
(3) Neurology	8%
(4) Hematology/Oncology	8%
(5) Gastroenterology	8%
(6) Anesthesiology	7%
(7) Child and Adolescent Psychiatry	7%
(8) Cardiology	7%
(9) Radiology	7%
(10) Adult Psychiatry	6%
(11) Pulmonary Disease	6%
(12) Pathology	6%
(13) Infectious Disease	5%
(14) Dermatology	5%
(15) Family Medicine	5%
(16) Pediatric Subspecialties	4%
(17) General Surgery	4%
(18) General Internal Medicine	3%
(19) Orthopedics	3%
(20) Anesthesiology - Pain Management	2%
(21) Critical Care Medicine	2%
(22) General Pediatrics	2%
(23) Endocrinology & Metabolism	1%
(24) Emergency Medicine	1%
(25) Physical Medicine and Rehabilitation	0%

TABLE 4.7. Median Expected Starting Income by Specialty (for Respondents With Confirmed Practice Plans)

Specialty	2023 Respondents	RANK (of 25)	Aggregated Respondents: 2022 and 2023	RANK (of 25)	Trend (Average Annual Change: 2018 to 2023)	RANK (of 25)
Primary Care	**$252,850**	N/A	**$244,100**	N/A	**4%**	N/A
Family Medicine	$257,400	21	$239,050	22	5%	15
General Internal Medicine	$261,800	20	$258,400	20	3%	18
General Pediatrics	$190,650	25	$197,350	25	2%	22
Obstetrics/Gynecology	**$341,050**	13	**$317,250**	13	**8%**	2
Medicine Subspecialties	**$326,100**	N/A	**$308,850**	N/A	**5%**	N/A
Cardiology	$423,600	3	$406,200	4	7%	8
Critical Care Medicine	$387,050	7	$362,900	9	2%	21
Endocrinology & Metabolism	$233,000	23	$248,500	21	1%	23
Gastroenterology	$401,550	5	$419,500	3	8%	5
Hematology/Oncology	$399,600	6	$356,050	11	8%	4
Infectious Disease	$227,200	24	$224,700	24	5%	13
Pulmonary Disease	$361,300	12	$362,000	10	6%	11
General Surgery	**$370,500**	10	**$370,500**	8	**4%**	17
Surgical Subspecialties	**$417,900**	N/A	**$409,000**	N/A	**5%**	N/A
Ophthalmology	$361,850	11	$350,000	12	13%	1
Orthopedics	$435,600	2	$429,400	1	3%	19
Facility Based	**$415,550**	N/A	**$408,700**	N/A	**7%**	N/A
Anesthesiology	$446,100	1	$427,400	2	7%	6
Pain Management	$384,200	8	$389,050	7	2%	20
Pathology	$262,400	19	$266,900	17	6%	12
Radiology	$413,850	4	$405,300	5	7%	9
Psychiatry	**$274,300**	N/A	**$263,700**	N/A	**6%**	N/A
Adult Psychiatry	$282,000	16	$261,850	19	6%	10
Child and Adolescent Psych	$273,000	17	$265,000	18	7%	7
Other	**$291,550**	N/A	**$287,000**	N/A	**3%**	N/A
Dermatology	$383,750	9	$392,250	6	5%	14
Emergency Medicine	$308,050	14	$303,000	14	1%	24
Neurology	$298,200	15	$285,950	15	8%	3
Pediatric Subspecialties	$234,450	22	$230,500	23	4%	16
Physical Medicine and Rehab	$264,050	18	$268,300	16	0%	25
Total (All Specialties)	**$302,600**	N/A	**$292,100**	N/A	**5%**	N/A

4.8 Assessment of Relative Demand by Specialty

To measure the demand for new physicians, a composite score was computed by taking the median of the ranks on each of the demand indicators (ie, where each specialty stood relative to all 25 specialties) for each specialty with the observations from the most recent 4 years of the survey (2019, 2021-2023). Observations from more recent years of the survey received a greater weight than observations from previous years. That is, when calculating the demand score for 2023, data from 2023 were weighted by a factor of 0.40, data from 2022 were weighted by a factor of 0.30, data from 2021 were weighted by a factor of 0.20, and data from 2019 were weighted by a factor of 0.10.

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

- Percentage of respondents having 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 in their specialty
- Respondents' views of the national job market in their specialty
- Trends in median starting income

Each of these indicators is an imperfect measure of demand. However, combined, they provide a composite picture of relative demand by specialty. There is a high degree of correlation between the percent of respondents having difficulty indicator and the percent of respondents having to change plans indicator (ie, a respondent reporting difficulty was also 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 in their specialty. Due to the correlations between these 2 sets of indicators, the job offers and trends in starting income indicators were weighed more heavily in the computation of the composite measure of new physician demand.

Note that the composite measure does not reflect absolute demand for new physicians (ie, determine the appropriate number of physicians necessary to serve a given population). Instead, it reflects the demand for each specialty relative to other specialties. Figure 4.18 is a plot of the composite relative demand score for each specialty.

Highlights

- In 2023, anesthesiology (average rank of 3.0 out of 25), gastroenterology (5.0), child and adolescent psychiatry (5.5), obstetrics/gynecology (5.5), adult psychiatry (6.0) and family medicine (6.0) experienced the strongest demand.
- The job market for emergency medicine (24.0), general surgery (23.5), pathology (22.5), and physical medicine and rehabilitation (22.0) was weak relative to other specialties.

FIGURE 4.18. Assessment of Current Relative Demand by Specialty, Median Rank of Demand Related Variables
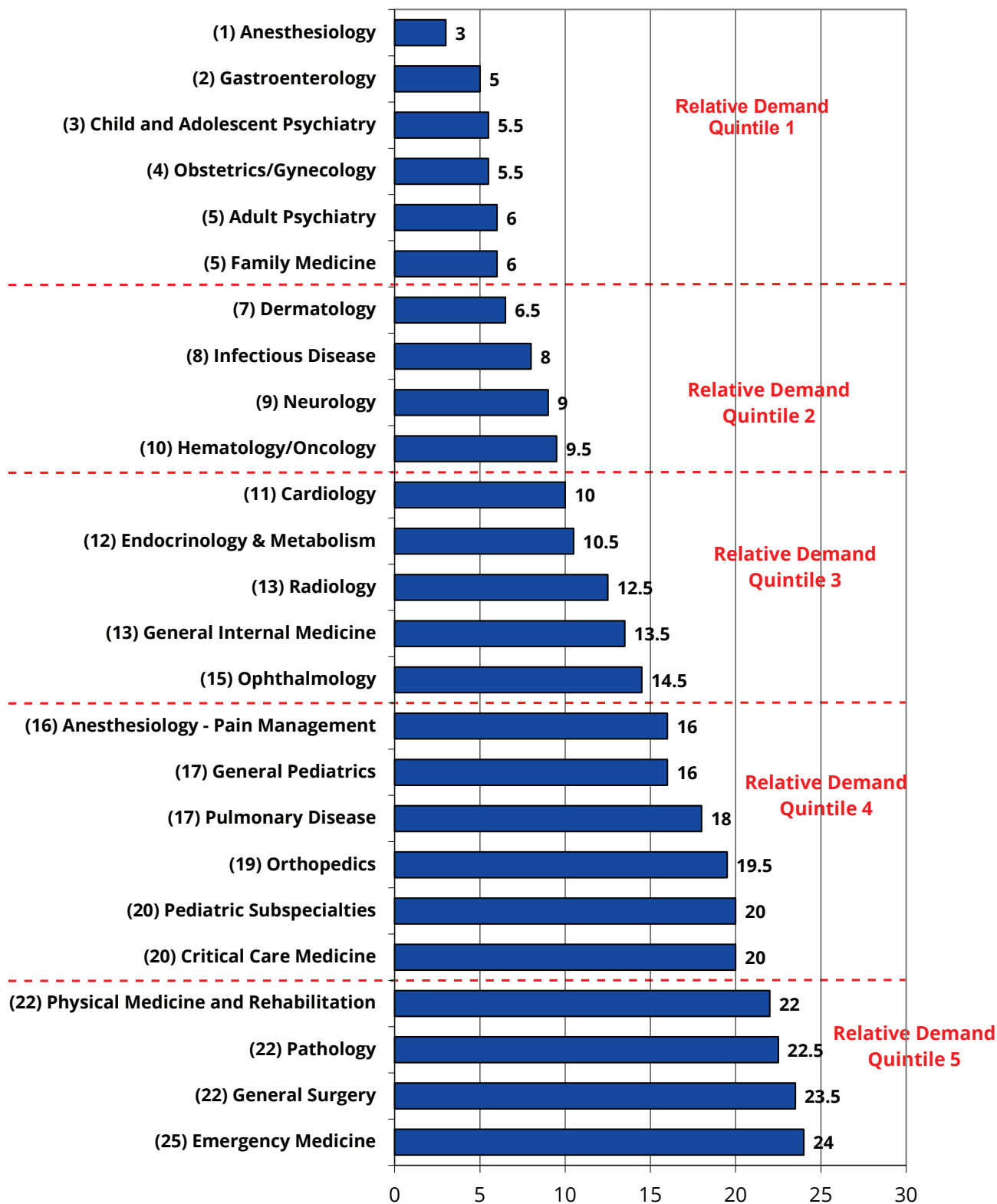
APPENDIX A

TABLE A-1. 2022 Exit Survey Response Rates by Specialty[a] and Region[b,c]

Specialty	UPSTATE NY PROGRAMS			DOWNSTATE NY PROGRAMS			NEW YORK (TOTAL)		
	Grads	Returned	Resp Rate	Grads	Returned	Resp Rate	Grads	Returned	Resp Rate
Primary Care	**233**	**72**	**31%**	**1,671**	**470**	**28%**	**1,904**	**542**	**28%**
Family Medicine	67	23	34%	138	42	30%	205	65	32%
Internal Medicine-General	112	38	34%	1,157	330	29%	1,269	368	29%
Pediatrics-General	43	9	21%	371	94	25%	414	103	25%
IM & Peds (Combined)	11	2	18%	5	4	80%	16	6	38%
Obstetrics/Gynecology	**23**	**8**	**35%**	**141**	**55**	**39%**	**164**	**63**	**38%**
Internal Medicine Specialties	**93**	**11**	**12%**	**640**	**270**	**42%**	**733**	**281**	**38%**
Cardiology	36	2	6%	172	57	33%	208	59	28%
Critical Care Medicine	2	1	50%	39	16	41%	41	17	41%
Endocrinology & Metabolism	8	0	0%	31	16	52%	39	16	41%
Gastroenterology	8	1	13%	63	23	37%	71	24	34%
Hematology/Oncology	5	2	40%	60	23	38%	65	25	38%
Infectious Disease	5	0	0%	43	21	49%	48	21	44%
Pulmonary Disease	10	1	10%	65	35	54%	75	36	48%
Other IM Specialties	19	4	21%	167	79	47%	186	83	45%
Geriatrics	*7*	*2*	*29%*	*51*	*16*	*31%*	*58*	*18*	*31%*
Nephrology	*6*	*2*	*33%*	*52*	*14*	*27%*	*58*	*16*	*28%*
Rheumatology	*6*	*0*	*0%*	*26*	*11*	*42%*	*32*	*11*	*34%*
Other IM Subspecialties	*0*	*0*	*0%*	*38*	*38*	*100%*	*38*	*38*	*100%*
Surgery (General)	**21**	**6**	**29%**	**146**	**67**	**46%**	**167**	**73**	**44%**
Surgery (Subspecialties)	**70**	**18**	**26%**	**337**	**190**	**56%**	**407**	**208**	**51%**
Ophthalmology	9	1	11%	58	33	57%	67	34	51%
Orthopedics	22	7	32%	130	65	50%	152	72	47%
Other Surgical Subspecs	39	10	26%	149	92	62%	188	102	54%
Neurosurgery	*4*	*2*	*50%*	*11*	*3*	*27%*	*15*	*5*	*33%*
Otolaryngology	*7*	*3*	*43%*	*29*	*11*	*38%*	*36*	*14*	*39%*
Plastic Surgery	*4*	*0*	*0%*	*14*	*14*	*100%*	*18*	*14*	*78%*
Thoracic Surgery	*3*	*0*	*0%*	*14*	*4*	*29%*	*17*	*4*	*24%*
Urology	*8*	*4*	*50%*	*29*	*14*	*48%*	*37*	*18*	*49%*
All Other Surg Subspecs	*13*	*1*	*8%*	*52*	*46*	*88%*	*65*	*47*	*72%*

TABLE A-1. 2022 Exit Survey Response Rates by Specialty[a] and Region[b,c] *(Cont.)*

Specialty	UPSTATE NY PROGRAMS			DOWNSTATE NY PROGRAMS			NEW YORK (TOTAL)		
	Grads	Returned	Resp Rate	Grads	Returned	Resp Rate	Grads	Returned	Resp Rate
Facility Based	**98**	**8**	**8%**	**562**	**281**	**50%**	**660**	**289**	**44%**
Anesthesiology-General	33	0	0%	164	100	61%	197	100	51%
Pain Management	8	1	13%	27	14	52%	35	15	43%
Other Anes Subspecs	5	2	40%	51	26	51%	56	28	50%
Pathology	16	3	19%	120	48	40%	136	51	38%
Pathology (General)	*10*	*1*	*10%*	*51*	*20*	*39%*	*61*	*21*	*34%*
Pathology Subspecialties	*6*	*2*	*33%*	*69*	*28*	*41%*	*75*	*30*	*40%*
Radiology	36	2	6%	200	93	47%	236	95	40%
Radiology (Diagnostic)	*32*	*1*	*3%*	*173*	*80*	*46%*	*205*	*81*	*40%*
Radiology (Therapeutic)	*4*	*1*	*25%*	*21*	*12*	*57%*	*25*	*13*	*52%*
Nuclear Medicine	*0*	*0*	*0%*	*6*	*1*	*17%*	*6*	*1*	*17%*
Psychiatry	**28**	**6**	**21%**	**309**	**135**	**44%**	**337**	**141**	**42%**
Psychiatry (General)	15	4	27%	179	84	47%	194	88	45%
Child & Adolescent Psych	5	1	20%	59	25	42%	64	26	41%
Other Psych Subspecs	8	1	13%	71	26	37%	79	27	34%
Other	**104**	**37**	**36%**	**735**	**364**	**50%**	**834**	**401**	**48%**
Dermatology	4	0	0%	55	19	35%	59	19	32%
Emergency Medicine	40	19	48%	234	121	52%	274	140	51%
Neurology	26	5	19%	129	60	47%	155	65	42%
Pediatric Specialties	13	4	31%	120	60	50%	133	64	48%
Physical Medicine & Rehab	10	2	20%	81	32	40%	91	34	37%
Other	11	7	64%	116	72	62%	122	79	65%
Allergy & Immunology	*3*	*0*	*0%*	*15*	*4*	*27%*	*18*	*4*	*22%*
Preventive Medicine	*1*	*0*	*0%*	*13*	*9*	*69%*	*14*	*9*	*64%*
All Other	*7*	*7*	*100%*	*88*	*59*	*67%*	*90*	*66*	*73%*
Total (All Specialties)	**670**	**166**	**25%**	**4,541**	**1,832**	**40%**	**5,206**	**2,000**	**38%**

[a] Specialties shaded in gold 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.

[b] Downstate NY includes New York City, Long Island, and Westchester County. Upstate NY includes the rest of the state.

[c] Adding up physicians by specialty and region will not reflect the total sample size due to missing data.

APPENDIX B

SURVEY OF RESIDENTS COMPLETING TRAINING IN NY IN 2023

YOUR INFORMATION

1. ACGME Residency Program Number:

   Format: XXX-XX-XX-XXX —————————————————

   Last Name ——————————————————

   First Name ——————————————————

2. Main hospital at which you did your training:

   ○ Albany Medical Center

   ○ Arnot Ogden Medical Center

   ○ Bronx-Lebanon Hospital Center

   ○ Brookdale University Hospital and Medical Center

   ○ Brooklyn Hospital Center

   ○ Coney Island Hospital

   ○ Creedmoor Psychiatric Center

   ○ Ellis Hospital

   ○ Flushing Hospital Medical Center

   ○ Garnet Health Medical Center

   ○ Good Samaritan Hospital Medical Center

   ○ Harlem Hospital Center

   ○ Hospital for Special Surgery

   ○ Icahn School of Medicine at Mount Sinai

   ○ IFH Harlem Residency in Family Medicine

   ○ Jacobi Medical Center

   ○ Jamaica Hospital Medical Center

   ○ Kingsbrook Jewish Medical Center

   ○ Laser and Skin Surgery Center of New York

   ○ Lenox Hill Hospital

   ○ Lincoln Medical and Mental Health Center

   ○ Maimonides Medical Center

   ○ Mary Imogene Bassett Hospital

   ○ Memorial-Sloan Kettering Cancer Center

   ○ Metropolitan Hospital Center

   ○ Mid-Hudson Family Health Services/Kingston Hospital

   ○ Montefiore Medical Center/Albert Einstein College of Medicine

   ○ Montefiore New Rochelle

   ○ Mount Sinai – Beth Israel

   ○ Mount Sinai – Morningside

   ○ Mount Sinai South Nassau

   ○ Mount Sinai West

   ○ Nassau University Medical Center

   ○ New York Blood Center

   ○ New York City Department of Health and Mental Hygiene

   ○ New York Hospital Queens

   ○ New York Presbyterian Brooklyn Methodist Hospital

   ○ New York Presbyterian Hospital-Columbia Campus

   ○ New York Presbyterian Hospital-Cornell Campus

   ○ New York Presbyterian Hospital-Westchester Division

   ○ New York University Langone Medical Center

   ○ Northwell Health - Forest Hills

   ○ Northwell Health - Glen Cove

   ○ Northwell Health - North Shore-LIJ

   ○ Northwell Health - Plainview

   ○ Northwell Health - Southside

   ○ NYU Winthrop Hospital

   ○ Office of Chief Medical Examiner-City of New York

○ Richmond University Medical Center

○ Rochester General Hospital

○ St. Barnabas Hospital

○ St. Elizabeth's Medical Center

○ St. John's Episcopal Hospital, South Shore

○ St. Joseph's Hospital Health Center

○ St. Joseph's Medical Center

○ Staten Island University Hospital

○ Strong Memorial Hospital of the University of Rochester

○ SUNY Health Science Center at Brooklyn

○ SUNY Health Science Center at Stony Brook

○ SUNY Health Science Center at Syracuse

○ The Mount Vernon Hospital

○ UHS Wilson Medical Center

○ Univeristy of Buffalo Jacobs School of Medicine and Biomedical Sciences

○ Westchester Medical Center

○ Woodhull Medical and Mental Health Center

○ Wyckoff Heights Medical Center

○ Other: _____

BACKGROUND

3. Gender

○ Female

○ Male

○ Nonbinary

○ Prefer not to disclose

○ Prefer to self-describe: _____

4. Age _____

5. Citizenship Status

○ Native born US

○ Naturalized US

○ Permanent resident

○ H-1, H-2, H-3 Temporary worker

○ J-1, J-2 Exchange visitor

6. Are you of Hispanic/Latino origin?

○ Yes

○ No

7. What is your race? (Mark all that apply)

○ American Indian/Alaska Native

○ Asian

○ Black/African American

○ Native Hawaiian/Other Pacific Islander

○ White

○ Other

8. Which best describes your current relationship status?

○ Now Married

○ In Long-term Relationship

○ Divorced/Separated/Widowed (skip to Question 10)

○ Never Married/Single (skip to Question 10)

9. Is your partner also a physician?

○ Yes

○ No

○ Question does not apply

10. Do you have any dependent children?

○ Yes

○ No

11. Where did you live when you graduated from high school?

○ New York   ○ Canada

○ Other US state   ○ Other country

MEDICAL EDUCATION AND TRAINING

12. At the end of your current year of training, how many total years of post-graduate training will you have completed in the US?

○ 1   ○ 4

○ 2   ○ 5

○ 3   ○ 6 or more

13. Type of Medical Education:

○ Allopathic (MD)

○ Osteopathic (DO)

14. Medical School Attended:

○ New York (If yes, complete Question 15)   ○ Canada (If yes, skip to Question 16)

○ Other state in the US (If yes, skip to Question 16)   ○ Other country (If yes, skip to Question 16)

15. Specify NY Medical School:

○ Albany Medical College

○ Albert Einstein College of Medicine of Yeshiva University

○ Columbia University College of Physicians and Surgeons

○ CUNY School of Medicine

○ Hofstra North Shore-LIJ School of Medicine

○ Icahn School of Medicine at Mount Sinai

○ New York Medical College (Valhalla)

○ NYIT College of Osteopathic Medicine

○ New York University School of Medicine

○ Stony Brook University Medical Center School of Medicine, SUNY

○ SUNY Downstate Medical Center College of Medicine

○ Touro College of Osteopathic Medicine

○ University at Buffalo School of Medicine & Biomedical Sciences, SUNY

○ University of Rochester School of Medicine & Dentistry

○ Upstate Medical University, SUNY

○ Weill Cornell Medical College

16. What is your current level of educational debt?

○ None
○ Less than $50,000
○ $50,000-$99,999
○ $100,000-$149,999
○ $150,000-$199,999

○ $200,000-$249,999
○ $250,000-$299,999
○ $300,000-$349,999
○ $350,000-$399,999
○ $400,000 and over

17. Specialty you are COMPLETING in 2023 (Mark only one):

○ Allergy and Immunology
○ Anesthesiology (General)
○ Anesthesiology - Pain Management
○ Other Anesthesiology Subspecialty–Specify:

_____

○ Dermatology
○ Emergency Medicine
○ Family Medicine
○ Internal Medicine (General)
○ Cardiology
○ Critical Care Medicine
○ Endocrinology and Metabolism
○ Gastroenterology
○ Geriatrics
○ Hematology/Oncology
○ Infectious Disease
○ Nephrology
○ Pulmonary Disease/CCM
○ Rheumatology
○ Other Internal Medicine Subspecialty–Specify:

_____

○ Internal Medicine and Pediatrics (Combined)
○ Neurology
○ Nuclear Medicine
○ Obstetrics and Gynecology (General)
○ Obstetrics and Gynecology (Subspecialty)-Specify:

_____

○ Pathology (General)
○ Pathology (Subspecialty)-Specify:

_____

○ Pediatrics (General)
○ Pediatrics (Subspecialty)-Specify:

_____

○ Physical Medicine and Rehabilitation
○ Preventive Medicine/Public Health/Occupational Medicine
○ Psychiatry
○ Child and Adolescent Psychiatry
○ Other Psychiatry Subspecialty-Specify:

_____

○ Radiology (Diagnostic)
○ Radiology (Therapeutic)
○ Surgery (General)
○ Cardio-Thoracic Surgery
○ Neurological Surgery
○ Ophthalmology
○ Orthopedic Surgery
○ Otolaryngology
○ Plastic Surgery
○ Urology
○ Other Surgical Subspecialty-Specify:

_____

○ Other-Specify:

_____

18. What do you expect to be doing after completion of your current training program?

○ Patient care/clinical practice (in non-training position)

○ Additional subspecialty training or fellowship (Specify specialty):

_____

○ Chief resident

○ Teaching/research (in non-training position)

○ Temporarily out of medicine

○ Other (Specify):

_____

○ Undecided/don't know yet

FUTURE PLANS

19. If you are going on for additional training/fellowship, please answer the following:

A. Why are you sub-specializing/continuing training? (Mark all that apply)

○ To further your medical education

○ Unable to find a job you are happy with

○ Unable to find any job

○ To stay in the US (ie, due to visa status)

○ Other (Specify):

_____

○ Always intended to subspecialize

○ Question does not apply

B. If you are leaving NY to continue your training, do you plan to return to NY to practice when your training is complete?

○ Yes

○ No

○ Don't know yet

○ Question does not apply

20. Are you joining a medical school as a faculty member?

○ Yes

○ No

21. In your upcoming position, how many hours per week do you expect to spend in each of the following activities?

	None	1-9	10-19	20-29	30-39	40-49	50-59	60+
Direct patient care	○	○	○	○	○	○	○	○
Research	○	○	○	○	○	○	○	○
Training	○	○	○	○	○	○	○	○
Administration	○	○	○	○	○	○	○	○
Volunteering/ Community service	○	○	○	○	○	○	○	○

22. Where is the location of your primary activity after completing your current training position?

○ Same city/county as current training ○ Other US state

○ Same region within NY, but different city/county ○ Outside the US

○ Other area within NY ○ Don't know yet

23. Do you have an obligation or visa requirement to work in a federally designated Health Professional Shortage Area?

○ Yes

○ No

24. How important is it for you to have control over the following job characteristics?

	Not Important at All	Of Little Importance	Important	Very Important
Start and end time each workday	○	○	○	○
Length of each workday	○	○	○	○
Frequency of overnight calls	○	○	○	○
Frequency of weekend duties	○	○	○	○

25. How important is it for you to have the following in a practice opportunity?

	Not Important at All	Of Little Importance	Important	Very Important
Workplace safety protocols, including access to personal protective equipment (PPE)	○	○	○	○
Support for my mental health and emotional well-being	○	○	○	○
An operations plan for emergency situations, such as pandemics, natural disasters, and the like	○	○	○	○

If you are planning to enter or have considered entering patient care/clinical practice:

26. Have you actively searched for a job?

○ Yes

○ No, not yet

○ No, I will be self-employed

27. Have you been offered a job?

○ Yes, and I have accepted an offer

○ Yes, but I declined the offer(s) and am still search-ing (skip to Question 40)

○ No, but I have not actively searched yet (skip to Question 40)

○ No, I have not yet been offered a practice position (skip to Question 40)

PRACTICE PLANS

If you have accepted a position in patient care/clinical practice, please answer the following questions. If not, skip to Question 40.

28. Which best describes the type of patient care practice you will be entering?

	Principal Setting (Mark only one)	Secondary Setting (Mark all that apply)
Solo practice	○	○
Partnership (2 people)	○	○
Group practice (owner/partner)	○	○
Group practice (employee)	○	○
Hospital – Inpatient	○	○
Hospital – Ambulatory care	○	○
Hospital – Emergency room	○	○
Freestanding health center or clinic	○	○
Nursing home	○	○
Other (Complete Below)	○	○

Other (Specify): _____

29. What is the zip code of the principal practice address where you will be working? If zip code is unknown, please give city or town and state.

Zip Code _____

City/Town _____

State _____

30. Is this principal practice address located in a federally designed Health Professional Shortage Area?

○ Yes

○ No

○ I don't know

31. If you are _not_ going to practice in New York, please indicate the reasons why. In the left column, indicate all of the reasons why (mark all that apply). In the right column, indicate the main reason why (mark only one).

		Reasons Why I'm Leaving NY (Mark all that apply)	Main Reason I'm Leaving NY (Mark only one)
Practice Reasons	Overall lack of jobs/practice opportunities in New York	○	○
	Better jobs/practice opportunities in desired locations outside New York	○	○
	Better jobs/practice opportunities in desired practice setting (eg, hospital, group practice, etc.) outside New York	○	○
	Better jobs/practice opportunities outside New York that meet visa status requirements	○	○
Financial Reasons	Better salary/compensation offered outside New York	○	○
	Cost of malpractice insurance in New York	○	○
	Cost of establishing a medical practice in New York	○	○
	Taxes in New York	○	○
	Cost of living in New York	○	○
Personal Reasons	Proximity to family	○	○
	Better employment opportunities for spouse/partner outside New York	○	○
	Climate (eg, weather)	○	○
Other	Never intended to practice in New York	○	○
	Other reason	○	○

32. How many years do you expect to be at your principal practice?

○ 1   ○ 4

○ 2   ○ 5 or more

○ 3

33. Which best describes the demographics of the area in which you will be practicing?

○ Inner City   ○ Small city (population less than 50,000)

○ Other area within major city   ○ Rural

○ Suburban

34. Please identify all of the incentives you received for accepting this practice position (mark all that apply). Also, please indicate the most influential incentive in your decision to accept this practice position (mark only one).

	Incentives Received (Mark all that apply)	Most Influential Incentive (Mark only one)
H-1 visa sponsorship	○	○
J-1 visa waiver	○	○
Sign-on bonus	○	○
Income guarantees	○	○
On-call payments	○	○
Relocation allowances	○	○
Spouse/Partner job transition assistance	○	○
Support for maintenance of certification and continuing medical education	○	○
Career development opportunities	○	○
Educational loan repayment	○	○
Other, specify: _____	○	○
None	○	○

35. If you received any incentives, how important were they in your decision to accept this practice position?

○ Not at all important   ○ Important

○ Of little importance   ○ Very important

36. Expected gross income during first year of practice: Base Salary/Income

○ Less than $99,999
○ $100,000-$124,999
○ $125,000-$149,999
○ $150,000-$174,999
○ $175,000-$199,999
○ $200,000-$224,999
○ $225,000-$249,999
○ $250,000-$274,999

○ $275,000-$299,999
○ $300,000-$324,999
○ $325,000-$349,999
○ $350,000-$374,999
○ $375,000-$399,999
○ $400,000 and over, please specify:

_____

37. Expected gross income during first year of practice: Anticipated Additional Incentive Income

○ None
○ Less than $5,000
○ $5,000-$9,999
○ $10,000-$14,999
○ $15,000-$19,999
○ $20,000-$24,999
○ $25,000-$29,999

○ $30,000-$34,999
○ $35,000-$39,999
○ $40,000-$44,999
○ $45,000-$49,999
○ $50,000-$54,999
○ $55,000-$59,999
○ $60,000 and over, please specify:

_____

38. For the practice position you accepted, did you accept the first salary or did you negotiate salary?

○ Accepted first offer

○ Negotiated salary

39. What is your level of satisfaction with your salary/compensation?

○ Very dissatisfied
○ Somewhat dissatisfied

○ Somewhat satisfied
○ Very satisfied

EXPERIENCE IN JOB MARKET

If you are going into patient care or have considered going into patient care, please complete the following.

40. Did you have difficulty finding a practice position you were satisfied with?

○ Yes
○ No
○ Haven't looked yet (skip to Question 43)

41. What would you say was the main reason?

○ Overall lack of jobs/practice opportunities

○ Lack of jobs/practice opportunities that meet visa status requirements

○ Lack of jobs/practice opportunities in desired locations

○ Lack of jobs/practice opportunities in desired practice setting (eg, hospital, group practice)

○ Inadequate salary/compensation offered

○ Lack of employment opportunities for spouse/ partner

○ Other (Specify): _____

42. Did you have to change your plans because of limited practice opportunities?

○ Yes

○ No

○ Haven't looked yet

43. How many offers for practice positions did you receive (excluding fellowships, chief residency, and other training positions)?

○ None

○ 1

○ 2

○ 3

○ 4

○ 5

○ 6-10

○ Over 10

44. What is your overall assessment of practice opportunities in your specialty, and within 50 miles of the site where you trained?

○ No jobs

○ Very few jobs

○ Few jobs

○ Some jobs

○ Many jobs

○ Unknown

45. What is your overall assessment of practice opportunities in your specialty nationally?

○ No jobs

○ Very few jobs

○ Few jobs

○ Some jobs

○ Many jobs

○ Unknown

Thank you for completing this important survey!

ABOUT THE AUTHORS

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