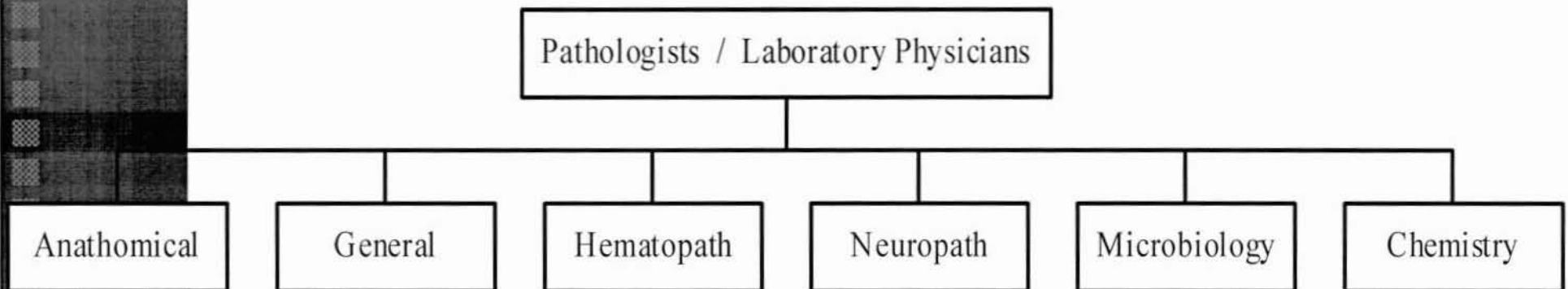


Overview

- To define and explain our practice, needs and problems in delivering services in NL
- What pathologists do
- Our issues
- Remuneration

Laboratory Specialties by RCPSC



Training and Credentials

Medical School

5 years of residency training

Certification by Royal College of Physicians
and Surgeons of Canada

Additional training and advances: MSci and
Ph.D.

SAME AS OTHER SPECIALISTS

Duties:

- Surgical pathology:
 - ◆ Biopsies (tissue taken during operative or medical procedures for the purpose of diagnosis)
 - ◆ Cytology (examination of groups of cells taken as a smear, brushing or aspiration for the purpose of diagnosis)
 - ◆ PAP test, FNA (breast, lung, ENT etc)
 - ◆ Assessment of resected specimens for extent of disease and adequacy of resection

Duties (cont'd)

- Clinical consultants
 - ◆ Frozen sections (Intra-operative consultation)
 - ◆ Clinical rounds (Tumor Chest Board, Tumor Board, Mammography-Pathology Rounds, Lymphoma Rounds etc.)
- Autopsies (< 0.5%)
- Other:
 - ◆ Flow Cytometry (method used for diagnosis of hematological disorders and malignancy)
 - ◆ Molecular Pathology and Cytogenetic
 - ◆ Interpretation of laboratory results and tests

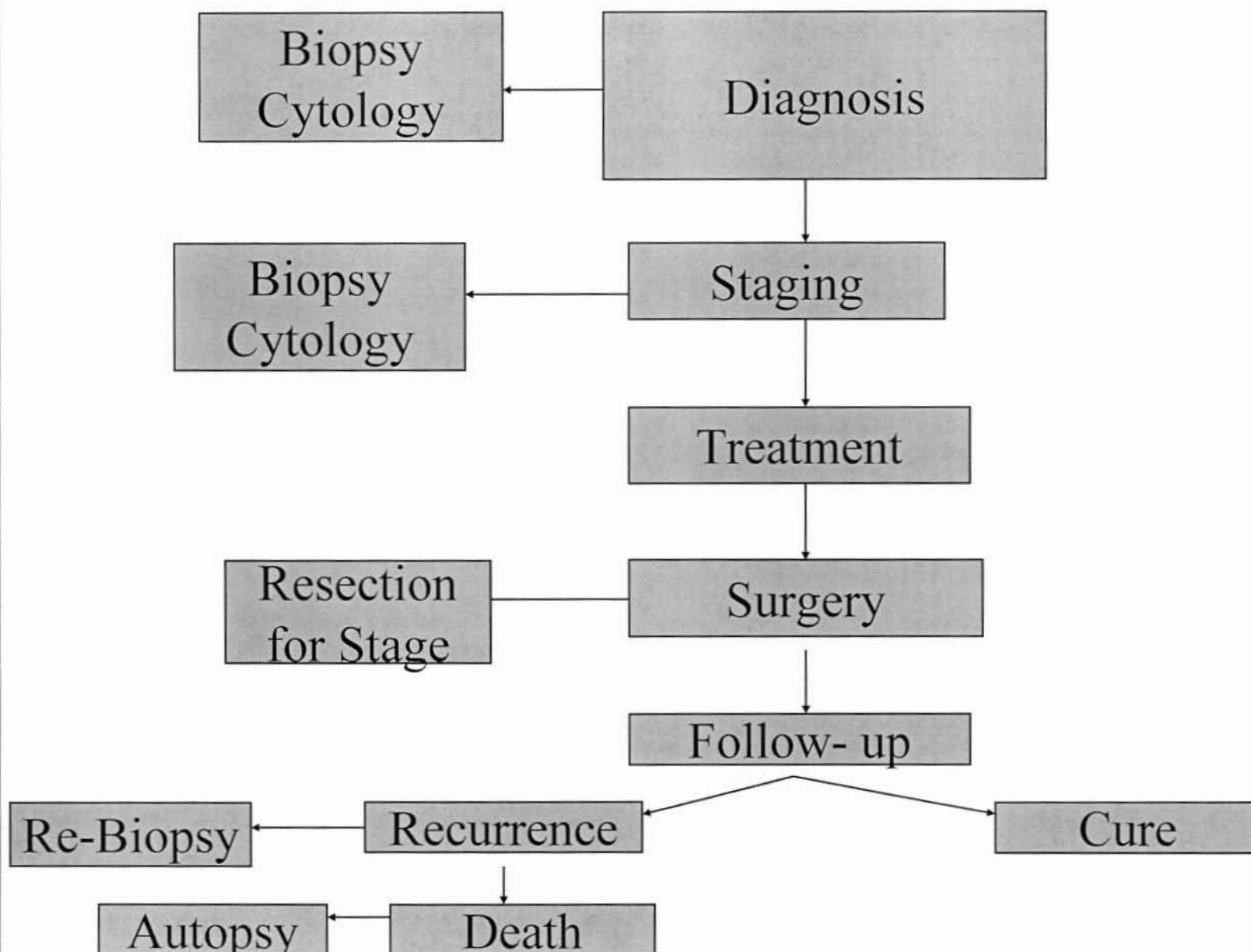
Pathology (cont'd)

- Process involved in reaching the diagnosis
- NB: IT IS A COMPLEX PROCESS
 - ◆ Intraoperative consultation
 - ◆ Grossing of the specimen
 - ◆ Microscopic evaluation
 - ◆ 1 case: from 3 up to 50 glass slides
 - ◆ Immunohistochemical stains
- Other: Flow Cytometry, Genetics ,Tissue Culture etc.

Evolution of Role

- Increasing technological complexity:
 - ◆ Assessment of tissue no longer solely by microscopy
- Increased reliance of therapy on information provided by Pathologist's assessment

Pathologist and Cancer Patient



Pathology Issues in NL

- Work Load
- Recruitment
- Retention

Work Load Per Center

Hospital (# pathologists)		Number of cases (surgeries)	Cytology	Autopsies (hospital)	Autopsies (forensic)
HCC	17	26988	5564	81	200
Car.	1	2000	0	10	12
CI	2	3500	255	4	17
GF	1	5000	150	10	20
Gnd	2	5128	95	11	23
St. A	1	2100	450	9	11
C.Brk	5	9500	3338	20	80
Total	29	54216	9852	145	363

Recruitment pressures over next 2 years

- 4 retirements over next 2 years
 - ◆ 3 of 4 have 20+ years in HCC service
- 3 current openings
- Retirements
- Potential for others to leave due to poor compensation

Current Manpower

- Canadian Association of Pathologists:
 - ◆ Over 1/3 of practicing Pathologists over 55 years of age
- National Physician Survey 2004:
 - ◆ Over 10% of workforce faces imminent retirement in next 2 years

Our Current Recruiting Efforts

- NO Canadian Applicants
- Mostly J1 Visa Applicants
 - ◆ Restricted license (no FRCPC)
 - ◆ Transient (short length of stay)
 - ◆ No Memorial Medical School Applicants to Lab Medicine since 1998

Remuneration

■ What Laboratory Physicians earn:

◆ NS :	248,935
◆ NB:	200,533
◆ NL:	184,285
◆ PEI:	202,500

■ Canadian Avrg: 261,135

- Source: Canadian Association of Pathologist National Survey 2004

Remuneration

- How Pathologists compare:
 - ◆ Pathologists earn about 1/3 less than other diagnostic specialists
 - ◆ Secondary income compared to other specialists is much lower

Concluding points

- Our compliment is under pressure due to:
 - ◆ Retirements
 - ◆ Steady decline in number of medical graduates entering laboratory medicine programs (i.e..Memorial no applicants since 1998)
 - ◆ Poor compensation

Addressing the Issues

- Promotion of Laboratory Medicine and exposure during undergraduate training
- Compulsory exposure to laboratory medicine in the training of clinical specialists
- Flexibility to transfer to laboratory medicine during residency training
- Emphasize the role of laboratory medicine in clinical practice.

Addressing the Issues (cont'd)

- Through compensation:
 - ◆ Competitive remuneration
 - ◆ Salary comparable to Atlantic provinces
 - ◆ Introduce stipend
 - ◆ Increase CME benefits
 - ◆ Re-evaluate payments for on-call coverage
 - ◆ Re-evaluate the extra work-load compensation policy: reward those taking an extra work-load.

Addressing the Issues (cont'd)

- Compensation and working conditions at least comparable to other specialists with similar training and experience
- Enhance supporting staff (such as pathology assistants) and technology
- Prevent consequences of “burn out” pathologists by ability of re-distribution of case –work load