Does salary motivate the choice of location for residency programs?

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Each year after the Canadian Resident Matching Service (CaRMS) has run both iterations of the medical post-graduate match, it distributes a survey to all graduating medical students. Questions on this survey range from satisfaction with the CaRMS match to motivations behind career choices. The 1996 survey (available from CaRMS, 151 Slater Street, Suite 802, Ottawa, ON, K1P 5H3) results show that 55% of graduating medical students listed income potential as at least a minor influence on choice of career. Likewise, 35.8% of graduating medical students listed level of educational debt as at least a minor influence on choice of career. Clearly, financial considerations are taken seriously by graduating medical students. These numbers, however, should come as no surprise to anyone who has observed the increasing financial demands on medical students in recent years (the tuition at Dalhousie Medical School was $5,715 last year). “How long will I be stuck with these loans?” is a question frequently asked, as many medical students are graduating with student loans in excess of $50,000.

Unfortunately, the financial situation for residents often worsens before it gets better. Residents are charged interest on the federal portion of their student loans the month after graduation from medical school—before they have received their first salary cheque. Interest on provincial student loans begins six months later and, of course, interest on personal lines of credit (student loans alone are often inadequate to pay for medical school) has been accumulating all along. In addition, new residents must pay CMPA dues, licensing dues, tuition, moving expenses, and, in some provinces, health insurance. With all of these financial com

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Table 1: First year (PGY1) salaries based on Provincial Residents Contracts. Data is taken from the 1997/98 CaRMS program directory (available at http://www.cma.ca) and rounded to the nearest dollar.

<table>
<thead>
<tr>
<th>Province</th>
<th>Salary($)</th>
<th>Tuition($)</th>
<th>Salary-Tuition($)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Newfoundland</td>
<td>30,176</td>
<td>505</td>
<td>29,671</td>
</tr>
<tr>
<td>Nova Scotia</td>
<td>29,613</td>
<td>1,450</td>
<td>28,163</td>
</tr>
<tr>
<td>Quebec</td>
<td>33,596</td>
<td>2,993</td>
<td>30,603</td>
</tr>
<tr>
<td>Ontario</td>
<td>37,974</td>
<td>190</td>
<td>37,784</td>
</tr>
<tr>
<td>Manitoba</td>
<td>30,417</td>
<td>534</td>
<td>29,883</td>
</tr>
<tr>
<td>Saskatchewan</td>
<td>31,735</td>
<td>2,417</td>
<td>29,318</td>
</tr>
<tr>
<td>Alberta</td>
<td>30,556</td>
<td>515*</td>
<td>30,041</td>
</tr>
<tr>
<td>British Columbia</td>
<td>37,658</td>
<td>286</td>
<td>37,372</td>
</tr>
</tbody>
</table>

*rough average, the actual numbers are University of Alberta $507, University of Calgary $524

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mitments, many medical students are forced to consider salary in their decision regarding not only choice of speciality but also in residency location. This is because there is presently a wide discrepancy in residents' salaries depending on the province in which the medical school is located. Table 1 shows that Nova Scotia has the lowest resident salary of any province in Canada, over $1000 lower than the next lowest (Saskatchewan) and nearly $10,000 lower than Ontario. To put this into perspective, over a five year residency program, the difference in gross salary minus tuition between Nova Scotia and Ontario is close to $50,000, or the amount of loan held by many medical students. Is this difference enough to influence the choices made by residency applicants? Interestingly, the CaRMS post-match survey does not ask if residency salary is a motivation in choice of residency location. I suspect, however, that of the third of medical students who stated that educational debt was a motivation for career choice on the CaRMS post match survey, many of these students would also consider the ability to repay debt during residency as an important consideration as well.

Although wage parity across Canada is unlikely to occur anytime in the foreseeable future, it would serve to eliminate an unfortunate consideration for graduating medical students and would help medical schools to compete fairly for the top graduates.

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