



ORTHOPAEDIC PRACTICE IN THE U.S. 2014

**AAOS Department of Research
and Scientific Affairs**

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I. EXECUTIVE SUMMARY

- 1) The AAOS has conducted an Orthopaedic Surgeon Census biennially since 1985 to update surgeon and practice information in the AAOS database. Information in this report is based on the most recent census of 28,047 orthopaedists on record with the AAOS at the time of the census.
- 2) Wyoming, Montana, New Hampshire, Vermont, and South Dakota have the highest density of orthopaedic surgeons (more than 11 per 100,000 population). Mississippi, Texas, Arkansas, West Virginia, and Michigan have the lowest surgeon density (7 or below per 100,000 population).
- 3) The average age of practicing orthopaedists is 54.76 years. The AAOS membership is made up of 92.1% male and 5.0% female (2.9% did not indicate their gender).
- 4) The primary reported race was Caucasian (88.0%), followed by Asian (5.2%).
- 5) The orthopaedic workforce is made up of 89.5% employed full-time, and 10.5% part-time.
- 6) The largest proportion of respondents practice in private practice – orthopaedic group setting (35%), with an additional 15% each in private practice – solo setting and hospital/medical center.
- 7) Fifty-four percent of respondents are specialist, 26.9% are general orthopaedic surgeons with specialty interest, and 19.6% are generalists.
- 8) The three most-frequently cited primary areas of practice are sports medicine (15.8%), hand (10.8%), and total joint (10.4%).
- 9) Overall, orthopaedists perform an average of 29 procedures per month, with full-time orthopaedists performing 32 procedures per month, and part-timers performing 6 procedures per month.

II. INTRODUCTION

This Orthopaedic Practice in the US (OPUS) report is 15th in a series produced by the American Academy of Orthopaedic Surgeons (AAOS) to focus on the orthopaedic workforce and practice characteristics in the United States. Information in this report is based on the most recent orthopaedic physician census of 28,047 orthopaedists on record with the AAOS at the time of the census.

III. METHODOLOGY

The 2014 AAOS Orthopaedic Physician Census was administered, processed, and analyzed by the AAOS Department of Research and Scientific Affairs. Orthopaedists with email addresses and fax numbers on file were contacted to complete the Census online on April 1st. Hard copy questionnaires were sent via post office mail to non-respondents on April 10th. Non respondents were sent email, fax, and hard copy reminders. In addition to individual reminders, an article was included in *AAOS Headline News Now*, providing information on the importance of collecting the Census information, methods of response, and how the data are used to benefit members.

Data collection concluded on June 30th with responses from 6,805 orthopaedists. This represents 24.26% of the 28,047 candidate member practitioners, applicants for fellowship, non-member practitioners, fellows, associate members, and emeritus orthopaedists who received the survey. The 2014 Orthopaedic Practice in the US Report is based on data collected in 2014 from 6,805 orthopaedic surgeons practicing in the United States, its territories, and the United States Military overseas. Response rate by member group is shown below.

Response Rate

	Invited to answer the 2014 Census	Responded to the 2014 Census	Response Rate
(3)-Candidate Member Practitioner	1651	466	28.23%
(4)-Candidate Mem Prac Appl for Fellowship	452	156	34.51%
(5)-Applicant for Fellowship	56	12	21.43%
(6)-Other NONMEMBER Practitioner	2540	287	11.30%
(7)-Active Fellow	18021	4425	24.55%
(7AO)-Associate Member Orthopaedic	80	25	31.25%
(7DO)-Associate Member Osteopathic	437	98	22.43%
(8)-Emeritus Fellow	4810	1336	27.78%
Total	28047	6805	24.26%

When respondents skipped over certain questions, it was possible to infer the response based on their answer to other questions. For example, if the orthopaedic surgeon indicated a retirement age but failed to mark “retired” on the data collection form, their work status of “retired” was inferred.

Age is backfilled from known date of birth information in AAOS records.

Basic demographic frequencies for all questions discussed in this report are available upon request from the AAOS Research and Scientific Affairs Department¹. The questionnaire used in the 2014 AAOS Orthopaedic Physician Census can be found in Appendix A.

Although the census was distributed to the full population of orthopaedic surgeons, all active orthopaedists did not complete the census information. Therefore, we provide 95% confidence intervals (CIs) for data reported to indicate the uncertainty in estimates based on responses submitted. (CIs indicate that if the study were repeated 100 times, 95% of the time, the true value will fall within the interval provided.) Confidence interval values and full detailed data tables are available upon request from the AAOS Research and Scientific Affairs Department¹. CIs are not provided in Section IV as these data are for the full population of AAOS active orthopaedic surgeons and not based on a subsample.

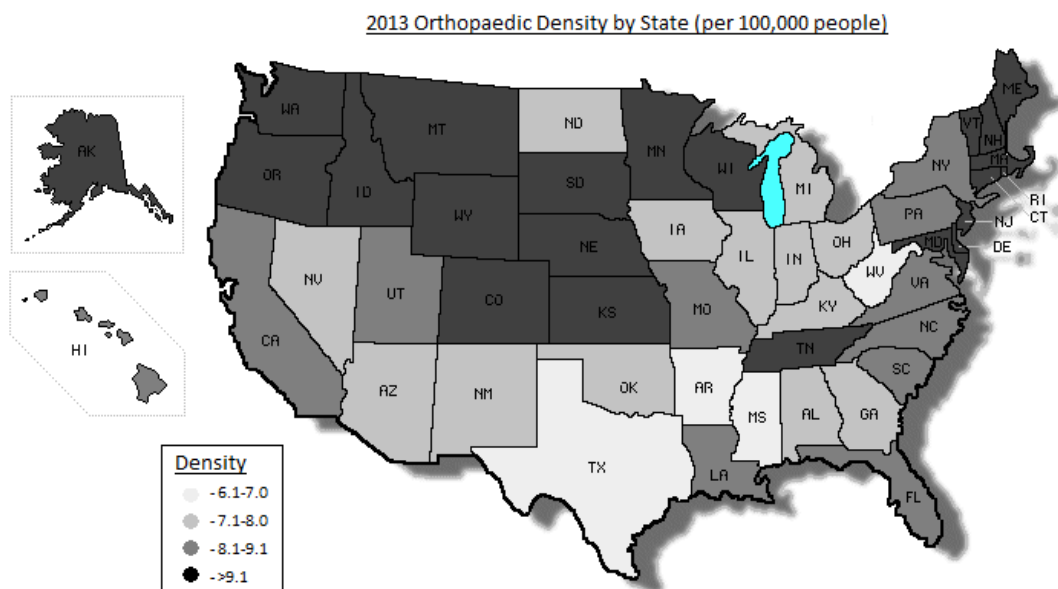
SPSS version 21.0 was used for data analysis. T-tests and analyses of variance (ANOVAs) were conducted to analyze differences in means and Chi-Square Tests for percentage across groups.

¹Contact the AAOS Research and Scientific Affairs Department

IV. ORTHOPAEDIC SURGEON DENSITY

The following information describes the population of US orthopaedic surgeons per 100,000 by state. Orthopaedic surgeons are defined as “practicing orthopaedists in the following AAOS membership categories: Candidate Member Practitioners (CMP’s), CMP fellow applicants, applicants for fellowship, fellows, non-member practitioners, associate members, and emeritus fellows.” The 2013 density of orthopaedic surgeons in the US is 8.51 per 100,000 population.

Figure 1 - Orthopaedic Density by State



Source: diymaps.net (c)

Wyoming, Montana, New Hampshire, Vermont, and South Dakota have the highest density of orthopaedic surgeons (more than 11 per 100,000 population). Mississippi, Texas, Arkansas, West Virginia, and Michigan have the lowest surgeon density (7 or below per 100,000 population).

Figure 2 - States with Highest and Lowest Surgeon Densities

Highest Density States				Lowest Density States			
State	US Population 2013*	# of Ortho Surgeons in 2014	2014 Ortho Surgeon Density	State	US Population 2013*	# of Ortho Surgeons in 2014	2014 Ortho Surgeon Density
Wyoming	582,658	79	13.56	Mississippi	2,991,207	191	6.39
Montana	1,015,165	136	13.40	Texas	26,448,193	1769	6.69
New Hampshire	1,323,459	177	13.37	Arkansas	2,959,373	201	6.79
Vermont	626,630	80	12.77	West Virginia	1,854,304	131	7.06
South Dakota	844,877	97	11.48	Michigan	9,895,622	715	7.23

*Orthopaedic surgeon density is calculated using the most recent population estimates from the US Census Bureau, 2013.

Figure 3 - Surgeon Density per 100,000 US Population

State	US Population 2013*	# of Practicing Ortho Surgeons	2014 Ortho Surgeon Density
Alabama	4,833,722	383	7.92
Alaska	735,132	84	11.43
Arizona	6,626,624	534	8.06
Arkansas	2,959,373	201	6.79
California	38,332,521	3191	8.32
Colorado	5,268,367	578	10.97
Connecticut	3,596,080	406	11.29
Delaware	925,749	87	9.40
District of Columbia	646,449	74	11.45
Florida	19,552,860	1682	8.60
Georgia	9,992,167	740	7.41
Hawaii	1,404,054	118	8.40
Idaho	1,612,136	174	10.79
Illinois	12,882,135	994	7.72
Indiana	6,570,902	528	8.04
Iowa	3,090,416	235	7.60
Kansas	2,893,957	267	9.23
Kentucky	4,395,295	345	7.85
Louisiana	4,625,470	407	8.80
Maine	1,328,302	147	11.07
Maryland	5,928,814	617	10.41
Massachusetts	6,692,824	703	10.50
Michigan	9,895,622	715	7.23
Minnesota	5,420,380	510	9.41
Mississippi	2,991,207	191	6.39
Missouri	6,044,171	491	8.12

State	US Population 2013*	# of Practicing Ortho Surgeons	2014 Ortho Surgeon Density
Montana	1,015,165	136	13.40
Nebraska	1,868,516	180	9.63
Nevada	2,790,136	202	7.24
New Hampshire	1,323,459	177	13.37
New Jersey	8,899,339	817	9.18
New Mexico	2,085,287	166	7.96
New York	19,651,127	1647	8.38
North Carolina	9,848,060	855	8.68
North Dakota	723,393	57	7.88
Ohio	11,570,808	935	8.08
Oklahoma	3,850,568	283	7.35
Oregon	3,930,065	438	11.14
Pennsylvania	12,773,801	1122	8.78
Rhode Island	1,051,511	117	11.13
South Carolina	4,774,839	412	8.63
South Dakota	844,877	97	11.48
Tennessee	6,495,978	605	9.31
Texas	26,448,193	1769	6.69
Utah	2,900,872	259	8.93
Vermont	626,630	80	12.77
Virginia	8,260,405	718	8.69
Washington	6,971,406	686	9.84
West Virginia	1,854,304	131	7.06
Wisconsin	5,742,713	544	9.47
Wyoming	582,658	79	13.56
TOTAL	316,128,839	26914	8.51

*Population estimates from the US Census Bureau, 2013

DENSITY BY REGION

Orthopaedic surgeon density was compared across US Census regions. (See Appendix VII for US Census region listing). Overall, New England states have the highest density of orthopaedic surgeons (11.15 per 100,000 population). The West South Central region has the lowest density of orthopaedic surgeons (7.02 per 100,000 population).

Figure 4 - Density of Orthopaedic Surgeons per 100,000 Population by Region

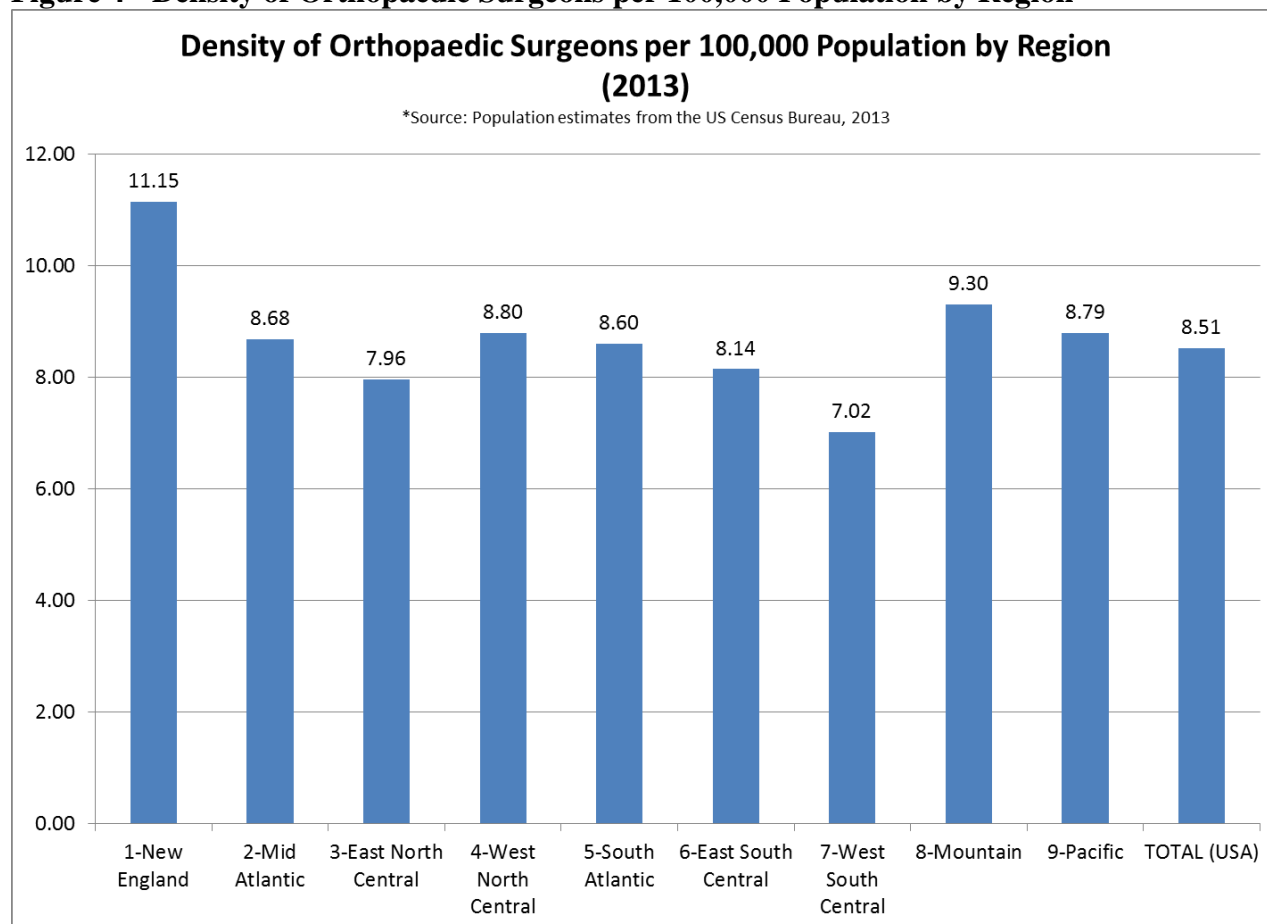


Figure 5 - Orthopaedic Density by Region

Region Name	Population sum (in region)*	Surgeon sum (in region)	Surgeon density per 100,000 people (in region)
1-New England	14,618,806	1630	11.15
2-Mid Atlantic	41,324,267	3586	8.68
3-East North Central	46,662,180	3716	7.96
4-West North Central	20,885,710	1837	8.80
5-South Atlantic	61,783,647	5316	8.60
6-East South Central	18,716,202	1524	8.14
7-West South Central	37,883,604	2660	7.02
8-Mountain	22,881,245	2128	9.30
9-Pacific	51,373,178	4517	8.79
TOTAL (USA)	316,128,839	26914	8.51

*Population estimates from the US Census Bureau, 2013

AVERAGE AGE BY STATE

The average age of practicing orthopaedists is 54.76 years (including CMPs, CMP fellow applicants, applicants for fellowship, fellows, associate members, non-member practitioners, and emeritus fellows who indicated an active work status).

Figure 6 - Average Age of Orthopaedic Surgeons by State

State	Mean Age	State	Mean Age
Total	54.76	27-Montana	55.21
1-Alabama	55.10	28-Nebraska	53.12
2-Alaska	54.82	29-Nevada	54.90
3-Arizona	54.67	30-New Hampshire	53.95
4-Arkansas	53.22	31-New Jersey	54.34
5-California	56.82	32-New Mexico	58.08
6-Colorado	53.94	33-New York	55.16
7-Connecticut	55.68	34-North Carolina	53.67
8-Delaware	56.27	35-North Dakota	51.96
9-District of Columbia	54.57	36-Ohio	53.36
10-Florida	56.64	37-Oklahoma	54.42
11-Georgia	53.24	38-Oregon	56.49
12-Hawaii	53.94	39-Pennsylvania	54.56
13-Idaho	55.98	40-Rhode Island	57.02
14-Illinois	53.32	41-South Carolina	55.04
15-Indiana	53.45	42-South Dakota	50.54
16-Iowa	53.38	43-Tennessee	54.22
17-Kansas	53.55	44-Texas	53.71
18-Kentucky	53.89	45-Utah	53.41
19-Louisiana	54.09	46-Vermont	57.23
20-Maine	57.22	47-Virginia	54.05
21-Maryland	54.52	48-Washington	55.71
22-Massachusetts	56.00	49-West Virginia	55.10
23-Michigan	54.20	50-Wisconsin	54.34
24-Minnesota	53.15	51-Wyoming	52.12
25-Mississippi	54.20		
26-Missouri	52.83		

GENDER BY STATE

The AAOS membership is made up of 92.1% male and 5.0% female (2.9% did not indicate their gender). States with the largest proportions of female members are Vermont (12.5%), Minnesota (9.4%), District of Columbia (8.1%), Montana (8.1%), and Oregon (8.0%). A list of gender by state is provided below.

Figure 7 - Percentage of Gender by State

	Male	Male %	Female	Female %	Did not indicate	Did not indicate %	TOTAL
TOTAL	24,798	92.1%	1,337	5.0%	779	2.9%	26,914
1-Alabama	358	93.5%	13	3.4%	12	3.1%	383
2-Alaska	77	91.7%	5	6.0%	2	2.4%	84
3-Arizona	483	90.4%	26	4.9%	25	4.7%	534
4-Arkansas	189	94.0%	8	4.0%	4	2.0%	201
5-California	2899	90.8%	181	5.7%	111	3.5%	3,191
6-Colorado	521	90.1%	45	7.8%	12	2.1%	578
7-Connecticut	363	89.4%	24	5.9%	19	4.7%	406
8-Delaware	79	90.8%	3	3.4%	5	5.7%	87
9-District of Columbia	67	90.5%	6	8.1%	1	1.4%	74
10-Florida	1568	93.2%	61	3.6%	53	3.2%	1,682
11-Georgia	694	93.8%	30	4.1%	16	2.2%	740
12-Hawaii	109	92.4%	5	4.2%	4	3.4%	118
13-Idaho	170	97.7%	2	1.1%	2	1.1%	174
14-Illinois	914	92.0%	48	4.8%	32	3.2%	994
15-Indiana	502	95.1%	14	2.7%	12	2.3%	528
16-Iowa	220	93.6%	12	5.1%	3	1.3%	235
17-Kansas	250	93.6%	11	4.1%	6	2.2%	267
18-Kentucky	314	91.0%	14	4.1%	17	4.9%	345
19-Louisiana	380	93.4%	19	4.7%	8	2.0%	407
20-Maine	134	91.2%	11	7.5%	2	1.4%	147
21-Maryland	559	90.6%	42	6.8%	16	2.6%	617
22-Massachusetts	628	89.3%	51	7.3%	24	3.4%	703
23-Michigan	652	91.2%	43	6.0%	20	2.8%	715
24-Minnesota	453	88.8%	48	9.4%	9	1.8%	510
25-Mississippi	180	94.2%	7	3.7%	4	2.1%	191
26-Missouri	445	90.6%	33	6.7%	13	2.6%	491

	Male	Male %	Female	Female %	Did not indicate	Did not indicate %	TOTAL
27-Montana	122	89.7%	11	8.1%	3	2.2%	136
28-Nebraska	171	95.0%	7	3.9%	2	1.1%	180
29-Nevada	189	93.6%	5	2.5%	8	4.0%	202
30-New Hampshire	162	91.5%	10	5.6%	5	2.8%	177
31-New Jersey	753	92.2%	35	4.3%	29	3.5%	817
32-New Mexico	149	89.8%	13	7.8%	4	2.4%	166
33-New York	1511	91.7%	83	5.0%	53	3.2%	1,647
34-North Carolina	802	93.8%	31	3.6%	22	2.6%	855
35-North Dakota	53	93.0%	3	5.3%	1	1.8%	57
36-Ohio	873	93.4%	36	3.9%	26	2.8%	935
37-Oklahoma	269	95.1%	10	3.5%	4	1.4%	283
38-Oregon	392	89.5%	35	8.0%	11	2.5%	438
39-Pennsylvania	1052	93.8%	43	3.8%	27	2.4%	1,122
40-Rhode Island	111	94.9%	3	2.6%	3	2.6%	117
41-South Carolina	396	96.1%	6	1.5%	10	2.4%	412
42-South Dakota	91	93.8%	2	2.1%	4	4.1%	97
43-Tennessee	573	94.7%	21	3.5%	11	1.8%	605
44-Texas	1632	92.3%	80	4.5%	57	3.2%	1,769
45-Utah	245	94.6%	9	3.5%	5	1.9%	259
46-Vermont	67	83.8%	10	12.5%	3	3.8%	80
47-Virginia	645	89.8%	44	6.1%	29	4.0%	718
48-Washington	620	90.4%	51	7.4%	15	2.2%	686
49-West Virginia	122	93.1%	5	3.8%	4	3.1%	131
50-Wisconsin	519	95.4%	18	3.3%	7	1.3%	544
51-Wyoming	71	89.9%	4	5.1%	4	5.1%	79

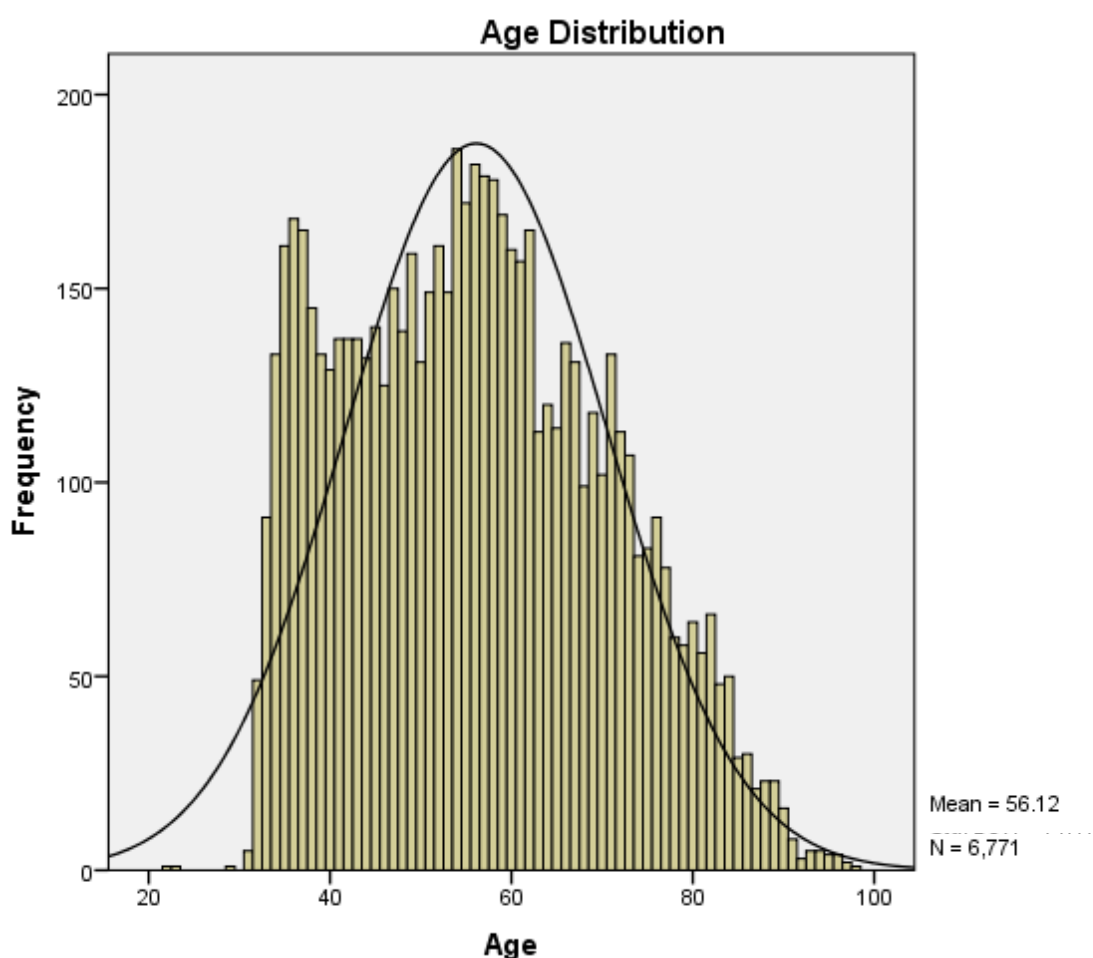
V. PRACTICING ORTHOPAEDIC SURGEON CHARACTERISTICS

Information in this section is based on the 2014 AAOS Orthopaedic Physician Census respondents from the following membership categories: Candidate Member Practitioners (CMP's), CMP fellow applicants, applicants for fellowship, fellows, associate members, non-member practitioners, and emeritus fellows.

AGE OF CENSUS RESPONDENTS

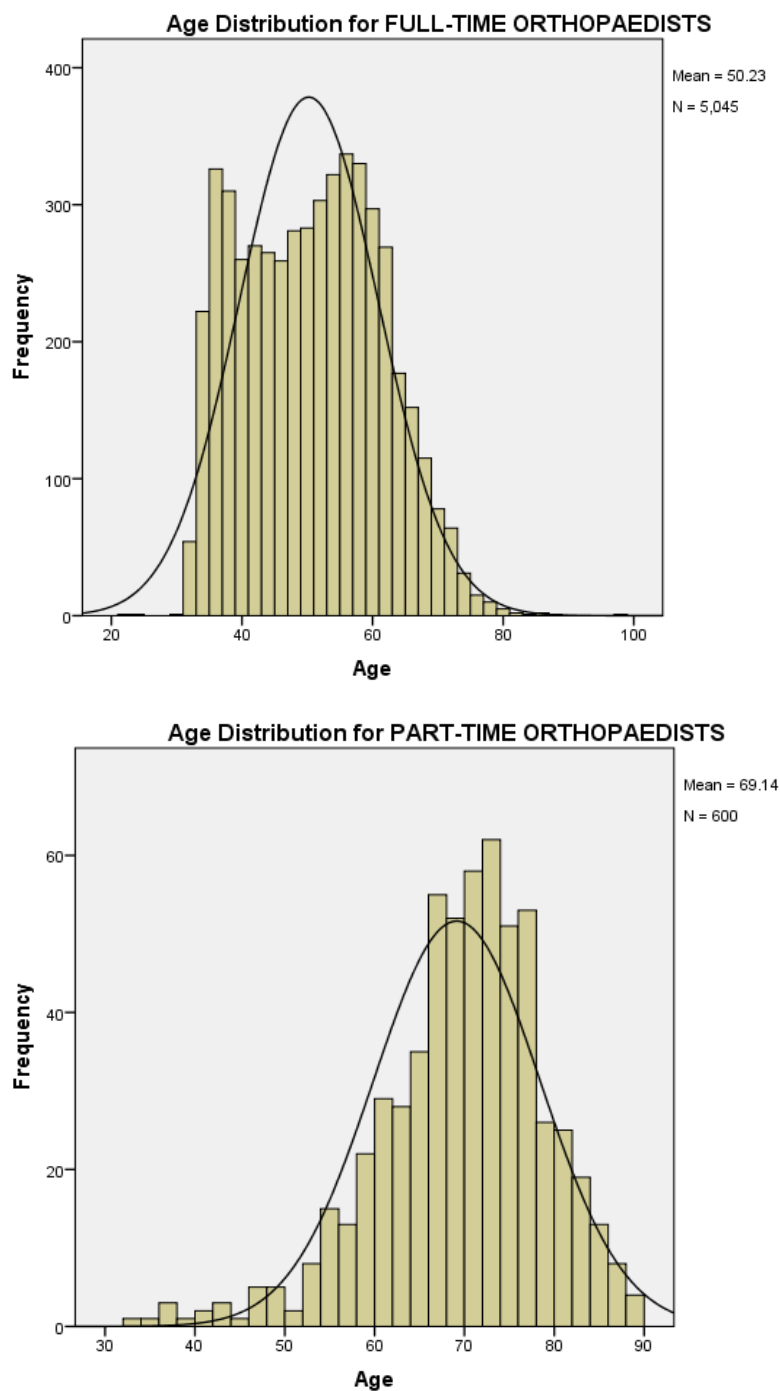
The average age of respondents is 56.12 years. The median age (50th percentile or midpoint) is 55 years. The mean age of responding orthopaedists is slightly lower than the population of non-member practitioners and emeritus fellows. Ages range from 22 to 98 years old.

Figure 8 - Age Distribution of Census Respondents



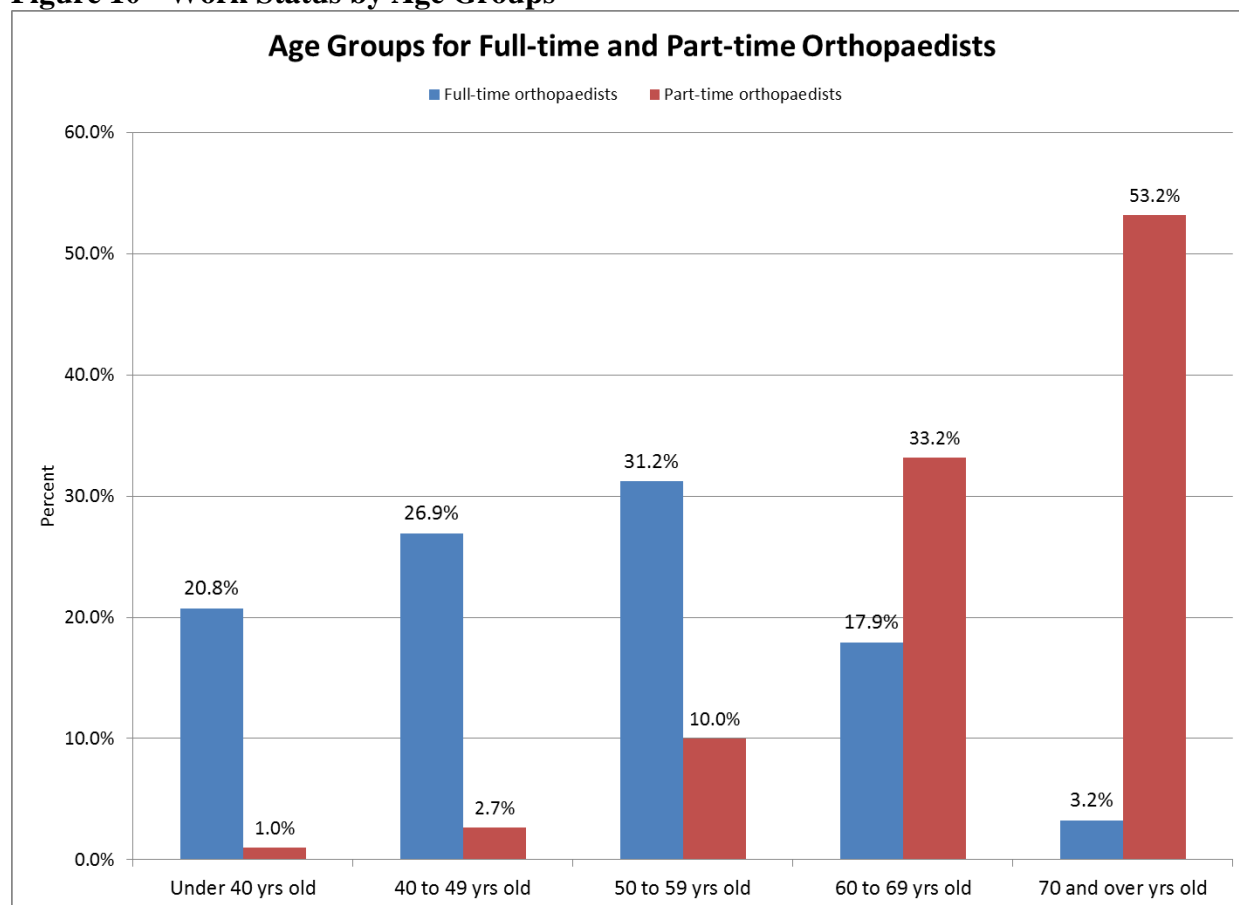
Mean age differs by work status. The mean age for full-time orthopaedists is 50.23 years old compared to the mean age of part-time orthopaedists, 69.14 years old. Figure 9 illustrates the difference in age distribution for full-time and part-time orthopaedists.

Figure 9 - Age Distribution by Work Status



The majority of full-time orthopaedists (78.9%) are under the age of 60, while the majority of part-time orthopaedists (86.4%) are over the age of 60. Differences are significant.

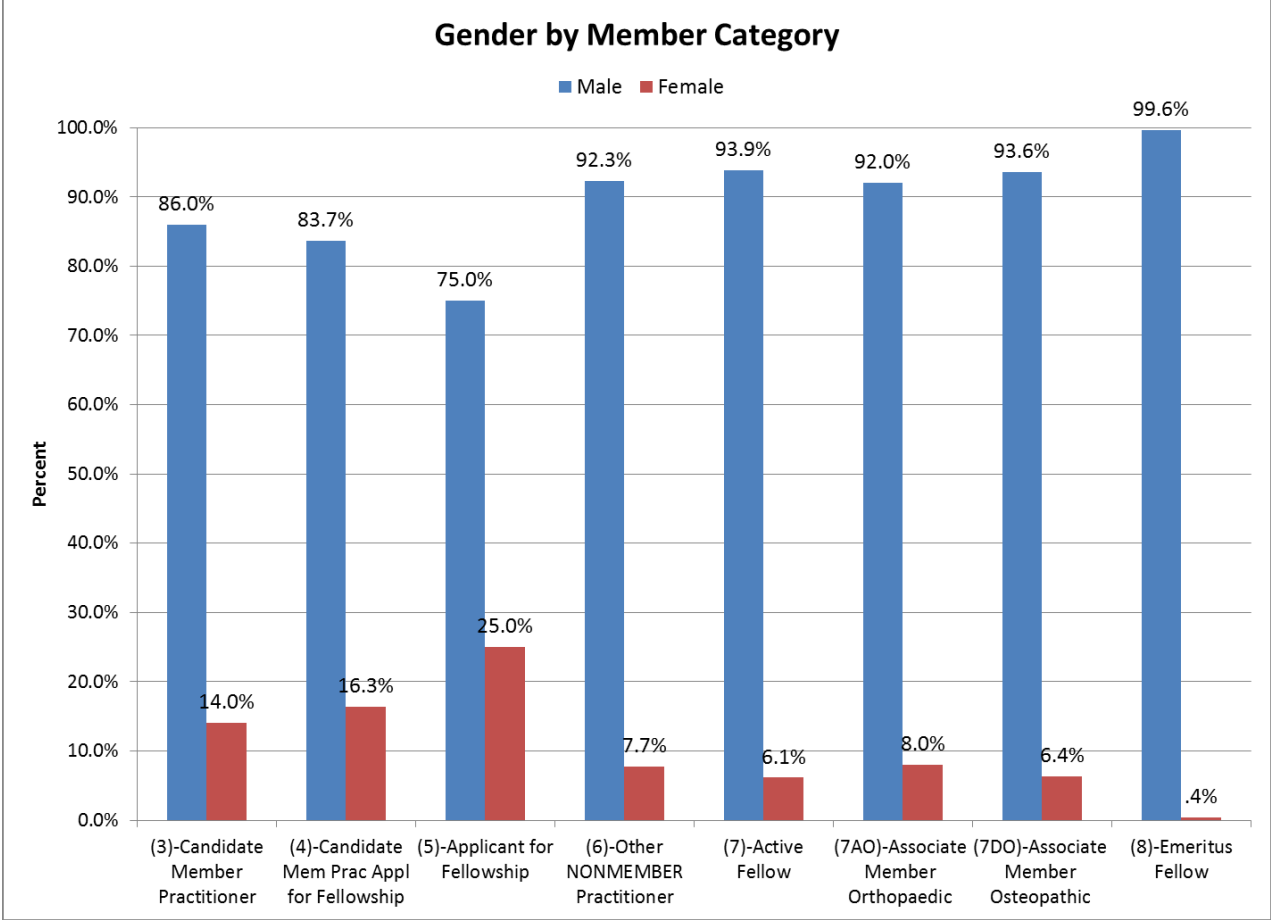
Figure 10 - Work Status by Age Groups



GENDER

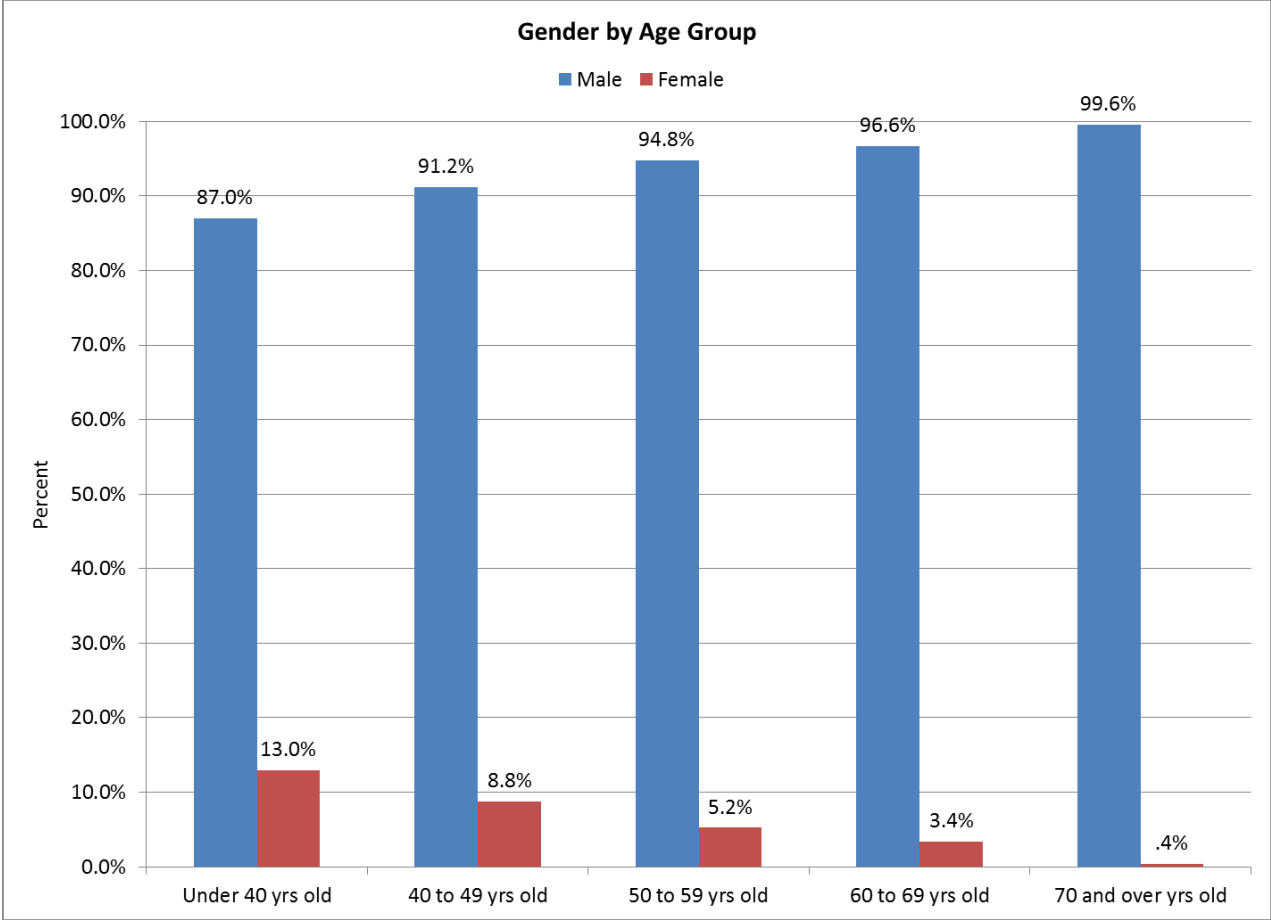
Respondents were composed of 90.1% males, and 5.7% females (4.2% did not indicate their gender). There is a significant difference between males and females in all member categories.

Figure 11 - Gender by Member Category



Gender also varies by age group, with a larger proportion of females under the age of 49 than in age group 50 years old and older. Few orthopaedists over the age of 60 are female.

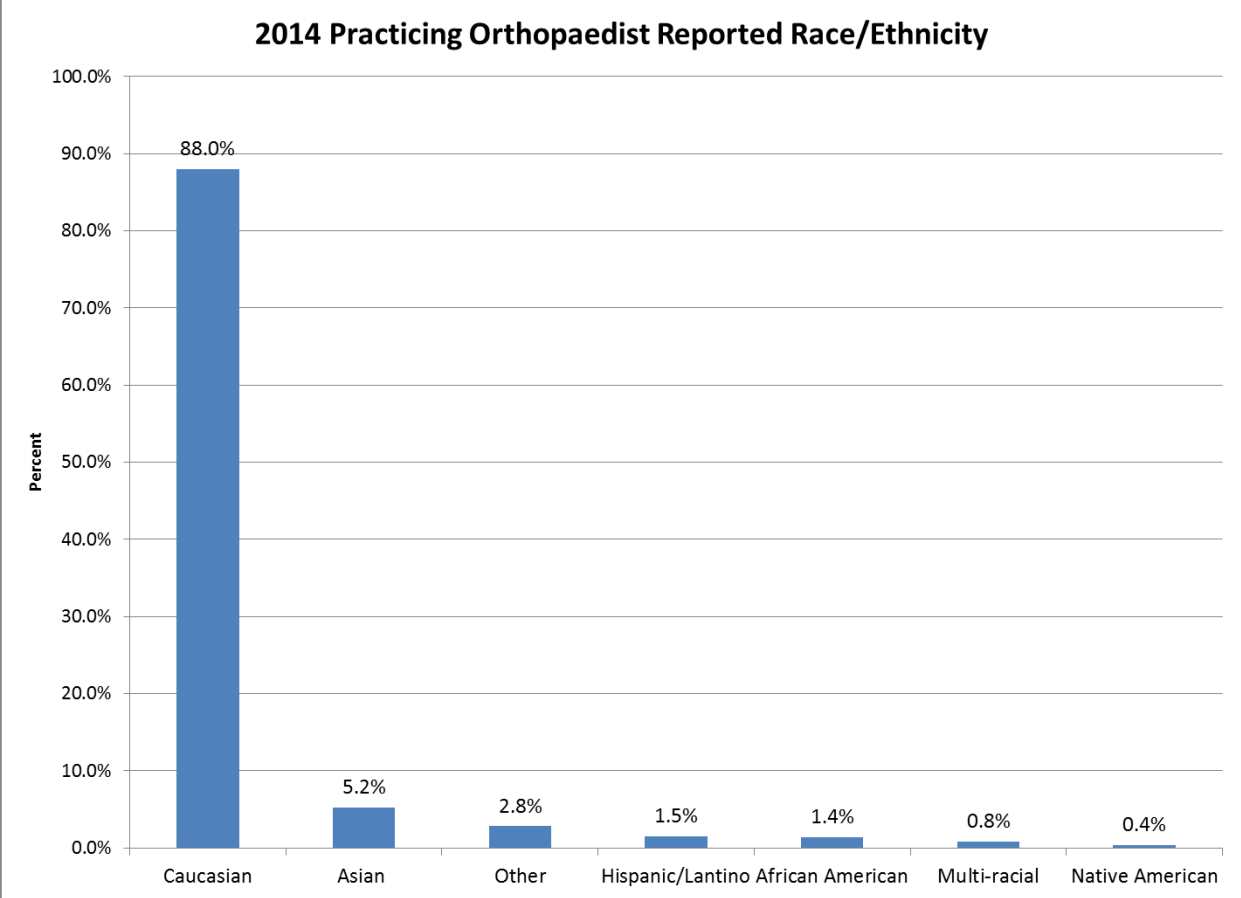
Figure 12 - Gender by Age Group



RACE/ETHNICITY

Ninety-nine percent of respondents provided race information. The primary reported race was Caucasian (88.0%), followed by Asian (5.2%). Less than 2% indicated African American, Hispanic/Latino, Native American, and Multi-racial. A full list of “other” race/ethnicity is found in Appendix C, Table 1.

Figure 13 - Orthopaedists Race/Ethnicity



RACE/ETHNICITY BY GENDER

Statistically significant differences were found in reported race between male and female orthopaedists. Differences were found between male and female Caucasians (88.4% and 81.0% respectively).

Figure 14 - Race by Gender

	Male (N=6109)	Female (N=389)
	Valid Percent	Valid Percent
Caucasian	88.4%	81.0%
African American	1.3%	2.6%
Hispanic/Latino	1.5%	3.3%
Asian	5.2%	8.0%
Native American	.3%	.8%
Multi-racial	.8%	.8%
Other	2.7%	3.6%

RACE/ETHNICITY BY AGE GROUP

Significant differences were found in reported race/ethnicity by age group. Overall, Caucasians make up the majority of the orthopaedic workforce in all age groups. Caucasians (81.2%) lead in the number of people entering the orthopaedic workforce, followed by Asians (9.5%). Less than 10% of people entering the orthopaedic workforce are made up of African American, Hispanic/Latino, Native American, Multi-racial, and “other” combined.

Figure 15 - Race by Age Group

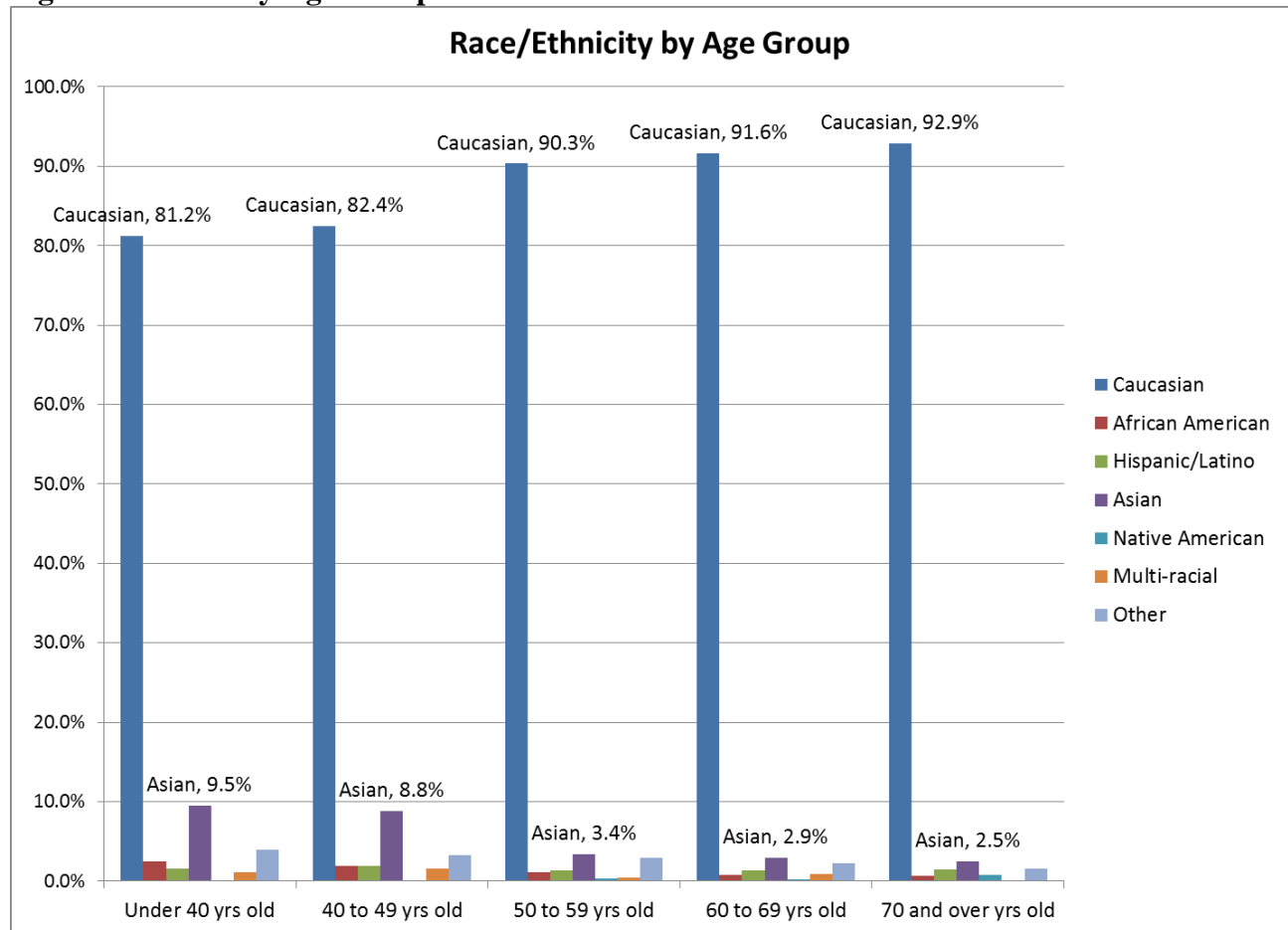


Figure 16 - Table for Race by Age Group

	Under 40 yrs old	40 to 49 yrs old	50 to 59 yrs old	60 to 69 yrs old	70 and over yrs old
Caucasian	81.2%	82.4%	90.3%	91.6%	92.9%
African American	2.5%	2.0%	1.1%	.8%	.7%
Hispanic/Latino	1.6%	1.9%	1.4%	1.3%	1.4%
Asian	9.5%	8.8%	3.4%	2.9%	2.5%
Native American	.1%	.1%	.4%	.2%	.8%
Multi-racial	1.1%	1.5%	.5%	.8%	.2%
Other	3.9%	3.3%	2.9%	2.3%	1.6%

ORTHOPAEDIC SOCIETY MEMBERSHIP

Orthopaedists were asked to indicate their membership status in four organizations: *American College of Surgeons*, *American Medical Association*, *State Medical Society*, and *State Orthopaedic Society*. Seventy-six percent of respondents marked at least one of these organizations. State Orthopaedic Society (83.8%) had the most members, followed by State Medical Society (65.9%), American Medical Association (31.3%), and American College of Surgeons (18.9%).

Figure 17 - Membership in Orthopaedic Societies

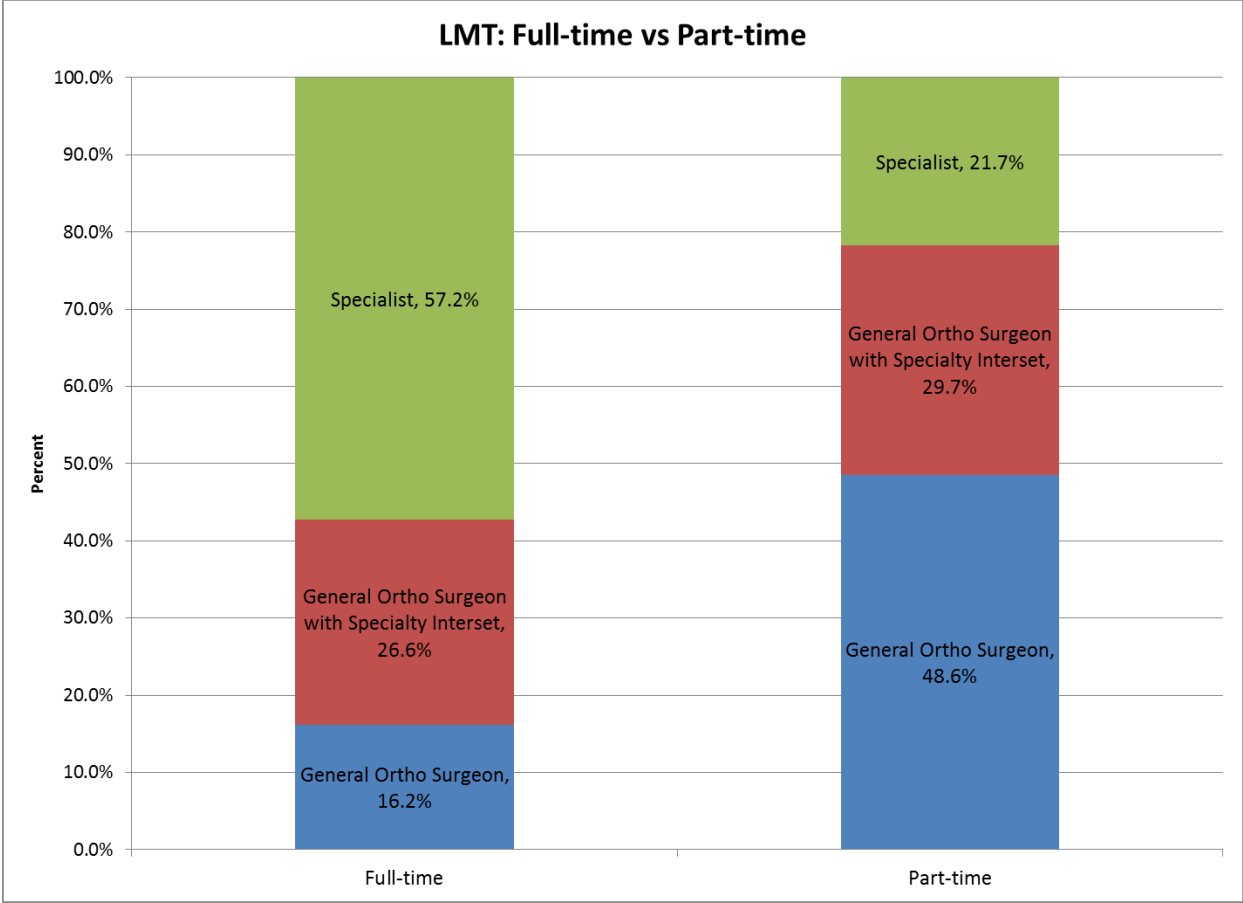
Indicate your membership in the following organizations (N=5188)

	Frequency	Valid Percent
American College of Surgeons	846	18.9
American Medical Association	1425	31.3
State Medical Society	3206	65.9
State Orthopaedic Society	4125	83.8

WORK STATUS

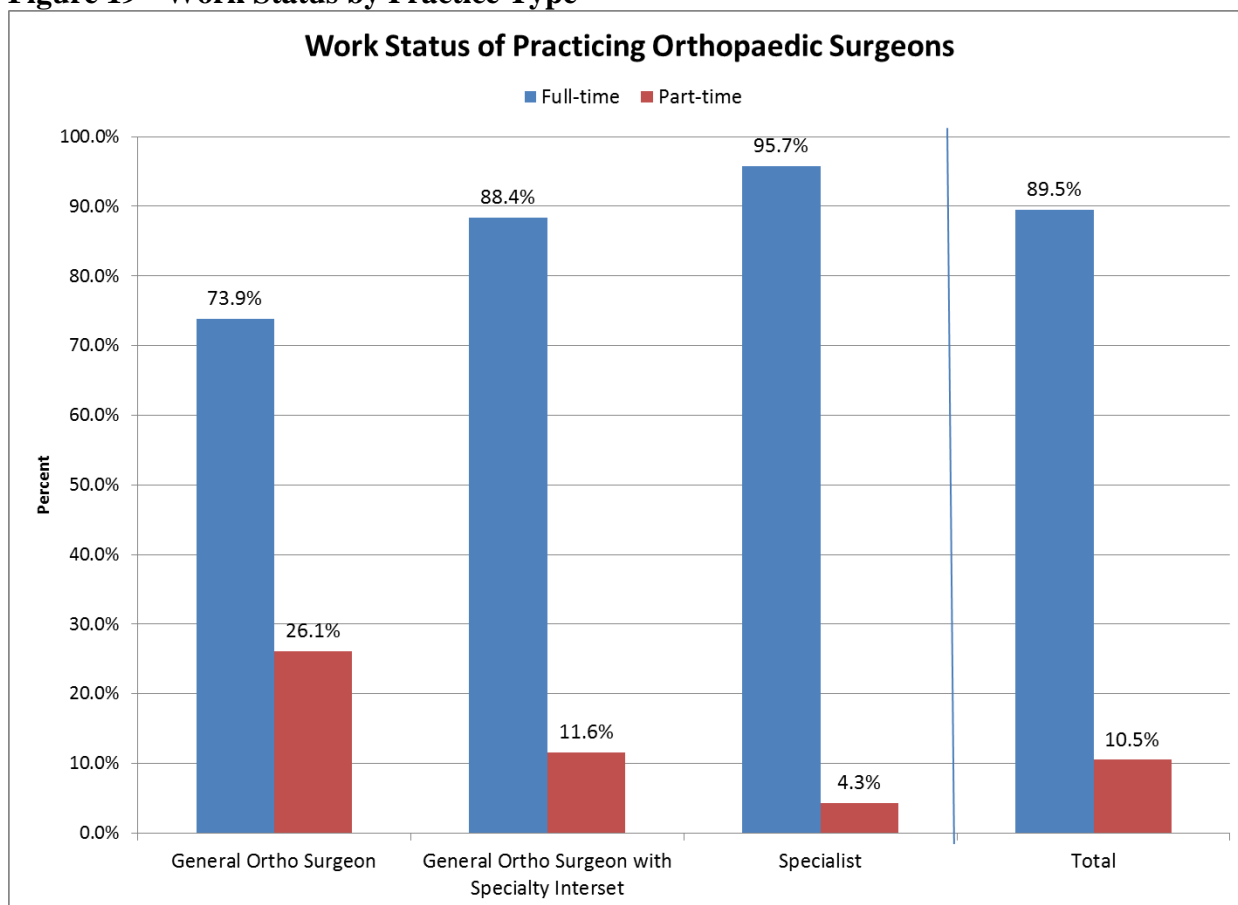
The orthopaedic workforce is made up of 89.5% employed full-time, and 10.5% part-time. Full-time orthopaedists are mostly specialists (57.2%), while part-time orthopaedists are mostly general orthopaedic surgeons (48.6%).

Figure 18 - Practice Setting: Full-time vs Part-time Orthopaedists



There is a significant difference between full-time and part-time orthopaedists in terms of practice type.

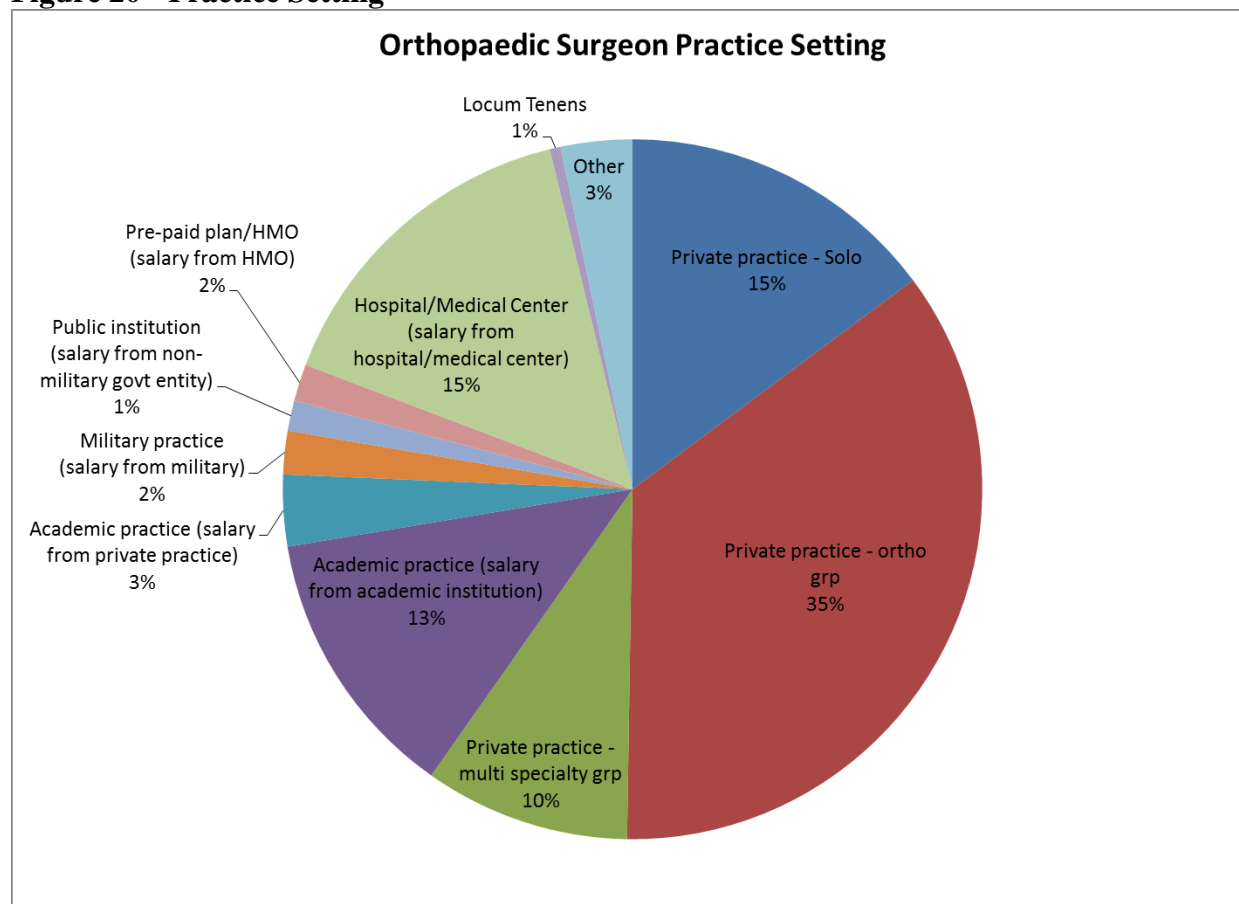
Figure 19 - Work Status by Practice Type



PRACTICE SETTING

Members were asked to identify the setting that best describes their current practice. The largest proportion of respondents practice in *private practice – orthopaedic group* setting (35%), with an additional 15% in *private practice – solo* setting and *Hospital/Medical Center*.

Figure 20 - Practice Setting



PRACTICE SETTING BY WORK STATUS

Most full-time orthopaedists work in *private practice – ortho group* (37.3%) and *hospital/medical center* (16.1%) settings. Most part-time orthopaedists work in *private practice - solo* (30.2%) and *ortho group* (19.6%) practice settings. A higher proportion of part-time orthopaedists work in private practice – solo, public institutions, locum tenens, and “other” practice settings compared to their full-time colleagues.

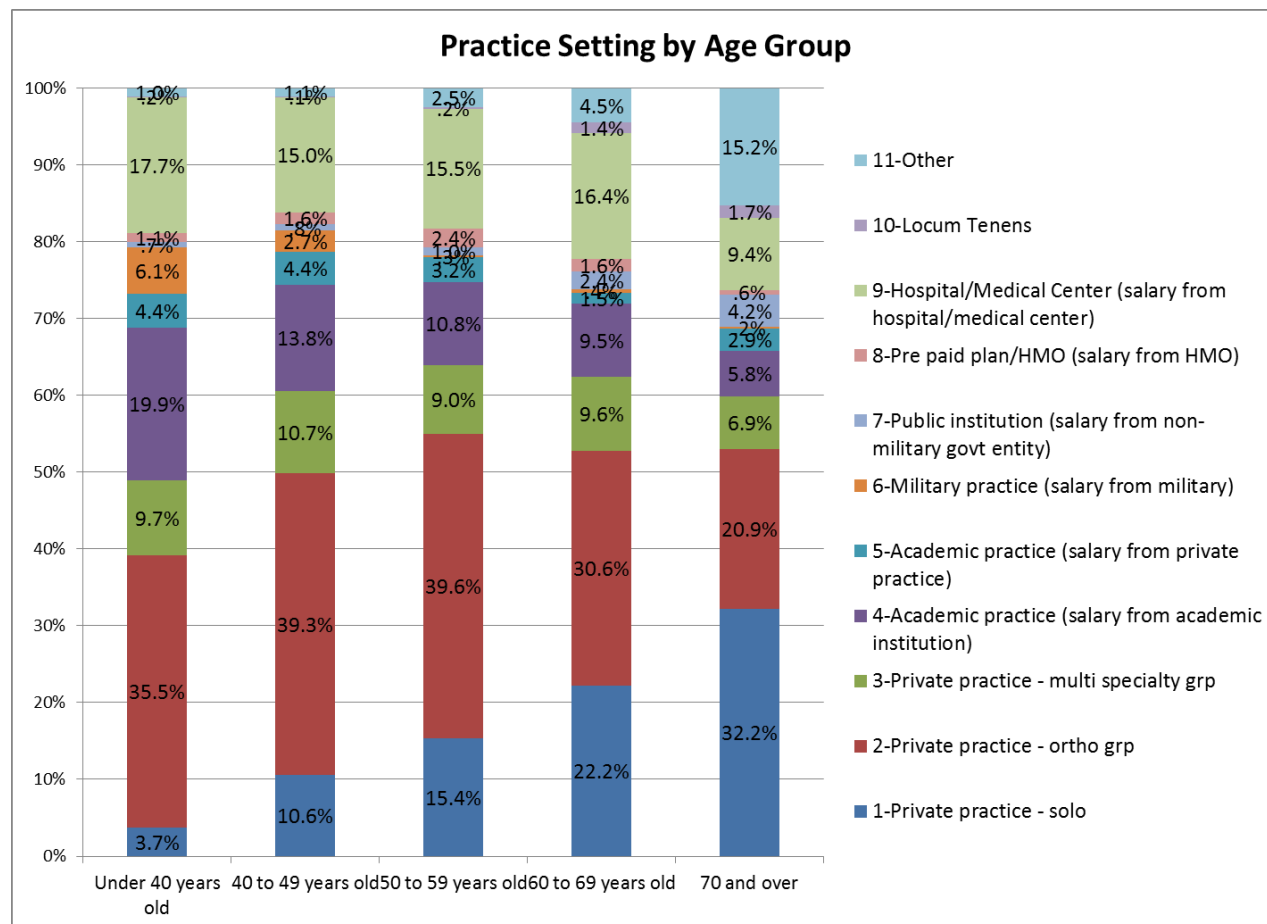
Figure 21 - Practice Setting by Work Status

	Full Time	Part Time
	Valid %	Valid %
Private Practice - Solo (income self-earned)	13.0%	30.2%
Private Practice - Orthopaedic Group	37.3%	19.6%
Private Practice - Multi-spec. Group	9.7%	8.0%
Academic Practice (salary from academic institution)	13.5%	5.0%
Academic Practice (salary from private practice)	3.5%	1.7%
Military Practice (salary from military)	2.1%	.5%
Public Institution (salary from non-military govt. entity)	1.2%	3.7%
Pre-paid Plan/HMO (salary from HMO)	1.7%	1.7%
Hospital/Medical Center (salary from hospital/med. center)	16.1%	10.1%
Locum Tenens	.1%	4.0%
Other	1.9%	15.6%

PRACTICE SETTING BY AGE GROUP

Differences in practice setting across age groups are significant. Younger orthopaedists start out in *private practice – ortho groups*. As orthopaedists get older, they tend to be in *private practice – solo* settings.

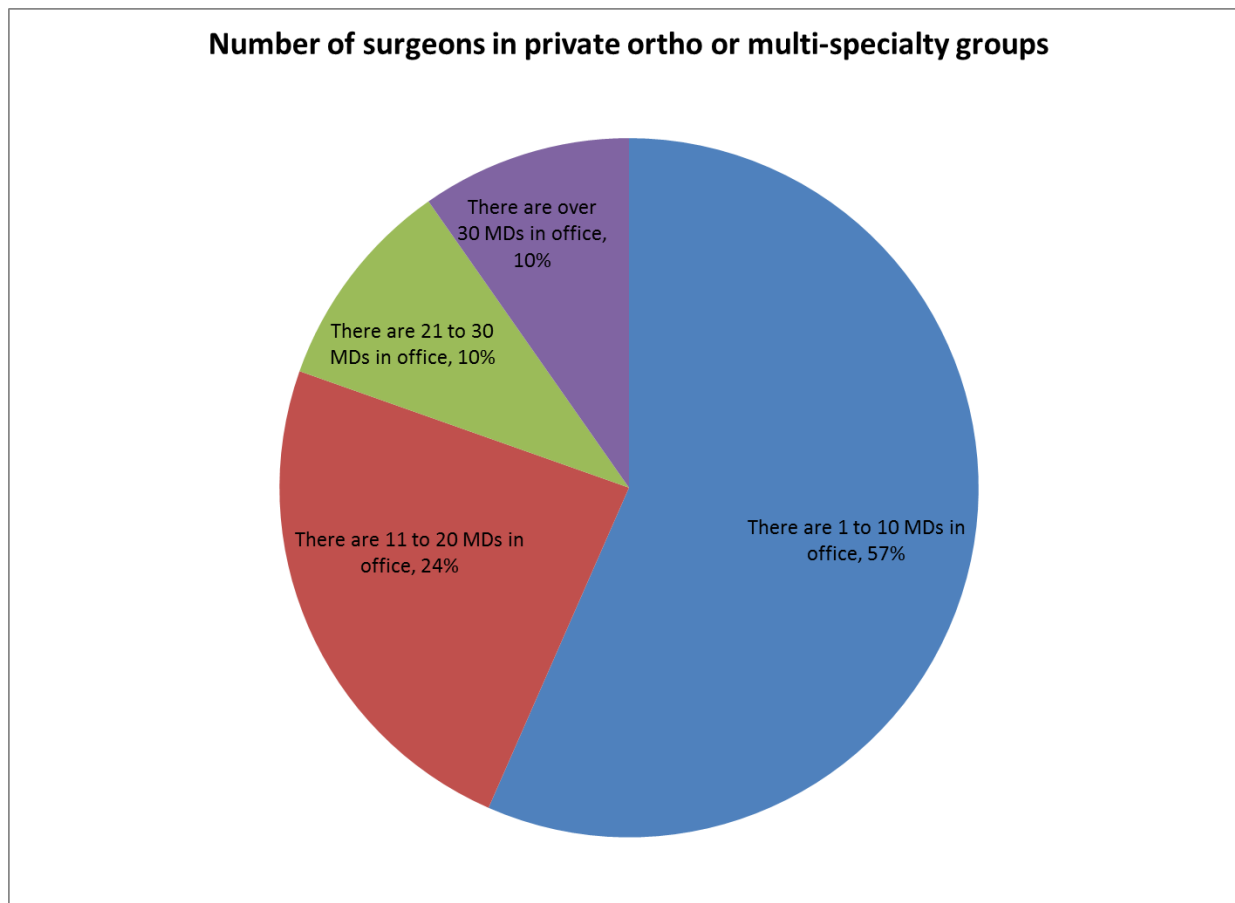
Figure 22 - Practice Setting by Age Group



PRACTICE SIZE

Orthopaedists in private orthopaedic or multi-specialty groups reported working in an average group size of 16, median of 9. The number of orthopaedists reported ranged from 1 to 300. Fifty-seven percent of respondents in private orthopaedic or multi-specialty groups reported having 1 to 10 physicians in their office.

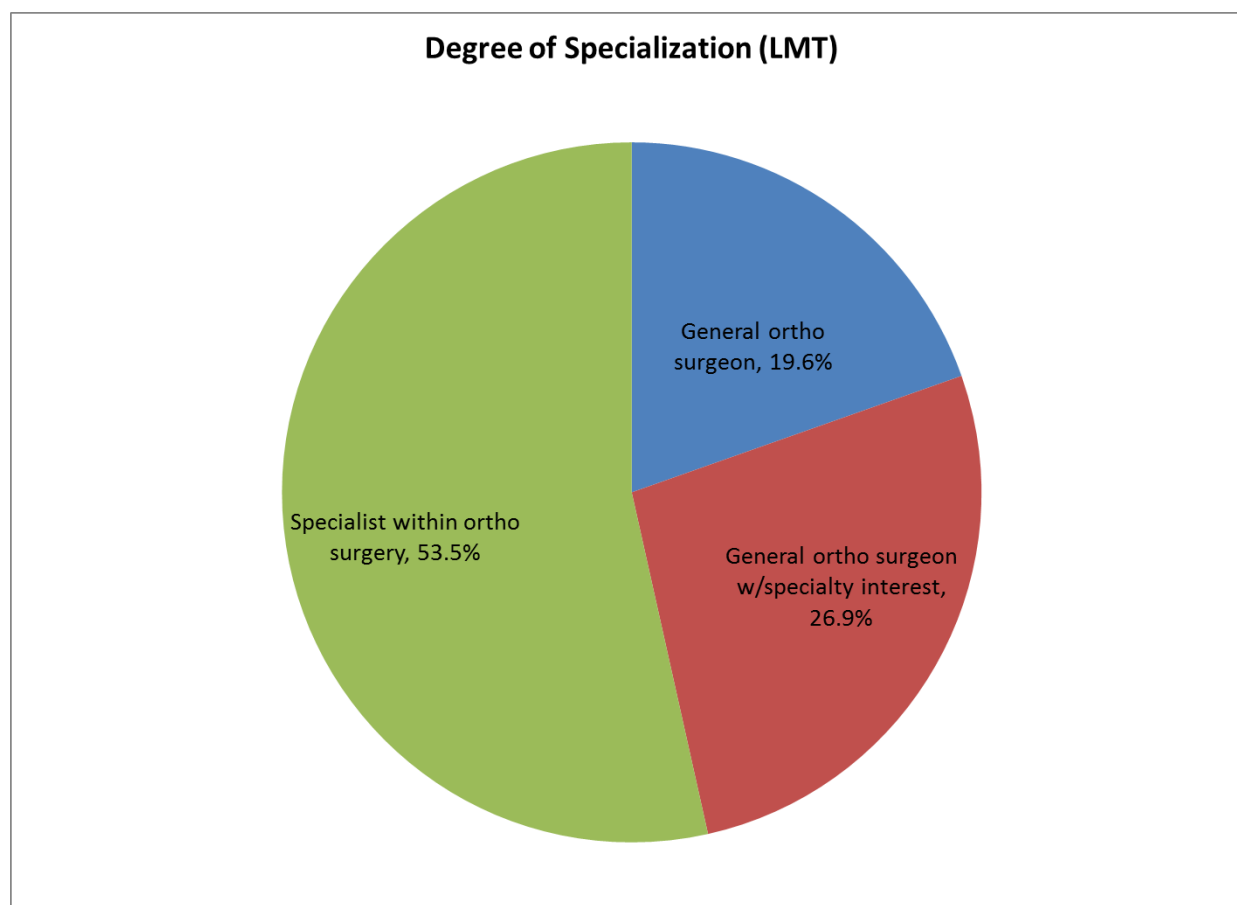
Figure 23 - Number of Surgeons in Private/Multi-Specialty Groups



DEGREE OF SPECIALIZATION

Fifty-four percent of respondents are specialists, 26.9% are general orthopaedic surgeons with specialty interest, and 19.6% are generalists.

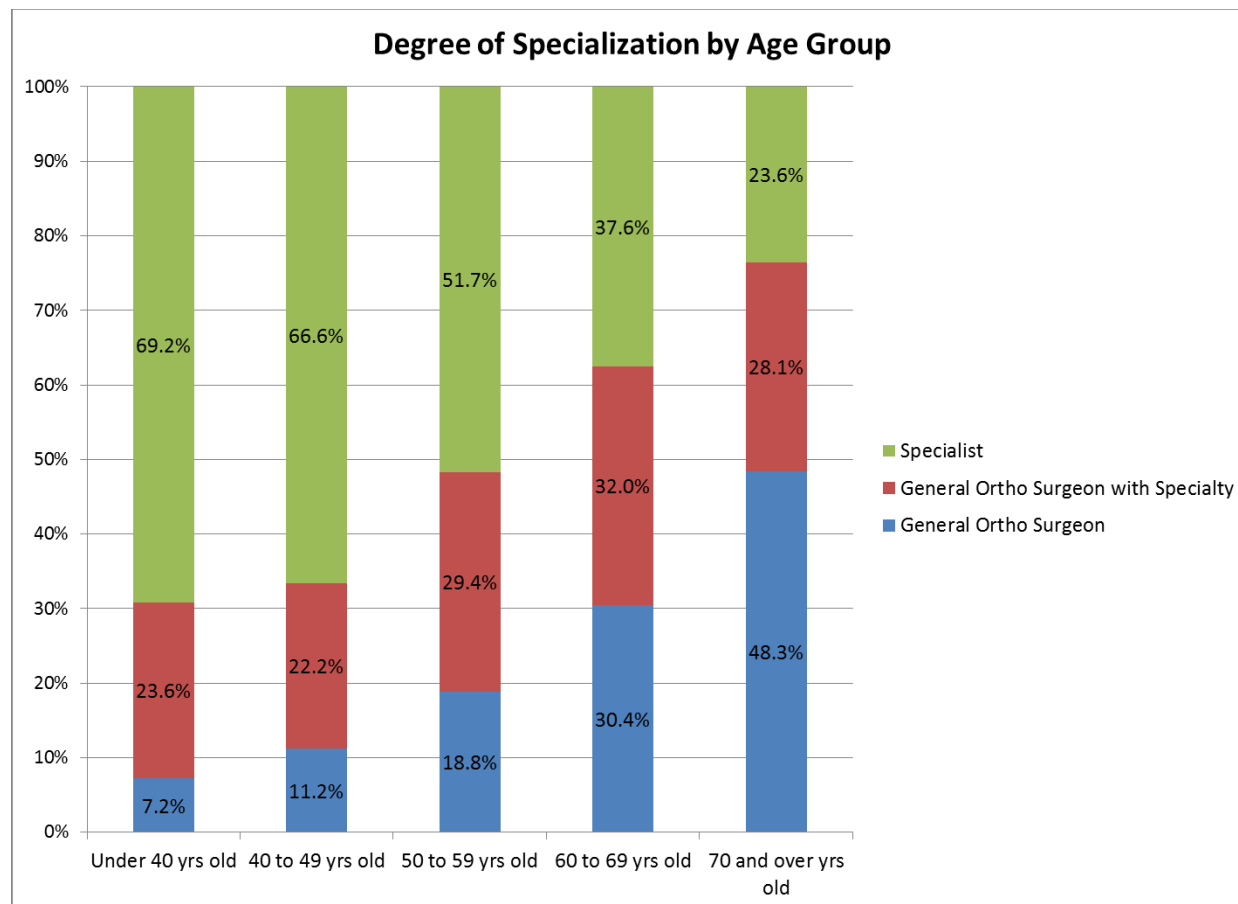
Figure 24 - Degree of Specialization Distribution



DEGREE OF SPECIALIZATION BY AGE GROUP

The percentage of orthopaedic surgeons practicing as *generalists* increases by age group, with 7.2% under 40 years old reporting generalist status, increasing to 48.3% of those 70 years old and older. Conversely, the percentage of *specialists* decreases as they age. Close to 69.2% of orthopaedists under 40 years old indicate they are specialists, decreasing to less than 23.6% of those 70 years old and older. Differences in degree of specialization by age group are statistically significant.

Figure 25 - Degree of Specialization by Age Group



SPECIALTY AREAS

Respondents were asked to identify the one area of orthopaedic surgery they considered their primary specialty area. The three most-frequently cited areas of practice are sports medicine (15.8%), hand (10.8%), and total joint (10.4%). Fourteen percent of respondents indicated they do not have a primary specialty area.

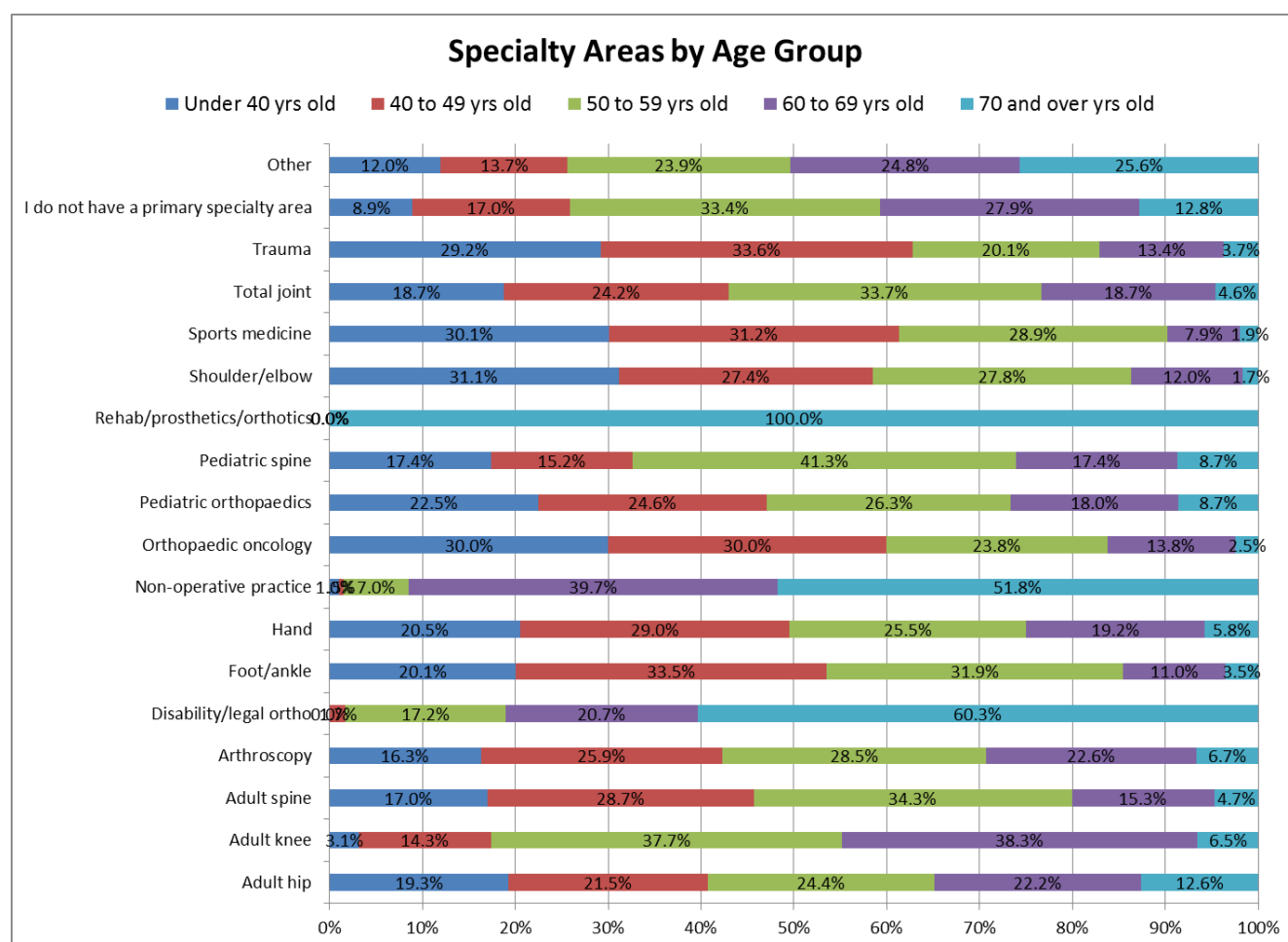
Figure 26 - Specialty Areas

Specialty Area		Valid Percent (Total N = 5654)
1	Sports medicine	15.8%
2	I do not have a primary specialty area.	14.3%
3	Hand	10.8%
4	Total joint	10.4%
5	Adult spine	8.2%
6	Adult knee	5.7%
7	Trauma	5.3%
8	Pediatric orthopaedics	5.1%
9	Foot/ankle	4.5%
10	Shoulder/elbow	4.3%
11	Arthroscopy	4.2%
12	Non-operative practice	3.5%
13	Adult hip	2.4%
14	Other (Please specify)	2.1%
15	Orthopaedic oncology	1.4%
16	Disability/legal ortho	1.0%
17	Pediatric spine	0.8%
18	Rehab/prosthetics/orthotics	0.0%
	Total	100.0%

SPECIALTY AREAS BY AGE GROUP

Figure 27 shows the frequency distribution of age groups by primary specialty area. Surgeons older than 60 years old mostly specialize in rehab/prosthetics/orthotics (100.0%), non-operative practice (91.5%), and disability/legal orthopaedics (81.0%). Surgeons between 40 to 59 years old are in foot and ankle (65.4%), adult spine (62.9%), sports medicine (60.1%), total joint (57.9%), pediatric spine (56.5%), shoulder and elbow (55.2%), hand (54.5%), and arthroscopy (54.4%) specialties. The three most-frequently cited areas of practice among orthopaedists under the age of 40 are: shoulder and elbow (31.1%), sports medicine (30.1%), and trauma (29.2%).

Figure 27 - Specialty Area by Age Group



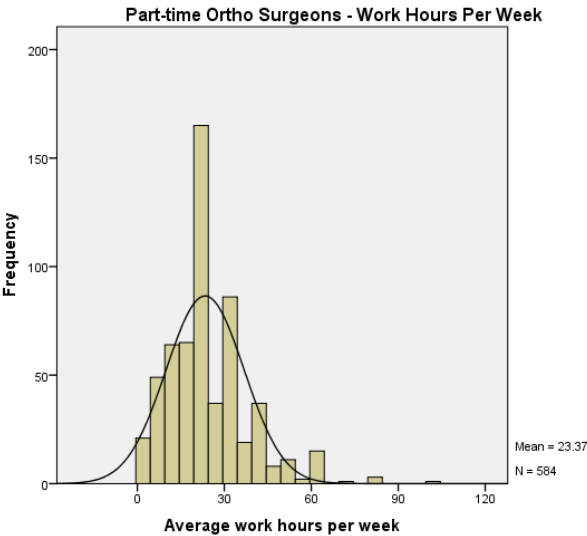
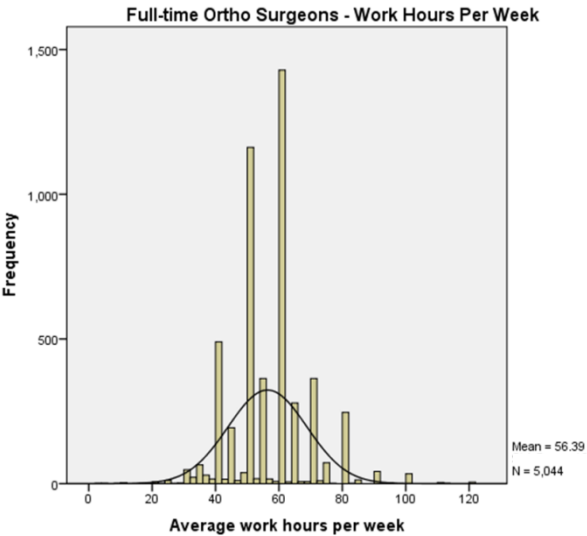
WORK HOURS

Full-time orthopaedists work an average of 56.39 hours per week. Answers ranged from 3 to 120 hours per week. Part-time orthopaedists work an average of 23.37 hours per week. Answers ranged from 2 to 100 hours per week.

Figure 28 - Average Hours per Week on All Activities (Excluding On-Call Time)

	Valid N	Mean	Min	Max
Full time	5044	56.39	3	120
Part time	584	23.37	2	100

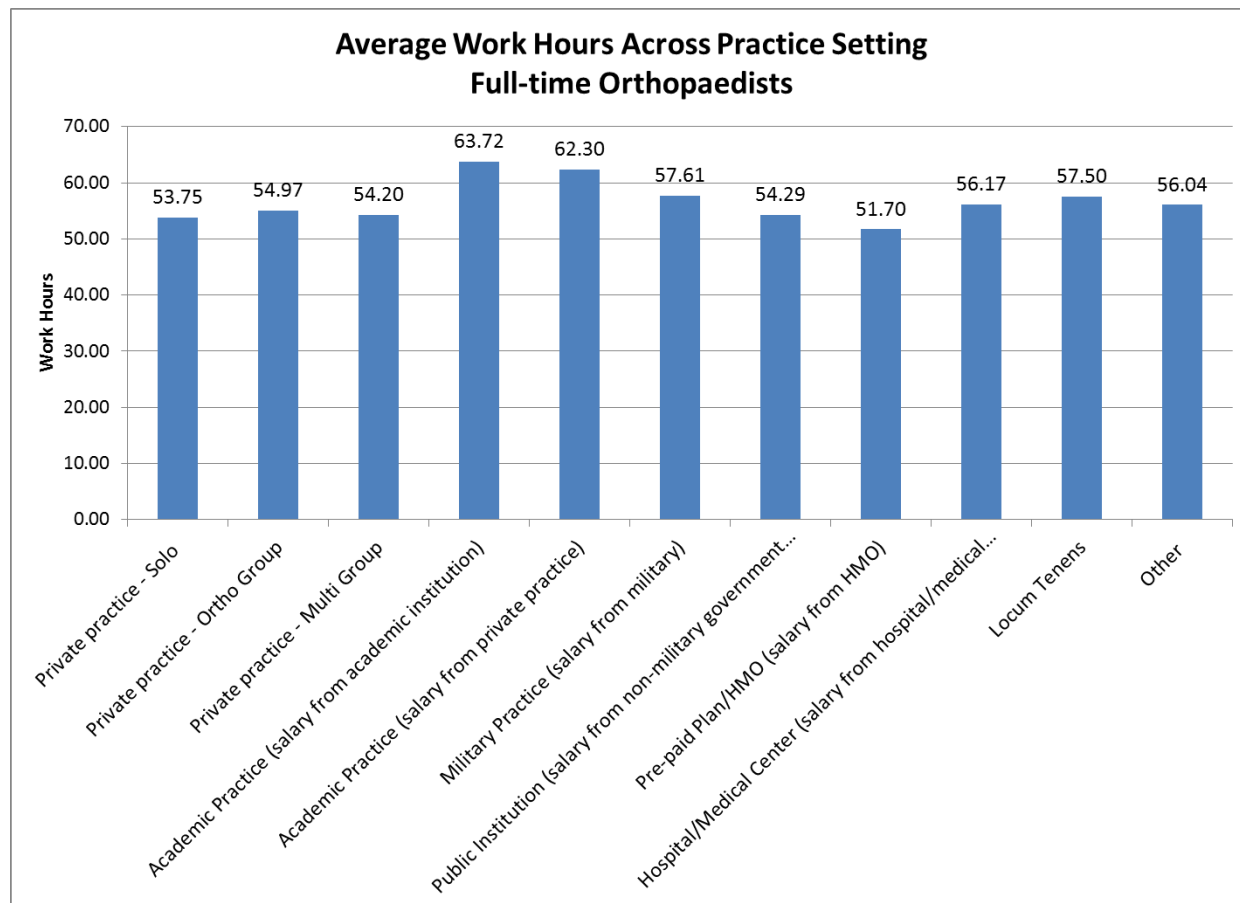
Figure 29 - Work Hours Distribution by Full and Part-time Ortho Surgeons



WORK HOURS BY PRACTICE SETTING

Significant differences in work hours of full-time orthopaedists are evident across practice settings. Full-time orthopaedists in academic practice setting reported working the longest hours (over 62 hours per week). Orthopaedists from pre-paid plan /HMO and private practice - solo reported working the least number of hours per week (less than 54 hours per week).

Figure 30- Full-time Orthopaedists' Average Work Hours by Practice Setting



WORK HOURS BY DEGREE OF SPECIALIZATION

Significant differences in work hours of full-time orthopaedists are evident across degree of specialization. Specialists report the longest work hours (58.50 hours per week), while generalists work the least number of hours (51.36 hours per week).

Figure 31 - Full Time Orthopaedists' Work Hours* by Degree of Specialization

Degree of Specialization	N	Mean	Min	Max
1-General Ortho Surgeon	813	51.36	11	100
2-General Ortho Surgeon w/specialty interest	1341	54.97	4	120
3-Specialist within Ortho Surgery	2878	58.50	3	120
Total	5032	56.41	3	120

*Excludes On-call times

WORK HOURS BY AGE GROUP

The number of work hours per week varies by age group, with orthopaedic surgeons under the age of 40 working the most (mean of 59.00 hours per week) and surgeons 70 years old and over working the least (46.45 hours per week).

Figure 32 - Full-time Orthopaedists' Work Hours* by Age Group

Age Group	N	Mean	Min	Max
Under 40 yrs old	1040	59.00	35	110
40 to 49 yrs old	1351	57.71	10	110
50 to 59 yrs old	1562	56.55	11	120
60 to 69 yrs old	899	52.87	3	120
70 and over yrs old	161	46.45	20	80
Total	5013	56.39	3	120

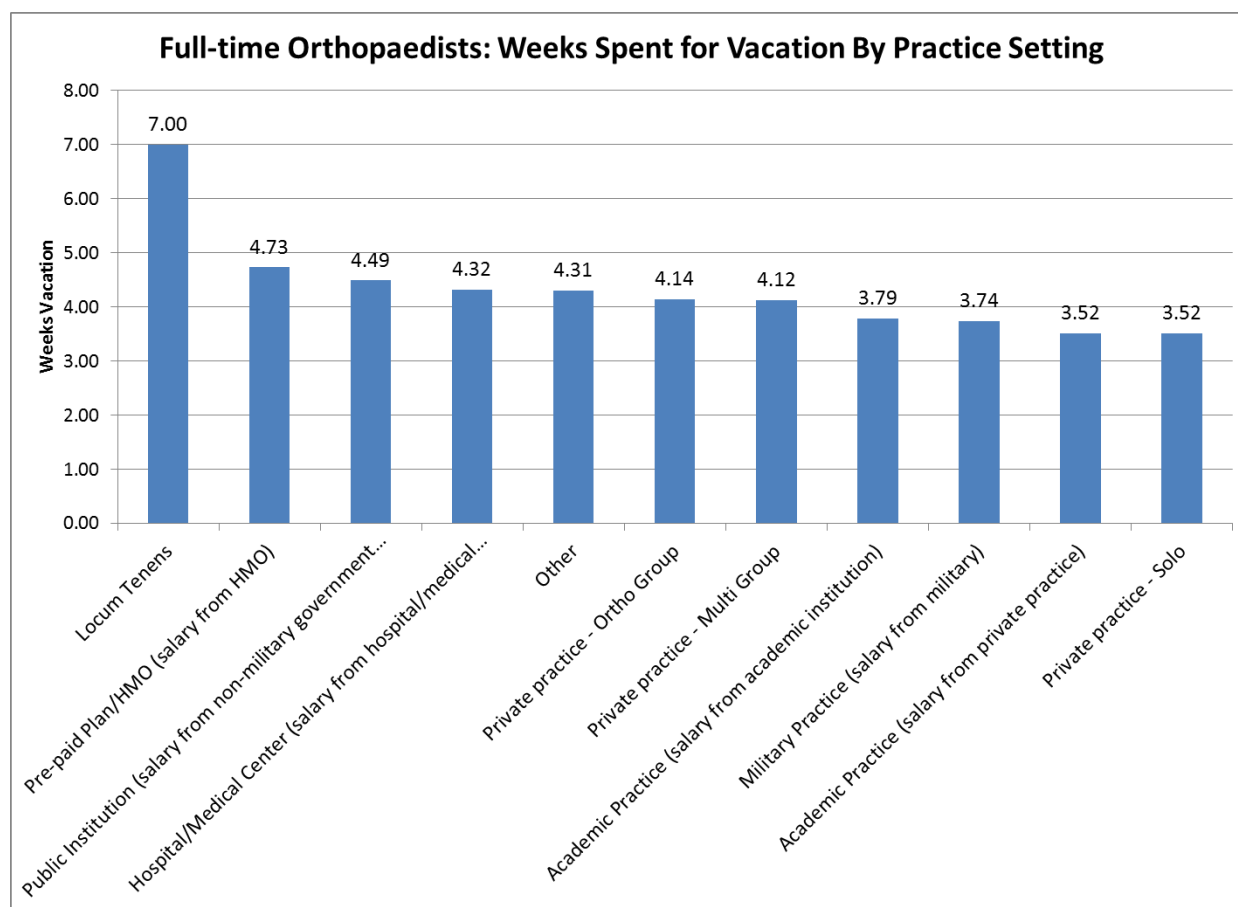
*Excludes On-call times

TIME AWAY FROM PRACTICE

WEEKS VACATION

Orthopaedists were asked to report the total number of weeks spent away from their practice for vacation. Full-time orthopaedists from the Locum Tenens group had the most weeks of vacation (average = 7 weeks). Respondents from pre-paid plan/HMO settings, public institutions, hospital/medical centers, other, private practice –*ortho group*, and private practice – *multi group* and have an average of four to five weeks of vacation. Respondents from private practice – *solo group*, academic practice, and military settings have an average of three to four weeks of vacation. Differences between practice settings are statistically significant.

Figure 33 - Weeks Vacation by Practice Setting (Full-time Orthopaedists Only)



WEEKS VACATION BY GENDER

Female orthopaedists spend an average of 4.09 weeks for vacation, while male orthopaedists spend an average of 4.02 weeks. The difference between gender is not statistically significant.

Figure 34 - Weeks Vacation by Gender

Gender	N	Mean	Min	Max
Female	340	4.09	0	49
Male	4565	4.02	0	52

WEEKS VACATION BY AGE GROUP

On average, orthopaedic surgeons ages 50 years old and older spend more weeks on vacation (over 4 weeks) than orthopaedic surgeons younger than 50 years old (3 weeks). Differences between age groups are statistically significant.

Figure 35 - Weeks Vacation by Age Group

Age Group	N	Mean	Min	Max
Under 40 yrs old	1040	3.45	0	40
40 to 49 yrs old	1351	3.90	0	49
50 to 59 yrs old	1563	4.23	0	47
60 to 69 yrs old	899	4.44	0	52
70 and over yrs old	156	4.85	0	50

DAYS AWAY FOR EDUCATION

On average, full-time orthopaedists spent 8.03 days away from their practice for orthopaedic education and training.

Figure 36 - Full-time Orthopaedists Only - Time Spent Away from Practice

	Valid N	Mean	Min	Max
Days spent out of practice for CME	5025	8.03	0	200

DAYS AWAY FOR EDUCATION BY PRACTICE SETTING

Orthopaedists from the Locum Tenens group and academic practice spent the most days away from practice for orthopaedic courses (10 to 15 days). Orthopaedists from military practice spent the least amount of days (6.36 days) away from practice for orthopaedic courses. Orthopaedists from other practice settings averaged seven to nine days spent for courses. Differences between groups are statistically significant.

Figure 37 - Days Spent Away for Business Meetings/Education by Practice Setting

	Orthopaedic Courses - CME	
	N	Mean
Private Practice - Solo (income self-earned)	648	7.90
Private Practice - Orthopaedic Group	1870	6.98
Private Practice - Multi-spec. Group	488	7.45
Academic Practice (salary from academic institution)	676	10.76
Academic Practice (salary from private practice)	180	12.79
Military Practice (salary from military)	109	6.36
Public Institution (salary from non-military govt. entity)	59	7.32
Pre-paid Plan/HMO (salary from HMO)	84	6.85
Hospital/Medical Center (salary from hospital/med. center)	811	7.92
Locum Tenens	5	15.20
Other	95	8.18

DAYS AWAY BY AGE GROUP

As orthopaedic surgeons get older, the mean number of days spent away from their practices for orthopaedic courses increases. Surgeons under 40 years old spent the fewest number of days for orthopaedic courses (7.07). Surgeons over 70 years old spent the most days away for training and orthopaedic courses (9.59). There are significant differences between age groups in terms of days spent away from practice for orthopaedic courses.

Figure 38 - Days Away by Age Group

	Orthopaedic Courses - CME	
	N	Mean
Under 40 yrs old	1036	7.07
40 to 49 yrs old	1349	7.56
50 to 59 yrs old	1563	8.47
60 to 69 yrs old	894	8.88
70 and over yrs old	152	9.59

DAYS AWAY BY SPECIALIZATION

Orthopaedic specialists reported the highest number of days away for education/training (8.88) compared to 7.09 days for generalists with specialty interest and 6.61 days for generalists. Differences between the three groups are statistically significant.

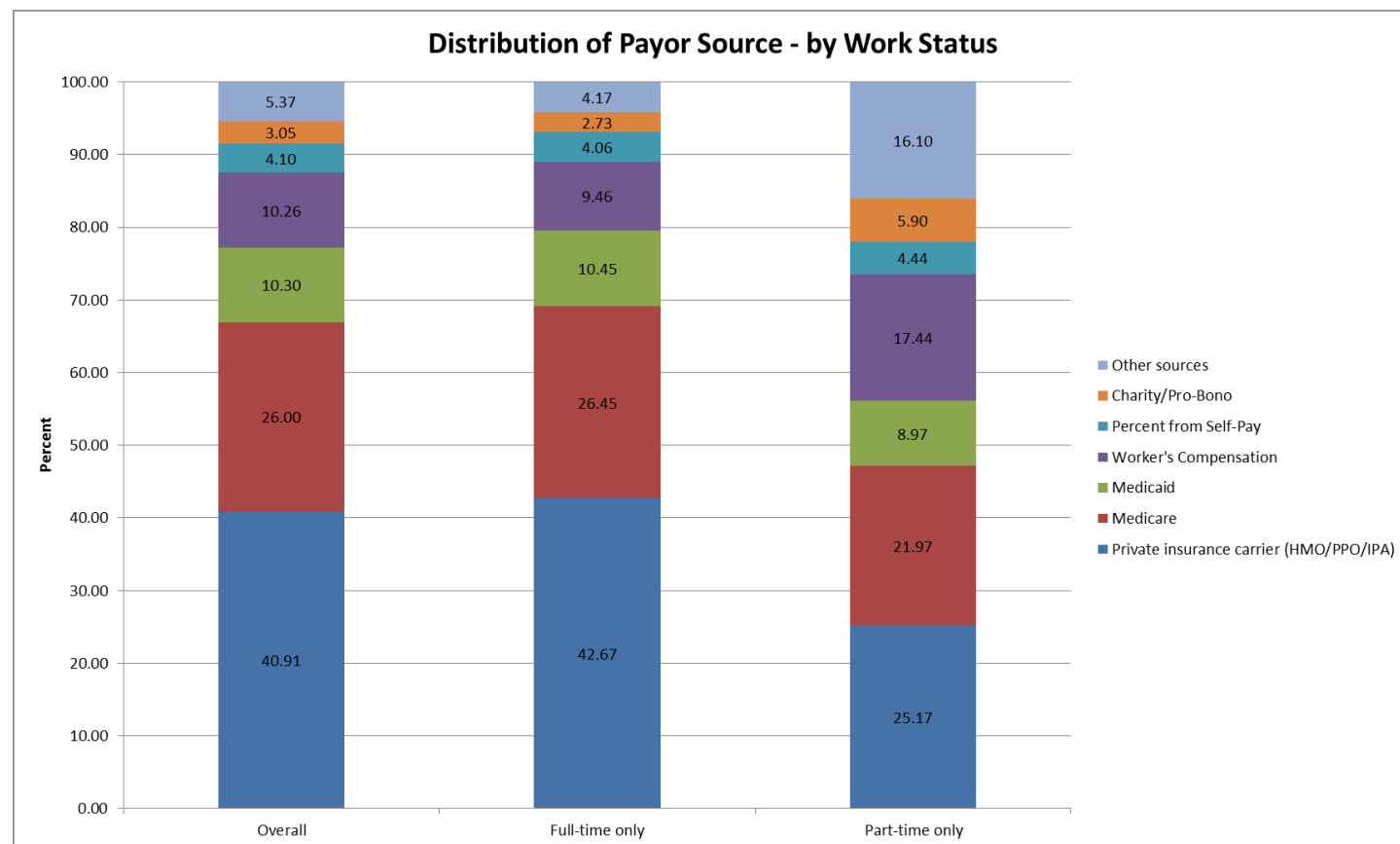
Figure 39 - Days Away by Specialization

Degree of Specialization	Orthopaedic Courses - CME	
	N	Mean
1-General Ortho Surgeon	803	6.61
2-General Ortho Surgeon w/specialty interest	1340	7.09
3-Specialist within Ortho Surgery	2869	8.88

PATIENTS BY PAYOR SOURCE

Orthopaedic surgeons were asked to approximate the distribution of their patients by payor source. Overall, about two-thirds of orthopaedists' payor source is made up of private insurance carrier (40.91%) and Medicare (26.0%). There were significant differences found between full-time and part-time orthopaedists in all payor sources with the exception of percent from self-pay.

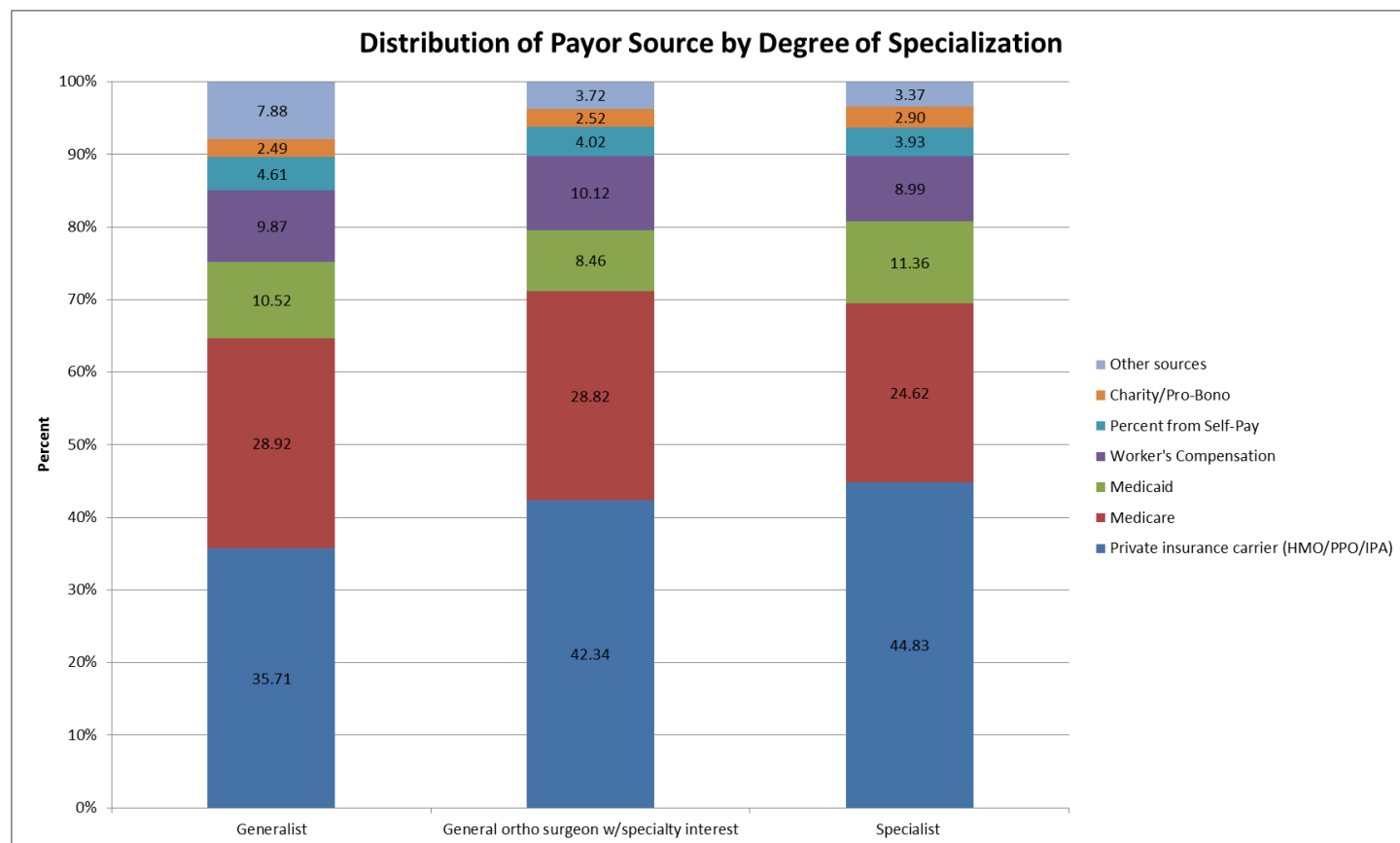
Figure 40 - Distribution of Payor Source by Work Status



PAYOR SOURCE BY DEGREE OF SPECIALIZATION – FULL-TIME ORTHOPAEDISTS ONLY

Statistically significant differences were found between generalists, general orthopaedic surgeons with specialty interest, and specialists in all payor sources. In all three groups, the top two payor sources were private insurance carrier and Medicare.

Figure 41 - Distribution of Payor Source by Degree of Specialization



PAYOR SOURCE BY PRACTICE SETTING

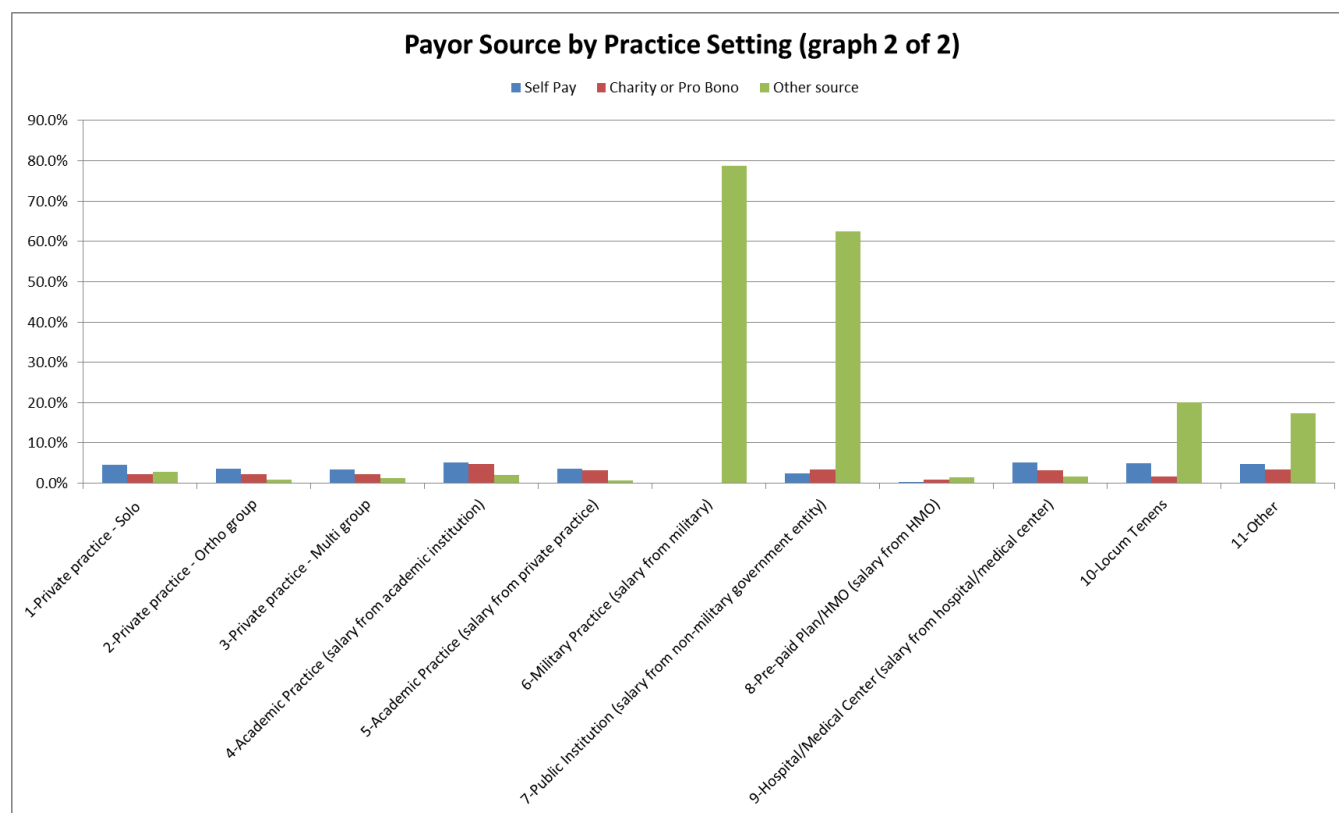
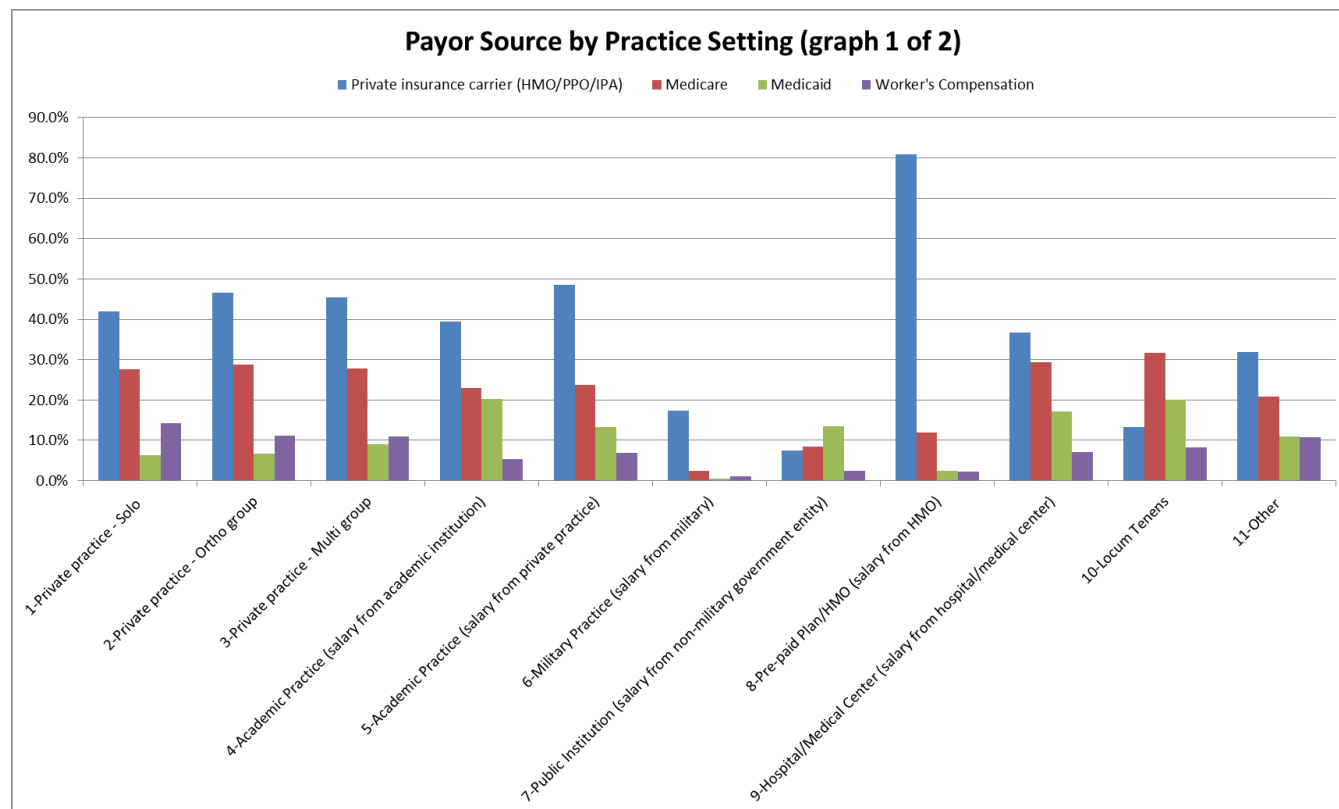
Statistically significant differences were found between practice setting groups in terms of payor sources. The following were noted:

- Orthopaedists in private practice, academic practice, and hospital/medical centers have private insurance carriers and Medicare as their top two payor sources.
- Orthopaedists in military practice have private insurance carriers and “other” as their top two payor sources.
- Orthopaedists whose salary comes from a public institution have Medicaid and “other” as their top two payor sources.
- Orthopaedists whose salary comes from HMO have private insurance carriers and Medicaid as their top two payor sources.
- Orthopaedists in locum tenens have Medicare and “other” as their top two payor sources.

Figure 42 - Payor Source by Practice Setting

	Private insurance carrier (HMO/PPO/IPA)	Medicare	Medicaid	Worker's Compensation	Self-Pay	Charity or Pro Bono	Other source
Private practice - Solo	41.97%	27.69%	6.28%	14.31%	4.60%	2.32%	2.83%
Private practice - Ortho group	46.56%	28.80%	6.73%	11.06%	3.68%	2.27%	0.90%
Private practice - Multi group	45.33%	27.75%	8.94%	10.95%	3.49%	2.19%	1.36%
Academic Practice (salary from academic institution)	39.48%	22.93%	20.30%	5.28%	5.18%	4.70%	2.13%
Academic Practice (salary from private practice)	48.62%	23.71%	13.28%	6.90%	3.57%	3.16%	0.76%
Military Practice (salary from military)	17.32%	2.36%	0.46%	1.03%	0.19%	0.00%	78.64%
Public Institution (salary from non-military government entity)	7.39%	8.39%	13.46%	2.50%	2.41%	3.46%	62.39%
Pre-paid Plan/HMO (salary from HMO)	80.84%	12.00%	2.37%	2.22%	0.24%	0.80%	1.53%
Hospital/Medical Center (salary from hospital/medical center)	36.63%	29.33%	17.10%	7.00%	5.10%	3.27%	1.57%
Locum Tenens	13.33%	31.67%	20.00%	8.33%	5.00%	1.67%	20.00%
Other	31.92%	20.74%	10.94%	10.83%	4.78%	3.47%	17.31%

Figure 43 - Payor Source by Practice Setting (Graph)



NUMBER OF SURGICAL PROCEDURES PERFORMED PER MONTH

Overall, orthopaedists perform an average of 29 procedures per month, with full-time orthopaedists performing 32 procedures per month, and part-timers performing 6 procedures per month. There are significant differences between the full-time and part-time group in the number of procedures they perform per month.

Figure 44 - Procedures Performed per Month by Work Status

	N	Mean
Full time	4059	31.56
Part time	470	5.60
Total	4529	28.86

NUMBER OF SURGICAL PROCEDURES PER MONTH BY PRACTICE TYPE

Looking at full-time orthopaedists only, *specialists* average 33 procedures a month, *generalists with specialty interests* average 32 procedures per month, and *generalists* average 27 procedures per month. There are significant differences between groups in the number of procedures they perform per month.

Figure 45 - Procedures Performed by Month by Practice Type

	N	Mean
1-General ortho surgeon	632	27.11
2-General ortho surgeon w/ specialty interest	1043	31.81
3-Specialist within ortho surgery	2372	32.64

NUMBER OF SURGICAL PROCEDURES PER MONTH BY PRACTICE SETTING

Looking at full-time orthopaedists only, orthopaedists in *private practice – ortho group* (34.21 procedures per month), *private practice – multi-specialty groups* (32.16), *academic practice – salary from academic institution* (30.12), *academic practice – salary from private practice* (34.99), *hospital/medical centers* (30.32), and *locum tenens* (30.75) average over 30 procedures per month. Orthopaedists in the *military practice* group (21.05) perform the least number of surgeries per month. There are significant differences between groups in the number of procedures they perform per month.

Figure 46 - Procedures Performed per Month by Practice Setting

	N	Mean
Private practice - Solo (income self-earned)	521	29.38
Private practice - Orthopaedic Group (income from group)	1530	34.21
Private practice - Multi-specialty Group (income from group)	392	32.16
Academic Practice (salary from academic institution)	556	30.12
Academic Practice (salary from private practice)	153	34.99
Military Practice (salary from military)	95	21.05
Public Institution (salary from non-military government entity)	46	24.93
Pre-paid Plan/HMO (salary from HMO)	57	25.33
Hospital/Medical Center (salary from hospital/medical center)	628	30.32
Locum Tenens	4	30.75
Other (Please specify)	77	25.90

NUMBER OF SURGICAL PROCEDURES PER MONTH BY AGE GROUP

Looking at full-time orthopaedists only, orthopaedists between 40 to 49 years old perform close to 35 surgeries per month. Orthopaedists 70 years old and over perform the least number of surgeries (20.11) per month. There are significant differences between groups in the number of procedures they perform per month.

Figure 47 - Procedures Performed per Month by Age Group

	N	Mean
Under 40 yrs old	928	28.90
40 to 49 yrs old	1129	35.26
50 to 59 yrs old	1205	33.55
60 to 69 yrs old	653	27.32
70 and over yrs old	116	20.11

NUMBER OF SURGICAL PROCEDURES PERFORMED PER MONTH BY REGION

Looking at full-time orthopaedists only, orthopaedists in the East South Central (36.77 surgeries per month) and West North Central (35.25 surgeries per month) parts of the United States perform the most number of surgeries per month. Orthopaedists in the Mountain, East North Central, West South Central, and South Atlantic average between 30 and 35 procedures per month.

Orthopaedists in New England, Mid Atlantic, and Pacific perform less than 30 procedures per month on average. There are significant differences between groups in the number of procedures they perform per month.

Figure 48 - Surgical Procedures per Month by Region

	N	Mean
1-New England	270	28.63
2-Mid Atlantic	559	29.55
3-East North Central	590	32.92
4-West North Central	342	35.25
5-South Atlantic	763	31.46
6-East South Central	222	36.77
7-West South Central	392	33.05
8-Mountain	323	32.11
9-Pacific	587	28.39

SPECIFIC PROCEDURES PERFORMED PER MONTH – OVERALL

Orthopaedic surgeons were asked to estimate the number of procedures performed per month for 11 pre-selected ICD-9-CM procedure codes. Overall, arthroscopy of the knee was the most performed procedure per month (average of 6.55 procedures per month). The least performed procedures per month are the replacement/revision of spinal disc (average of 0.42 procedures per month), revision of hip replacement (average of 0.64 procedures per month), and total knee replacement (UNI compartmental) (average of 0.85 procedures per month).

Figure 49 - Specific Procedures Performed per Month

	OVERALL Valid N	OVERALL Mean
a) Release of carpal tunnel	3874	3.15
b) Knee arthroscopy	4284	6.55
c) Spinal fusion/re-fusion	3211	2.04
d) Other repair/construction of the ACL	3660	1.81
e) Total hip replacement	3785	3.71
f) Partial hip replacement	3328	1.48
g) Revision of hip replacement	3184	.64
h) Total knee replacement (UNI compartmental)	3227	.85
i) Total knee replacement (BI/TRI compartmental)	3902	5.72
j) Revision of the knee	3276	.74
k) Replacement/revision of the spinal disc	2840	.42

SPECIFIC PROCEDURES PERFORMED PER MONTH – FULL-TIME VS PART-TIME ORTHOPAEDISTS

The most performed procedures by full-time orthopaedists are arthroscopy of the knee (average of 6.78 procedures per month) and bi/tri-compartmental total knee replacement (5.92). Part-time orthopaedists also perform arthroscopy of the knee (2.79) and bi/tri-compartmental total knee replacement (2.05) the most out of the 11 procedures.

The most infrequent procedure performed by full-time and part-time orthopaedists is replacement and/or revision of the spinal disc. The least performed procedures by full-time orthopaedists are hip revision (0.67), knee revision (0.76), and uni-compartmental total knee replacement (0.87). The least performed procedures by part-time orthopaedists are hip revision (0.20), spinal fusion/re-fusion (0.28), and revision of knee (0.32).

There were significant differences found between full-time and part-time surgeons in terms of number of procedures performed per month in all procedures except for total knee replacement (uni compartmental).

Figure 50 - Specific Procedures Performed per Month - Full-time vs Part-time

	FULL TIME		PART TIME	
	N Valid	Mean	N Valid	Mean
a) Release of carpal tunnel	3638	3.23	227	1.89
b) Knee arthroscopy	4036	6.78	236	2.79
c) Spinal fusion/re-fusion	3034	2.14	169	.28
d) Other repair/construction of the ACL	3468	1.88	184	.58
e) Total hip replacement	3569	3.83	204	1.67
f) Partial hip replacement	3142	1.53	177	.60
g) Revision of hip replacement	3007	.67	168	.20
h) Total knee replacement (UNI compartmental)	3042	.87	174	.44
i) Total knee replacement (BI/TRI compartmental)	3682	5.92	208	2.05
j) Revision of the knee	3092	.76	173	.32
k) Replacement/revision of the spinal disc	2680	.44	153	.05

SPECIFIC PROCEDURES PERFORMED PER MONTH – FULL-TIME ORTHOPAEDISTS ONLY BY DEGREE OF SPECIALIZATION

Statistically significant differences were found in the number of procedures performed by full-time orthopaedists across degree of specialization for all procedures except total knee replacement (uni compartmental).

The top procedures *generalists* perform are arthroscopy of the knee (average of 7.63 procedures per month), bi/tri-compartmental total knee replacement (5.41), and release of carpal tunnel (3.33). Their least performed procedures are replacement of spinal disc (average of 0.03 procedures per month), spinal fusion/re-fusion (0.06), revision of hip replacement (0.26), and revision of knee replacement (0.47).

The top procedures *generalists with specialty interest* perform are arthroscopy of the knee (average of 8.69 procedures per month), bi/tri-compartmental total knee replacement (6.91), and total hip replacement (3.70). Their least performed procedures are replacement of spinal disc (average of 0.18 procedures per month), revision of hip replacement (0.54), and spinal fusion/re-fusion (0.56).

The top procedures *specialists* perform are bi/tri-compartmental total knee replacement (average of 5.48 procedures per month), arthroscopy of the knee (5.26), and total hip replacement (4.27). Their least performed procedure is replacement of spinal disc (0.68).

Figure 51 - Number of Specific Procedures Performed per Month - Full-time Only by Degree of Specialization

	1-General ortho surgeon	2-General ortho surgeon w/ specialty interest	3-Specialist within ortho surgery
a) Release of carpal tunnel	3.33	2.74	3.48
b) Knee arthroscopy	7.63	8.69	5.26
c) Spinal fusion/re-fusion	.06	.56	3.29
d) Other repair/construction of the ACL	1.36	2.25	1.83
e) Total hip replacement	2.86	3.70	4.27
f) Partial hip replacement	2.05	1.89	1.12
g) Revision of hip replacement	.26	.54	.85
h) Total knee replacement (UNI compartmental)	.88	.95	.81
i) Total knee replacement (BI/TRI compartmental)	5.41	6.91	5.48
j) Revision of the knee	.47	.69	.88
k) Replacement/revision of the spinal disc	.03	.18	.68

VI. APPENDIX A: 2014 ORTHOPAEDIC SURGEON CENSUS SAMPLE FORM



2014 ORTHOPAEDIC SURGEON CENSUS

Three ways to reply to this questionnaire:

- 1) Answer this 2-page questionnaire and fax back to 847-574-7550.
- 2) You may also mail this to AAOS Research-Census, 6300 N. River Rd., Rosemont, IL 60018-4262.
- 3) You may also complete this online at <http://research.aaos.org/surveys/2014census.htm>. To log in, use Member ID #

1) Race/Ethnicity (Please check one.) <input type="radio"/> African American <input type="radio"/> Hispanic/Latino <input type="radio"/> Asian <input type="radio"/> Multi-racial <input type="radio"/> Caucasian <input type="radio"/> Native American <input type="radio"/> Other (please specify) <div style="border: 1px solid black; height: 20px; width: 100%; margin-top: 5px;"></div>	3) I am a member of: (Check all that apply.) <input type="checkbox"/> American College of Surgeons <input type="checkbox"/> American Medical Association <input type="checkbox"/> State Medical Society <input type="checkbox"/> State Orthopaedic Society 4) Year you began your orthopaedic career (1st year of practice). Please answer in XXXX format. Example: 1970, 1984, etc. <div style="border: 1px solid black; display: inline-block; width: 40px; height: 20px; margin-right: 5px;"></div> <div style="border: 1px solid black; display: inline-block; width: 40px; height: 20px; margin-right: 5px;"></div> <div style="border: 1px solid black; display: inline-block; width: 40px; height: 20px; margin-right: 5px;"></div> <div style="border: 1px solid black; display: inline-block; width: 40px; height: 20px;"></div>	5) Work Status: <input type="radio"/> Full-time <input type="radio"/> Part-time <input type="radio"/> Retired If retired, age <div style="border: 1px solid black; width: 30px; height: 20px; display: inline-block;"></div> <div style="border: 1px solid black; width: 30px; height: 20px; display: inline-block;"></div> you retired? If <u>RETIRED</u>, please stop here. If <u>full-time</u> or <u>part-time</u>, please continue to question # 6.
2) Gender: <input type="radio"/> Male <input type="radio"/> Female		
6) Which category best describes you? (Check one.) <input type="radio"/> General orthopaedic surgeon <input type="radio"/> General orthopaedic surgeon with an area of specialty interest (at least 25% but less than 75% of practice committed to an area of specialty interest) <input type="radio"/> Specialist within orthopaedic surgery (75% or more of practice committed to an area of specialty interest)		
7) Which setting listed below best describes your practice? (Check one.) <div style="display: flex; align-items: flex-start;"> <div style="flex: 1;"> <input type="radio"/> Private Practice - Solo (income self-earned) <input type="radio"/> Private Practice - Orthopaedic Group (income from group) <input type="radio"/> Private Practice - Multi-spec. Group (income from group) <input type="radio"/> Academic Practice (salary from academic institution) <input type="radio"/> Academic Practice (salary from private practice) <input type="radio"/> Military Practice (salary from military) <input type="radio"/> Public Institution (salary from non-military govt. entity) <input type="radio"/> Pre-paid Plan/HMO (salary from HMO) <input type="radio"/> Hospital/Medical Center (salary from hospital/med. center) <input type="radio"/> Locum Tenens <input type="radio"/> Other </div> <div style="flex: 0.2; text-align: center; font-size: small;"> # of Orthopaedic Surgeons in group </div> <div style="flex: 0.8; border: 1px solid black; width: 80px; height: 30px; margin-top: 10px;"></div> </div> <div style="border: 1px solid black; height: 20px; width: 100%; margin-top: 5px;"></div>	9) Your <u>OTHER SPECIALTY AREAS</u> include: (Check all that apply.) <input type="checkbox"/> 1) Adult hip <input type="checkbox"/> 2) Adult knee <input type="checkbox"/> 3) Adult spine <input type="checkbox"/> 4) Arthroscopy <input type="checkbox"/> 5) Disability/legal ortho <input type="checkbox"/> 6) Foot & ankle <input type="checkbox"/> 7) Hand <input type="checkbox"/> 8) Non-operative practice <input type="checkbox"/> 9) Orthopaedic oncology <input type="checkbox"/> 10) Pediatric orthopaedics <input type="checkbox"/> 11) Pediatric spine <input type="checkbox"/> 12) Rehab, prosthe/orthotics <input type="checkbox"/> 13) Shoulder & elbow <input type="checkbox"/> 14) Sports medicine <input type="checkbox"/> 15) Total joint <input type="checkbox"/> 16) Trauma <input type="checkbox"/> 17) I don't have other specialty areas <input type="checkbox"/> 18) Other (please specify in the box below) <div style="border: 1px solid black; height: 40px; width: 100%; margin-top: 5px;"></div>	
8) Your PRIMARY SPECIALTY AREA is in: (Check one.) <div style="display: flex; flex-wrap: wrap;"> <div style="width: 50%;"> <input type="radio"/> 1) Adult hip <input type="radio"/> 2) Adult knee <input type="radio"/> 3) Adult spine <input type="radio"/> 4) Arthroscopy <input type="radio"/> 5) Disability/legal ortho <input type="radio"/> 6) Foot & ankle <input type="radio"/> 7) Hand <input type="radio"/> 8) Non-operative practice <input type="radio"/> 9) Orthopaedic oncology </div> <div style="width: 50%;"> <input type="radio"/> 10) Pediatric orthopaedics <input type="radio"/> 11) Pediatric spine <input type="radio"/> 12) Rehab, prosthe/orthotics <input type="radio"/> 13) Shoulder & elbow <input type="radio"/> 14) Sports medicine <input type="radio"/> 15) Total joint <input type="radio"/> 16) Trauma <input type="radio"/> 17) I don't have a primary specialty area. <input type="radio"/> 18) Other (please specify below) </div> </div> <div style="border: 1px solid black; height: 20px; width: 100%; margin-top: 5px;"></div>		



2014 ORTHOPAEDIC SURGEON CENSUS

10) Average work hours per week (exclude on-call time) 11) Weeks vacation per year 12) Days spent out of practice for CME (including Annual Mtg)

13) What is the approximate distribution of patients by payer source? (Answers must add up to 100%)

- a) Private insurance carrier (HMO/PPO/IPA) ... %
b) Medicare ----- %
c) Medicaid ----- %
d) Worker's Compensation ----- %
e) Percent from Self-Pay ----- %
f) Charity/Pro-Bono ----- %
g) Other sources (Please specify below) ----- %

16) Amount paid for your current professional liability coverage:

\$

17) Per occurrence/aggregate limit of your current policy:

- ☐ \$250k/\$275k
☐ \$500k - \$1.5m
☐ \$1m - \$3m
☐ \$2m - \$6m
☐ Other (Please specify in the box above)

14) Number of procedures you do in a typical month

15) Approximately how many of the following procedures do you do PER MONTH?

- a) Release of carpal tunnel -----
b) Knee arthroscopy -----
c) Spinal fusion/re-fusion -----
d) Other repair/construction of ACL -----
e) Total hip replacement -----
f) Partial hip replacement -----
g) Revision of hip replacement -----
h) Total knee replacement (unicompartmental) -----
i) Total knee replacement bi/tri-compartmental -----
j) Revision of knee -----
k) Replacement/revision of spinal disc -----

18) GROSS INCOME in 2013

\$

19) NET INCOME in 2013

\$

Please fax back this questionnaire to 847-574-7550.
Make sure pages 1 and 2 were sent.
Or mail this form to: AAOS Census 6300 N. River Rd., Rosemont, IL 60018



VII. APPENDIX B: US REGIONS

1 New England	CT	Connecticut
	MA	Massachusetts
	ME	Maine
	NH	New Hampshire
	RI	Rhode Island
	VT	Vermont
2 Mid Atlantic	NJ	New Jersey
	NY	New York
	PA	Pennsylvania
3 East North Central	IL	Illinois
	IN	Indiana
	MI	Michigan
	OH	Ohio
	WI	Wisconsin
4 West North Central	IA	Iowa
	KS	Kansas
	MN	Minnesota
	MO	Missouri
	ND	North Dakota
	NE	Nebraska
	SD	South Dakota
5 South Atlantic	DC	District of Columbia
	DE	Delaware
	FL	Florida
	GA	Georgia
	MD	Maryland
	NC	North Carolina
	SC	South Carolina
	VA	Virginia
	WV	West Virginia

6 East South Central	AL	Alabama
	KY	Kentucky
	MS	Mississippi
	TN	Tennessee
7 West South Central	AR	Arkansas
	LA	Louisiana
	OK	Oklahoma
	TX	Texas
8 Mountain	AZ	Arizona
	CO	Colorado
	ID	Idaho
	MT	Montana
	NM	New Mexico
	NV	Nevada
	UT	Utah
	WY	Wyoming
9 Pacific	AK	Alaska
	CA	California
	HI	Hawaii
	OR	Oregon
	WA	Washington

VIII. APPENDIX C: OPEN ENDED RESPONSES

Table 1 - Other Race Reported: Please specify

	Frequency
(no response)	16
50% white 50% asian indian	1
African	1
African American and Cherokee Indian	1
American	15
Appalachian American	1
Arab-American	3
Arabic	2
Armenian	1
Asian Indian	9
Asian/caucasian	4
Asian/Hispanic	1
Black/Mexican	1
Canadian	1
Carribean	1
Caucasian	1
Caucasion & Native American	1
celtic/aryan	1
Coptic	1
CUBAN	1
Italian and French Canadian	1
East Indian	3
Egyptian	4
European American	5
Filipino	1
Greek	1
half caucasian half asian	1
Hispanic of white ethnicity	1
Indian	15
Indian (from India)	2
indian american	7
Indo Aryan	1
iranian	1
Iranian-american	1
irish american	2
IRISH CATHOLIC	1
Italian	1
Italian American	1
Lebanese	1
Macedonian	1
Mediterranean	2
mesopotamian	1
Middle Eastern	6

Mixed race	1
North African	1
Pacific Islander	3
Pakistani	1
Pakistani American	1
Persian	2
Persian (Iranian)-American	1
russian-american	1
Scots-Irish	1
scots/english	1
Slavic	1
South Asian	4
South Asian (Indian)	1
South-East Asian, Sri Lankan	1
SPANISH	1
SRI LANKA	1
Swedish	1
Swiss	2
Welsh and Chinese	1
white/american	1
white/hispanic	2
White/Native American	1
Total	153

Table 2 - Other Practice Setting Reported

	Frequency
(no response)	1
1-3 days a month at Denver Health Center	1
1. private practice within orthopaedic group-semi retired-retiring 6/30/14 from clinical practice. 2. review disability appeals records for insurance company about 18 hours a week	1
2 man group	1
2 physician occupational medicine group	1
2 surgeon group /no PA/income self earned	1
45 hours VA Ortho; 15 hours private practice	1
60% academic subspecialty orthopedic practice; 15% orthopaedic hospitalist (24 call shift/3 days/month)	1
80% private practice/ortho group, 20% academic/salary	1
Academic - income from group (productivity)	1
Academic - University stipend plus RVU based reimbursement	1
Academic Practice - Income Self-Earned (not salaried, not employed) - Major University Setting	1
Academic practice (salary from hospital/medical center)	4
Academic Practice salary from academic institution and practice group	1
Academic practice with salary from RVU productivity, call stipend, medical directorship of outpatient surgery center	1
Academic Practice with the clinical salary coming from private practice and academic salary coming from the university	1

academic practice, but responsible for my salary	1
administration	2
Administration/accreditation	1
Administrative, utilization reviews, private salary	1
administrator (CMO) and very limited practice	1
Area Free Clinics and orthopedic missions	1
Assist ortho or neurosurg 6 hours/week	1
both part-time private practice solo, and part-time VA surgeon, with consulting academic affiliation	1
Both types academic practice 50/50	1
CMO of an orthopaedic device company	1
Combined Academic and Private practice with income from private practice	1
Consultant	1
Consultant state/hospital	1
Consultation practice - Independent Medical Exams	1
Consulting	3
consulting only, mainly rating industrial cases	1
Contract Consultant to US Gov't.	1
Delphi	1
DISABILITY EXAMS	1
Disability Insurer review	1
DOD Contract Surgeon	1
Employed by the Federal Government	1
Employed multi-speciality group, income self-earned, RVU based.(no group income)	1
Employed physician by health system in a pure production model (I'll be at least 30% of folks are employed this way now. Employed does not equal salaried.)	1
Exclusively IME and medical/legal consulting	1
Federal Employee at VA Hospital	1
Fellow in Orthopedic Trauma	1
forensic	1
Forensic/Teaching	1
Full credentialed Volunteer at Naval Medical Center San Diego	1
full time academic administration with some teaching	1
group part time academic	1
Half the people I treat have no direct responsibility to pay me since I am paid by a government agency. I don't know what kind of medical practice that is - Should I start to have more allegiance to the entities that pay me?	1
Healthcare management consultant	1
Hospital Administrator with small clinical practice	1
Hospital employed	1
Hospital employed in a multi-specialty group paid by generated RVUs	1
Hospital employed revenue - expense	1
Hospital employee but income is self earned with stipend for resident teaching.	1
Hospital Foundation Multi-specialty Medical Group	1
hospital orthopedic clinic volunteer	1

Hospital owned multi-specialty clinic	1
hospital owned, income based on production[not salaried]	1
I am working only a few hours a week, developing a medical product and working on two papers.	1
I am Director of Medical Education for CME Program for physicians at South Shore Hosp., S. Weymouth, MA	1
I am employed by a not for profit health system that owns numerous hospitals and large multispecialty practices. my income is productivity based. I am not sure why on some of the options in this question the term "salary" is used and some "income" is	1
I am in a group practice where we share expenses but income is self earned and not shared.	1
I work for Tenet Health, not a specific hospital	1
I work in another ortho surgeon's office	1
IME	2
IME Offices	1
IME, Casualty and Medical Legal exams. No longer in surgical practice	1
IMEs with 5 companies and pip	1
In an orthopaedic group, but, income is self-earned and not derived from group	1
Independent contractor	2
independent contractor/independent locum tenens regular coverage at two institutions	1
independent examiner only; no longer in practice	1
Independent Medical Evaluations	1
Independent medical examinations and case reviews	1
Independent Medical Exams	1
Independent working part time in ortho group of 3	1
Independent. Doing social security evaluations	1
independently contract with multiple facilities	1
Integrated Health System	1
Just moved abroad, planning on doing humanitarian work.	1
Kent County (MI) Medical Reserve Corps	1
large multispecialty group	1
Looking	1
low income medical clinic	1
Medical Director	2
Medical Director for Medical Device Co. and Tissue Bank	1
Medical Director, Insurance Industry	1
Medical Legal without direct patient care	1
Medical Management	1
medical-legal consulting and locum tenens	1
missionary surgeon, mainly in Africa	1
Mixed private, VA academic 70/30	1
Neck and face clinics (3)	1
Non operative orthopedics and medical evaluations	1
OCC med clinic	1
Orthopaedic hospitalist - paid by hospital, but independent contractor	1
orthopaedic hospitalist at same location on a regular basis	1
orthopedic hospitalist	1

Orthopedic Surgicalist	1
part time	1
Part time - workmen's comp insurance	1
Part time as "fee basis physician" at Veterans Administration Hospital in a teaching position	1
Part time doing IME's only	1
Part time evaluations	1
part time hospital practice and part time private clinic practice	1
Part time self employed Workcomp 3 rd party liability eval	1
Part time teaching VA Hospital	1
part time VA and part time private non operative office practice	1
part time VA out patient nonoperative orthopedics	1
part-time	1
Part-time Sports Medicine Orthopedist, not operating	1
PARTTIME EMPLOYEE AT A VETERANS HOSPITAL	1
perform IME's	1
Personal Injury Evaluations (Full Time)	1
Physician Executive	1
physician reviewer (independent contractor)	1
Private academic income self earned	1
Private group, no income from group (all income self earned)	1
Private orthopaedic group with academic affiliation	1
Private practice - Multi-specialty group (income self-earned from ortho group within larger group)	1
Private practice - Orthopaedic Group (income self-earned)	6
private practice within a group.income generated from gross minus expenses	1
private practice-academic	1
private practice, consultant only	1
Private practice, partners are 1 other ortho, 3 neurosurgeons, 2 PM&R	1
Private practice, Subspecialty Group (Hand), Salary from Private Practice	1
private,multiple,self earned share overhead.	1
Prof. Corp solo practitioner	1
PSA with local county hospital	1
Research	1
retired from private practice-now medical director for industry	1
Retired from the Blount Orthopedic Clinic 5/12, doing consulting for medical-legal matters, IME's	1
returning to work after 1 1/2 hiatus in July 2014. Public institution.	1
review physician Independent contractor--Worker's Comp	1
Semi retired do disability and voc rehab exams	1
Semi-retired, performing medical legal evaluations	1
Shriners Hospital	2
Since closing my office in Mrch 2006 I have conducted eleemosynary geriatric orthopaedic clinics	1
Small clinical practice (no surgery) and bulk is IME's	1
Sole proprietor sharing overheads with one other orthopaedic surgeon	1
Solo private practice and monthly hospital Medicaid Clinic	1

US FDA Medical Officer	1
US Government regulatory	1
VA	1
VA - part-time hourly pay	1
VA fee basis	1
VA Healthcare	1
VA Hospital	1
VA Physician, non-operative orthopedic clinic	1
VA surgeon- but full time academic faculty	1
VAMC	1
Veteran's Administration	1
Veterans Affairs	1
veterans affairs employed	1
Voluntary-free	1
Volunteer at Local Medical Clinic for working uninsured, volunteer for overseas medical mission activities, and insurance co. consultant	1
Volunteer free clinic	2
Volunteer King Clinic Okc./ designated doctor for State of Texas workmans comp.	1
Volunteer of uninsured clinic - office only	1
Volunteer orthopedic work wth state sovereign immunity	1
Volunteers in Medicine (free clinic)	1
WORK FOR INS. CO. REVIEWING DISABILITY CLAIMS IN ORTHO	1
Work from home	1
work overseas approx 6 months per year in developing world, paid if possible, otherwise on own	1
worker compensation consultant	1
Worker's comp/industrial clinics	1
Working full time but not able to practice orthopaedics due to injuries, was primarily in solo practice when in practice	1
working on yearly contract with former partnership group, private practice	1
working part time; I voluntarily stopped surgical procedures in 2011 at the age of 70	1
Total	186

Table 3 - Other Primary Specialty Areas Reported

	Frequency
(no response)	6691
50% TJA 50% general / hand	1
Adult and pediatric spine	1
adult hip AND adult knee, total joint	1
adult hip and knee	2
Adult hip and trauma	1
Adult joint reconstruction	1
Adult Reconstruction	1
Advanced exercise therapist and postural alignment specialist for musculoskeletal pain	1
all	1

Arthroplasty and Adult Reconstruction, Hip and Knee	1
Arthroscopic Knee only but includes sports, pediatrics, Adult knee, injury and arthritis	1
Arthroscopy and sports medicine	1
Assist in surgery half day in office	1
Assist only	1
Avascular Necrosis of the large major joints.	1
Both Hand and Shoulder/Elbow	1
ceo of medical liability company	1
children/adults with neurologic disorders	1
clinical and basic research	1
complex secondary reconstruction	1
Consultant for insurance and workers compensation	1
consultations	1
Currently only do Independent Medical Exams, WC and Liability	1
Disability Insurer review	1
DO NOT SEE PATIENTS	1
ELEEMOSYNARY GERIATRIC ORTHOPAEDIC SURGERY CLINICS	1
fellowships in sports and joints- now retired-do locum tenens	1
General Orhtopaedics	9
General sports medicine	1
General Orthopaedics with Fellowship Training in Sports Medicine	1
General orthopedics with interest in sports med total joints	1
Global Health Engagement	1
Hand and Microsurgery	1
hand and reconstructive microsurgery	1
hand subspecialty. currently non operative practice	1
Hip and Knee 50/50	1
hip arthroscopy	1
Hip preservation	1
Hip Preservation Surgery	1
I have 4 to 5 specialty areas TKR THR knee surgery hip fractures foot shoulders	1
IME, peer review, legal opinions and evaluation	1
IME's only	1
Independent contract reviewer Worker's Comp	1
Independent evaluations only	1
Independent Medical Examiner	1
infection and wound care	1
Joint Fellowship, Sports Fellowship, getting MBA at Wharton	1
Knee conditions, both adult and sports	1
Knee Only, IMEs, Legal, Research, AJSM masthead editor	1
Limb Deformity	1
Limited consulting - no surgery.	1
Lower extremity- knee, ankle, feet	1
Med legal evals	1
Medical device development	1
Musculoskeletal	1
Musculoskeletal Infection	1
NON Surgical general orthopedics	1

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January 2015

Non-clinical	1
Non-operative knee and hip	1
Not currently practicing	1
open and arthroscopic hip preservation	1
Orthopaedic Hospitalist	1
Orthopaedic pain skeletomuscular pain	1
Orthopaedic Rehabilitation	1
Orthopaedic spine surgery	1
Orthopedic Hospitalist	1
pediatric hand	1
Pediatric Hand Surgery	1
Pediatric Sports Medicine	3
physician executive	1
physician reviewer (peer and utilization review)	1
shoulder	1
Shoulder (no elbow)	1
Shoulder and knee	1
Shoulder elbow and hand	1
Shoulder only	1
Shoulder Surgery	1
Spinal deformity	1
Spine	4
Spine surgery until 2010; now FDA Medical Officer	1
sports and shoulder	1
Sports med and shoulder	1
TEACH RESIDENTS TREAT VA PATIENTS	1
Total joints and cervical spine	1
total knee/arthroscopic shoulders/CTR/fractures	1
Trauma and Adult Hip	1
Upper Extremity	5
Upper Extremity - Comprehensive	1
Upper extremity (Double Hand and Shoulder/elbow fellowship trained)	1
Will be returning to part-time clinic only work.	1
Workcomp, 3rd party liability	1
Workers comp	1
Wound care	2
Total	6805

Table 4 – Other Payor Sources

"No-fault" automobile insurance	1
1/4 TIME AS CONSULTANT STATE HOSPITAL	1
100% Medical legal, no direct patient care	1
19% "legal, collections, etc" with payor uncertain, 4% goverment (VA, Tricare, other govt sources)	1
20% forensic (expert opinions for med legal)	1
20% from medical legal and casualty	1

25% PERSONAL INJURY. 5% MEDICAL CRIMINAL INVESTIGATION.	1
3RD WORLD VOLUNTEERING, INDEPENDENT MEDICAL EXAM CONSULTING	1
Academic center/salary approximately 5 days per month	1
active duty military and dependents	1
active duty military and retirees	1
Active military, dependents and retirees	1
Active/retired military, their dependents and select VA patients	1
administration	1
Administrative work only, no direct patient care	1
all are Veterans Administration patients. I do not know if they have other insurance.	1
All pts are veterans. I practice at the VA.	1
American population	1
ATTORNETS, INS. COMPANIES	1
Attorney	4
ATTORNEY FIRMS, US GOVERNMENT AND INSURANCE COMPANIES	1
Attorney, indigent care	1
attorney/IME	1
attorneys (75%), insurance companies (25%)	1
Attorneys for IME's	1
attorneys/expert witness	1
Auto	12
AUTO ACCIDENT LEGAL	1
Auto and Legal	1
Auto insurance	5
auto no fault	1
Auto, Personal Injury	2
auto/liability	1
auto/LOP	1
Automobile insurance	1
california childrens service	1
Call cases at University	1
call stipend	1
capitated	1
Capitated contract	1
CAR INSURANCE	1
Champus	1
CHAMPUS, VA, TRICARE, INDIAN HEALTH, THIRD PARTY LIABILITY	1
Champus/Tricare and SCHPs	1
church/legal lien	1
City Contract	1
clinic and on call	1
Clinical research trials	1
clinical/industry consulting and research	1
Commercial	1
commercial insurance	1
COMMERCIAL INSURANCES	1
COMMERCIAL/LEGAL	1
COMP	1
consultancy	1
Consultant for a Med Provider Network	1
Contract consultant, US Gov't.	1
contract for indigent care	1

contract with state	1
contracts for IME, peer review, legal work	1
County	2
county health plan	1
County Hospital Insurance	1
County Insurance	1
COUNTY INSURANCE PLAN FOR "UNINSURED"	1
county insurance program	1
Covered by Indian Health Service internal funding.	1
DARS	1
Delphi on-call coverage	1
Depos, court, etc.	1
depositions	1
Dept of Veterans Affairs	2
direct pay from University for athletes	1
Disability and Liability evaluations	1
DISABILITY EXAMS	1
DISABILITY/LEGAL ORTHOPEDICS	1
DIVIDED BETWEEN SELF-PAY AND CHARITY	1
DV ADMINISTRATION	1
EA program	1
employer and legal sources	1
evaluations and expert opinions	1
Family, friends, foreign	1
Federal disability evaluations	1
Federal Government	1
FEDERAL GOVT IMPARTIAL ORTHO CONSULTANT MAINLY M.L.M.I.C. MALPRACT. DEFENSE WORK	1
Forensic examinations for attorneys and insurance companies	1
Forensic medicing, IMEs record reviews etc	1
Foriegn government subsidy	1
foriegn patients	1
FREE	1
free services	1
friends	1
gov	1
Gov't	1
Government	1
government beneficiaries	1
GOVERNMENT EMPLOYEE	1
Government VA	1
Govt entity	1
hmo	1
HMO	2
HMO contracted	1
HMO, PPO	1
Homeless, Uninsured, Illegals	1
Hospital based contracts	1
HOSPITAL CONTRACT AND OFFICE IME'S	1
hospital financial aid	1
Hospital Financial assistance, discount programs, etc	1
Hospital for Clinic - 30%	1

hospital funded trauma coverage	1
hospital self-insures employees--"other" refers to this type of insurance	1
Hospital subsidized care	1
Hospital trauma contract	1
HOSPITAL TRAUMA FUNDS	1
I am a salaried physician and am not aware of this information. Very little worker's comp (oncology practice does not lend to this)	1
I am an independent medical examiner and most of my income is derived from these examinations	1
I am employed by the Veterans Administration	1
I am paid thru' the Shriners system, and have no data on insurance breakdown	1
I am salaried and I do not have insurance data on an individual patient to check financial class.	1
I do not have access to payor mix data	1
I do not know the distribution of payers	1
I don't have any idea - information is not provided to me	1
I don't know. I'm paid by HMO, and don't do billing for non-HMO (call) patients.	1
ihs	1
IHS	1
IME	8
IME AND EXPERT WITNESS WORK FOR ATTORNEYS. CONSULTING WORK	1
IME Companies	1
IME CONSULTANT DISABILITY	1
IME examination and medical review (Orthopaedic)	1
IME exams	2
IME INSURERS	1
IME REIMBURSEMENT	1
ime,depos, chart review for med mal, service agreement with hospital	1
IME's ,admin charges	1
IME/opinions	1
IME/SMO/Legal	1
IMEs	1
Independent Medical Exams	1
independent contractor for multiple IROs	1
Independent exams	1
Independent medical evaluations	1
Independent Medical Evaluations	3
Independent Medical Exams	1
Independent Orthopedic Exams State ind carriers, legal exams	1
Indian Health Services	1
indigent care funding- safety net, etc.	1
indigent patients in developing world	1
Indian Health Service (Contract Health Services)	1
insurance	1
INSURANCE	1
Insurance industry	1
international	1
International	2
INTRALIGN	1
Iowa Care	1
JAIL, COUNTY UNINSURED	1
Kaiser Permanente	1

Lake County Health department	1
legal	10
Legal	11
Legal - Independent Medical Examinations	1
LEGAL CASE PENDING SETTLEMENTS	1
Legal Cases, Consultation	1
Legal consulting	1
legal reviews and exams, second opinions	1
Legal work, IME's, occasional deposition for my own patients	1
legal, cash, sports teams	1
Legal/attorney patients	1
Letter of Protection	1
LETTER OF PROTECTION (LIABILITY)	1
liability	1
liability and other rare cases	1
lien	1
Lien work..personal injury	1
lien/personal injury	1
Local gov non Medicaid - uninsured and no money to self-pay	1
locum tenens	1
Locum Tenens contract physician paid by contracting agency	1
LOP	1
managed care	1
mass health	1
MASS. DEPT WORKER'S COMPENSATION LAWYERS	1
Med legal	1
MED MISSIONS	1
med-legal	3
Med-Legal, MVA/No Fault	1
Med-legal/IME	1
med/legal	1
MED/LEGAL	1
medial legal	1
Medial legal work	1
medical device sales and royalties	1
medical legal	4
Medical Legal	2
Medical Legal Consultation	1
medical legal entities	1
Medical Lien	1
Medical-legal	1
Medical-Legal	1
MEDICAL-LEGAL EXPERT	1
MEDICAL-LEGAL INSURANCE COMP. AND ATTORNY	1
medical/legal	1
MEDICARE	1
Medicare advantage	1
Medicare HMOs	1
medicare/medicaid AND auto insurance	1
MEDICINE REPLACEMENT	1
medicl legal exams	1
MEDICO LEGAL	1

MEDICO-LEGAL	1
medico-legal orthopaedics	1
medicolegal	1
Medicolegal	1
MEDICOLEGAL	1
MEDICOLEGAL	1
Medicolegal case reviews	1
medicolegal consulting, IME's etc	1
medlegal	1
military	12
Military	4
military - gov't	1
Military - tricare	1
Military - TriCare	1
Military "Tricare" beneficiaries	1
military (tricare)	1
Military (Tricare/VA)	1
Military / Tricare	2
military active duty, dependents, retirees	1
military and VA patients	1
military beneficiaries	2
Military beneficiaries	2
Military Beneficiaries	1
Military DoD/Tricare	1
Military Health Beneficiary	1
Military patients	1
military practice	3
military tricare	1
military Tricare	1
military TRICARE	2
Military tricare	1
military tricare insurance	1
military- TRICARE	1
military-contract	1
Military, active, dependants and retired	1
Military, Retiree, Dependents	1
military, tricare	1
Military, TRICARE	1
Military(all patients in military system but some outside payers contribute)	1
Military/ Tri-Care	1
Military/ tricare	1
Military/Tricare	2
MISC INSURANCE	1
MMO	1
motor vehicle	4
Motor vehicle	2
MOTOR VEHICLE	1
motor vehicle accidents	1
MOTOR VEHICLE INSURANCE - STATE	1
Motor vehicle- PIP	1
motor vehicle, legal	1
Motor vehicle, medical legal	1

mva	1
Mva	1
MVA	1
MVA NO FAULT	1
MVA, PIP INSURANCE, STATE OF FLA.	1
MVA, WC	1
MVA/Injury related	1
New York No Fault.	1
No fault	17
No fault auto	1
NO FAULT AUTO ACCIDENTS	1
no fault automobile insurance	1
No Fault, military	1
No fault. Car insurance	1
no fault/auto	1
no longer in clinical practice except charity care	1
No-Fault Auto Insurance	1
no-fault motor vehicle accident insurance	1
None	1
NOT from 3 rd party payments....	1
NY NO-FAULT	1
NYC employees	1
Obamacare	1
Obamacare silver	1
On call / trauma payment	1
OREGON HEALTH PLAN	1
other government	1
other government (VA)	1
Other government programs	1
OUT of network	1
Out-of-network and traditional indemnity	1
over seas out of states	1
paid by locum tenens, no other information	1
Paid on call	1
Part time for VA Hospital	1
Part time VHA	1
Patients of the veterans health administration	1
Payment by agencies requesting exams	1
Per Diem and Per report as independent contractor	1
Perform Independent Medical Exams on personal injury cases	1
Personal injury	13
Personal injury and retirement evaluations	1
Personal Injury Lien cases	1
PI/lawyer	1
PIP - CAR ACCIDENTS	1
plaintiff and defense attorneys	1
Prison	1
Prison work	1
private employer	1
private insurance	1
Private Insurance	1
Private insurance policies	1

professional sports teams	1
Property and casualty insurers (MVCs, slip and fall, etc.)	1
referral	1
Rehab	1
Rehab hospital consult	1
salaried	1
Salaried employee in non-operative Orthopaedics	1
Salary and benefits	1
salary for administrative work	1
School	1
School referral	1
Second Opinions on Injured Workers, etc.	1
Shrine Endowment	1
Shriners Hospital	1
Shriners Hospital patients	1
spouses and family members	1
SS Disability	1
SS Disability,VR,case review,Medical Legal Expert,depositions,court appearance	1
state	1
State insurance	1
state insurance plan	1
STATE OF IOWA	1
Stipend from clinic for Medical Director duties	1
TEXAS REHAB COMMISSION	1
third party	1
third party exams	1
trauma	1
Trauma Center Reimbursement Program	1
trauma supplement from hospital for self pay trauma patients	1
Tricare	56
TRICARE - Military	1
Tricare (Military coverage)	1
TriCare (military health care)	1
TRICARE (military)	1
TRICARE (MILITARY)	1
TRICARE Active Military insurance	1
TriCare and VA	1
Tricare beneficiaries	1
Tricare Military	1
tricare or VA benefits	1
Tricare, IHS, Liability	1
Tricare, Indian Health service	1
TRICARE, LIENS	1
Tricare/Government	1
tricare/military	1
TRICARE/Military	1
TRICARE/military/VA	1
Tricare/united health military	1
TRICARE/VA	1
Uninsured	1
Uninsured but compensated by hospital with Medicaid rates for procedures	1
union clinics	1

Universtiy Salary, Military Retirement - Not currently seeing patients	1
US DEPARTMENT OF LABOR FOR DISABILITY EVALUATION	1
US Department of Labor/Office based practice	1
US Military Dependents	1
VA	22
VA beneficiaries	1
VA EMPLOYEE	1
VA Health System	2
VA hospital	2
VA Hospital	1
VA Hospital / Clinic	1
VA Medical Center	1
VA medical system	1
VA outsourced patients	1
VA position	1
VA practice	1
VA Salary	1
VA system	2
VA-govt	1
VA.Veterans care & compesation	1
VET ADMINIS.	1
Veteran's admiinistartion and Governmen pension as retired military	1
Veteran`s Administration	1
VETERANS ADMIN	1
Veterans administration	1
Veterans Administration	2
VETERANS ADMINISTRATION	1
Veterans Administration esp. Tetraplegic patients	1
Veterans Administration Hospital	1
Veterans Administration patients	1
Veterans Affairs	1
veterans are the patients	1
veterans care	1
Veterans healthcare	1
veterans hospital	1
voc rehab	1
Vocational Rehabilitation	1
Work consits of consulting work for workers comp. defense	1
Worker's Comp Independent Contractor	1
Workers compensation	1
Total	5345

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