# The State of the Urology Workforce and Practice in the United States 2015



American Urological Association

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### Preface

The American Urological Association (AUA) continues to transform urologic care through meaningful collection, integration and utilization of data in order to generate knowledge and inform urologic practice, the nation's health care system and public policy. The AUA Annual Census has entered its second year and serves as a cornerstone for these endeavors.

The AUA Annual Census creates an exciting opportunity to collect and to disseminate urology workforce and practice data on the entire urologic community. The primary goal of the Census is to provide a definitive source of data surrounding the urologic community, including providers' geographic distribution, demographic characteristics, education and training, licensing and board certification and patterns of practice. The Census explores the urologic profession in one systematically designed survey in a longitudinal manner to report both cross-sectional variations and trends over time. The collected data assist in filling knowledge gaps and in meeting research needs while ultimately improving patient care.

The annual publication summarizing Census findings, *The State of the Urology Workforce and Practice in the United States*, has emerged as a primary source of information about urology, and the inaugural 2014 edition was well received by members of the urology community, industry partners, government and other stakeholders. Additionally, a de-identified public use Census dataset is available and being increasingly used by researchers to conduct studies and generate publications on the urologic practice and workforce.

The AUA Annual Census is one of the AUA's primary data initiatives. Please visit the AUA Census webpage at **www.AUAnet.org/Census** for more Census information and results. To participate in the AUA Annual Census, you may access the Census online: **www.AUAnet.org/TakeCensus** from May to September each year or complete it at the AUA Annual Meeting. Your annual participation is vital. I encourage all urology community members to take part in this important data effort each year.

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The AUA would like to thank all members of the urology community for their continued support for and participation in the AUA Annual Census.

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## **Executive Summary**



Millions of patients and their families in the United States are affected by urologic diseases and conditions, including urologic cancers, benign prostatic hyperplasia and urinary incontinence. Therefore, urologists increasingly face tremendous challenges and opportunities, especially as the U.S. population ages and the demand for urologic care and services grows. The American Urological Association (AUA), with more than 22,000 members worldwide, is committed to providing the urologic community with the education, research and advocacy required to address these challenges. Data relating to the urology workforce and practice patterns play an important role in generating knowledge to inform urologic care and policy.

As a premier urologic association, the AUA is committed to providing a definitive source of data regarding the urologic community. In 2014, the AUA launched its first Annual Census, defined and estimated the practicing urologist population, and, for the first time in the history of urology, reported the workforce and practice characteristics of the entire population of practicing urologists.

The 2015 AUA Annual Census was launched at the AUA Annual Meeting in May 2015 in New Orleans, LA, and online data collection continued until the end of September. A total of 5,162 urologists and other urologic care professionals, representing 108 countries and regions throughout the world, completed the 2015 AUA Annual Census. The results on the U.S. practicing urologists were adjusted for non-responses and are reported in this annual publication.

In analyzing and reporting Census results, two data files were established: a population denominator file containing basic demographic, geographic and some certification information for all practicing urologists in the United States in 2015 as listed in the National Provider Identifier (NPI) master file<sup>3</sup> and cross-checked against the American Board of Urology (ABU) certification information maintained by the American Board of Medical Specialties (ABMS)<sup>4</sup> for allopathic physicians and the American Osteopathic Board of Surgeons (AOBS) certification information listed by the American Osteopathic Association (AOA) for osteopathic physicians;<sup>5</sup> and a sample file containing information collected via the AUA Annual Census.

The Census is a novel data source that can be used to explore the profession of urology from multiple angles through the collection of information from practicing urologists and other professionals worldwide. The data collected assist in filling knowledge gaps and meeting research needs while, ultimately, improving patient care.

## RESPONSE AND METHODOLOGY USED IN REPORTING ON U.S. PRACTICING UROLOGISTS

### Data Collection

The AUA Annual Census targeted the entire landscape of the U.S. urologic practitioner population, ensuring all sample groups could then be weighted and compared with the "practicing urologist" population in order to address non-responses. The population file and the Census survey sample file were linked using post-stratification factors (i.e., gender, location, certification status and years since initial certification) to adjust for the contribution of each respondent in a Census survey by the assigned proper sample weight. A total of 5,162 respondents completed the 2015 AUA Annual Census—3,174 of whom were from the United States. Of these, 2,057 respondents were confirmed to be practicing urologists in the United States.

### Population Definition

Practicing urologists are defined as those with valid medical licensures reported in the NPI file as either urologists or pediatric urologists. Those who were reported as either surgeons or specialists in the NPI file were checked against the ABU certification records maintained by the ABMS and AOBS certification records listed on the AOA website. Urologists in residency training were excluded.

### Justification for Non-Response

Census samples were weighted based on post-stratification techniques to adjust for the contribution of each respondent in the Census.

### Statistical Confidence of Census Reporting

When reported findings were based on the weighted Census samples, error estimates were also listed as a margin of error (MOE) or a confidence interval (CI), measuring the precision of the reported values at a 90 percent confidence level. The difference was statistically significant when no overlap was identified between the two corresponding confidence limits.

### **KEY FINDINGS**

In 2015, there were 11,990 practicing urologists identified in the United States.



Among these, 10,869 are actively practicing (have clinical duties for 25 hours or longer per week) (Table 1-1).

- Among the 50 U.S. states, New York has the highest urologist-to-population ratio, while Nevada has the lowest (Table 1-2).
- Among the 3,144 U.S. counties, practicing urologists maintain their primary practice locations in 1,143 counties (Table 1-4).
- The median age of practicing urologists in the United States is 55 years (Table 2-1). Practicing urologists are predominantly male (Table 2-2), non-Hispanic (Table 2-3) and white (Table 2-4).
- Three top areas for fellowship of practicing urologists in the United States are: oncology, endourology/stone disease and pediatrics (Table 3-3).
- More than 88 percent of practicing urologists in the United States are certified by the ABU, the AOBS or both (Table 3-6).
- Practicing urologists in the United States have practiced urology for a median of 21 years, while nearly 30 percent of practicing urologists have practiced for more than 30 years (Table 3-7).

Nearly 63 percent of practicing urologists in the United States are in private practice (including solo, single urology or multispecialty groups) (Table 4-1).

- Over 37 percent of practicing urologists in the United States have a primary subspecialty (Table 4-4), while oncology is the most common subspecialty area (Table 4-5).
- Eighty percent of practicing urologists in the United States perform inpatient surgical procedures. After age 75, fewer than half of practicing urologists perform inpatient procedures (Table 4-6).
- Practicing urologists in the U.S. work a median number of 55 hours in a "typical" week. Nearly 32 percent of urologists work more than 60 hours a week (Table 5-1).
- Both the average and median numbers of clinical hours in a typical week remain at 50 and then decline gradually after the age of 60 (Figure 5-1).

Practicing urologists in the United States work a median 48 weeks per year (Table 5-8) and have a median number of 75 patient visits/encounters in a "typical" week (Table 5-5), suggesting a total number of 3,600 patient visits/encounters per year.



48 weeks/year



### 75 patients/week

- Nearly 88 percent and 70 percent of practicing urologists in the United States accept Medicare and Medicaid, respectively (Table 6-2).
- Approximately 63 percent of practicing urologists in the United States have physician assistants (PAs) and/ or nurse practitioners (NPs) on staff in their primary practices (Tables 7-3, 7-4 and 7-5).
- Nearly all urologic practices in the United States accept new patients (Table 8-1).
- Approximately 41 percent of practicing urologists' practices experience difficulty filling urologist vacancies (Table 8-3).
- Nearly 13 percent of practicing urologists either maintain their primary practices in a rural area or travel to see patients in rural areas (Table 8-5). The majority of the practicing urologists whose primary practices are located in a rural area (81.7 percent) are satisfied with their career and plan to stay in that setting (Table 8-6).
- Approximately 70 percent of practicing urologists in the United States treat patients who have female urinary incontinence and/or pelvic prolapse (Table 9-1).
- In the United States, nearly 58 percent of practicing urologists treat patients with castration-resistant prostate cancer (CRPC) (Table 9-6).

### CONCLUSION

The AUA Census is conducted annually. Each new version is launched at the AUA Annual Meeting and remains available online until the end of September of that same year. The AUA strongly encourages all members to complete the Census each year at the AUA's Annual Meeting or online at <a href="https://www.AUAnet.org/TakeCensus">www.AUAnet.org/TakeCensus</a>. Future Census publications will expand on the initial findings. Beginning in 2016, when the AUA Annual Census finishes its third cycle of data, the AUA will report trends over time and identify significant cross-sectional and longitudinal variations across the specialty.

# About the American Urological Association (AUA)

### THE ORGANIZATION

Founded in 1902 and headquartered near Baltimore, Maryland, the AUA serves more than 22,000 members throughout the world as a leading advocate for the specialty of urology. The AUA is a premier urologic association, providing invaluable support to the urologic community by fostering the highest standards of urologic care.

#### **AUA MISSION**

The AUA mission is to promote the highest standards of urological clinical care through education, research and the formulation of health care policy.

### **AUA VISION**

The AUA vision is to be the premier professional association for the advancement of professional urologic patient care.

For more information about the AUA, please visit www.AUAnet.org.

## The AUA Annual Census

As a premier urologic association, the AUA is committed to serving the urologic community. The AUA supports the generation and dissemination of urologic knowledge through a systematic approach. The AUA's Annual Census is a systematically designed, specialty-representative survey of urology (similar to the U.S. Census). The results of the AUA's Annual Census are weighted in order to reduce non-response bias, to represent accurately the entire specialty and to address the broad landscape of urology.

This publication serves as a primary source of information for the urology workforce in its effort to convey effectively the needs and demands of the urologic community. The findings also depict current clinical practice, including the use of electronic health records (EHRs), mechanisms to report quality measures and medications and procedures to treat urologic conditions of interest to the urologic community. Results from this publication provide an array of information that can bridge knowledge gaps, provide data to meet increasing research needs and, ultimately, improve patient care. Future Census publications will expand on initial findings, report trends over time and identify cross-sectional and longitudinal variations across the specialty nationwide and globally.



## **Definition of Terms**

### **PRACTICE STATUS**

In order to understand the manner in which this report classifies urologists, a Definition of Terms section is provided:

- UROLOGISTS: Physicians and surgeons who are specially trained for the diagnosis and treatment of genitourinary and adrenal gland diseases in patients of any age and of either sex
- PRACTICING UROLOGISTS: Urologists who maintain current medical licensures and treat patients with urologic conditions
- PRACTICING UROLOGISTS IN THE UNITED STATES:
   Practicing urologists with primary practice locations
   in at least one of the 50 U.S. states or the District of
   Columbia
- ACTIVE PRACTICING UROLOGISTS: Practicing urologists who treat patients with urologic conditions and who work at least 25 clinical hours per week
- CERTIFIED UROLOGISTS: Urologists who are certified either by the American Board of Urology (ABU) or by the American Osteopathic Board of Surgery (AOBS)

### **LEVEL OF RURALITY**

The zip code of each practicing urologist's primary practice location was converted to a rural-urban commuting area (RUCA) code based on RUCA3.10<sup>6</sup> (developed collaboratively by the Health Resources and Service Administration's Office of Rural Health Policy [ORHP], the United States Department of Agriculture's Economic Research Service [ERS], the WWAMI Rural Health Research Center [RHRC] based on 2010 United States Census work-commuting data, 2012 United States Census Bureau revised urban area definition based on 2010 Census data and 2013 zip codes).

RUCA3.10 codes were grouped into four levels of rurality. An area with population size  $\geq 50,000$  was defined as a Metropolitan Area. An area with population size < 50,000 was defined as a Non-Metropolitan Area. The Non-Metropolitan Area was further classified: Micropolitan Area (population = 10,000-49,999), Small Town (population = 2,500-9,999), Rural Area (population < 2,500).

## Glossary

**90% CI** 90 Percent Confidence Interval

**AUA** American Urological Association

**ABU** American Board of Urology

**ABMS** American Board of Medical Specialties

**AOA** American Osteopathic Association

**AOBS** American Osteopathic Board of Surgeons

**DO** Doctor of Osteopathic Medicine

**EHR** Electronic Health Record

**HMO** Health Maintenance Organization

MD Medical Doctor

MOE Margin of Error

**NP** Nurse Practitioner

**NPI** National Provider Identifier

PA Physician Assistant

**RUCA** Rural-Urban Commuting Area

## Methodology

Data in the AUA Annual Census were collected and analyzed using the survey methodology developed by Groves et al.<sup>7</sup> Two data files were established. One file was a population file containing basic demographic, geographic and certification information for all practicing urologists in the United States in 2015. Another file was a sample data file containing a broad range of information collected from the Census. The population file and the Census survey sample file were linked through post-stratification factors to adjust for non-responses and the contribution of each respondent in the Census survey by assigned sample weight.

### PRACTICING UROLOGIST POPULATION

Practicing urologists were identified from the NPI File, which includes all physicians in the United States who hold valid medical licenses; ABU certification records maintained by the ABMS; and AOBS certification records from the AOA website if the following criteria were met:

- **1.** Either urology or pediatric urology was listed as the medical specialty.
- 2. A provider was listed as either a surgeon or a specialist and matched to either the 2015 ABU certification records as a urologist or the AOBS certification records as a urological surgeon. Manual checks of all individual urologists' and urologic surgeons' websites were performed to confirm that these physicians provided urologic care in 2015.
- 3. Urologists in residency training were excluded.
- **4.** Urologists who were identified as certified by the ABU and/or AOBS but not listed in the NPI file were excluded in order to ensure inclusion of only currently practicing urologists.

### **ORGANIZATION OF QUESTIONS**

The Census consists of "base" and "supplemental" questions. Base questions that target the entire urology specialty will be asked annually in order to identify cross-sectional and longitudinal patterns. Examples of base question topics include practice status, clinical practice setting, primary and secondary subspecialties, patient encounters and employment status. Supplemental questions will vary each year and focus on emerging

issues; these questions may be distributed either to all participants or to a random subset of participants.

### **CENSUS TIMELINE**

The AUA Annual Census officially launches at the AUA Annual Meeting, and the Census is available to respondents online through September of that same year. Census data are analyzed and reported in the annual publication, *The State of the Urology Workforce and Practice in the United States*, which is available in the spring of the following year.

### **CENSUS DATA COLLECTION**

Data collection for the 2015 AUA Annual Census began on May 15, 2015 at the 2015 AUA Annual Meeting and ended on September 30, 2015. Each respondent was assigned an identification number prior to the submission of responses to the Census questions. This step ensured that the results could be linked to the population file and that no respondent could take the survey more than once.

A total of 5,162 respondents completed the 2015 AUA Annual Census–2,057 of whom were practicing urologists in the United States. Those who self-reported as practicing urologists were checked against the practicing urologist population file and removed if there were no matches found (n=51). Those who were practicing outside the United States (n=1,705) were also removed from this study, but their responses will be analyzed and reported separately with the final analysis available on the AUA website.

### **SAMPLE WEIGHTING**

The purpose of a survey is to sample the entire population of interest, generalizing the collected data to the rest of the population. In order to achieve this aim, the sample needs to be representative (i.e., reflect the characteristics of the population from which it is drawn); however, surveys often over-sample some subgroups of the population and under-sample others. In other words, unless a certain response rate is achieved, survey samples usually do not represent the population. The way in which a certain characteristic (e.g., age, education, race, sex) of a sample is distributed in the survey data may differ from the way it is distributed in the population. Thus, sample weighting is performed to address this difference. Post-stratification factors are used with lesser weight given to over-sampled data and greater weight given to under-sampled data. This utilization provides

a mathematical correction for these biases, and a key result is reasonable statistical confidence. The post-stratification factors are those significant characteristics that distinguish urologists from the sample and from the population.

In order to adjust for non-responses and resulting biases in the 2015 AUA Census sample, a standard post-stratification weighting technique<sup>8</sup> was used to identify post-stratification factors. Identified factors include gender, geographic location, certification status and years since initial certification. These factors were used to develop stratification cells for calculating sample weights.

### CENSUS REPORTING WITH STATISTICAL CONFIDENCE

Results were based on either weighted Census samples or the practicing urologist population data described earlier in this report. Reported statistics based on the population data were preferred because of the lack of sampling bias. In contrast, when reported findings were based on weighted Census samples, error estimates were reported in the form of either MOE or CI, with the estimation of measurement precision at a 90 percent level of confidence.

### **DATA ANALYSIS**

After a post-stratification weighting adjustment, the Census data were analyzed with IBM-SPSS Complex Samples 20.0.

### MARGIN OF ERROR (MOE)

Estimates of characteristics of the practicing urologists from the AUA Census sample data can differ from those that would be obtained if all practicing urologists were surveyed. MOE values at the 90 percent confidence level were used to measure and report the precision of each estimate. The MOE is the difference between an estimate and its upper or lower confidence bounds. The AUA reports both estimates and their associated MOE values in alignment with the U.S. Census Bureau in reporting the U.S. Census/American Community Survey.

### **CONFIDENCE INTERVALS (CI)**

Estimates based on the AUA Census samples can differ from those that would be obtained if all practicing urologists were surveyed. A 90 percent confidence interval (90% CI) was used to mark the upper or lower confidence bounds of the estimated parameter by Census samples with 90 percent statistical confidence.

### **LIMITATIONS**

The results of the AUA Annual Census are subject to the following limitations:

- As a population-backed and weighted survey, the analysis of the AUA Annual Census data relied on the absolute number of responses to report statistics for small geographic, demographic and clinical categories. Women and racial/ethnic minority groups were not well represented in the urologist population and, therefore, were difficult to analyze.
- 2. AOBS certification of osteopathic doctors was obtained via the AOA's online urologic surgeon list without direct verification by the AOBS. Information contained in the AOA's "DO Directory" (public list) is not the primary source for verification of physician credentials
- **3.** The AUA Annual Census is subject to sampling and estimate errors. Thus, the MOE is the appropriate tool when comparing two groups.
- **4.** The practicing urologist population in the United States was based on the assumption that urologists who maintain their medical licenses in the Census year are considered practicing urologists.
- **5.** Geographic classifications, such as levels of rurality and state, were determined based on the primary office location in the NPI file. The actual geographic coverage of practice for each practicing urologist may be beyond the area reported.
- **6.** Census data are self-reported, non-validated and subject to bias or misrepresentation.

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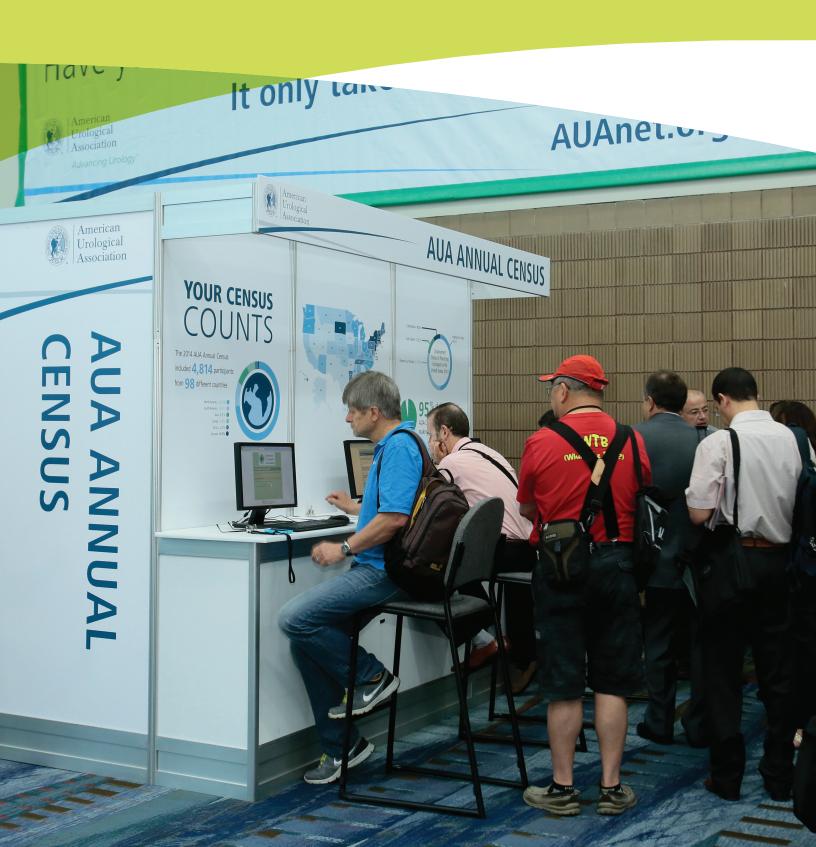
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# Practicing Urologists in the United States



## Section 1: Geographic Distribution

### Primary Observations

- In 2015, 11,990 urologists were identified as "practicing urologists" in the United States. Of those practicing urologists, nearly 91 percent are "actively" practicing (Table 1-1), which is statistically higher than 85.3 percent in 2014.
- On average, the United States has a urologist-to-population ratio of 3.72 per 100,000 population.
   Among the 50 U.S. states, New York has the highest urologist-to-population ratio, while Nevada has the lowest (Table 1-2).
- The AUA's Southeastern Section has the greatest number of practicing urologists in the United States (21.6 percent of the total practicing urologist population in the United States) (Table 1-3).
- Practicing urologists maintain their primary practice locations in nearly 36 percent of all U.S. counties (Table 1-4).
- Less than 10 percent of practicing urologists in the
   United States maintain their primary practice locations
   in non-metropolitan areas (including micropolitan
   areas, small towns and rural areas) (Table 1-5).
   Practicing urologists between the ages of 55-64 and
   those aged 65 or older are more likely to maintain
   their primary practice locations in non-metropolitan
   areas than their counterparts aged 54 or younger
   (Figure 1-5).

### **TABLE 1-1**

### **Practice Status**

Type of Urologist	Number of Practicing Urologists	Percent (%)
Practicing Urologists	11,990	100.0
Active Practicing Urologists	10,869*	90.6

(Data source: National Provider Identifier 09/2015 file, ABU certification records from the ABMS Directory of Board Certified Medical Specialists, AOA DO Directory. \*2015 AUA Annual Census; active practicing urologists are defined as those who work 25 or more clinical hours per week.)

TABLE 1-2
Urologist-to-Population Ratio by State of Primary Practice Location (Ranked from High to Low)

State	Number of Practicing Urologists	Urologist-to- Population Ratio^	Relative Position
U.S. (50 States & DC)	11,990	3.72	National Average
District of Columbia	62	9.39	
New York	959	4.91	
South Dakota	39*	4.89	
Massachusetts	318	4.71	
New Hampshire	66	4.53	High
Pennsylvania	563	4.43	
Rhode Island	50*	4.39	
Louisiana	204	4.36	
New Jersey	402	4.34	
Hawaii	60	4.33	
Maryland	267	4.30	
Tennessee	276	4.24	
Connecticut	154	4.24	
West Virginia	76	4.17	
Maine	57	4.10	Medium High
Alaska	30	4.10	
North Carolina	407	4.07	
Oregon	163	4.06	
Washington	279	4.01	
Ohio	466	4.01	
Delaware	37	3.99	
Florida	821	3.87	
South Carolina	177	3.81	
Colorado	186	3.68	
Alabama	171	3.67	Medium
Indiana	239	3.67	
Wisconsin	215	3.65	
Nebraska	65	3.63	
North Dakota	23*	3.62	
Michigan	383	3.61	

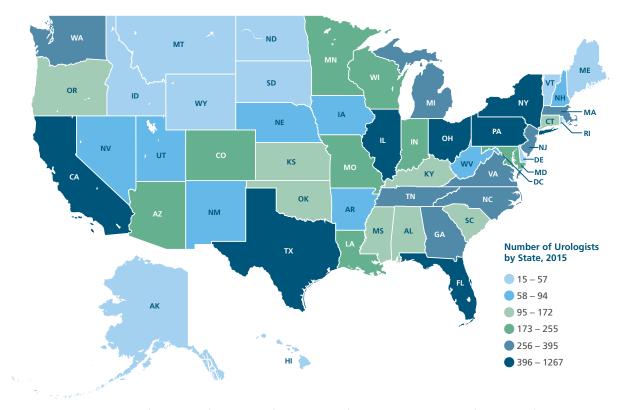
State	Number of Practicing Urologists	Urologist-to- Population Ratio^	Relative Position
Missouri	216	3.56	
Illinois	466	3.56	
Virginia	301	3.56	
Oklahoma	126	3.44	
Minnesota	195	3.44	Medium Low
Kansas	97	3.40	
Kentucky	146	3.36	
Idaho	54	3.31	
Iowa	99	3.27	
Vermont	22*	3.27	
California	1,268	3.16	
Mississippi	94	3.12	
Arizona	233	3.11	
New Mexico	63	3.09	
Texas	816	3.07	
Arkansas	91	3.07	Low
Georgia	298	2.91	
Wyoming	15	2.84	
Utah	77	2.77	
Montana	26*	2.60	
Nevada	72	2.35	

<sup>\*</sup>In reporting results from the 2015 AUA Census, states with fewer than 50 reported urologists were manually checked against these urologists' web sites, resulting in elimination of some practicing urologists from Vermont (9), Montana (7), North Dakota (2), Rhode Island (1) and South Dakota (2).

<sup>^</sup>Urologist-to-population ratio is per 100,000 population.

FIGURE 1-1

### Number of Practicing Urologists by State of Primary Practice Location



(Data source: National Provider Identifier 09/2015 file, ABU certification records from the ABMS Directory of Board Certified Medical Specialists, AOA DO Directory.)

FIGURE 1-2
Practicing Urologist-to-Population Ratio by State of Primary Practice Location

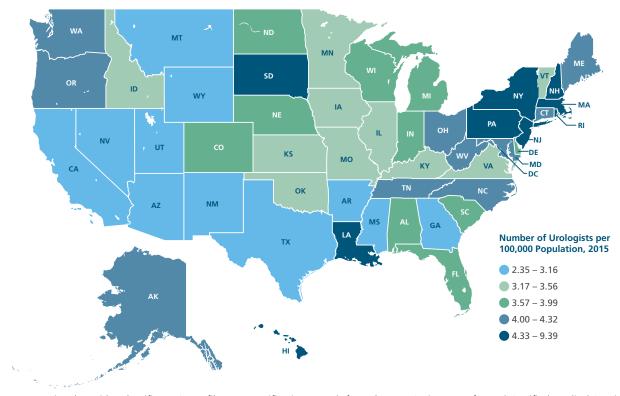
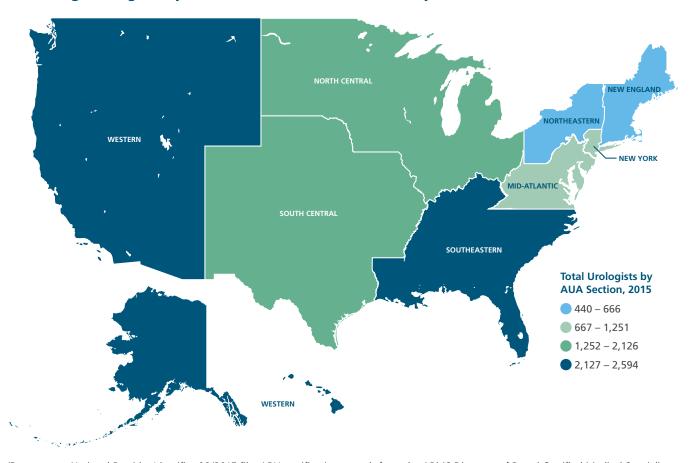


TABLE 1-3
AUA Section (United States Only\*)

AUA Section	Number of Practicing Urologists	Percent (%)
Southeastern	2,594	21.6
Western	2,276	19.0
North Central	2,126	17.7
South Central	1,660	13.8
Mid-Atlantic	1,251	10.4
New York	977	8.1
New England	666	5.6
Northeastern	440	3.7
Total	11,990	100.0

(Data source: National Provider Identifier 09/2015 file, ABU certification records from the ABMS Directory of Board Certified Medical Specialists, AOA DO Directory.)

FIGURE 1-3
Practicing Urologists by AUA Section (United States Only)



<sup>\*</sup>Some AUA sections have non-U.S. members who were not included in this report.

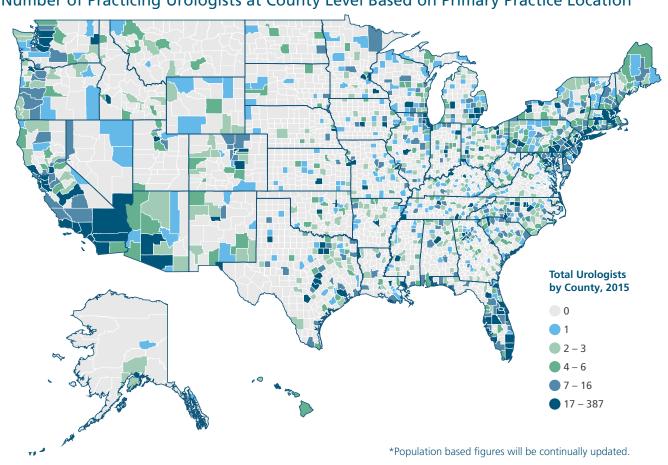
TABLE 1-4
County of Primary Practice Location

Urologist Supply	Number of Counties	Percent (%)
Counties without Any Urologists	2,001*	63.6
Counties with at Least 1 Urologist	1,143	36.4
Counties with 1 Urologist	271	
Counties with 2-3 Urologists	282	
Counties with 4-8 Urologists	277	
Counties with 9 or More Urologists	313	
Total	3,144	100.0

(Data source: National Provider Identifier 09/2015 file. \*Based on the U.S. Census 2013 population estimates, these 2,001 counties represent a population of 47,300,238 Americans.)

FIGURE 1-4

Number of Practicing Urologists at County Level Based on Primary Practice Location



(Data source: National Provider Identifier 09/2015 file.)

TABLE 1-5
Level of Rurality of Primary Practice Location

Rurality Level	Number of Practicing Urologists	Percent (%)
Metropolitan	10,872	90.7
Non-Metropolitan Areas	1,118	9.3
Micropolitan Areas	882	7.4
Small Towns	194	1.6
Rural Areas	42	0.4
Total	11,990	100.0

(Data source: National Provider Identifier 09/2015 file, Rural Urban Commuting Area Codes Data from RUCA3.10.)

### FIGURE 1-5

## Percent of Practicing Urologists Whose Primary Practice Locations are Outside Metropolitan Areas (by Age)\*



(Data source: National Provider Identifier 09/2015 file, weighted samples from the 2015 AUA Annual Census and Rural Urban Commuting Area Codes Data from RUCA3.10.)

<sup>\*</sup>Bold numbers are point estimates. The dashed bars represent upper and lower 90% confidence limits.

## Section 2: Demographic Characteristics

### Primary Observations

- The median age of practicing urologists in the United States is 55 years (Table 2-1).
- The urologic workforce in the United States is predominantly male. Male and female practicing urologists represent approximately 92 percent and 8 percent of the U.S. urologic workforce, respectively (Table 2-2).
- Higher percentages of females are observed in the younger age groups of practicing urologists (Figure 2-1). These data suggest an increasing number of females is entering the urologic workforce in the United States.
- The urologic workforce in the United States is predominantly non-Hispanic white (Table 2-3 and Table 2-4).

#### **TABLE 2-1**

### Age

	Population Represented		
Age Group (Year)	Number	Percent (%)	± MOE (%)
≤ 34	530	4.4	0.8
35 - 44	2,733	22.8	1.0
45 - 54	2,642	22.0	1.0
55 - 64	2,747	22.9	1.0
≥ 65	3,337	27.8	0.8
Total	11,990	100.0	

(Data source: Weighted samples from the 2015 AUA Annual Census. The median age is 55.)

### **TABLE 2-2**

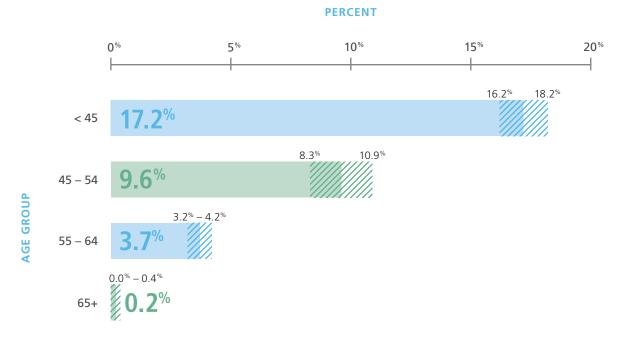
### Gender

Gender	Number of Practicing Urologists	Percent (%)
Male	11,068	92.3
Female	922	7.7
Total	11,990	100.0

(Data source: National Provider Identifier 09/2015 file.)

FIGURE 2-1

### Percent of Female Practicing Urologists (by Age)\*



(Data source: National Provider Identifier 09/2015 file and weighted samples from the 2015 AUA Annual Census.) \*Bold numbers are point estimates. The dashed bars represent upper and lower 90% confidence limits.

### **TABLE 2-3**

### **Ethnicity**

	Population Represented		
Hispanic Origin	Number	Percent (%)	± MOE (%)
Hispanic	445	3.8	0.8
Non-Hispanic	11,195	96.2	0.8
Total Reported	11,641	100.0	
Not Reported	349		
Total	11,990		

(Data source: Weighted samples from the 2015 AUA Annual Census.)

### **TABLE 2-4**

### Race

	Population Represented		
Race	Number	Percent (%)	± MOE (%)
White	9,452	84.1	1.5
Asian	1,439	12.8	1.3
African American/ Black	251	2.2	0.7
Other Races (Including Multiple Races)	103	0.9	0.3
Total Reported	11,244	100.0	
Not Reported	746		
Total	11,990		

(Data source: Weighted samples from the 2015 AUA Annual Census.)

**TABLE 2-5** 

### **Country of Origin**

	Population Represented		
Country of Origin	Number	Percent (%)	± MOE (%)
North and South America	10,275	85.7	1.5
United States	9,806	81.8	1.6
Canada	191	1.6	0.5
Rest of Countries	277	2.3	0.7
Asia	1,215	10.1	1.3
India	510	4.3	0.8
Rest of Countries	705	5.9	1.0
Europe	311	2.6	0.7
Africa	189	1.6	0.5
Total	11,990	100.0	

(Data source: Weighted samples from the 2015 AUA Annual Census.)

## Section 3: Education, Training, State Licensing, Certification and Years of Practice

### Primary Observations

- Nearly 65 percent of practicing urologists completed their residency training between the ages of 31-33 years (Table 3-1).
- More than half of practicing urologists completed fellowship training between the ages of 33-35 and at a median age of 34 (Table 3-4).
- Practicing urologists in younger age groups are more likely to have completed fellowship training than practicing urologists in older age groups (Figure 3-1).
   Significant differences in the completion of fellowship training only exist in age among male practicing urologists and in gender in the age group of 45 and older (Figure 3-2).
- There are three top areas for fellowship among practicing urologists in the United States: oncology, endourology/stone disease, pediatrics (Table 3-3).
- Approximately 16 percent of practicing urologists in the United States maintain more than one state medical license (Table 3-5).
- Most practicing urologists in the United States are certified by the ABU, the AOBS or both (Table 3-6).
- Practicing urologists in the United States have practiced urology for a median of 21 years, while nearly 30 percent of practicing urologists have practiced for more than 30 years (Table 3-7).

TABLE 3-1
Age at Completion of Residency

Age at Completion	Population Represented			
of Residency	Number	Percent (%)	± MOE (%)	
≤ 30	1,036	8.6	1.2	
31	2,136	17.8	1.5	
32	3,256	27.2	1.6	
33	2,355	19.6	1.6	
34	1,212	10.1	1.2	
35	708	5.9	1.0	
≥ 36	1,286	10.7	1.2	
Total	11,990	100.0		

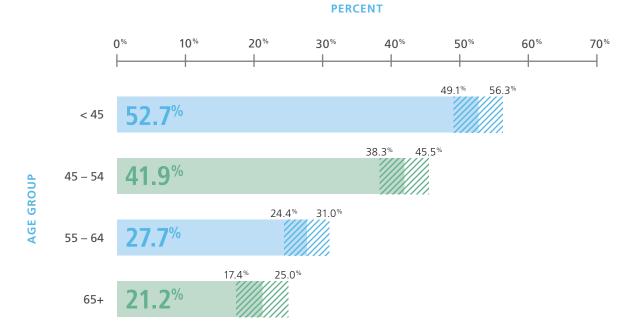
(Data source: Weighted samples from the 2015 AUA Annual Census. The median age at completion of residency is 32.)

TABLE 3-2
Completion of Fellowship Experience

Fellowship	Population Represented				
Experience	Number	Percent (%)	± MOE (%)		
No Fellowship	7,691	64.1	1.8		
Fellowship Trained	4,299	35.9	1.8		
One	3,199	26.7	1.6		
Two or More	1,099	9.2	1.2		
Total	11,990	100.0			

(Data source: Weighted samples from the 2015 AUA Annual Census. Fellowship experience was reported on programs with a duration of one year or longer.)

FIGURE 3-1
Percent of Practicing Urologists with Completed Fellowship Experience (by Age)\*

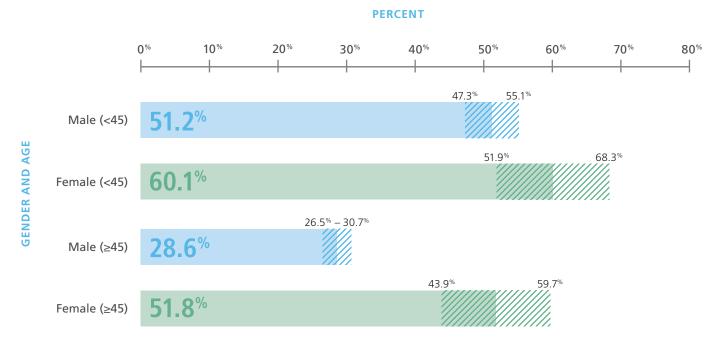


(Data source: Weighted samples from the 2015 AUA Annual Census. Fellowship experience was reported on programs with a duration of one year or longer.)

\*Bold numbers are point estimates. The dashed bars represent upper and lower 90% confidence limits.

FIGURE 3-2

## Percent of Practicing Urologists with Completed Fellowship Experience (by Gender and Age)\*



(Data source: Weighted samples from the 2015 AUA Annual Census. Fellowship experience was reported on programs with a duration of one year or longer.)

**TABLE 3-3**Fellowship Area

	Population Represented		
Area of Fellowship	Number	Percent (%)	± MOE (%)
Oncology	1,292	10.8	1.2
Endourology/Stone Disease	799	6.7	1.0
Pediatrics	788	6.6	1.0
Female Pelvic Medicine and Reconstructive Surgery	579	4.8	0.8
Robotic Surgery	567	4.7	0.8
Research	414	3.5	0.7
Male Genitourinary Reconstruction	302	2.5	0.7
Male Infertility	283	2.4	0.5
Erectile Dysfunction	278	2.3	0.7
Renal Transplantation	199	1.7	0.5

(Data source: Weighted samples from the 2015 AUA Annual Census. Fellowship experience was reported on programs with a duration of one year or longer. This is a multiple selection question, so the total number of counts may differ from the total number of practicing urologists.)

<sup>\*</sup>Bold numbers are point estimates. The dashed bars represent upper and lower 90% confidence limits.

TABLE 3-4

Age at Completion of Most Recent Fellowship

Age at Completion of	Population Represented		
Most Recent Fellowship	Number	Percent (%)	± MOE (%)
≤ 32	542	15.6	2.6
33	721	20.7	3.0
34	736	21.2	3.0
35	470	13.5	2.3
≥ 36	1,009	29.0	3.3
Total Reported	3,478	100.0	
Not Reported	821		
Not Fellowship Trained	7,691		
Total	11,990		

(Data source: Weighted samples from the 2015 AUA Annual Census. Fellowship experience was reported on programs with a duration of one year or longer. The median age is 34.)

TABLE 3-5
Number of State Medical Licenses

	Population		
Number of Licenses	Number	Percent (%)	
Total Reported	11,977	100.0	
1	10,047	83.9	
2	1,632	13.6	
3	256	2.1	
4	42	0.4	
Not Reported	13		
Total	11,990		

TABLE 3-6
Certification Status

	Population		
Certification Status	Number	Percent (%)	
Not Certified	1,428	11.9	
Certified	10,562	88.1	
By ABU	10,367		
By AOBS	207		
By Either ABU or AOBS	10,550		
By Both ABU and AOBS	12		
Total	11,990		

(Data source: National Provider Identifier 09/2015 file, ABU certification records from the ABMS Directory of Board Certified Medical Specialists, AOA DO Directory.)

TABLE 3-7

Total Number of Years of Practicing Urology Since Completion of Residency

Total Number of Years of Practicing Urology since	Рор	nted	
Completion of Residency	Number	Number Percent (%)	
1 - 5	1,875	15.6	0.9
6 - 10	1,358	11.3	0.7
11 - 15	1,338	11.2	0.8
16 - 20	1,215	10.1	0.8
21 - 25	1,394	11.6	0.8
26 - 30	1,219	10.2	0.7
31 - 35	1,275	10.6	0.8
35 - 40	1,404	11.7	1.2
≥ 41	912	7.6	1.2
Total	11,990	100.0	

(Data source: Weighted samples from the 2015 AUA Annual Census. The median number of years of practicing urology since completion of residency is 21.)

## Section 4: Characteristics of the Urology Practice

### Primary Observations

- Nearly 63 percent of practicing urologists in the United States are in private practice (including solo, single urology or multispecialty groups) (Table 4-1). Practicing urologists between the ages of 55 and 64 are most likely to be in private practice, whereas practicing urologists who are 45 and younger are least likely to be in private practice (Figure 4-1). A significant gender difference in this regard was found only among practicing urologists under 45 (Figure 4-2).
- Nearly 63 percent of practicing urologists in the United States do not have a primary subspecialty (Table 4-4), while oncology is the most common subspecialty area (Table 4-5).
- Eighty percent of practicing urologists in the United
   States perform inpatient surgical procedures. However,

- the percentage of practicing urologists who perform inpatient surgical procedures is lower in older age groups. After age 75, less than half of practicing urologists perform inpatient procedures (Table 4-6).
- Practicing urologists in the United States between the ages of 55 and 64 are less likely to be employed by others compared to practicing urologists in other age groups (Figure 4-4).
- Nearly 13 percent of practicing urologists in the United States are the sole owners of their practices, and more than 34 percent of practicing urologists serve as partners in their practices (Table 4-8).
- Female practicing urologists who are 44 or younger are more likely to be employed by others compared to their male counterparts (Figure 4-5).

## TABLE 4-1 Work Setting

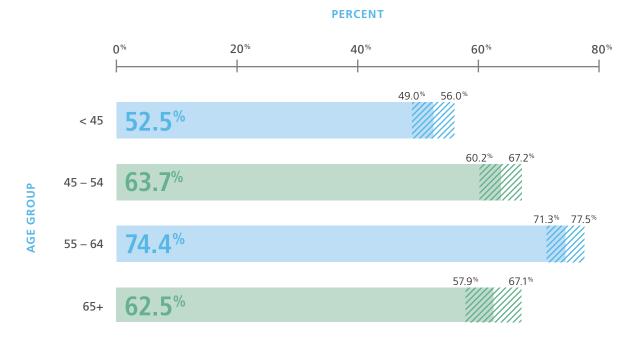
	Population Represented		
Work Setting	Number	Percent (%)	± MOE (%)
Private Practices	7,527	62.8	2.0
Solo Practice	1,376	11.5	1.3
Single Urology Group	4,168	34.8	1.8
Multispecialty Group	1,984	16.5	1.3
Institutional Settings	4,366	36.4	1.8
Academic Medical Center*	2,711	22.6	1.6
Primarily in an Academic Site/Center	2,500	20.9	1.6
Public or Private Hospital	1,360	11.3	1.3
Private Hospital	610	5.1	0.8
Veterans Affairs (VA)	424	3.5	0.8
Non-VA Military Hospital	109	0.9	0.3
Other Public Hospital	216	1.8	0.5

	Population Represented		
Work Setting	Number	Percent (%)	± MOE (%)
Community Health Center/HMO/Managed Care Organization	295	2.5	0.7
Other Settings	97	0.8	0.3
Total	11,990	100.0	

(Data source: Weighted samples from the 2015 AUA Annual Census. Sums from numbers and percentages may contrast with calculated totals due to intrinsic rounding errors.)

### FIGURE 4-1

### Percent of Practicing Urologists in Private Practice (by Age)\*



(Data source: Weighted samples from the 2015 AUA Annual Census.)

<sup>\*</sup>Of these 2,711 practicing urologists who work in academic medical centers, 2,500 are in sites that are primarily academic, 175 are in satellite practices that are affiliated with an academic medical center and the remaining 36 are in sites that are not further identified.

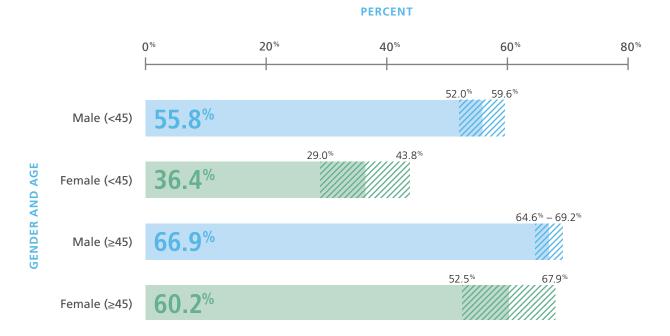
<sup>\*</sup>Bold numbers are point estimates. The dashed bars represent upper and lower 90% confidence limits.

TABLE 4-2
Number of Practicing Urologists by Work Setting

Number of Practicing	Population Represented			
Urologists	Number	Percent (%)	± MOE (%)	
Institutional Settings (Academic, Hospitals and Health Care Systems)				
1	482	12.3	2.5	
2 - 5	1,265	32.1	3.3	
6 - 10	1,012	25.7	3.0	
≥ 11	1,176	29.9	3.1	
Total	3,935	100.0		
Private Practices	s (Solo, Single-S	pecialty and Mu	ltispecialty)	
1	2,020	27.0	2.3	
2 - 5	3,083	41.1	2.5	
6 - 10	1,156	16.5	1.8	
≥ 11	1,349	15.4	1.8	
Total	7,496	100.0		
Other Settings (Co Organization	ommunity Healt n, Federal, State			
1	115	31.6	11.7	
2 - 5	114	31.3	11.5	
6 - 10	62	17.0	8.2	
≥ 11	73	20.0	9.0	
Total	364	100.0		

(Data source: Weighted samples from the 2015 AUA Annual Census.)

FIGURE 4-2
Percent of Practicing Urologists in Private Practice (by Gender and Age)\*



(Data source: Weighted samples from the 2015 AUA Annual Census.)

**TABLE 4-3**Number of Office Locations per Practice

Number of Office	Рор	nted	
Locations	Number	Percent (%)	± MOE (%)
1	5,488	45.8	2.0
2	2,804	23.4	1.6
3	1,733	14.5	1.3
4	569	4.7	0.8
≥ 5	1,396	11.6	1.3
Total	11,990	100.0	

(Data source: Weighted samples from the 2015 AUA Annual Census. The median number of office locations per practice is 2.)

<sup>\*</sup>Bold numbers are point estimates. The dashed bars represent upper and lower 90% confidence limits.

TABLE 4-4
Primary Subspecialty

	Population Represented		
Primary Subspecialty	Number	Percent (%)	± MOE (%)
General without Subspecialty	7,543	62.9	1.8
Oncology	1,166	9.7	1.2
Pediatrics	720	6.0	1.0
Female Pelvic Medicine and Reconstructive Surgery	680	5.7	0.8
Robotic Surgery	544	4.5	0.8
Endourology/Stone Disease	497	4.1	0.8
Male Infertility	266	2.2	0.5
Erectile Dysfunction	226	1.9	0.7
Male Genitourinary Reconstruction	230	1.9	0.5
Renal Transplantation/Laparoscopic Surgery	118	1.0	0.3
Total	11,990	100.0	

(Data source: Weighted samples from the 2015 AUA Annual Census.)

TABLE 4-5
Any Subspecialty

	Population Represented		
Area of Practice	Number	Percent (%)	± MOE (%)
Oncology	4,894	40.8	2.0
Endourology/Stone Disease	4,477	37.3	1.8
Erectile Dysfunction	3,835	32.0	1.8
Robotic Surgery	2,962	24.7	1.5
Laparoscopic Surgery	2,568	21.4	1.5
Female Pelvic Medicine and Reconstructive Surgery	2,447	20.4	1.5
Male Infertility	1,734	14.5	1.3
Pediatrics	1,600	13.3	1.3
Male Genitourinary Reconstruction	1,570	13.1	1.3
Renal Transplantation	192	1.6	0.5

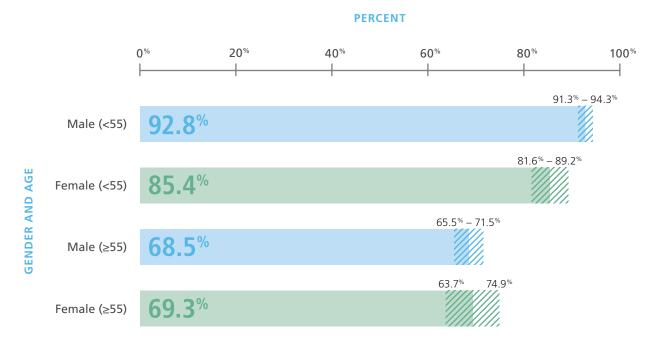
(Data source: Weighted samples from the 2015 AUA Annual Census. This is a multiple selection question so the total number of counts may be more than the total number of practicing urologists.)

TABLE 4-6
Performing Inpatient Procedures (by Age)

	Population Represented			
Age	Number	Percent (%)	± MOE (%)	
All Ages	9,485	80.0	1.6	
≤ 54 Years Old	5,368	91.8	1.3	
55 - 64 Years Old	2,264	82.5	5.3	
65 - 74 Years Old	1,485	61.3	5.3	
≥ 75 Years Old	368	43.4	9.7	
Total Reported	11,862	100.0		
Not Reported	128			
Total	11,990			

FIGURE 4-3

## Percent of Practicing Urologists Who Reported Performing Inpatient Procedures (by Gender and Age)\*



<sup>\*</sup>Bold numbers are point estimates. The dashed bars represent upper and lower 90% confidence limits.

**TABLE 4-7**Other Professional Roles

	Population Represented		
Other Roles	Number	Percent (%)	± MOE (%)
Educator	893	7.4	1.0
Researcher	695	5.8	0.8
Administrator/Medical Officer/ Practice Manager	430	3.6	0.7

**TABLE 4-8**Employment Status

	Population Represented			
Employment Status	Number	Percent (%)	± MOE (%)	
I Am Employed by Others	6,147	51.3	1.3	
I Am a Partner in My Practice	4,134	34.5	1.8	
I Am the Sole Owner of My Practice	1,489	12.4	2.0	
I Am a Combination of the Above	219	1.8	0.5	
Total	11,990	100.0		

FIGURE 4-4

#### Percent of Employed Practicing Urologists (by Age)\*



(Data source: Weighted samples from the 2015 AUA Annual Census.)

\*Bold numbers are point estimates. The dashed bars represent upper and lower 90% confidence limits.

FIGURE 4-5

#### Percent of Employed Practicing Urologists (by Gender and Age)\*



(Data source: Weighted samples from the 2015 AUA Annual Census.)

\*Bold numbers are point estimates. The dashed bars represent upper and lower 90% confidence limits.

## Section 5: Work Hours, Patient Encounters and Other Practice Characteristics

#### Primary Observations

- Practicing urologists in the United States work a median number of 55 hours on clinical and other activities in a "typical" week. Nearly 32 percent of urologists work more than 60 hours a week (Table 5-1).
- Approximately 91 percent of practicing urologists in the United States are "actively" practicing (spending at least 25 hours per week on clinical duties) (Table 5-2).
- Both the average and median numbers of clinical hours in a typical week remain at 50 and then decline gradually after the age of 60 (Figure 5-1).
- Both male and female practicing urologists in the United States work about the same number of combined total hours per typical week; however, male practicing urologists spend fewer hours on non-clinical activities and more hours on clinical activities than their female counterparts (Table 5-4).

- Practicing urologists in the United States have a median number of 75 patient visits/encounters in a "typical" week (Table 5-5) and work a median 48 weeks per year (Table 5-8), suggesting a total number of patient visits/encounters of 3,600 per year.
- Approximately 28 percent of practicing urologists in the United States plan to retire fully after age 70 (Table 5-9). However, the age of planned retirement is higher in older age groups than in younger age groups (Table 5-10).

TABLE 5-1
Total Number of Work Hours in a Typical Week

Number of Work	Population Represented			
Hours per Week	Number	Percent (%)	± MOE (%)	
≤ 35	1,261	10.5	1.3	
36 - 40	1,017	8.5	1.2	
41 - 45	1,040	8.7	1.2	
46 - 50	1,443	12.0	1.3	
51 - 55	1,577	13.2	1.3	
56 - 60	1,865	15.6	1.3	
≥ 61	3,787	31.6	1.6	
Total	11,990	100.0		

(Data source: Weighted samples from the 2015 AUA Annual Census. This table is based on a derived question summing work hours from both clinical work and non-clinical work. The median number of work hours per week is 55.)

TABLE 5-2
Number of Clinical Hours Directly Related to Patient Care in a Typical Week

Number of Clinical	Population Represented		
Hours per Week	Number	Percent (%)	± MOE (%)
< 25	1,121	9.4	1.3
≥ 25	10,869	90.6	1.3
25 - 30	982	8.2	1.2
31 - 35	587	4.9	1.0
36 - 40	2,097	17.5	1.5
41 - 45	799	6.7	1.0
46 - 50	2,615	21.8	1.6
51 - 55	762	6.4	0.8
56 - 60	1,846	15.4	1.3
≥ 61	1,181	9.8	1.2
Total	11,990	100.0	

(Data source: Weighted samples from the 2015 AUA Annual Census. The median number of clinical hours directly related to patient care per week is 50.)

FIGURE 5-1

#### Median and Mean Numbers of Clinical Hours Worked in a Typical Week (by Age)

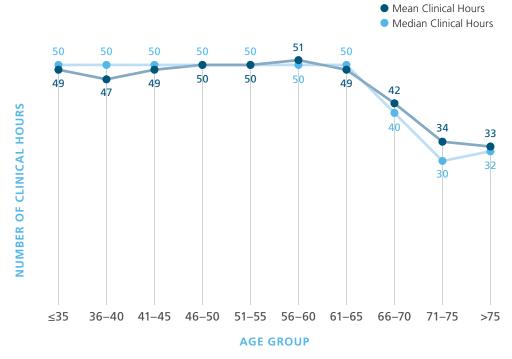


TABLE 5-3

Number of Non-Clinical (Administration, Teaching, Research etc.) Hours in a Typical Week

Number of Non-Clinical Hours	Рор	nted	
per Week	Number	Percent (%)	± MOE (%)
≤ 1	1,964	16.4	1.5
2 - 5	4,134	34.5	1.8
6 - 10	3,291	27.5	1.8
11 - 15	981	8.2	1.2
16 - 20	897	7.5	1.0
> 20	723	6.0	0.8
Total	11,990	100.0	

(Data source: Weighted samples from the 2015 AUA Annual Census. The median number of non-clinical hours per week is 5.)

**TABLE 5-4** 

#### Median Work Hours per Week (by Gender)

Median Hours	Population Represented			
per Week	Men	Women	Total	
Clinical Hours	50	45	50	
Non-Clinical Hours	5	8	5	
Total Work Hours	55	55	55	

(Data source: Weighted samples from the 2015 AUA Annual Census. The median number of hours per week for male and female, combined, is 55.)

TABLE 5-5
Number of Patient Visits/Encounters in a Typical Week

Patient Visits/	Population Represented			
Encounters	Number	Percent (%)	± MOE (%)	
≤ 50	3,237	27.1	1.8	
51 - 75	2,942	24.6	1.6	
76 - 100	3,673	30.7	1.8	
101 - 125	1,000	8.4	1.0	
≥ 126	1,096	9.2	1.2	
Total Reported	11,948	100.0		
Not Reported	42			
Total	11,990			

(Data source: Weighted samples from the 2015 AUA Annual Census. The median number of patient visits/encounters per week is 75.)

TABLE 5-6
Number of Patient Visits/Encounters in a Typical Week (by Gender)

Male Urologis		ologists	Female U	rologists
Encounters	Percent (%)	± MOE (%)	Percent (%)	± MOE (%)
≤ 50	26.5	1.8	34.8	5.10
51 - 75	24.0	1.8	31.6	5.10
76 - 100	31.2	1.8	24.7	4.61
≥ 101	18.3	1.5	8.9	3.13
Total	100.0		100.0	

#### FIGURE 5-2

## Percent of Practicing Urologists with More Than 100 Patient Visits/Encounters in a Typical Week (by Age)\*



(Data source: Weighted samples from the 2015 AUA Annual Census. \*Bold numbers are point estimates. The dashed bars represent upper and lower 90% confidence limits.)

TABLE 5-7
Percent of Patient Visits/Encounters Made by Female Patients

	Population Represented			
Percent	Number	Percent (%)	± MOE (%)	
≤ 25	4,332	36.1	2.0	
26 - 50	6,863	57.2	2.0	
51 - 75	471	3.9	0.7	
≥ 76	323	2.7	0.5	
Total	11,990	100.0		

(Data source: Weighted samples from the 2015 AUA Annual Census. The median percentage of patient visits/encounters by female patients is 33.)

TABLE 5-8

Number of Weeks of Vacation Leave in the Previous Year

Number of Weeks of	Pop	ulation Represe	nted
Vacation Leave	Number	Percent (%)	± MOE (%)
≤ 2	2,766	23.1	1.6
3	2,475	20.6	1.5
4	2,928	24.4	1.6
5 - 6	2,535	21.1	1.6
≥ 7	1,286	10.7	1.3
Total	11,990	100.0	

(Data source: Weighted samples from the 2015 AUA Annual Census. The median number of vacation weeks is 4.)

TABLE 5-9
Age at Planned Full Retirement from Practice

Planned	Population Represented			
Retirement Age	Number	Percent (%)	± MOE (%)	
< 60	467	3.9	0.7	
60 - 65	4,338	36.2	1.5	
66 - 70	3,782	31.5	1.6	
71 - 75	1,989	16.6	1.5	
≥ 76	1,414	11.8	1.3	
Total	11,990	100.0		

(Data source: Weighted samples from the 2015 AUA Annual Census. The median age at planned full retirement from practice is 68.)

**TABLE 5-10**Age at Planned Full Retirement from Practice (by Current Age)

	Population Represented			
Retirement Age	Number	Percent (%)	± MOE (%)	
Current Ag	je: ≤ 44 — <i>Median p</i>	lanned full retireme	ent age: 65	
≤ 59	306	9.4	2.0	
60 - 65	1,773	54.3	3.5	
66 - 70	957	29.3	3.3	
≥ 71	228	7.0	1.8	
Total Reported	3,263	100.0		
Current Ag	e: 45-54 — <i>Median</i> <sub>l</sub>	olanned full retirem	ent age: 65	
≤ 59	118	4.5	1.5	
60 - 65	1,509	57.1	3.6	
66 - 70	761	28.8	3.3	
≥ 71	255	9.6	2.1	
Total	2,642	100.0		
Current Ag	e: 55-64 — <i>Median</i> <sub> </sub>	olanned full retirem	ent age: 67	
≤ 59	43	1.6	0.8	
60 - 65	1,041	37.9	3.5	
66 - 70	1,245	45.3	3.6	
≥ 71	418	15.2	2.6	
Total	2,747	100.0		
Current Age: ≥ 65 — Median planned full retirement age: 75				
≤ 70	836	25.0	3.4	
≥ 71	2,501	75.0	3.4	
Total	3,337	100.0		

# Section 6: Use of Electronic Health Records, Acceptance of Insurance and Quality Reporting

#### Primary Observations

- Nearly 94 percent of practicing urologists in the United States use Electronic Health Records (EHRs) either solely or in combination with paper records (Table 6-1).
- Nearly 88 percent and 70 percent of practicing urologists in the United States accept Medicare and Medicaid, respectively (Table 6-2).
- The top three insurers (excluding Medicare and Medicaid) accepted by practicing urologists are Blue Cross Blue Shield (85.4 percent), Aetna (80.6 percent) and United Healthcare (78.4 percent) (Table 6-2).
- Approximately 52 percent of urologists practicing in the United States participated in some type of quality reporting program in the past year (Table 6-3).

TABLE 6-1
Electronic Health Records (EHR) Use Status

	Population Represented			
Electronic Health Record Use	Number	Percent (%)	± MOE (%)	
EHR Only	9,584	80.2	1.6	
Both EHR and Paper Records	1,619	13.5	1.5	
Paper Records Only	750	6.3	1.0	
Total Reported	11,954	100.0		
Not Reported	36			
Total	11,990			

TABLE 6-2
Insurers Accepted

	Population Represented		
Insurer	Number	Percent (%)	± MOE (%)
Medicare	10,522	87.8	1.3
Blue Cross Blue Shield	10,234	85.4	1.5
Self-Pay	9,854	82.2	1.5
Aetna	9,666	80.6	1.6
United Healthcare	9,400	78.4	1.6
CIGNA	9,074	75.7	1.6
Medicaid	8,349	69.6	1.8
Humana	7,967	66.5	1.8
Anthem/WellPoint	6,630	55.3	2.0
VA	4,701	39.2	2.0
Kaiser Permanente	1,652	13.8	1.3

(Data source: Weighted samples from the 2015 AUA Annual Census. This is a multiple selection question so the total number of counts may be more than the total number of practicing urologists.)

TABLE 6-3

Quality Reporting Programs Participated (Over the Past 12 Months)

	Population Represented			
Response	Number	Percent (%)	± MOE (%)	
Yes	6,254	52.2	2.8	
No	1,748	14.6	2.1	
I Am Unsure/Not Aware	3,988	33.3	2.6	
Total	11,990	100.0		

## Section 7: Medical Team Composition

#### Primary Observations

- The median number of practicing urologists per practice in the United States is 4 (Table 7-1). Nearly 21 percent of practicing urologists work in practices with physicians other than urologists (Table 7-2).
- A majority of practicing urologists (62.7 percent) work with at least one physician extender (PA or NP) in their primary practices (Table 7-5).
- Approximately 73 percent of practicing urologists work with at least one nurse (Table 7-6) on staff in their primary practices.
- Professionals commonly seen in urologic practices are practice managers, administrators and medical officers (Table 7-7), medical assistants (Table 7-9), administrative assistants (Table 7-10) and nurses (Table 7-6).

TABLE 7-1

#### Number of Practicing Urologists per Practice

Number of Urologists per	Population Represented		
Practice	Number	Percent (%)	± MOE (%)
1	2,618	22.2	1.6
2	1,255	10.6	1.3
3	1,280	10.9	1.2
4	1,094	9.3	1.2
5 - 9	2,731	23.2	1.6
10 - 15	1,562	13.2	1.3
≥ 16	1,254	10.6	1.2
Total Reported	11,795	100.0	
Not Reported	195		
Total	11,990		

(Data source: Weighted samples from the 2015 AUA Annual Census. The median number of urologists per practice in the United States is 4.)

TABLE 7-2
Practicing Urologists Who Work Directly with Physicians Other Than Urologists in the Urologists' Primary Practices or Medical Teams

Number of Physicians Other	Population Represented		
Than Urologists	Number	Percent (%)	± MOE (%)
None	8,862	79.2	1.6
≥ 1	2,325	20.8	1.6
1	647	5.8	0.8
2 - 6	796	7.1	1.0
≥ 7	883	7.9	1.2
Total Reported	11,188	100.0	
Not Reported	802		
Total	11,990		

**TABLE 7-3** 

Practicing Urologists Who Work Directly with Physician Assistants in the Urologists' Primary Practices or Medical Teams

Number of Physician	Population Represented		
Assistants	Number	Percent (%)	± MOE (%)
None	6,507	56.6	2.0
≥ 1	4,981	43.4	2.0
1	2,243	19.5	1.5
2	1,170	10.2	1.2
≥ 3	1,568	13.7	1.3
Total Reported	11,488	100.0	
Not Reported	502		
Total	11,990		

TABLE 7-4
Practicing Urologists Who Work Directly with Nurse Practitioners in the Urologists' Primary Practices or Medical Teams

Number of Nurse	Population Represented			
Practitioners	Number	Percent (%)	± MOE (%)	
None	6,333	55.3	2.0	
≥ 1	5,121	44.7	2.0	
1	2,403	21.0	1.6	
2	1,395	12.2	1.3	
≥ 3	1,323	11.5	1.3	
Total Reported	11,454	100.0		
Not Reported	536			
Total	11,990			

**TABLE 7-5** 

Practicing Urologists Who Work Directly with Physician Assistants and Nurse Practitioners in the Urologists' Primary Practices or Medical Teams

Number of Physician Assistants and Nurse	Population Represented		
Practitioners	Number	Percent (%)	± MOE (%)
None	4,327	37.3	2.0
≥ 1	7,284	62.7	2.0
1	2,378	20.5	1.6
2 - 4	3,489	30.1	1.8
≥ 5	1,417	12.2	1.3
Total	11,612	100.0	
Not Reported	378		
Total	11,990		

TABLE 7-6
Practicing Urologists Who Work Directly with Nurses in the Urologists' Primary Practices or Medical Teams

Number of	Population Represented		
Nurses	Number	Percent (%)	± MOE (%)
None	2,890	26.9	1.8
≥ 1	7,854	73.1	1.8
1	2,097	19.5	1.6
2	1,614	15.0	1.5
3	1,014	9.4	1.2
4	796	7.4	1.2
5 - 9	1,484	13.8	1.3
≥ 10	850	7.9	1.2
Total Reported	10,745	100.0	
Not Reported	1,245		
Total	11,990		

**TABLE 7-7** 

Practicing Urologists Who Work Directly with Administrators/Medical Officers/Practice Managers in the Urologists' Primary Practices or Medical Teams

Number of Administrators/ Medical Officers/	Population Represented		
Practice Managers	Number	Percent (%)	± MOE (%)
None	1,163	10.9	1.5
≥ 1	9,491	89.1	1.5
1	5,297	49.7	2.1
2	2,012	18.9	1.6
3 - 4	1,331	12.5	1.3
≥ 5	850	8.0	1.2
Total Reported	10,654	100.0	
Not Reported	1,336		
Total	11,990		

TABLE 7-8
Practicing Urologists Who Work Directly with Certified Surgical Technicians in the Urologists' Primary Practices or Medical Teams

Number of Certified Surgical	Population Represented		
Technicians	Number	Percent (%)	± MOE (%)
None	8,331	82.2	1.6
≥ 1	1,807	17.8	1.6
1	802	7.9	1.2
≥ 2	1,005	9.9	1.3
Total Reported	10,138	100.0	
Not Reported	1,852		
Total	11,990		

**TABLE 7-9** 

Practicing Urologists Who Work Directly with Medical Assistants in the Urologists' Primary Practices or Medical Teams

Number of Medical	Рор	ulation Represe	nted
Assistants	Number	Percent (%)	± MOE (%)
None	1,956	18.8	1.8
≥ 1	8,428	81.2	1.8
1	1,504	14.5	1.5
2	1,844	17.8	1.6
3	1,150	11.1	1.3
4	924	8.9	1.2
5	589	5.7	1.0
6 - 9	1,247	12.0	1.3
≥ 10	1,169	11.3	1.3
Total	10,384	100.0	
Not Reported	1,606		
Total	11,990		

TABLE 7-10
Practicing Urologists Who Work Directly with Administrative Assistants in the Urologists' Primary Practices or Medical Teams

Number of Administrative	Population Represented			
Assistants	Number	Percent (%)	± MOE (%)	
0	2,528	25.3	2.0	
≥ 1	7,462	74.7	2.0	
1	2,299	23.0	1.8	
2	1,349	13.5	1.5	
3	1,009	10.1	1.3	
4 - 7	1,778	17.8	1.6	
≥ 8	1,027	10.3	1.2	
Total Reported	9,990	100.0		
Not Reported	2,000			
Total	11,990			

## Section 8: Workforce and Rural Practice

#### Primary Observations

- Nearly all urologic practices in the United States accept new patients (Table 8-1).
- The most common urologic practices that do not accept new patients or cannot schedule first appointments within two weeks include Veterans Affairs and other military hospitals, community health centers, HMO and managed care organizations and non-university hospitals, as well as practices in nonmetropolitan areas (Table 8-2).
- Approximately 41 percent of practicing urologists' practices experience difficulty filling urologist vacancies (Table 8-3). This difficulty is more prevalent in private hospitals, VA and other military hospitals and non-university hospitals, as well as in practices in non-metropolitan areas (Table 8-4).

- Approximately 12 percent of practicing urologists either maintain their primary practices in a rural area or travel to see patients in rural areas (Table 8-5).
- The majority of the practicing urologists whose primary practices are located in a rural area (81.7 percent) are satisfied with their career and plan to stay in that setting (Table 8-6).

#### **TABLE 8-1**

#### Number of Practicing Urologists Who Do Not Currently Accept New Patients

	Population Represented			
Response	Number	Percent (%)	± MOE (%)	
No	104	0.9	0.5	
Yes	11,886	99.1	0.4	
Appointment Can Be Scheduled within Two Weeks	9,617	80.7	1.5	
Appointment Cannot Be Scheduled within Two Weeks	2,192	18.4	1.5	
Total Reported	11,914	100.0		
Not Reported	76			
Total	11,990			

TABLE 8-2
Percent of Practicing Urologists Who Do Not Currently Accept New Patients or Cannot See New Patients within Two Weeks (by Work Setting and by Level of Rurality)

Selected Work Settings	Percent (%)	± MOE (%)
Veterans Affairs and Other Military Hospital	32.6	8.9
Community Health Center/HMO/Managed Care Organization	25.3	11.7
Other Public Hospital	25.9	12.3
Private Hospital	21.4	7.4
Academic Medical Center	20.7	3.3
Metropolitan versus Non-Metropolitan Area		
Practices in Metropolitan Areas	18.5	1.6
Practices in Non-Metropolitan Areas	26.4	5.3

**TABLE 8-3** 

Number of Practicing Urologists from Practices Currently Experiencing Difficulty Filling Urologist Vacancies

	Population Represented			
Response	Number	Percent (%)	± MOE (%)	
No	6,046	58.7	2.0	
Yes	4,262	41.3	2.0	
Total Reported	10,308	100.0		
Not Reported	1,682			
Total	11,990			

TABLE 8-4
Percent of Practicing Urologists from Practices Currently Experiencing Difficulty Filling Urologist Vacancies (by Work Setting and Level of Rurality)

Work Setting	Percent (%)	± MOE (%)
Private Hospital	58.9	9.2
Veterans Affairs and Other Military Hospital	53.4	10.5
Other Public Hospital	51.2	16.1
Multispecialty Group	46.4	4.9
Single Urology Group	44.8	3.5
Solo Practice	42.5	7.1
Academic Medical Center	26.6	3.8
Community Health Center/HMO/Managed Care Organization	26.4	13.2
Metropolitan versus Non-Metropolitan Areas		
Practices in Metropolitan Areas	38.8	2.2
Practices in Non-Metropolitan Areas	65.3	6.5

TABLE 8-5
Number of Practicing Urologists with Primary Practice Locations in a Rural Area\*

	Population Represented		
Response	Number	Percent (%)	± MOE (%)
Yes	769	6.4	1.0
No, My Primary Practice Is Not in a Rural Area	4,832	40.5	1.8
No, But I Travel to Rural Areas Regularly to Treat Patients	724	6.1	0.8
No, But Patients from Rural Areas Travel to My Primary Practice Location	5,601	47.0	2.0
Total Reported	11,925	100.0	
Not Reported	65		
Total	11,990		

<sup>\*</sup>A rural area is defined as an area that is outside of an urban area or cluster and has a population less than 2,500.

**TABLE 8-6**Level of Career Satisfaction in a Rural Setting

	Population Represented		
Response	Number	Percent (%)	± MOE (%)
Satisfied–I Plan to Stay	602	81.7	6.6
Not Satisfied-Consider Leaving or Plan to Leave	135	18.3	6.6
Total Reported	737	100.0	
Not Reported	32		
Total	769		

## Section 9: Selected Urologic Conditions: Stress Urinary Incontinence and Castration-Resistant Prostate Cancer

#### Primary Observations

- Approximately 70 percent of practicing urologists in the United States treat patients who have female urinary incontinence and/or pelvic prolapse (Table 9-1).
- Compared to five years ago, nearly 88 percent of practicing urologists who treat patients with stress urinary incontinence (SUI) and 88 percent of practicing urologists who treat patients with pelvic organ prolapse treat the same number of patients or fewer (Table 9-2 and Table 9-3).
- In the United States, about 58 percent of practicing urologists treat patients with castration-resistant prostate cancer (CRPC) (Table 9-6).

- Approximately 92 percent of practicing urologists in the United States who treat CRPC patients use AUA Clinical Guidelines (Table 9-8).
- Nearly 83 percent of practicing urologists who treat patients with CRPC treat CRPC patients who have undergone radiation and/or who have been treated by medical oncologists in a multidisciplinary clinic (Table 9-9).

#### Stress Urinary Incontinence (SUI)

#### **TABLE 9-1**

## Practicing Urologists Who Treat Female Urinary Incontinence and/or Pelvic Prolapse Patients

	Population Represented		
Response	Number	Percent (%)	± MOE (%)
Yes	8,442	70.4	1.8
No	3,548	29.6	1.8
Total	11,990	100.0	

**TABLE 9-2** 

Practicing Urologists Who Treat More, the Same or Fewer SUI Patients Compared to Five Years Ago

	Population Represented			
Response	Number	Percent (%)	± MOE (%)	
More	986	12.6	1.6	
The Same	2,825	36.1	2.3	
Fewer	4,012	51.3	2.5	
Total Reported	7,823	100.0		
Not Reported	619			
Total	8,442			

(Data source: Weighted samples from the 2015 AUA Annual Census.)

#### **TABLE 9-3**

Practicing Urologists Who Treat More, the Same or Fewer Pelvic Organ Prolapse Patients Compared to Five Years Ago

	Population Represented			
Response	Number	Percent (%)	± MOE (%)	
More	788	11.8	1.6	
The Same	1,924	28.9	2.3	
Fewer	3,944	59.3	2.5	
Total Reported	6,655	100.0		
Not Reported	1,786			
Total	8,442			

(Data source: Weighted samples from the 2015 AUA Annual Census.)

#### **TABLE 9-4**

Practicing Urologists Who Use More, the Same or Fewer Synthetic Midurethral Slings to Treat Female SUI Compared to Five Years Ago

	Population Represented			
Response	Number	Percent (%)	± MOE (%)	
More	467	7.0	1.3	
The Same	2,927	44.0	2.5	
Fewer	3,256	49.0	2.6	
Total Reported	6,649	100.0		
Not Reported	1,792			
Total	8,442			

TABLE 9-5
Practicing Urologists Who Use More, the Same or Fewer Autologous Fascial Slings to Treat Female SUI Compared to Five Years Ago

	Population Represented			
Response	Number	Percent (%)	± MOE (%)	
More	676	14.3	2.1	
The Same	2,149	45.4	3.1	
Fewer	1,905	40.3	3.1	
Total Reported	4,731	100.0		
Not Reported	3,711			
Total	8,442			

Castration-Resistant Prostate Cancer (CRPC)

**TABLE 9-6** 

#### **Practicing Urologists Who Treat CRPC Patients**

	Population Represented			
Response	Number	Percent (%)	± MOE (%)	
Yes	6,996	58.4	2.0	
No	4,994	41.6	2.0	
Total	11,990	100.0		

(Data source: Weighted samples from the 2015 AUA Annual Census.)

**TABLE 9-7** 

#### Practicing Urologists and Number of CRPC Patients Seen in a Typical Month

Number of	Population Represented			
CRPC Patients per Month	Number	Percent (%)	± MOE (%)	
1	838	12.0	1.6	
2	1,197	17.1	2.0	
3	832	11.9	1.6	
4	849	12.1	1.6	
5 - 9	1,831	26.2	2.3	
≥ 10	1,449	20.7	2.0	
Total	6,996	100.0		

(Data source: Weighted samples from the 2015 AUA Annual Census. The median number of CRPC patients seen in a typical month is 4.)

TABLE 9-8
Practicing Urologists Who Use AUA Clinical Guidelines in the Treatment of CRPC Patients

	Population Represented		
Response	Number	Percent (%)	± MOE (%)
Yes	6,401	91.5	1.0
No	366	5.2	1.2
I am not Aware of the AUA Guidelines	229	3.3	1.0
Total	6,996	100.0	

#### **TABLE 9-9**

Practicing Urologists Who See CRPC Patients Who Have Undergone Radiation and/or Who Have Been Treated by Medical Oncologists in a Multidisciplinary Clinic

	Population Represented			
Response	Number	Percent (%)	± MOE (%)	
Yes	5,775	82.5	2.0	
No	1,222	17.5	2.0	
Total	6,996	100.0		

(Data source: Weighted samples from the 2015 AUA Annual Census.)

#### **TABLE 9-10**

Practicing Urologists Who Refer CRPC Patients Not Previously Seen by a Medical Oncologist to a Medical Oncologist

	Population Represented		
Response	Number	Percent (%)	± MOE (%)
At the Time of Diagnosis of CRPC	2,730	39.0	2.5
At the Time of First Treatment for CRPC	662	9.5	1.5
After Failure of Initial Treatment for CRPC	1,788	25.6	2.3
Only When the Patient Requires Docetaxel or Other Agents That You Do Not Prescribe	2,515	35.9	2.5
Only When the Patient Becomes Symptomatic	244	3.5	1.0
I Do Not Refer Patients to Medical Oncology	55	0.8	0.3

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