

The State of the Urology Workforce and Practice in the United States 2018



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Urological
Association

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Preface

The American Urological Association (AUA) has established a data platform to conduct its Annual Census of urologic professionals, which serves as a vehicle to understand the current urology workforce, identify existing workforce issues and prepare for the future urology workforce.

Since its inception in 2014, the AUA Annual Census consists of questions pertaining to important provider-related topics such as geographic distribution, demographic characteristics, education and training, licensing and board certification, and scope and pattern of practice. Each year, the AUA receives a large number of potential questions from AUA committees, councils, sections, urology subspecialty societies and individual urologists. The ultimate goal of the Annual Census is to fill the knowledge gaps around the specialty with definitive and comparable information.

The AUA Annual Census is designed to not only identify practice characteristics and longitudinal variations through base questions that are asked annually, but also delve into emerging topics through new questions collected from the specialty leadership and the urology community that vary year by year. Responses to base questions in previous years are pre-populated in each subsequent year to be reviewed and updated as needed by the respondent. This strategy allows more time for participants to respond to the important questions on new topics; many of which provide data for use in lobbying and advocacy activities on behalf of the specialty.

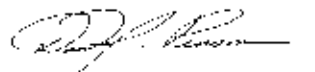
The State of the Urology Workforce and Practice in the United States, the annual publication summarizing Census findings, has emerged as a primary source of information about urology. Additionally, de-identified public use Census datasets from each survey are available to researchers for a nominal fee. Researchers have used these data to conduct studies and generate publications on the urologic practice and workforce.

As one of the AUA's primary data programs, the AUA Annual Census is now entering its sixth year of data collection. We encourage all urology community members to take part in and contribute to this important data effort each year. Please visit the AUA Census webpage at AUAnet.org/Census for more information and results.

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

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Executive Summary



The AUA, with more than 22,000 members worldwide, is committed to providing the urologic community with the education, research, advocacy and data required to address the increasing number of challenges and opportunities presented to the profession as the demand for urologic care grows. Data relating to the urology workforce and practice patterns play an important role in generating knowledge to inform urologic care and workforce policy.

Data collection for the 2018 AUA Annual Census began in May 2018 at the AUA Annual Meeting in San Francisco, CA, and continued online until the end of September 2018. A total of 5,870 urologists and other urologic care professionals, representing 114 countries and regions throughout the world, completed the 2018 AUA Annual Census. The results on U.S. practicing urologists were adjusted for non-responses and are reported in this annual publication.

The AUA Annual Census is a primary data source 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.

Definition of the Urologist Population

Practicing urologists are defined as those with valid medical licenses reported in the National Provider Identifier (NPI) file as either urologists or pediatric urologists. Those who were reported as either surgeons or specialists in the NPI file and those who did not report a medical degree (MD or DO) were checked against the American Board of Urology (ABU) certification records maintained by the American Board of Medical Specialties (ABMS) and the American Osteopathic Board of Surgery (AOBS) certification records listed on the American Osteopathic Association (AOA) website. Urologists in residency training were excluded from this report; however, their results will be published in a separate report.

The 2018 U.S. urologist population consists of a total of 12,660 practicing urologists, an increase of 1.1 percent from 12,517 practicing urologists in 2017.

Data Collection and Justification for Non-Response

A total of 5,870 respondents completed the 2018 AUA Annual Census—3,622 of whom were from the United

States. Of these, 2,339 Census respondents were validated to be practicing urologists in the United States and formed the Census sample data for analysis. The population file and the Census survey sample file were linked using post-stratification factors (i.e., gender, location, certification status, years since initial certification) to adjust for the non-response bias in a Census survey by the assigned proper sample weight.

KEY FINDINGS

In 2018, **12,660 urologists** were identified as “practicing urologists” in the United States. Of those, **84.5 percent** were “actively” practicing (Table 1-1), which is higher than the 80 percent reported a year ago.



The national urologist-to-population ratio increased to 3.89 per 100,000 population in 2018, up from 3.85 in 2017 and 3.77 in 2016. Among the 50 U.S. states, New Hampshire has the highest urologist-to-population ratio, while Nevada has the lowest (Table 1-2).

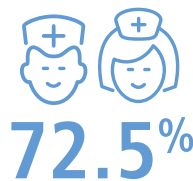
- The AUA's Southeastern Section has the greatest number of practicing urologists, accounting for 21.3 percent of the total practicing urologist population in the United States (Table 1-3).
- Practicing urologists maintain their primary practice locations in 37.4 percent of U.S. counties (Table 1-4), slightly down from 37.8 percent a year ago.
- The percentage of practicing urologists in the United States who maintain their primary practice locations outside of metropolitan areas remained stable, slightly higher than 10 percent (Table 1-5). The likelihood of practicing urologists maintaining their primary practice locations in non-metropolitan areas increases with the age of the urologist (Figure 1-6).
- The median age of practicing urologists in the United States is 56 years; one year older than what was reported a year ago (Table 2-1).

While the urologic workforce in the United States is predominantly male, the **percentage of female urologists continued to rise to 9.2** in 2018, up from 8.8 in 2017 (Table 2-2).



- The urologic workforce in the United States is predominantly non-Hispanic white (Table 2-3 and Table 2-4). The percentage of practicing urologists with Hispanic origin was only 3.9 in 2018, while the Hispanic population accounted for 18.1 percent of the U.S. population.¹
- If given the opportunity, nearly 91 percent of practicing urologists would not be interested in shortening residency training to only be allowed to perform lower risk procedures (Table 3-2).
- Nearly 38 percent of urologists have completed at least one fellowship program during their career (Table 3-3). Younger urologists and female urologists are more likely to have completed fellowship training than their older and male counterparts (Figure 3-1).
- The top three areas for fellowship are oncology, robotic surgery, and endourology/stone disease among male practicing urologists and female pelvic medicine and reconstructive surgery, pediatrics, and oncology among female practicing urologists (Table 3-4).
- Approximately 85 percent of practicing urologists in the United States are certified by the ABU (Table 3-7).

The number of practicing urologists who directly work with physician assistants and nurse practitioners significantly increased from 62.7 percent in 2015 to 72.5 percent in 2018 (Table 4-2).



- The percentage of practicing urologists in private practices in the United States decreased to 56.9 in 2018 from 59.5 in 2017 (Table 4-4). Male urologists aged 45 years or older are most likely to work in private practices (Figure 4-1).
- Female practicing urologists are more likely to work in academic medical centers than their male counterparts (32.7 percent and 24.2 percent, respectively) (Table 4-5).
- Nearly 38 percent of practicing urologists in the United States have a primary subspecialty (Table 4-8); oncology is the most common subspecialty area (Table 4-9).
- Approximately 80 percent of practicing urologists in the United States reported performing at least one major inpatient surgical procedure in a typical month (Table 4-10). The percentage of practicing urologists who perform inpatient surgical procedures decreases with age (Table 4-11).

The median number of hours practicing urologists worked per week was 55. Nearly one-third of urologists work more than 60 hours a week (Table 5-1).



60+ hours

- The average number of work hours per week increased to 52.9 hours in 2018 from 51.6 hours in 2017 (Table 5-4).
- The median number of minutes a practicing urologist spends with a patient in a typical office visit is 15 (Table 5-5). On average, female urologists spend more minutes with patients than their male counterparts whereas practicing urologists in single urology groups spend the least amount of time with patients in a typical office visit (Table 5-6).
- Practicing urologists see 75 patients in a typical week (Table 5-7) and work a median 48 weeks per year (Table 5-10), suggesting an estimated 3,600 patients visits/encounters per urologist in 2018, which was higher than 3,360 patient visits/encounters per urologist in 2017.

The top reason urologists plan to retire before the age of 65 is a lack of time for personal and/or family life while they work (Table 5-12). The top reason urologists plan to retire after the age of 70 is they enjoy practicing (Table 5-13).



- Approximately 70 percent of practicing urologists reported their practices took steps to increase practice profitability in the previous year (Table 6-1). The top three steps taken were to see more patients, reduce spending in areas other than reducing staff or travel to meetings and decrease staff size (Table 6-2).
- Approximately 75 percent of practicing urologists received financial support from their practices to attend in-person meetings (Table 6-3).
- Approximately 78 percent and 63 percent of practicing urologists reported their practices made efforts to hire women and underrepresented minorities, respectively (Table 6-5 and Table 6-6).
- The majority of practicing urologists do not feel a gender bias exists within their practice (Table 7-1).

- Nearly 60 percent of urologists stated their practice has at least one female partner (Table 7-7).
- Approximately 55 percent of male urologists and 40 percent of female urologists were satisfied or very satisfied with their work-life balance (Table 7-12).
- Nearly 12 percent of practicing urologists in the United States participated in a telemedicine program in 2018 (Table 8-1), which is significantly higher than the 8.5 percent in 2016.
- The top motivation for implementing telemedicine capabilities is to provide care to patients from underserved areas (Table 8-3).
- A vast majority (83.3 percent) of urologists who currently participate in telemedicine expected their organizations' telemedicine services to increase in three years (Table 8-5).
- Of practicing urologists, 85 percent reported their practices made steps to incorporate Quality Payment Program participation (via the Merit-based Incentive Payment System or an Alternative Payment Model) into their practice (Table 9-1). To do so, the majority of practices upgraded or purchased a new EHR system, or committed new resources (Table 9-2).
- The top three quality programs in which urologists participated in the past 12 months included standardization of clinical care through protocols or guidelines, participation in morbidity and mortality conferences and collection of quality metrics for internal review (Table 9-3).
- Approximately 95 percent of practicing urologists used an EHR system in their practices in 2018 (Table 9-7), an increase from 91.9 percent in 2014. Lower utilization was found in male urologists 45 years of age or older (Figure 9-1) and urologists in solo practices (Figure 9-2).
- Approximately 90 percent of practicing urologists prescribed opioids for their patients undergoing surgical procedures (Table 10-1).
- Nearly 15 percent of practicing urologists prescribe opioids based on procedure-specific guidance developed by their practice or institution (Table 10-2).
- Nearly three-fourths of urologists decreased their number of opioid prescriptions compared to three years ago for patients undergoing surgical procedures (Table 10-4).

CONCLUSION

The AUA Annual Census provides the urology community with a reliable and sustainable mechanism to describe practicing urologists in the United States, to understand their medical training and scope of practice and to identify cross-sectional and longitudinal variations across the specialty. This mechanism not only generates a unique data source to explore the profession of urology, but can be adapted to all medical specialties as well. The results are being used to inform health care policy and to prepare for the future urologic care workforce.

The AUA strongly encourages all members to complete the Census each year either during the AUA Annual Meeting or online anytime between May and September at [AUNet.org/TakeCensus](https://www.aunet.org/takecensus).



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 through education, research, and the formulation of health policy.

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 AUAnet.org.

About the AUA Annual Census

The AUA supports the generation and dissemination of urologic knowledge through a sophisticated statistical 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 to adjust for non-response bias to accurately represent the entire specialty and address the broad landscape of urology.

This publication serves as a primary source of information for the urology workforce in its effort to effectively convey the needs and demands of the urologic community. The findings also depict current clinical practice including the use of EHRs, mechanisms to report quality measures and medications, along with procedures to treat urologic conditions. The 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. Besides publications on practicing urologists in the United States, publications on practicing urologists and urology residents across the globe are also available.

Definition of Terms

PRACTICE STATUS

In order to understand the manner in which this report classifies urologists, a Definition of Terms 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 ABU or the 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 RUCA3.10² (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 and 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), and Rural Area (population $< 2,500$).

Glossary

90% CI	90 Percent Confidence Interval
90% MOE	Margin of Error at 90 Percent Confidence Level
ABMS	American Board of Medical Specialties
ABU	American Board of Urology
AOA	American Osteopathic Association
AOBS	American Osteopathic Board of Surgery
AUA	American Urological Association
CME	Continuing Medical Education
DO	Doctor of Osteopathic Medicine
EHR	Electronic Health Record
HMO	Health Maintenance Organization
MD	Medical Doctor
NPI	National Provider Identifier
PPO	Preferred Provider Organization
RUCA	Rural-Urban Commuting Area
VA	Veteran Affairs

Methodology

Data in the AUA Annual Census were collected and analyzed using survey methodology developed by Groves et al.³ 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 2018. 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 a Census survey by assigned sample weight.

PRACTICING UROLOGISTS POPULATION

Practicing urologists were identified jointly 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:

- Either urology or pediatric urology was listed as the medical specialty.
- A provider was listed as either a surgeon or a specialist and matched to either the 2018 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 2018.
- Urologists in residency training were excluded from this report; however, these results will be published in a separate report.
- Additionally, 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 to all participants or to a random subset of participants.

CENSUS TIMELINE

The AUA Annual Census officially launches during the AUA Annual Meeting and is available online to respondents 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 2018 AUA Annual Census began on May 18, 2018 during the 2018 AUA Annual Meeting and ended on September 30, 2018. Each respondent was assigned an identification number prior to the submission of responses to the Census questions. This step ensured the results could be linked to the population file and no respondent could take the survey more than once.

A total of 5,870 respondents completed the 2018 AUA Annual Census—2,339 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. Those urologists who were either practicing outside the United States or in residency training were removed from this study, but their responses were analyzed and reported separately with final analysis available on the AUA website.⁴

SAMPLE WEIGHTING

In order to adjust for non-responses and resulting biases in the 2018 AUA Census sample, a standard post-stratification weighting technique⁵ 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 given 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 margin of error (MOE) or confidence interval (CI), with estimation of measurement precision at a 90 percent level of confidence.

DATA ANALYSIS

After post-stratification weighting adjustment, the Census data were analyzed with IBM-SPSS Complex Samples 22.0.

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.⁶ 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-based 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. Racial/ethnic minority groups were not well represented in the urologist population and, therefore, were difficult to analyze.
- 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.
- The AUA Annual Census is subject to sampling and estimate errors. Thus, the MOE is the appropriate tool when comparing two groups. Sums from numbers and percentages may contrast with calculated totals due to intrinsic rounding errors.
- 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.
- 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.
- Census data are self-reported, non-validated and subject to bias or misrepresentation.

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FIGURE 2-1: Percentage of Female Practicing Urologists (by Age)

FIGURE 3-1: Percentage of Practicing Urologists with Completed Fellowship Experience (by Gender and Age)

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FIGURE 9-1: Do You Use an EHR System in Your Practice (by Gender and Age)?

FIGURE 9-2: Do You Use an EHR System in Your Practice (by Practice Setting)?



Practicing Urologists

in the United States



Section 1: Geographic Distribution

Primary Observations

- In 2018, 12,660 urologists were identified as “practicing urologists” in the United States. Of those, 84.5 percent were “actively” practicing (Table 1-1), which is higher than the 80 percent reported a year ago. The national urologist-to-population ratio increased to 3.89 per 100,000 population in 2018, up from 3.85 in 2017 and 3.77 in 2016. Among the 50 U.S. states, New Hampshire 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, accounting for 21.3 percent of the total practicing urologist population in the United States (Table 1-3).
- Practicing urologists maintain their primary practice locations in 37.4 percent of U.S. counties (Table 1-4), slightly down from 37.8 percent a year ago.
- The percentage of practicing urologists in the United States who maintain their primary practice locations outside of metropolitan areas remained stable, slightly higher than 10 percent (Table 1-5). The likelihood of practicing urologists maintaining their primary practice locations in non-metropolitan areas increases with the age of the urologist (Figure 1-6).

TABLE 1-1
Practice Status

Type of Urologist	Practicing Urologists Represented		
	Number	Percent (%)	+/- MOE (%)
Practicing Urologists	12,660	100.0	N/A
Active Practicing Urologists [^]	10,693	84.5	1.5

(Data sources: National Provider Identifier 09/2018 file, ABU certification records from the ABMS Directory of Board Certified Medical Specialists and AOA DO Directory. [^]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 Highest to Lowest)**

State	Number of Practicing Urologists*	Urologist-to-Population Ratio [^]	Relative Position
U.S. (50 States & DC^^)	12,660	3.89	National Average
New Hampshire	70	5.21	High
New York	992	5.00	
Massachusetts	337	4.91	
Louisiana	219	4.68	
Pennsylvania	598	4.67	
Connecticut	164	4.57	
New Jersey	410	4.55	
Maryland	273	4.51	
Tennessee	300	4.47	
Hawaii	63	4.41	
West Virginia	80	4.41	
Ohio	496	4.25	
Florida	882	4.20	
Oregon	172	4.15	
Rhode Island	44	4.15	
North Carolina	422	4.11	
Wisconsin	236	4.07	
Michigan	401	4.03	
Illinois	508	3.97	
Washington	293	3.96	Medium
Minnesota	218	3.91	
South Carolina	195	3.88	
South Dakota	33	3.79	
Kentucky	167	3.75	
Virginia	315	3.72	
Alabama	181	3.71	
Indiana	247	3.70	
Colorado	205	3.66	
Missouri	223	3.65	
Kansas	106	3.64	

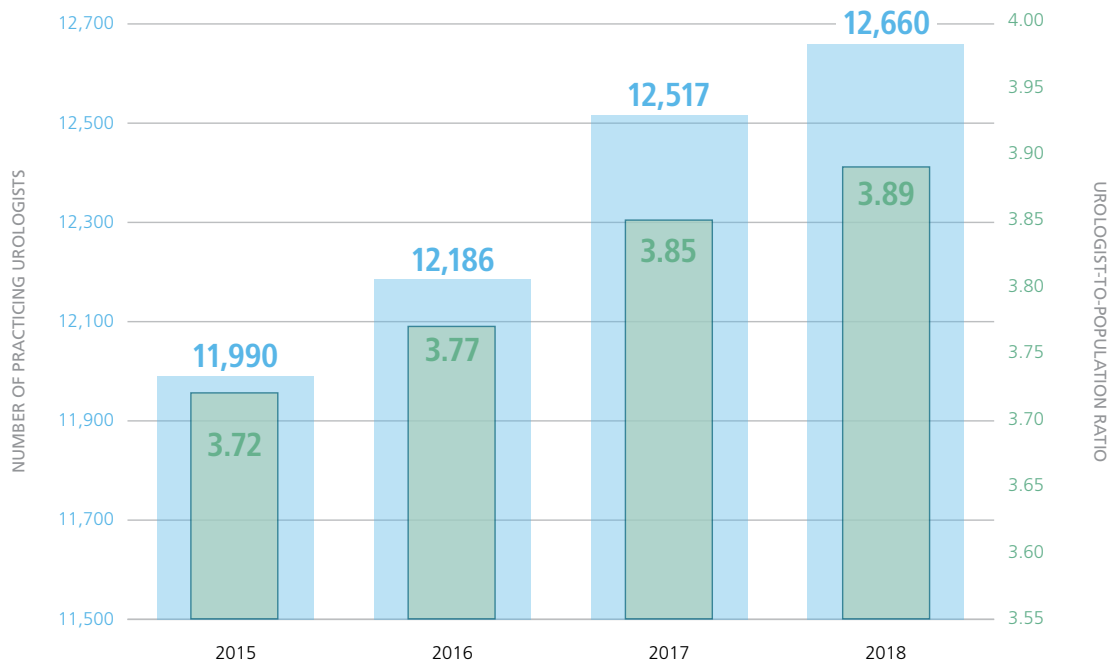
TABLE 1-2**Urologist-to-Population Ratio by State of Primary Practice Location
(Ranked from Highest to Lowest) (Continued)**

State	Number of Practicing Urologists*	Urologist-to-Population Ratio [^]	Relative Position
Maine	47	3.52	Medium Low
Arizona	246	3.51	
Nebraska	67	3.49	
California	1,359	3.44	
Montana	36	3.43	
Oklahoma	134	3.41	
Vermont	21	3.37	
Iowa	105	3.34	
Delaware	32	3.33	
Mississippi	96	3.22	
Georgia	333	3.19	Low
Arkansas	95	3.16	
Alaska	23	3.11	
New Mexico	63	3.02	
Texas	849	3.00	
Utah	83	2.68	
North Dakota	20	2.65	
Idaho	45	2.62	
Wyoming	15	2.59	
Nevada	72	2.40	

(Data sources: National Provider Identifier 09/2018 file, ABU certification records from the ABMS Directory of Board Certified Medical Specialists and AOA DO Directory. *In reporting results from the 2018 AUA Annual Census, states with fewer than 50 reported urologists were manually checked against the urologists' websites. ^Urologist-to-population ratio is per 100,000 population. ^^ District of Columbia was not listed separately due to its incomparability with the other 50 U.S. states.)

FIGURE 1-1

Number of Practicing Urologists and Urologist-to-Population Ratios (per 100,000 Population) from 2015 to 2018

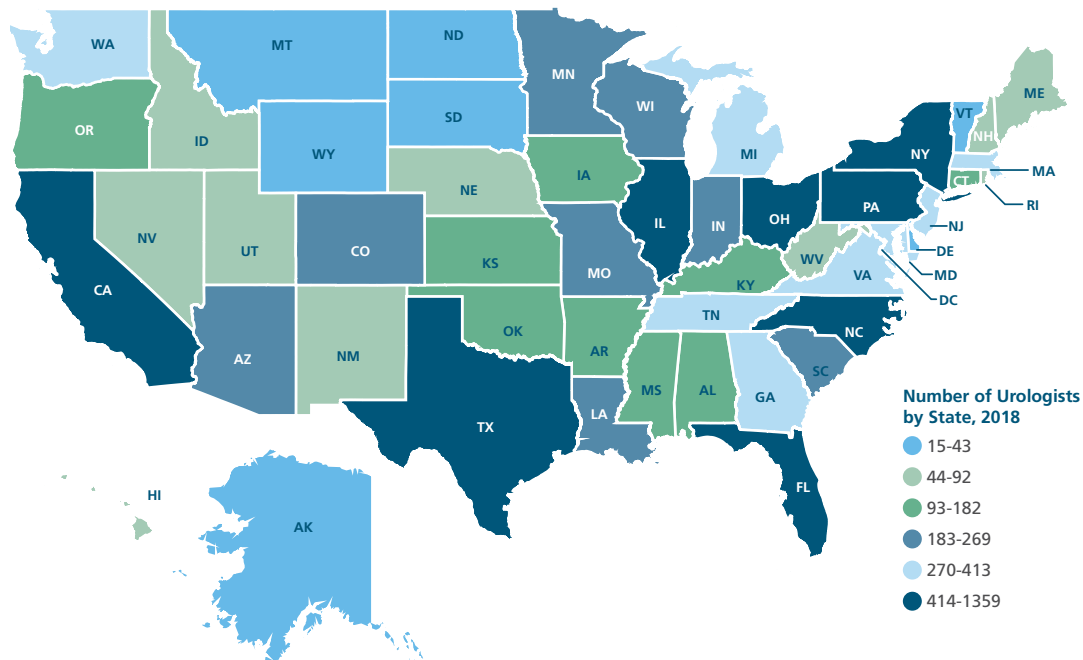


Blue: Number of Practicing Urologists; Green: Urologist-to-population ratios (per 100,000 population)

(Data sources: National Provider Identifier 09/2018 file, ABU certification records from the ABMS Directory of Board Certified Specialists Medical, AOA DO Directory and U.S. Census Bureau U.S. population files.)

FIGURE 1-2

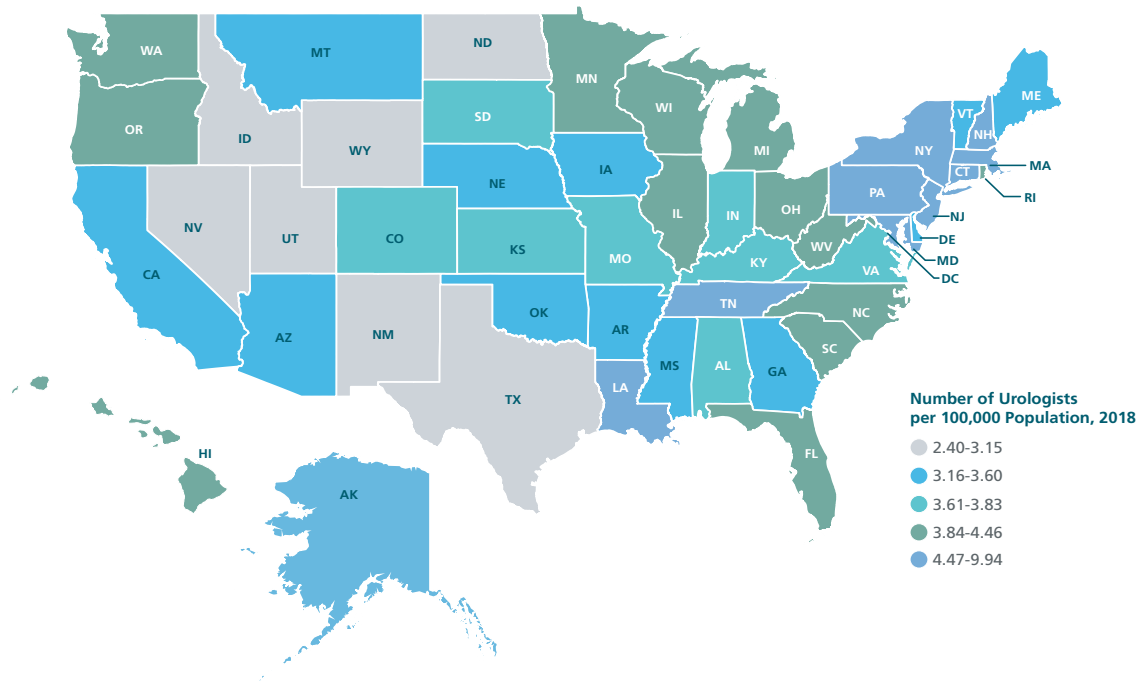
Number of Practicing Urologists (by State of Primary Practice Location)



(Data sources: National Provider Identifier 09/2018 file, ABU certification records from the ABMS Directory of Board Certified Medical Specialists and AOA DO Directory.)

FIGURE 1-3

Practicing Urologist-to-Population Ratio (by State of Primary Practice Location)



(Data sources: National Provider Identifier 09/2018 file, ABU certification records from the ABMS Directory of Board Certified Medical Specialists and AOA DO Directory.)

TABLE 1-3

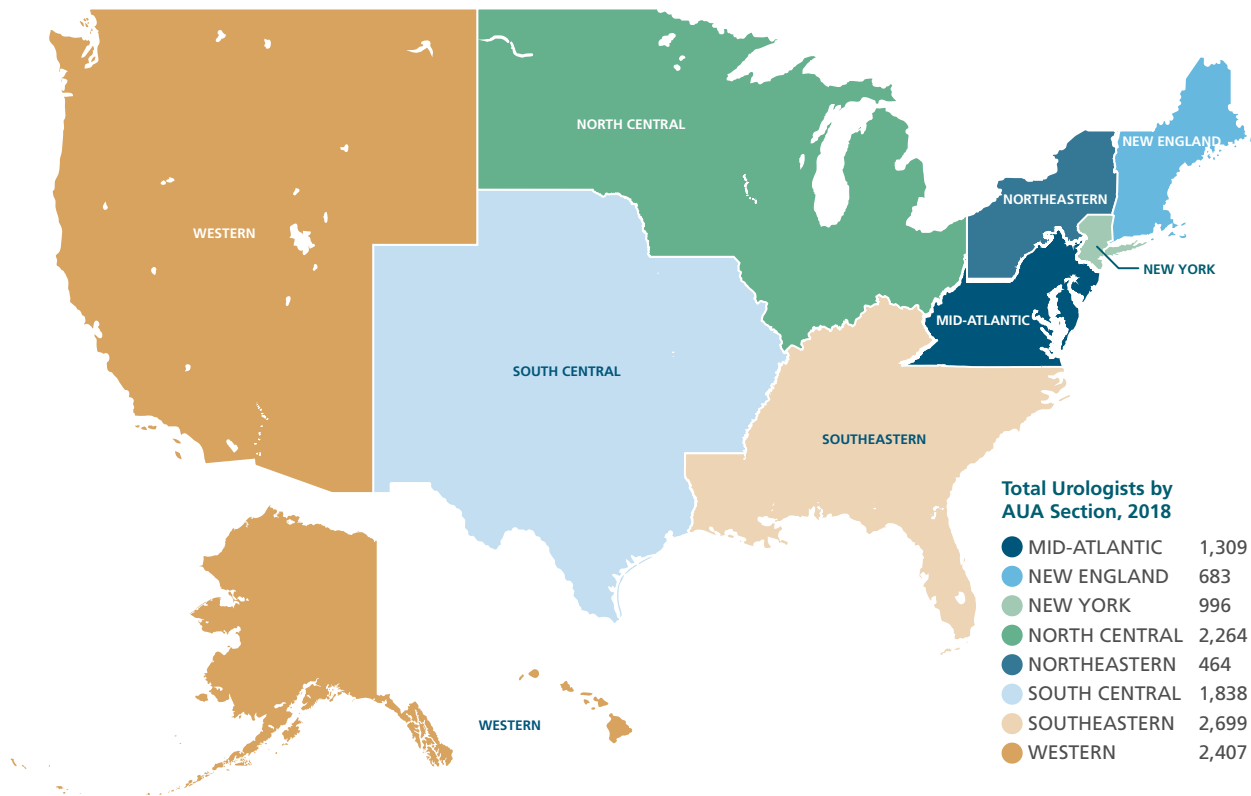
AUA Sections (United States Practicing Urologists Only)^

AUA Section	Number of Practicing Urologists	Percent (%)
Southeastern	2,699	21.3
Western	2,407	19.0
North Central	2,264	17.9
South Central	1,838	14.5
Mid-Atlantic	1,309	10.3
New York	996	7.9
New England	683	5.4
Northeastern	464	3.7
Total	12,660	100.0

(Data sources: National Provider Identifier 09/2018 file, ABU certification records from the ABMS Directory of Board Certified Medical Specialists and AOA DO Directory. ^Some AUA sections have non-U.S. members who were not included in this report due to a lack of urologist population files in those countries.)

FIGURE 1-4

Practicing Urologists by AUA Section (United States Practicing Urologists Only)^



(Data sources: National Provider Identifier 09/2018 file, ABU certification records from the ABMS Directory of Board Certified Medical Specialists and AOA DO Directory. ^Some AUA sections have non-U.S. members who were not included in this report due to a lack of urologist population files in those countries.)

TABLE 1-4

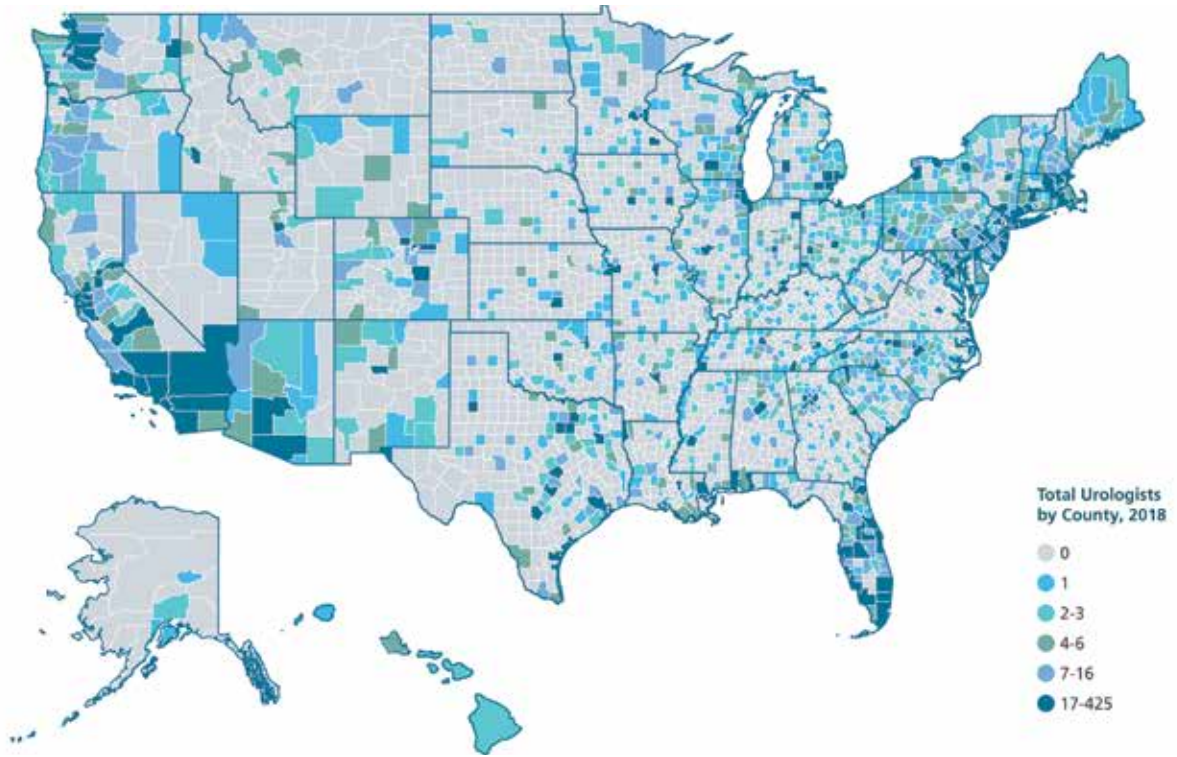
County of Primary Practice Location

Urologist Supply	Number of Counties	Percent (%)
Counties with 0 Urologists	1,968^	62.6
Counties with at least 1 Urologist	1,176	37.4
Counties with 1 Urologist	291	9.3
Counties with 2-3 Urologists	302	9.6
Counties with 4-8 Urologists	273	8.7
Counties with 9 or more Urologists	310	9.9
Total	3,144	100.0

(Data source: National Provider Identifier 09/2018 file. ^Based on the U.S. Census 2013 population estimates, these 1,968 counties represent a population of 47,300,238 residents.)

FIGURE 1-5

Number of Practicing Urologists (by County) (Based on Primary Practice Location)



(Data source: National Provider Identifier 09/2018 file.)

TABLE 1-5

Level of Rurality of Primary Practice Location

Rurality Level	Number of Practicing Urologists	Percent (%)
Metropolitan	11,323	89.4
Non-Metropolitan	1,337	10.6
Micropolitan	1,067	8.4
Small Town	214	1.7
Rural	56	0.4
Total	12,660	100.0

(Data source: National Provider Identifier 09/2018 file, Rural Urban Commuting Area Codes Data from RUCA3.10)

FIGURE 1-6

Percentage of Practicing Urologists Whose Primary Practice Locations Are Outside Metropolitan Areas (by Age)



(Data sources: National Provider Identifier 09/2018 file and weighted samples from the 2018 AUA Annual Census and Rural Urban Commuting Area Codes Data from RUCA3.10. 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 56 years, up from 55 in 2017 (Table 2-1).
- While the urologic workforce in the United States is predominantly male, the percentage of female urologists continued to rise to 9.2 in 2018, up from 8.8 in 2017 (Table 2-2).
- The urologic workforce in the United States is predominantly non-Hispanic white (Table 2-3 and Table 2-4). The percentage of practicing urologists with Hispanic origin is only 3.9 in 2018, while the Hispanic population accounts for 18.1 percent of the U.S. population.⁷

TABLE 2-1

Age

Age Group (Year)	Practicing Urologists		
	Number	Percent (%)	+/- MOE (%)
≤ 34	541	4.3	0.7
35-44	2,840	22.4	1.0
45-54	2,633	20.8	0.9
55-64	2,875	22.7	1.0
≥ 65	3,771	29.8	0.8
Total	12,660	100.0	

(Data source: Weighted samples from the 2018 AUA Annual Census. The median age is 56.)

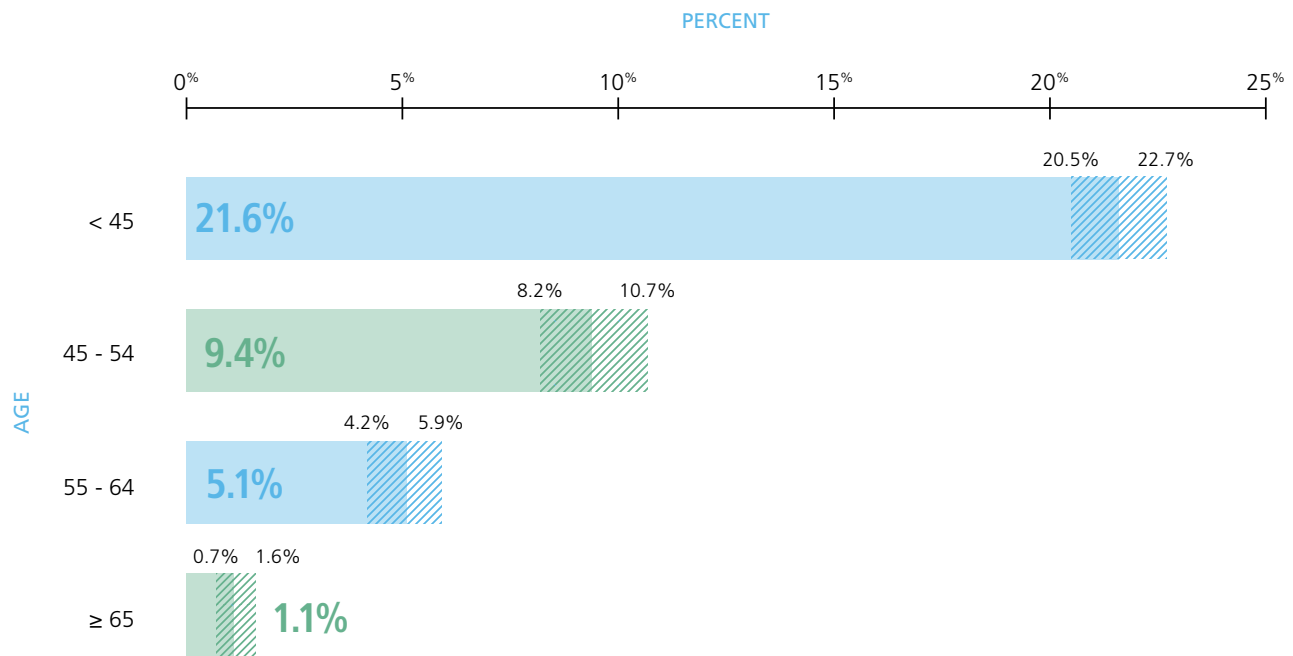
TABLE 2-2

Gender

Gender	Number of Practicing Urologists	Percent (%)
Male	11,493	90.8
Female	1,167	9.2
Total	12,660	100.0

(Data source: National Provider Identifier 09/2018 file.)

FIGURE 2-1
Percentage of Female Practicing Urologists (by Age)



(Data sources: National Provider Identifier 09/2018 file and weighted samples from the 2018 AUA Annual Census. Bold numbers are point estimates. The dashed bars represent upper and lower 90% confidence limits.)

TABLE 2-3
Ethnicity

Ethnicity	Practicing Urologists Represented		
	Number	Percent (%)	+/- MOE (%)
Hispanic	484	3.9	0.7
Non-Hispanic	11,870	96.1	0.7
Total Reported	12,354	100.0	
I Prefer Not to Report	306		
Total	12,660		

(Data source: Weighted samples from the 2018 AUA Annual Census.)

TABLE 2-4**Race**

Race	Practicing Urologists Represented		
	Number	Percent (%)	+/- MOE (%)
White	10,082	84.1	1.3
Asian	1,469	12.2	1.2
African American/Black	262	2.2	0.6
Other Races (Including Multiple Races)	180	1.5	0.5
Total Reported	11,992	100.0	
I Prefer Not to Report	668		
Total	12,660		

(Data source: Weighted samples from the 2018 AUA Annual Census.)

TABLE 2-5**Country of Origin**

Country of Origin	Practicing Urologists Represented		
	Number	Percent (%)	+/- MOE (%)
North and South America	10,913	86.2	1.3
United States	10,425	82.3	1.4
Canada	185	1.5	0.4
Others	303	2.4	0.6
Asia	1,262	10.0	1.1
India	459	3.6	0.7
Others	803	6.3	0.9
Europe	326	2.6	0.6
Africa	159	1.3	0.4
Total	12,660	100.0	

(Data source: Weighted samples from the 2018 AUA Annual Census.)

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

Primary Observations

- If given the opportunity, nearly 91 percent of practicing urologists would not be interested in shortening residency training to only be allowed to perform lower risk procedures (Table 3-2).
- Nearly 38 percent of urologists have completed at least one fellowship program during their career (Table 3-3). Younger urologists and female urologists are more likely to have completed fellowship training than their older and male counterparts (Figure 3-1).
- The top three areas for fellowship are oncology, robotic surgery, and endourology/stone disease among male practicing urologists and female pelvic medicine and reconstructive surgery, pediatrics, and oncology among female practicing urologists (Table 3-4).
- Approximately 85 percent of practicing urologists in the United States are certified by the ABU (Table 3-7).

TABLE 3-1
Age at Completion of Residency

Age at Completion of Residency	Practicing Urologists Represented		
	Number	Percent (%)	+/- MOE (%)
≤ 30	1,111	8.8	1.2
31	2,281	18.0	1.5
32	3,320	26.2	1.6
33	2,540	20.1	1.5
34	1,226	9.7	1.1
35	799	6.3	0.9
≥ 36	1,383	10.9	1.1
Total	12,660	100.0	

(Data source: Weighted samples from the 2018 AUA Annual Census. The median age at completion of residency is 32.)

TABLE 3-2

If You Had Been Able to Shorten Your Residency Training by One to Two Years, Allowing You to Only Perform Lower Risk Procedures, Would You Have Pursued Such a Residency Program Track?

Shorten Residency Training	Practicing Urologists Represented		
	Number	Percent (%)	+/- MOE (%)
Yes	1,036	9.1	1.7
No	10,330	90.9	1.7
Total Reported	11,367	100.0	
Not Reported	1,293		
Total	12,660		

(Data source: Weighted samples from the 2018 AUA Annual Census.)

TABLE 3-3

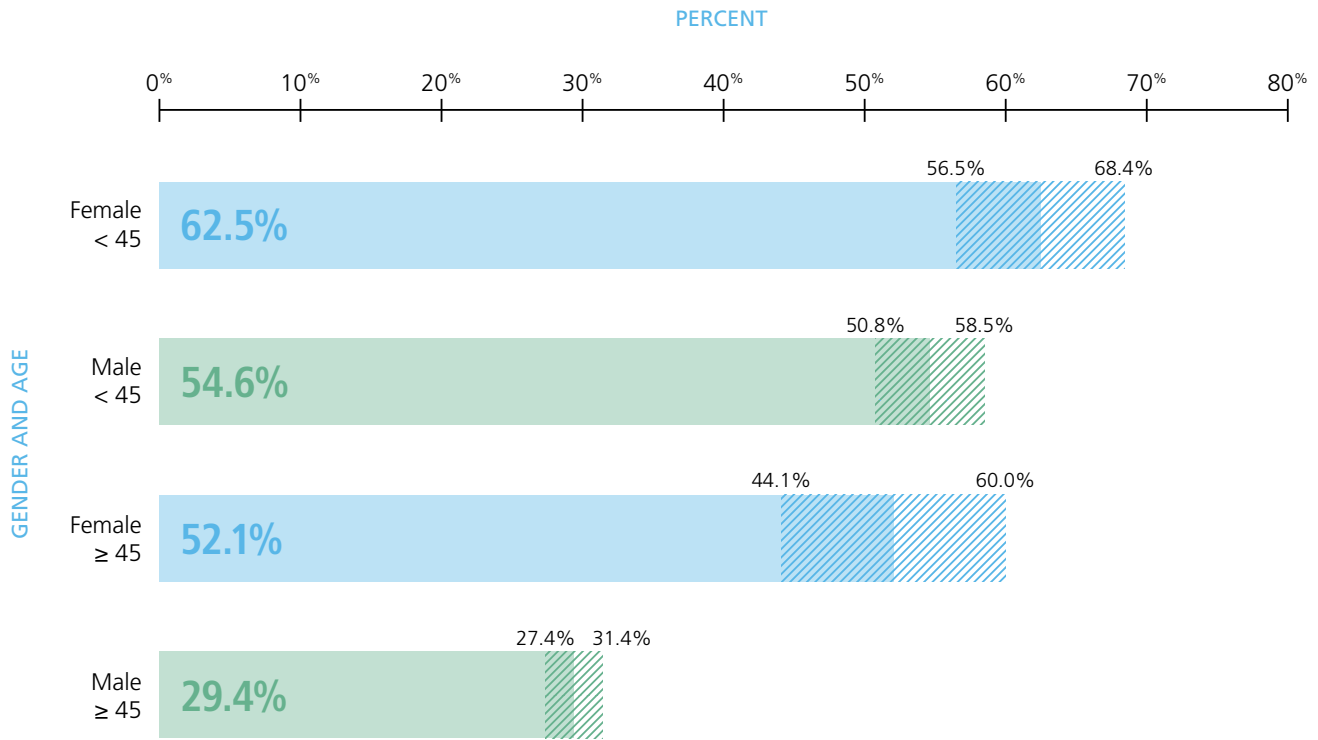
Completion of Fellowship Experience

Fellowship Experience	Practicing Urologists Represented		
	Number	Percent (%)	+/- MOE (%)
No Fellowship	7,927	62.6	1.7
Fellowship Trained	4,733	37.4	1.7
One	3,287	26.0	1.6
Two or More	1,446	11.4	2.1
Total	12,660	100.0	

(Data source: Weighted samples from the 2018 AUA Annual Census. Fellowship experience was reported for programs with a duration of one year or longer.)

FIGURE 3-1

**Percentage of Practicing Urologists with Completed Fellowship Experience
(by Gender and Age)**



(Data source: Weighted samples from the 2018 AUA Annual Census. Fellowship experience was reported for programs with a duration of one year or longer. Bold numbers are point estimates. The dashed bars represent upper and lower 90% confidence limits.)

TABLE 3-4
Fellowship Area

Area of Fellowship	Male Urologists Represented			Female Urologists Represented		
	Number	Percent (%)	+/- MOE (%)	Number	Percent (%)	+/- MOE (%)
Endourology/Stone Disease	689	6.0	0.9	50	4.3	1.9
Erectile Dysfunction	367	3.2	0.7	53	4.5	2.4
Female Pelvic Medicine and Reconstructive Surgery	365	3.2	0.6	260	22.2	3.9
Male Genitourinary Reconstruction	342	3.0	0.7	86	7.3	2.4
Male Infertility	380	3.3	0.7	37	3.2	*
Oncology	1,401	12.2	1.3	108	9.2	3.1
Pediatrics	601	5.2	0.9	157	13.4	3.3
Renal Transplantation	180	1.6	0.5	0	n/a	n/a
Research	451	3.9	0.8	45	3.9	1.9
Robotic Surgery	723	6.3	0.9	53	4.5	2.1

(Data source: Weighted samples from the 2018 AUA Annual Census. Fellowship experience was reported for programs with a duration of one year or longer. Respondents could select multiple answers; the total number of choices may not add up to the total number of practicing urologists and the total percentages may not equal 100 percent. *Represents the estimated value should be used with caution due to small samples.)

TABLE 3-5
Age at Completion of Most Recent Fellowship

Age at Completion of Most Recent Fellowship	Practicing Urologists Represented		
	Number	Percent (%)	+/- MOE (%)
≤ 32	868	18.3	2.4
33	935	19.8	2.3
34	938	19.8	2.3
35	688	14.5	2.1
≥ 36	1,304	27.6	2.6
Fellowship Trained	4,733	100.0	
Not Fellowship Trained	7,927		
Total	12,660		

(Data source: Weighted samples from the 2018 AUA Annual Census. Fellowship experience was reported for programs with a duration of one year or longer. The median age at completion of most recent fellowship is 34.)

TABLE 3-6**Number of State Medical Licenses**

Number of Licenses	Practicing Urologists Represented	
	Number	Percent (%)
1	10,196	80.5
2	2,008	15.9
3	374	3.0
4	72	0.6
Total Reported	12,650	100.0
Not Reported	10	
Total	12,660	

(Data source: National Provider Identifier 09/2018 file.)

TABLE 3-7**Certification Status**

Certification Status	Practicing Urologists Represented	
	Number	Percent (%)
Certified by ABU	10,808	85.4
Not Certified by ABU	1,852	14.6
Total	12,660	100.0

(Data sources: National Provider Identifier 09/2018 file, ABU certification records from the ABMS Directory of Board Certified Medical Specialists.)

TABLE 3-8**Total Number of Years of Practicing Urology Since Completion of Residency**

Total Number of Years	Practicing Urologists Represented		
	Number	Percent (%)	+/- MOE (%)
1-5	2,135	16.9	0.9
6-10	1,327	10.5	0.7
11-15	1,283	10.1	0.7
16-20	1,360	10.7	0.7
21-25	1,321	10.4	0.7
26-30	1,348	10.7	0.7
≥ 31	3,885	30.7	0.8
Total	12,660	100.0	

(Data source: Weighted samples from the 2018 AUA Annual Census. The median number of years practicing urology since the completion of residency is 21.)

Section 4: Characteristics of the Urology Practice

Primary Observations

- The number of practicing urologists who directly work with physician assistants and nurse practitioners significantly increased from 62.7 percent in 2015 to 72.5 percent in 2018 (Table 4-2).
- The percentage of practicing urologists in private practices in the United States decreased to 56.9 in 2018 from 59.5 in 2017 (Table 4-4). Male urologists aged 45 years or older are most likely to work in private practices (Figure 4-1).
- Female practicing urologists are more likely to work in academic medical centers than their male counterparts (32.7 percent and 24.2 percent, respectively) (Table 4-5).
- Nearly 38 percent of practicing urologists in the United States have a primary subspecialty (Table 4-8); oncology is the most common subspecialty area (Table 4-9).
- Approximately 80 percent of practicing urologists in the United States reported performing at least one major inpatient surgical procedure in a typical month (Table 4-10). The percentage of practicing urologists who perform inpatient surgical procedures decreases with age (Table 4-11).

TABLE 4-1

Number of Practicing Urologists per Practice

Number of Urologists	Practicing Urologists Represented		
	Number	Percent (%)	+/- MOE (%)
1	2,165	17.1	1.5
2	1,136	9.0	1.1
3	1,002	7.9	1.0
4	984	7.8	1.0
5-9	3,002	23.7	1.6
10-15	2,060	16.3	1.4
≥ 16	2,312	18.3	1.4
Total	12,660	100.0	

(Data source: Weighted samples from the 2018 AUA Annual Census. The median number of urologists per practice in the United States is 6.)

TABLE 4-2

Number of Practicing Urologists Who Work Directly with Physician Assistants (PAs) and Nurse Practitioners (NPs) in Their Primary Practices

Number of Physician Assistants and Nurse Practitioners	Practicing Urologists Represented		
	Number	Percent (%)	+/- MOE (%)
None	3,388	27.5	1.7
≥ 1	8,912	72.5	1.7
1	2,276	18.5	1.5
2 - 4	3,857	31.4	1.7
≥ 5	2,779	22.6	1.5
Total Reported	12,300	100.0	
Not Reported	360		
Total	12,660		

(Data source: Weighted samples from the 2018 AUA Annual Census)

TABLE 4-3

Does Your Practice Allow PAs or NPs to Perform the Following Procedures?

Procedure	Practicing Urologists Represented								
	Yes			Depending on Experience			No		
	Number	Percent (%)	+/- MOE (%)	Number	Percent (%)	+/- MOE (%)	Number	Percent (%)	+/- MOE (%)
Circumcision	126	3.0	1.1	55	1.3	*	3,958	95.6	1.3
Cystoscopy	851	20.6	2.5	547	13.2	2.3	2,741	66.2	3.0
Hydrocele Aspiration	169	4.1	1.2	102	2.5	1.1	3,868	93.4	1.6
Intravesicle Botox	94	2.3	0.9	75	1.8	0.9	3,970	95.9	1.3
Prostate Biopsy	340	8.2	1.6	202	4.9	1.5	3,597	86.9	2.1
Testopel Injection	897	21.7	2.5	248	6.0	1.7	2,994	72.3	2.9
Vasectomy	47	1.1	*	47	1.1	*	4,044	97.7	1.0
Verapamil Injection	407	9.8	1.9	213	5.1	1.5	3,519	85.0	2.3
Xiaflex Injection	546	13.2	2.1	230	5.6	1.5	3,363	81.3	2.5

(Data source: Weighted samples from the 2018 AUA Annual Census. *Represents the estimated value should be used with caution due to small samples.)

TABLE 4-4
Practice Setting

Practice Setting	Practicing Urologists Represented		
	Number	Percent (%)	+/- MOE (%)
Private Practices	7,198	56.9	1.8
Solo Practice	1,239	9.8	1.2
Single Urology Group	4,047	32.0	1.7
Multispecialty Group	1,913	15.1	1.3
Institutional Settings	5,368	42.4	1.8
Academic Medical Center	3,163	25.0	1.6
Public or Private Hospital	1,805	14.3	1.3
Private Hospital	723	5.7	0.9
Veteran Affairs (VA)	497	3.9	0.8
Non-VA Military Hospital	153	1.2	0.4
Other Public Hospital	432	3.4	0.6
Community Health Center/Health Maintenance Organization (HMO)/Managed Care Organization	399	3.2	0.7
Other Settings	94	0.7	*
Total	12,660	100.0	

(Data source: Weighted samples from the 2018 AUA Annual Census. *Represents the estimated value should be used with caution due to small samples.)

TABLE 4-5

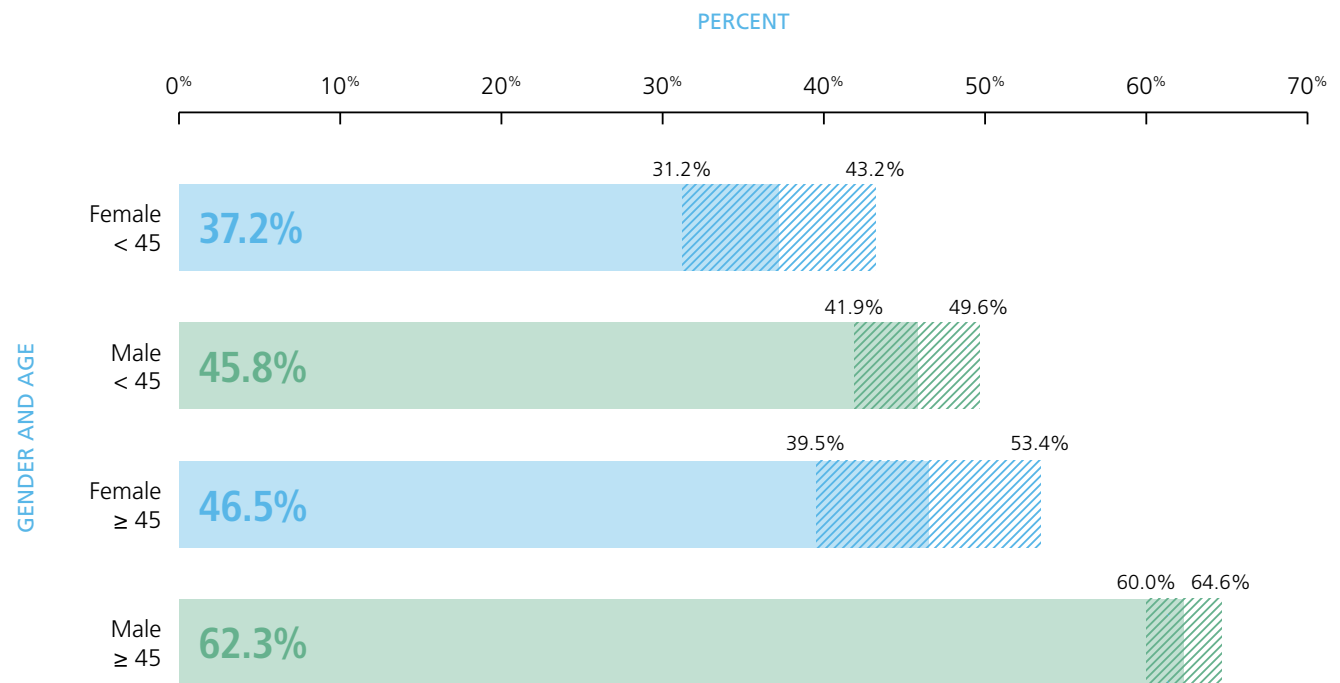
Practice Setting (by Gender)

Practice Setting	Male Urologists Represented			Female Urologists Represented		
	Number	Percent (%)	+/- MOE (%)	Number	Percent (%)	+/- MOE (%)
Academic Medical Center	2,782	24.2	1.7	381	32.7	4.4
Multispecialty Group	1,743	15.2	1.4	170	14.6	3.7
Single Urology Group	3,787	32.9	1.8	260	22.3	4.2
Others	3,181	27.7	1.8	356	30.5	4.5
Total	11,493	100.0		1,167	100.0	

(Data source: Weighted samples from the 2018 AUA Annual Census.)

FIGURE 4-1

Percentage of Practicing Urologists in Private Practices (by Gender and Age)



(Data source: Weighted samples from the 2018 AUA Annual Census. Bold numbers are point estimates. The dashed bars represent upper and lower 90% confidence limits.)

TABLE 4-6**Number of Practicing Urologists per Practice (by Practice Setting)**

Number of Practicing Urologists	Practicing Urologists Represented		
	Number	Percent (%)	+/- MOE (%)
Institutional Settings (Academic, Hospitals and Health Care Systems)			
1	544	10.1	1.9
2-5	1,429	26.6	2.6
6-9	1,037	19.3	2.2
≥ 10	2,358	43.9	2.8
Total	5,368	100.0	
Private Practices (Solo, Single Urology and Multispecialty)			
1	1,573	21.9	2.1
2-5	2,442	33.9	2.3
6-9	1,169	16.2	1.8
≥ 10	2,014	28.0	2.2
Total	7,198	100.0	
Other Settings			
1	48	51.0	*
≥ 2	46	49.0	*
Total	94	100.0	

Data source: Weighted samples from the 2018 AUA Annual Census. *Represents the estimated value should be used with caution due to small samples.)

TABLE 4-7**Number of Office Locations per Practice**

Number of Office Locations	Practicing Urologists Represented		
	Number	Percent (%)	+/- MOE (%)
1	4,346	34.3	1.8
2	2,458	19.4	1.5
3	1,629	12.9	1.2
4	1,058	8.4	1.0
≥ 5	3,169	25.0	1.6
Total	12,660	100.0	

(Data source: Weighted samples from the 2018 AUA Annual Census. The median number of office locations per practice is 2.)

TABLE 4-8

Primary Subspecialty

Primary Subspecialty	Practicing Urologists Represented		
	Number	Percent (%)	+/- MOE (%)
General without Subspecialty	7,877	62.2	1.7
Oncology	1,394	11.0	1.2
Pediatrics	724	5.7	0.8
Female Pelvic Medicine and Reconstruction	604	4.8	0.6
Endourology/Stone Disease	523	4.1	0.8
Robotic Surgery	468	3.7	0.7
Male Genitourinary Reconstruction	360	2.8	0.6
Male Infertility	292	2.3	0.6
Erectile Dysfunction	266	2.1	0.6
Renal Transplantation/ Laparoscopic Surgery	114	0.9	0.3
Others	37	0.3	*
Total	12,660	100.0	

(Data source: Weighted samples from the 2018 AUA Annual Census. *Represents the estimated value should be used with caution due to small samples.)

TABLE 4-9

Any Subspecialty (by Gender)

Subspecialty	Male Urologists Represented			Female Urologists Represented			Total Urologists Represented		
	Number	Percent (%)	+/- MOE (%)	Number	Percent (%)	+/- MOE (%)	Number	Percent (%)	+/- MOE (%)
Oncology	7,693	66.9	1.9	564	48.3	4.7	8,257	65.2	1.8
Endourology/Stone Disease	7,345	63.9	2.0	713	61.1	4.9	8,058	63.6	1.8
Erectile Dysfunction	6,574	57.2	2.0	445	38.2	4.6	7,020	55.4	1.9
Laparoscopic Surgery/ Renal Transplantation	3,933	34.2	1.7	391	33.5	4.5	4,323	34.1	1.6
Female Pelvic Medicine and Reconstructive Surgery	3,569	31.1	1.8	697	59.7	4.5	4,266	33.7	1.7
Robotic Surgery	3,683	32.0	1.6	500	42.9	4.6	4,183	33.0	1.5

TABLE 4-9

Any Subspecialty (by Gender) (continued)

Subspecialty	Male Urologists Represented			Female Urologists Represented			Total Urologists Represented		
	Number	Percent (%)	+/- MOE (%)	Number	Percent (%)	+/- MOE (%)	Number	Percent (%)	+/- MOE (%)
Male Infertility	3,665	31.9	1.9	188	16.1	3.8	3,853	30.4	1.7
Male Genitourinary Reconstruction	2,374	20.7	1.6	265	22.7	4.3	2,639	20.8	1.5
Pediatrics	2,235	19.4	1.6	264	22.6	4.2	2,499	19.7	1.5

(Data source: Weighted samples from the 2018 AUA Annual Census. Respondents could select multiple answers; the total number of choices may not add up to the total number of practicing urologists and the total percentages may not equal 100 percent.)

TABLE 4-10

Number of Major Inpatient Operative Procedures Performed in a Typical Month

Number of Procedures per Month	Practicing Urologists Represented		
	Number	Percent (%)	+/- MOE (%)
None	2,513	19.8	1.6
At Least One	10,147	80.2	1.6
1-4	3,429	27.1	1.7
5-9	2,961	23.4	1.6
≥ 10	3,757	29.7	1.7
Total	12,660	100.0	

(Data source: Weighted samples from the 2018 AUA Annual Census.)

TABLE 4-11

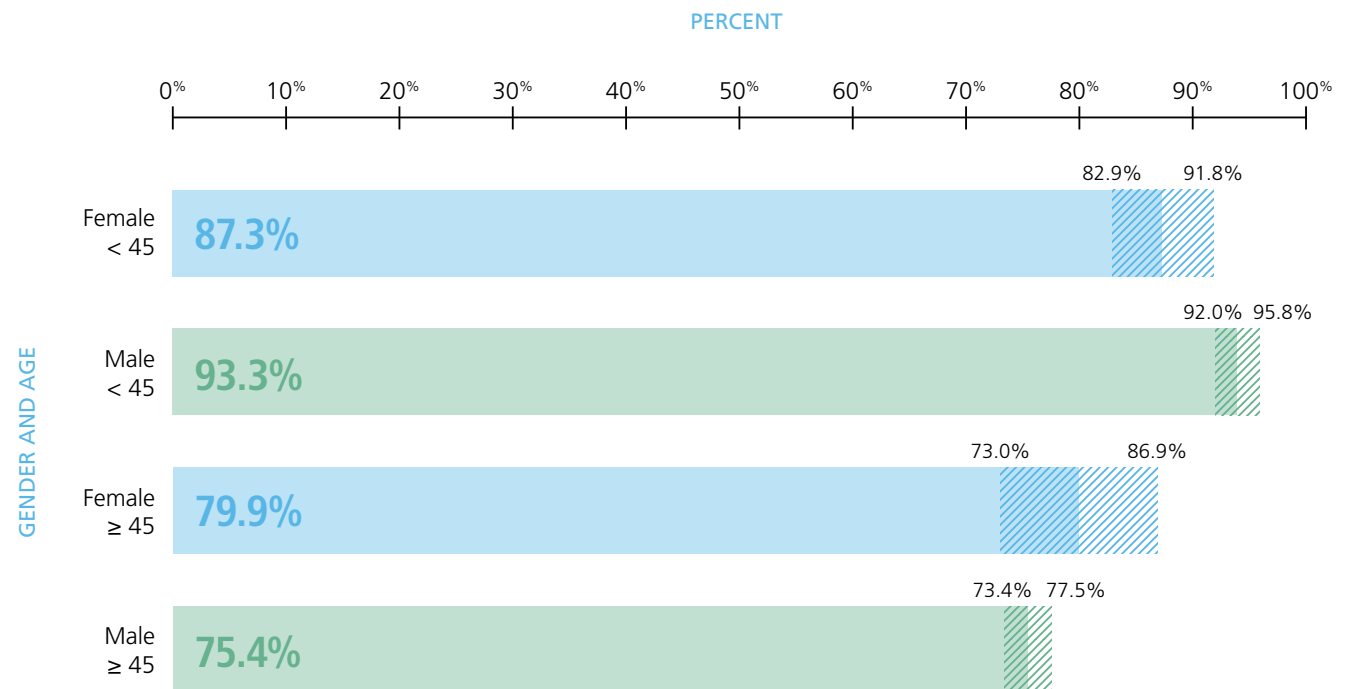
Performing Major Inpatient Operative Procedures (by Age)

Age of Physician	Practicing Urologists Represented		
	Number	Percent (%)	+/- MOE (%)
All Ages	10,147	80.2	1.6
< 45	3,127	92.5	1.8
45-54	2,346	89.1	2.2
55-64	2,322	80.8	2.7
65-74	1,891	70.8	4.6
≥ 75	462	42.0	8.5

(Data source: Weighted samples from the 2018 AUA Annual Census. The total number of choices may not add up to the total number of practicing urologists and the total percentages may not equal 100 percent.)

FIGURE 4-2

Percentage of Practicing Urologists Who Reported Performing Major Inpatient Operative Procedures (by Gender and Age)



(Data source: Weighted samples from the 2018 AUA Annual Census. Bold numbers are point estimates. The dashed bars represent upper and lower 90% confidence limits.)

TABLE 4-12**Do You Currently Provide Care for Transgender Patients?**

Care to Transgender Patients	Practicing Urologists Represented		
	Number	Percent (%)	+/- MOE (%)
Yes	7,168	58.8	2.6
I Provide General Urological Care	6,758	53.4	2.6
I Offer Gender Affirming Hormonal Therapy or Gonadectomy	940	7.4	1.4
I Offer Gender Affirming Genital Reconstructive Surgery	330	2.6	0.8
No	5,020	41.2	2.6
Total Reported	12,188	100.0	
Not Reported	472		
Total	12,660		

(Data source: Weighted samples from the 2018 AUA Annual Census. Respondents could select multiple answers; the total number of choices may not add up to the total number of practicing urologists and the total percentages may not equal 100 percent.)

TABLE 4-13**Other Professional Roles**

Other Roles	Practicing Urologists Represented		
	Number	Percent (%)	+/- MOE (%)
Educator	1,258	9.9	1.1
Researcher	946	7.5	0.9
Administrator/Medical Officer/Practice Manager	455	3.6	0.6

(Data source: Weighted samples from the 2018 AUA Annual Census.)

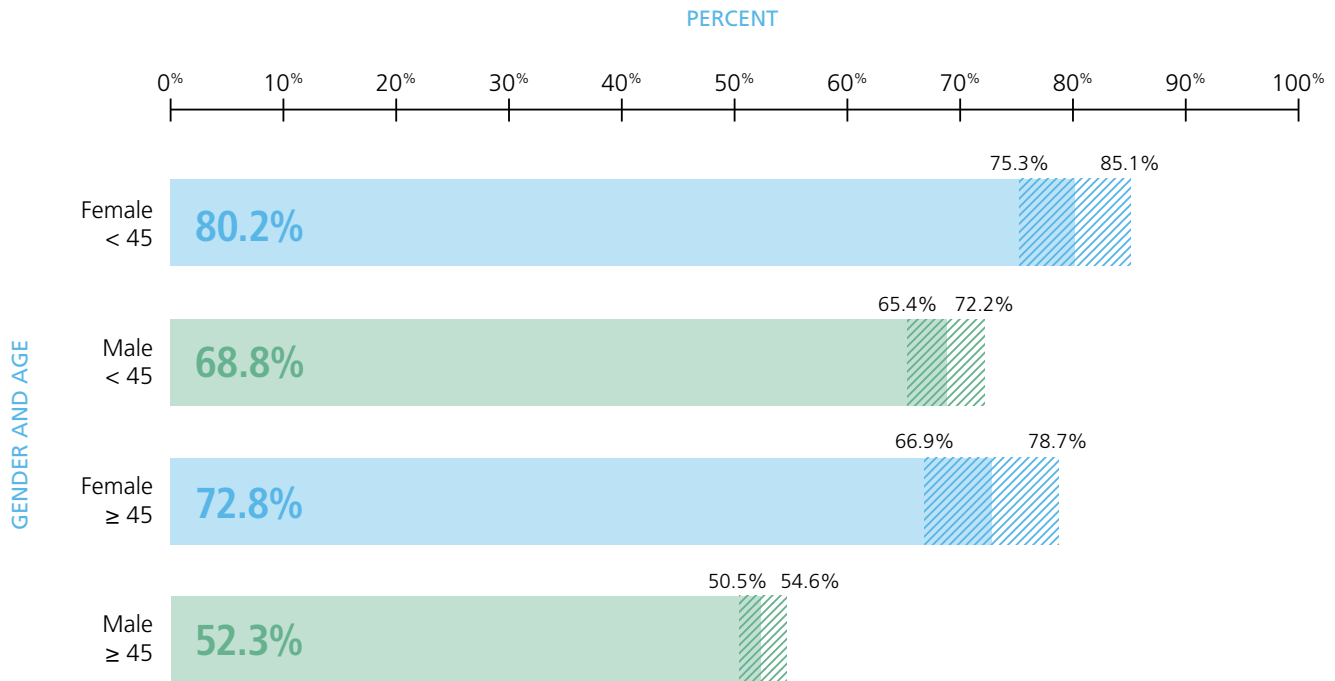
TABLE 4-14**Employment Status**

Employment Status	Practicing Urologists Represented		
	Number	Percent (%)	+/- MOE (%)
I Am the Sole Owner of My Practice	1,297	10.2	1.2
I Am a Partner in My Practice	3,642	28.8	1.6
I Am Employed by Others	7,352	58.1	1.8
A Combination of the Above	370	2.9	0.6
Total	12,660	100.0	

(Data source: Weighted samples from the 2018 AUA Annual Census.)

FIGURE 4-3

Percentage of Practicing Urologists Employed by Others (by Gender and Age)



Data source: Weighted samples from the 2018 AUA Annual Census. Bold numbers are point estimates. The dashed bars represent upper and lower 90% confidence limits.)

TABLE 4-15

On Average, What Percentage of Patient Cases You See Could Have Been Handled by Primary Care Physicians?

Percent of Patient Cases	Practicing Urologists Represented		
	Number	Percent (%)	+/- MOE (%)
≤ 5	2,091	18.1	2.4
6-10	2,565	22.2	2.4
11-15	1,582	13.7	1.8
16-20	2,112	18.2	2.1
21-25	1,085	9.4	1.7
> 25	2,142	18.5	2.0
Total Reported	11,577	100.0	
Not Reported	1,083		
Total	12,660		

(Data source: Weighted samples from the 2018 AUA Annual Census.)

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

Primary Observations

- The median number of hours practicing urologists worked per week was 55. Nearly one-third of urologists work more than 60 hours a week (Table 5-1).
- The average number of work hours per week increased to 52.9 hours in 2018 from 51.6 hours in 2017 (Table 5-4).
- The median number of minutes a practicing urologist spends with a patient in a typical office visit is 15 (Table 5-5). On average, female urologists spend more minutes with patients than their male counterparts, whereas practicing urologists in single urology groups spend the least amount of time with patients in a typical office visit (Table 5-6).
- Practicing urologists see 75 patients in a typical week (Table 5-7) and work a median 48 weeks per year (Table 5-10), suggesting an estimated 3,600 patients visits/encounters per urologist in 2018, which was higher than 3,360 patient visits/encounters per urologist in 2017.
- The top reason urologists plan to retire before the age of 65 is a lack of time for personal and/or family life while they work (Table 5-12). The top reason urologists plan to retire after the age of 70 is they enjoy practicing (Table 5-13).

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

Hours Worked per Week	Practicing Urologists Represented		
	Number	Percent (%)	+/- MOE (%)
≤ 35	2,279	18.0	1.5
36-40	596	4.7	0.9
41-45	886	7.0	0.9
46-50	1,491	11.8	1.1
51-55	1,473	11.6	1.1
56-60	1,861	14.7	1.3
≥ 61	4,075	32.2	1.7
Total	12,660	100.0	

(Data source: Weighted samples from the 2018 AUA Annual Census. This table is based on a derived question consisting of work hours for both clinical and non-clinical activities. 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 Hours per Week	Practicing Urologists Represented		
	Number	Percent (%)	+/- MOE (%)
< 25	1,967	15.5	1.5
≥ 25	10,693	84.5	1.5
25-30	1,042	8.2	1.1
31-35	573	4.5	0.8
36-40	1,753	13.8	1.3
41-45	893	7.1	0.9
46-50	2,153	17.0	1.3
51-55	678	5.4	0.7
56-60	2,042	16.1	1.3
≥ 61	1,560	12.3	1.2
Total	12,660	100.0	

(Data source: Weighted samples from the 2018 AUA Annual Census. The median number of clinical hours directly related to patient care per week is 48.)

TABLE 5-3**Number of Non-Clinical (e.g., Administration, Teaching, Research) Hours in a Typical Week**

Number of Non-Clinical Hours per Week	Practicing Urologists Represented		
	Number	Percent (%)	+/- MOE (%)
≤ 1	2,174	17.2	1.5
2-5	4,591	36.3	1.8
6-10	3,282	25.9	1.7
11-15	865	6.8	0.9
16-20	967	7.6	1.0
≥ 21	781	6.2	0.9
Total	12,660	100.0	

(Data source: Weighted samples from the 2018 AUA Annual Census. The median number of non-clinical hours per week is 5.)

TABLE 5-4

Mean Number of Clinical, Non-Clinical and Total Work Hours in a Typical Week (by Gender)

Type of Work Hours	Male Urologists Represented			Female Urologists Represented			Total Urologists Represented		
	Number of Urologists	Mean Number of Hours	+/- MOE	Number of Urologists	Mean Number of Hours	+/- MOE	Number of Urologists	Mean Number of Hours	+/- MOE
Number of Clinical Hours		44.8	0.7		43.4	1.8		44.6	0.7
Number of Non-Clinical Hours	11,248	8.2	0.3	1,152	9.1	0.9	12,400	8.2	0.3
Total Number of Work Hours		52.9	0.8		52.4	1.8		52.9	0.7

(Data source: Weighted samples from the 2018 AUA Annual Census. To avoid outliers, practicing urologists who reported the lowest and highest 1 percent of minutes were excluded from this analysis.)

TABLE 5-5

Number of Minutes Spent with a Patient in a Typical Office Visit

Number of Minutes	Practicing Urologists Represented		
	Number	Percent (%)	+/- MOE (%)
≤ 10	3,288	26.0	1.6
11-14	792	6.3	0.9
15-19	5,079	40.1	1.9
≥ 20	3,501	27.7	1.7
Total	12,660	100.0	

(Data source: Weighted samples from the 2018 AUA Annual Census. The median number of minutes spent with a patient during a typical office visit is 15.)

TABLE 5-6

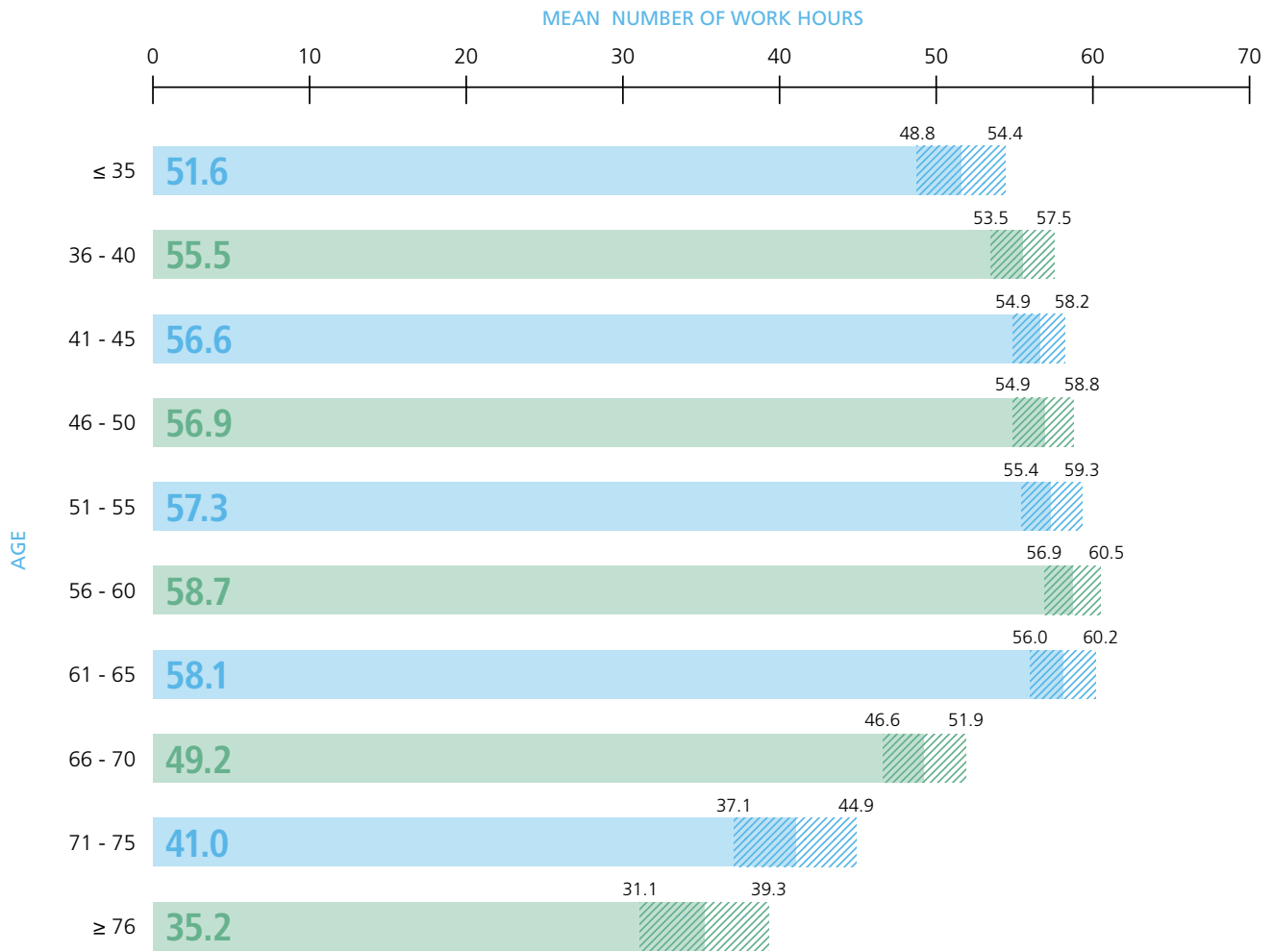
Mean Number of Minutes Spent with a Patient in a Typical Office Visit (by Gender and Practice Setting)

Practice Setting	Male Urologists Represented			Female Urologists Represented			Total Urologists Represented		
	Number of Urologists	Mean Number of Minutes	+/- MOE	Number of Urologists	Mean Number of Minutes	+/- MOE	Number of Urologists	Mean Number of Minutes	+/- MOE
Solo	1,194	17.4	1.7	45	17.9	2.8	1,239	17.4	1.6
Single	3,757	13.8	0.5	260	15.3	1.4	4,017	13.9	0.5
Multispecialty	1,719	15.2	0.5	166	18.7	3.1	1,884	15.5	0.5
Academic	2,777	16.9	0.6	381	20.0	1.1	3,159	17.3	0.5
VA and Other Military Hospitals	589	18.3	1.2	60	22.9	1.7	649	18.7	1.2
Private and Public Hospitals	974	16.3	1.3	180	16.2	2.0	1,153	16.2	1.1
Others	483	18.1	2.4	76	19.6	2.5	559	18.3	2.1
Total	11,493	15.8	0.3	1,167	18.2	0.8	12,660	16.0	0.3

(Data source: Weighted samples from the 2018 AUA Annual Census. To avoid outliers, practicing urologists who reported the lowest and highest 1 percent of minutes were excluded from this analysis.)

FIGURE 5-1

Mean Number of Work Hours per Week (by Age)



Data source: Weighted samples from the 2018 AUA Annual Census. Total number of work hours include both clinical hours and non-clinical hours. To avoid outliers, practicing urologists who reported the lowest 1 percent and highest 1 percent of total numbers of hours were excluded from this analysis. Bold numbers are point estimates. The dashed bars represent upper and lower 90% confidence limits.)

TABLE 5-7

Number of Patient Visits/Encounters in a Typical Week

Patient Visits/ Encounters	Practicing Urologists Represented		
	Number	Percent (%)	+/- MOE (%)
≤ 50	3,868	30.6	1.8
51-75	3,037	24.0	1.6
76-100	3,779	29.8	1.7
101-125	1,183	9.3	1.0
≥ 126	793	6.3	0.9
Total	12,660	100.0	

(Data source: Weighted samples from the 2018 AUA Annual Census. The median number of patient visits/encounters per week is 75.)

TABLE 5-8

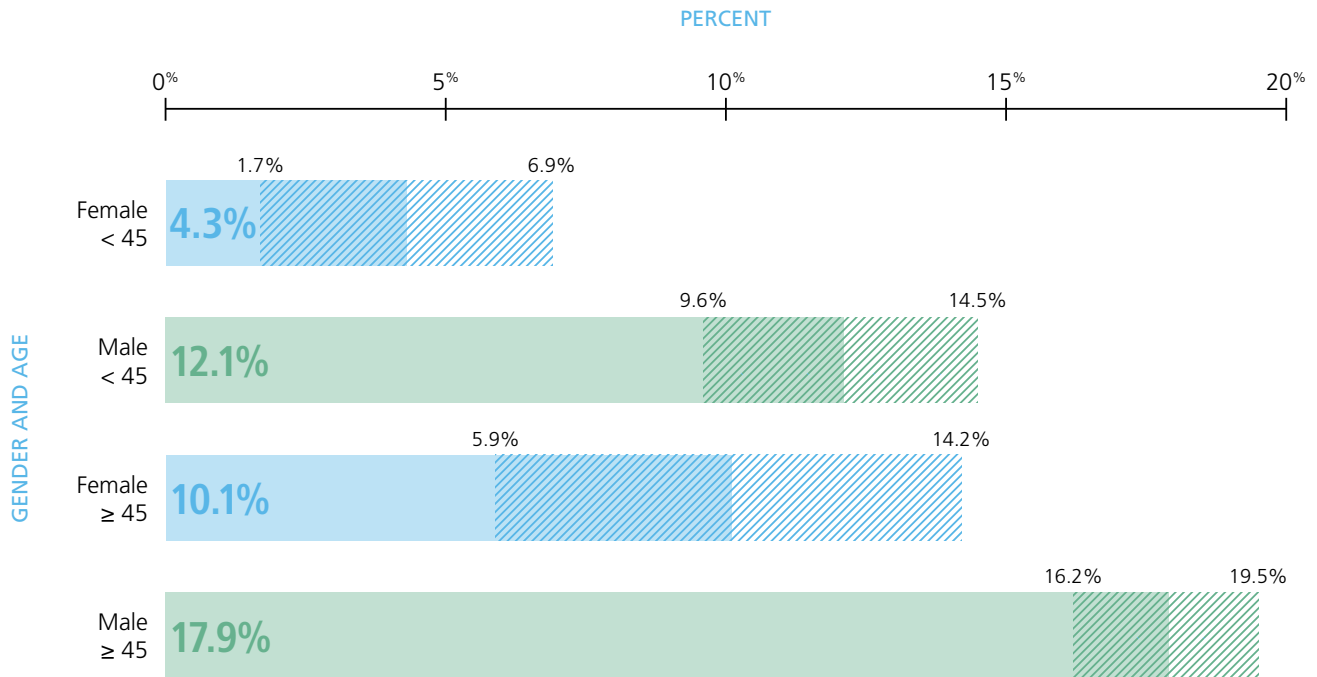
Mean Number of Patient Visits/Encounters in a Typical Week (by Gender and Practice Setting)

Practice Setting	Male Urologists Represented			Female Urologists Represented			Total Urologists Represented		
	Number of Urologists	Mean Number of Visits	+/- MOE	Number of Urologists	Mean Number of Visits	+/- MOE	Number of Urologists	Mean Number of Visits	+/- MOE
Solo	1,194	80.1	5.6	45	74.7	15.6	1,239	79.9	5.4
Single	3,787	91.6	2.5	260	87.6	6.5	4,047	91.4	2.4
Multispecialty	1,743	80.9	3.2	170	72.9	7.0	1,913	80.2	3.0
Academic	2,782	56.0	2.3	381	50.3	3.2	3,163	55.4	2.0
Private and Public Hospitals including VA and non-Military Hospitals	1,563	65.9	3.8	242	58.1	4.2	1,805	64.9	3.4
Others	424	41.9	7.6	69	67.3	12.9	494	45.5	7.0
Total	11,493			1,167			12,660		

(Data source: Weighted samples from the 2018 AUA Annual Census. To avoid outliers, practicing urologists who reported the lowest and highest 1 percent of patient visits were excluded from this analysis.)

FIGURE 5-2

Percentage of Practicing Urologists with More Than 100 Patient Visits/Encounters in a Typical Week (by Gender and Age)



(Data source: Weighted samples from the 2018 AUA Annual Census. Bold numbers are point estimates. The dashed bars represent upper and lower 90% confidence limits.)

TABLE 5-9

Percentage of Patient Visits/Encounters Made by Female Patients (by Gender)

Percentage of Female Patient Visits	Male Urologists Represented			Female Urologists Represented			Total Urologists Represented		
	Number of Urologists	Percent (%)	+/- MOE (%)	Number of Urologists	Percent (%)	+/- MOE (%)	Number of Urologists	Percent (%)	+/- MOE (%)
≤ 25	4,845	42.2	2.0	195	16.7	3.6	5,039	39.8	1.8
26-50	6,248	54.4	2.0	398	34.1	4.7	6,646	52.5	1.9
51-74	286	2.5	0.6	257	22.0	4.1	543	4.3	0.7
≥ 75	114	1.0	0.4	318	27.3	3.6	432	3.4	0.5
Total	11,493	100.0		1,167	100.0		12,660	100.0	

(Data source: Weighted samples from the 2018 AUA Annual Census. The median percentage of patient visits/encounters by female patients is 30.)

TABLE 5-10

Number of Weeks Taken for Vacation Leave in the Previous Year (by Gender)

Number of Weeks of Vacation Leave	Male Urologists Represented			Female Urologists Represented			Total Urologists Represented		
	Number of Urologists	Percent (%)	+/- MOE (%)	Number of Urologists	Percent (%)	+/- MOE (%)	Number of Urologists	Percent (%)	+/- MOE (%)
≤ 2	2,116	18.4	1.6	200	17.2	3.7	2,316	18.3	1.5
3	2,321	20.2	1.5	252	21.6	3.8	2,574	20.3	1.4
4	3,070	26.7	1.7	299	25.6	3.9	3,369	26.6	1.6
5-6	2,697	23.5	1.7	306	26.2	3.7	3,003	23.7	1.6
≥ 7	1,289	11.2	1.4	110	9.4	2.8	1,398	11.0	1.3
Total	11,493	100.0		1,167	100.0		12,660	100.0	

(Data source: Weighted samples from the 2018 AUA Annual Census. The median number of vacation weeks is 4.)

TABLE 5-11

Age at Planned Full Retirement from Practice (by Gender)

Planned Retirement Age	Male Urologists Represented			Female Urologists Represented			Total Urologists Represented		
	Number of Urologists	Percent (%)	+/- MOE (%)	Number of Urologists	Percent (%)	+/- MOE (%)	Number of Urologists	Percent (%)	+/- MOE (%)
< 60	470	4.1	0.7	223	19.1	3.5	693	5.5	0.7
60-65	3,961	34.5	1.5	605	51.8	4.8	4,566	36.1	1.4
66-70	3,551	30.9	1.7	305	26.1	4.1	3,856	30.5	1.6
71-75	2,119	18.4	1.6	22	1.9	*	2,142	16.9	1.5
> 75	1,391	12.1	1.1	12	1.0	*	1,403	11.1	1.3
Total	11,493	100.0		1,167	100.0		12,660	100.0	

(Data source: Weighted samples from the 2018 AUA Annual Census. The median age at planned full retirement from practice is 68. *Represents the estimated value should be used with caution due to small samples.)

TABLE 5-12**Among Those Who Plan to Retire Before the Age of 65, What Factors May Lead to Early Retirement?**

Factors for Early Retirement	Practicing Urologists Represented		
	Number of Urologists	Percent (%)	+/- MOE (%)
Not Enough Time for Personal and/or Family Life	1,819	73.1	3.0
Work Related Stress	1,724	69.3	3.3
Complicated Regulatory Requirements	1,381	55.5	3.3
Too Many Patients to See	578	23.2	2.9
Malpractice	470	18.9	2.6
Others	426	17.1	2.5
Total	2,488		

(Data source: Weighted samples from the 2018 AUA Annual Census. Respondents could select multiple answers; the total number of choices may not add up to the total number of practicing urologists and the total percentages may not equal 100 percent.)

TABLE 5-13**Among Those Who Plan to Retire at the Age of 70 or Later, What Factors May Delay Your Retirement?**

Factors for Late Retirement	Practicing Urologists Represented		
	Number of Urologists	Percent (%)	+/- MOE (%)
I Enjoy Practicing	4,365	76.0	2.5
I Want to Keep Working	3,278	57.1	3.1
Economic Pressure	1,953	34.0	2.7
Inability to Recruit a Replacement	534	9.3	1.9
Others	232	4.0	1.2
Total	5,742		

(Data source: Weighted samples from the 2018 AUA Annual Census. Respondents could select multiple answers; the total number of choices may not add up to the total number of practicing urologists and the total percentages may not equal 100 percent.)

Section 6: Practice Internal Policies and Support

Primary Observations

- Approximately 70 percent of practicing urologists reported their practices took steps to increase practice profitability in the previous year (Table 6-1). The top three steps taken were to see more patients, reduce spending in areas other than reducing staff or travel to meetings and decrease staff size (Table 6-2).
- Approximately 75 percent of practicing urologists received financial support from their practices to attend in-person meetings (Table 6-3).
- Approximately 78 percent and 63 percent of practicing urologists reported their practices made efforts to hire women and underrepresented minorities, respectively (Table 6-5 and Table 6-6).

The following question was intended to ask practicing urologists about whether they were aware of the profitability issues around their practices.

TABLE 6-1
Has Your Practice Taken Steps to Increase Practice Profitability?

Increase Practice Profitability	Practicing Urologists Represented		
	Number	Percent (%)	+/- MOE (%)
Yes	7,242	69.3	2.8
No	3,212	30.7	2.8
Total Reported	10,454	100.0	
Not Reported	2,206		
Total	12,660		

(Data source: Weighted samples from the 2018 AUA Annual Census.)

TABLE 6-2**For Those Who Were Aware That Their Practices Took Steps to Increase Profitability, What Steps Were Taken?**

Steps Taken	Practicing Urologists Represented		
	Number	Percent (%)	+/- MOE (%)
See More Patients	5,166	71.3	3.1
Reduce Spending in Areas Other than Reducing Staff Size or Travel to Meetings	3,173	43.8	3.1
Reduce Staff Size	1,648	22.8	2.8
Increase Ancillary Income Opportunities by Adding a Pharmacy	1,332	18.4	2.6
Increase Ancillary Income Opportunities by Adding Pathology Services	1,033	14.3	2.5
Outsourcing the Management of Some Services	997	13.8	2.4
Increase Ancillary Income Opportunities by Adding Imaging Services	931	12.9	2.3
Reduce Travel to Meetings	804	11.1	2.1
Increase Ancillary Income Opportunities by Adding Radiation Therapy	681	9.4	2.1
Others	1,162	16.0	2.5

(Data source: Weighted samples from the 2018 AUA Annual Census. Practicing urologists included are those whose practices took steps to increase profitability in Table 6-1. Respondents could select multiple answers; the total number of choices may not add up to the total number of practicing urologists and the total percentages may not equal 100 percent.)

TABLE 6-3

Does Your Practice Provide Enough Financial Support for You to Do the Following?

Financial Support	Practicing Urologists Represented		
	Number	Percent (%)	+/- MOE (%)
Attend In-person Meetings You Want to Attend for Face-to-Face Interaction with Other Urologists?			
No	3,047	24.5	2.4
Yes	9,394	75.5	2.4
Total Reported	12,442	100.0	
Not Reported	218		
Total	12,660		
Obtain Needed Continuing Medical Education (CME)			
No	2,197	17.6	2.1
Yes	10,289	82.4	2.1
Total Reported	12,486	100.0	
Not Reported	174		
Total	12,660		

(Data source: Weighted samples from the 2018 AUA Annual Census.)

TABLE 6-4**I Have Adequate Time to Complete the Following Educational Activities to Keep Up with Changes in the Field of Urology (by Practice Size)**

Educational Activities	Practice Size ≤ 5 Urologists			Practice Size > 5 Urologists			Total Urologists		
	Number	Percent (%)	+/- MOE (%)	Number	Percent (%)	+/- MOE (%)	Number	Percent (%)	+/- MOE (%)
Attend In-Person Scientific Meetings	4,805	79.1	3.1	5,667	86.1	2.3	10,472	82.7	1.9
Read Scientific Papers or Journals	4,924	81.0	2.8	5,414	82.2	2.5	10,338	81.7	1.8
Attend Online Learning	4,614	75.9	3.3	5,034	76.5	2.9	9,647	76.2	2.2
Watch Videos or Podcasts	4,613	75.9	3.3	4,858	73.8	3.0	9,471	74.8	2.2
Attend Live CME Classes	4,444	73.1	3.3	4,779	72.6	3.1	9,223	72.9	2.2
Attend Webinars	3,812	62.7	3.7	4,331	65.8	3.2	8,143	64.3	2.4

(Data source: Weighted samples from the 2018 AUA Annual Census. Practicing urologists included are those who had adequate time to complete activities to keep up with changes in the field of urology. Respondents could select multiple answers; the total number of choices may not add up to the total number of practicing urologists and the total percentages may not equal 100 percent.)

TABLE 6-5**Is Your Practice Making Efforts to Hire Women?**

Efforts to Hire Women	Practicing Urologists Represented		
	Number	Percent (%)	+/- MOE (%)
Yes	7,800	78.2	2.5
No	2,171	21.8	2.5
Total Reported	9,971	100.0	
Not Reported	2,689		
Total	12,660		

(Data source: Weighted samples from the 2018 AUA Annual Census.)

TABLE 6-6**Is Your Practice Making Efforts to Hire Underrepresented Minorities?**

Efforts to Hire Underrepresented Minorities	Practicing Urologists Represented		
	Number	Percent (%)	+/- MOE (%)
Yes	5,319	63.1	3.2
No	3,105	36.9	3.2
Total Reported	8,424	100.0	
Not Reported	4,236		
Total	12,660		

(Data source: Weighted samples from the 2018 AUA Annual Census.)

Section 7: Topics Related to Gender and Family

Primary Observations

- The majority of practicing urologists do not feel a gender bias exists within their practice (Table 7-1).
- Nearly 60 percent of urologists stated their practice has at least one female partner (Table 7-7).
- Approximately 55 percent of male urologists and 40 percent of female urologists were satisfied or very satisfied with their work-life balance in 2018 (Table 7-12).

TABLE 7-1
Do You Feel That There Is a Gender Bias in Your Practice (by Gender)?

Gender Bias	Male Urologists Represented			Female Urologists Represented		
	Number	Percent (%)	+/- MOE (%)	Number	Percent (%)	+/- MOE (%)
Yes	135	1.2	0.5	428	39.3	6.5
My Supervisor Considers Gender in Delegating Job Assignments	114	1.0	0.5	141	12.1	5.3
My Professional Growth Is Limited Because of My Gender	28	0.2	*	351	30.1	6.7
My Opportunities to Collaborate with My Colleagues Are Limited Because of My Gender	0	n/a	n/a	133	11.4	4.1
No	11,145	98.8	0.5	660	60.7	6.5
Total	11,280	100.0		1,088	100.0	

(Data source: Weighted samples from the 2018 AUA Annual Census. *Represents the estimated value should be used with caution due to small samples.)

TABLE 7-2

For Those Who Felt There Was a Gender Bias, Are You Limited to Seeing Certain Patients/Diagnoses Due to Your Gender (by Gender)?

Limited to Seeing Patients Due to Gender	Male Urologists Represented			Female Urologists Represented		
	Number	Percent (%)	+/- MOE (%)	Number	Percent (%)	+/- MOE (%)
Yes	20	14.6	*	211	50.1	13.7
No	115	85.4	14.7	210	49.9	13.7
Total Reported	135	100.0		421	100.0	
Not Reported	0			7		

(Data source: Weighted samples from the 2018 AUA Annual Census. The reported numbers are from those who felt there were gender biases in their practices [i.e., responded 'yes' in Table 7-1]. *Represents the estimated value should be used with caution due to small samples.)

TABLE 7-3

For Those Who Felt They Were Limited to Seeing Patients Due to Gender, Was It Driven by Any of the Following?

Source of Gender Bias	Practicing Urologists Represented		
	Number	Percent (%)	+/- MOE (%)
Your Patients	201	86.9	8.2
Your Partners	134	57.9	20.0
Yourself	67	28.9	*
Other Factors	89	38.6	19.1

(Data source: Weighted samples from the 2018 AUA Annual Census. These results represent those who reported limitations in the types of patients they see based on their gender. Respondents could select multiple answers; the total number of choices may not add up to the total number of practicing urologists and the total percentages may not equal 100 percent. *Represents the estimated value should be used with caution due to small samples.)

TABLE 7-4

Does Seeing Certain Patients/Diagnoses in Your Group Due to Your Gender Contribute to Feelings of Dissatisfaction?

Contribute to Feelings of Dissatisfaction	Practicing Urologists Represented		
	Number	Percent (%)	+/- MOE (%)
Yes	114	56.6	13.3
No	87	43.4	13.3
Total Reported	201	100.0	
I Prefer Not to Answer	30		

(Data source: Weighted samples from the 2018 AUA Annual Census. These results represent those who reported limitations in the types of patients they see based on their gender.)

TABLE 7-5

Have You Been Personally Exposed to Sexual Harassment[^] in the Workplace (by Gender)?

Sexual Harassment Exposure	Male Urologists Represented			Female Urologists Represented		
	Number	Percent (%)	+/- MOE (%)	Number	Percent (%)	+/- MOE (%)
Yes	1,343	11.9	1.9	550	52.4	7.4
I Have Been Sexually Harassed in the Workplace	327	2.8	0.9	328	28.1	6.8
I Have Witnessed Sexual Harassment in the Workplace	1,071	9.3	1.7	303	26.0	5.1
No	9,907	88.1	1.9	500	47.6	7.4
Total Reported	11,250			1,050		
Prefer Not to Report	243			117		
Total	11,493			1,167		

(Data source: Weighted samples from the 2018 AUA Annual Census. Respondents could select multiple answers; the total number of choices may not add up to the total number of practicing urologists and the total percentages may not equal 100 percent. [^]Sexual harassment was defined in the 2018 AUA Annual Census as unwanted sexually-oriented comments, advances or touching.)

TABLE 7-6

Locations Where Practicing Urologists Were Exposed to Sexual Harassment (by Gender)

Location of Sexual Harassment	Male Urologists Represented			Female Urologists Represented		
	Number	Percent (%)	+/- MOE (%)	Number	Percent (%)	+/- MOE (%)
Operating Room	307	51.3	6.7	689	55.8	11.2
Office	657	48.9	6.4	277	50.3	9.7
Hospital Ward	436	32.5	6.6	198	36.0	8.1
Surgeons' Lounge	225	16.8	6.0	153	27.9	8.5
Regional or National Meetings	188	14.0	5.9	160	29.1	4.9
Other	68	5.1	2.6	55	10.1	5.6

(Data source: Weighted samples from the 2018 AUA Annual Census. These results represent those who reported exposure to sexual harassment in the workplace. Respondents could select multiple answers; the total number of choices may not add up to the total number of practicing urologists and the total percentages may not equal 100 percent.)

TABLE 7-7

Are There Any Female Partner(s) in Your Practice (by Gender)?

Female Partner(s)	Male Urologists Represented			Female Urologists Represented			Total Urologists Represented		
	Number	Percent (%)	+/- MOE (%)	Number	Percent (%)	+/- MOE (%)	Number	Percent (%)	+/- MOE (%)
Yes	5,746	54.8	2.9	808	77.0	6.8	6,554	56.8	2.7
No	4,747	45.2	2.9	241	23.0	6.8	4,988	43.2	2.7
Total Reported	10,493	100.0		1,049	100.0		11,542	100.0	
Not Applicable^ or Not Reported	1,000			118			1,118		
Total	11,493			1,167			12,660		

(Data source: Weighted samples from the 2018 AUA Annual Census. ^Partners may not exist in non-private practices.)

TABLE 7-8

Do You Have a Domestic Partner (by Gender)?

Domestic Partner	Male Urologists Represented			Female Urologists Represented			Total Urologists Represented		
	Number	Percent (%)	+/- MOE (%)	Number	Percent (%)	+/- MOE (%)	Number	Percent (%)	+/- MOE (%)
Yes	10,320	91.7	1.7	1,066	92.3	3.2	11,386	91.8	1.6
My Domestic Partner/ Spouse Is Either Employed or Self-Employed	5,184	46.1	2.7	943	81.6	6.0	6,127	49.4	2.5
My Domestic Partner/Spouse Is Neither Employed nor Self-Employed	5,136	45.7	2.8	123	10.6	5.2	5,259	42.4	2.6
No	928	8.3	1.7	89	7.7	3.2	1,018	8.2	1.6
Total Reported	11,248	100.0		1,156	100.0		12,404	100.0	
Not Reported	245			11			256		
Total	11,493			1,167			12,660		

(Data source: Weighted samples from the 2018 AUA Annual Census.)

TABLE 7-9

Who Is Primarily Responsible for Day-to-Day Family Responsibilities (e.g. Caring for Sick Children) (by Gender)?

Day-to-Day Family Responsibilities	Male Urologists Represented			Female Urologists Represented			Total Urologists Represented		
	Number	Percent (%)	+/- MOE (%)	Number	Percent (%)	+/- MOE (%)	Number	Percent (%)	+/- MOE (%)
Both My Partner and I	4,218	38.9	2.9	481	42.1	7.5	4,699	39.2	2.7
Me	855	7.9	1.7	224	19.6	4.7	1,079	9	1.6
My Partner	5,280	48.8	2.9	281	24.6	5.8	5,562	46.5	2.7
Others	477	4.4	1.1	156	13.6	5.4	633	5.3	1.1
Total Reported	10,831	100.0		1,142	100.0		11,973	100.0	
Not Reported	662			25			687		
Total	11,493			1,167			12,660		

(Data source: Weighted samples from the 2018 AUA Annual Census.)

TABLE 7-10**Does Your Practice Offer Paid Maternity Leave?**

Paid Maternity Leave	Practicing Urologists Represented		
	Number	Percent (%)	+/- MOE (%)
Yes	5,338	60.4	3.2
No	3,507	39.6	3.2
Total Reported	8,844	100.0	
Not Reported	3,816		
Total	12,660		

(Data source: Weighted samples from the 2018 AUA Annual Census.)

TABLE 7-11**Does Your Practice Offer Paid Paternity Leave?**

Paid Paternity Leave	Practicing Urologists Represented		
	Number	Percent (%)	+/- MOE (%)
Yes	2,313	28.0	2.9
No	5,938	72.0	2.9
Total Reported	8,250	100.0	
Not Reported	4,410		
Total	12,660		

(Data source: Weighted samples from the 2018 AUA Annual Census.)

TABLE 7-12

How Satisfied Do You Feel with Your Work-Life Balance (by Gender)?

Work-Life Balance Satisfaction	Male Urologists Represented			Female Urologists Represented			Total Urologists Represented		
	Number	Percent (%)	+/- MOE (%)	Number	Percent (%)	+/- MOE (%)	Number	Percent (%)	+/- MOE (%)
Very Satisfied	1,982	17.4	2.2	79	6.7	3.3	2,060	16.4	2.1
Satisfied	4,305	37.9	2.8	388	33.3	7.6	4,692	37.4	2.6
Neutral	2,175	19.1	2.1	331	28.4	6.6	2,506	20.0	2.0
Dissatisfied	2,074	18.2	2.0	260	22.3	6.1	2,334	18.6	1.9
Very Dissatisfied	832	7.3	1.4	109	9.3	3.7	940	7.5	1.3
Total Reported	11,367	100.0		1,165	100.0		12,533	100.0	
Not Reported	125			2			127		
Total	11,492			1,167			12,660		

(Data source: Weighted samples from the 2018 AUA Annual Census.)

Section 8: Telemedicine

Primary Observations

- Nearly 12 percent of practicing urologists in the United States participated in a telemedicine program in 2018 (Table 8-1), which is significantly higher than the 8.5 percent in 2016.⁸
- The top motivation for implementing telemedicine capabilities is to provide care to patients from underserved areas (Table 8-3).
- A vast majority (83.3 percent) of urologists who currently participate in telemedicine expected their organizations' telemedicine services to increase in three years (Table 8-5).

TABLE 8-1

Telemedicine Program Participation (by Practice Setting)

Practice Setting	Practicing Urologists Represented			
	Telemedicine Program Participants	Total Number of Urologists	Percent (%)	+/- MOE (%)
Private Groups (Solo, Single Urology and Multispecialty Groups)	347	7,013	4.9	1.4
Institutions (Academic Centers, Hospitals, HMO/Managed Care Organizations)	1,133	5,587	20.3	3.3
Total Reported	1,479	12,600	11.7	1.7
Not Reported		60		
Total		12,660		

(Data source: Weighted samples from the 2018 AUA Annual Census.)

TABLE 8-2

What Percentage of Your Encounters Are Considered Telemedicine?

Percent of Telemedicine Encounters	Practicing Urologists Represented		
	Number	Percent (%)	+/- MOE (%)
< 5	1,108	74.9	6.1
5-10	244	16.5	5.3
11-20	81	5.5	*
> 20	46	3.1	*
Total	1,479	100.0	

(Data source: Weighted samples from the 2018 AUA Annual Census. These results represent those who reported participating in telemedicine. *Represents the estimated value should be used with caution due to small samples.)

TABLE 8-3**What Is Your Organization's Primary Motivation for Implementing Telemedicine Capabilities?**

Primary Motivation	Practicing Urologists Represented		
	Number	Percent (%)	+/- MOE (%)
Providing Care to Patients from Underserved Areas	906	61.2	5.0
Fully Utilizing Existing Operational Capacity	581	39.3	6.3
Providing Competitive Advantage Regionally	554	37.5	7.8
Improving Quality of Care for Patients from Underserved Areas	542	36.6	5.8
Seeing More Patients to Increase Revenue/Profitability	384	26.0	5.5
Conducting Research and Other Academic Activities	162	11.0	3.4
Others	192	13.0	3.5

(Data source: Weighted samples from the 2018 AUA Annual Census. These results represent those who reported participating in telemedicine. Respondents could select multiple answers; the total number of choices may not add up to the total number of practicing urologists and the total percentages may not equal 100 percent.)

TABLE 8-4**What Are the Significant Concerns Regarding Reimbursement for Telemedicine Services?**

Concerns Regarding Reimbursement for Telemedicine Services	Practicing Urologists Represented		
	Number	Percent (%)	+/- MOE (%)
There Is No or Insufficient Reimbursement from Medicare	714	48.2	7.9
There Is No or Insufficient Reimbursement from Medicaid	604	40.8	7.9
There Is No or Insufficient Reimbursement from PPO Fee for Service	562	38.0	5.8
There Is No or Insufficient Reimbursement from Other Payers	640	43.2	7.4
Other Concerns	24	1.6	*
No Concerns Regarding Reimbursement	629	42.5	7.4

(Data source: Weighted samples from the 2018 AUA Annual Census. These results represent those who reported participating in a telemedicine program. Respondents could select multiple answers; the total number of choices may not add up to the total number of practicing urologists and the total percentages may not equal 100 percent. *Represents the estimated value should be used with caution due to small samples.)

TABLE 8-5**How Do You Anticipate Your Organization Will Utilize Telemedicine Services Three Years from Now?**

Future Use of Telemedicine	Practicing Urologists Represented		
	Number	Percent (%)	+/- MOE (%)
Increase	1,188	83.3	6.3
Same/Decrease	239	16.7	6.3
Total	1,427	100.0	

(Data source: Weighted samples from the 2018 AUA Annual Census. These results represent those who reported participating in a telemedicine program.)

Section 9: Quality Improvement and Use of Electronic Health Record Systems

Primary Observations

- Of practicing urologists, 85 percent reported their practices took steps to incorporate Quality Payment Program (QPP) participation (via the Merit-based Incentive Payment System [MIPS] or an Alternative Payment Model [APM]) into their practice (Table 9-1). To do so, the majority of practices upgraded or purchased a new EHR system or committed new resources (Table 9-2).
- The top three quality programs in which urologists participated in the past 12 months included standardization of clinical care through protocols or guidelines, participation in a morbidity and mortality conferences and collection of quality metrics for internal review (Table 9-3).
- Approximately 95 percent of practicing urologists used an Electronic Health Record (EHR) system in their practices in 2018 (Table 9-7), an increase from 91.9 percent in 2014. Lower utilization was found in male urologists 45 years of age or older (Figure 9-1) and urologists in solo practices (Figure 9-2).

TABLE 9-1
Is Your Practice Taking Steps to Incorporate the MIPS or an APM?

Taking Steps	Practicing Urologists Represented		
	Number	Percent (%)	+/- MOE (%)
Yes	6,951	85.0	2.6
No	1,231	15.0	2.6
Total Reported	8,182	100.0	
Not Applicable to My Practice [^]	999		
Not Reported	3,479		
Total	12,660		

(Data source: Weighted samples from the 2018 AUA Annual Census. [^]Practices within large institutions may not have direct reporting responsibility.)

TABLE 9-2**What Changes Have You Made to Your Practice to Incorporate the MIPS or an APM?**

Changes Made	Practicing Urologists Represented		
	Number	Percent (%)	+/- MOE (%)
Upgraded or Purchased a New EHR System	3,409	49.0	3.5
Committed New Resources	3,222	46.4	3.6
Committed Other Financial Resources	1,846	26.6	3.1
Hired More Full Time Staff	1,420	20.4	2.8
Hired Part Time Staff	707	10.2	2.0
Purchased New Equipment	653	9.4	2.0
Others	380	5.5	1.4
No Change Has Been Made	1,249	18.0	2.8

(Data source: Weighted samples from the 2018 AUA Annual Census. These results represent those who reported that their practices made steps to incorporate MIPS/APM into the practice. Respondents could select multiple answers; the total number of choices may not add up to the total number of practicing urologists and the total percentages may not equal 100 percent.)

TABLE 9-3**What Quality Programs Have You/Your Practice Participated in Over the Last 12 Months?**

Quality Programs	Practicing Urologists Represented		
	Number	Percent (%)	+/- MOE (%)
Standardization of Clinical Care through Protocols or Guidelines	6,767	53.4	2.7
Morbidity and Mortality Conferences	6,736	53.2	2.7
Collection of Quality Metrics for Internal Review	6,719	53.1	2.6
Quality Education Curriculum	5,013	39.6	2.7
Structured Case Review	4,107	32.4	2.5
Collection of Quality Metrics for Public Reporting	3,851	30.4	2.4
None of the Above	1,742	13.8	2.1
Others	209	1.6	0.7

(Data source: Weighted samples from the 2018 AUA Annual Census. These results represent those who reported that their practices made steps to incorporate MIPS/APM into the practice. Respondents could select multiple answers; the total number of choices may not add up to the total number of practicing urologists and the total percentages may not equal 100 percent.)

TABLE 9-4**What Patient Safety Initiatives Have You/Your Practice Participated in Over the Last 12 Months?**

Patient Safety Initiatives	Practicing Urologists Represented		
	Number	Percent (%)	+/- MOE (%)
Morbidity and Mortality Conferences	6,730	53.2	2.7
Patient Safety Event Reporting System	5,957	47.1	2.7
Systematic Analysis of a Near Miss, Close Call, or Adverse Event	4,691	37.1	2.6
Patient Safety Education Curriculum	4,099	32.4	2.6
Patient Safety Culture Survey	3,675	29.0	2.5
Patient Safety Focused Management Conference	3,142	24.8	2.3
None of the Above	2,652	20.9	2.3
Others	124	1.0	*

(Data source: Weighted samples from the 2018 AUA Annual Census. Respondents could select multiple answers; the total number of choices may not add up to the total number of practicing urologists and the total percentages may not equal 100 percent. *Represents the estimated value should be used with caution due to small samples.)

TABLE 9-5**Which of the Following Quality and Patient Safety Domains Are Present Within Your Practice Group?**

Quality and Patient Safety Domains	Practicing Urologists Represented		
	Number	Percent (%)	+/- MOE (%)
Quality Officer	5,572	44.0	2.7
Regular Use of Quality Improvement Tools to Change Practice	4,932	39.0	2.7
Patient Safety Officer	4,346	34.3	2.6
Regular Use of Patient Safety Tools to Change Practice	3,542	28.0	2.4
Detailed Quality Improvement Strategy with Specific Aims to Change Practice	3,524	27.8	2.4
Learning Collaborative that Shares Best Practices to Change Practice	3,318	26.2	2.3
Detailed Patient Safety Strategy with Specific Aims to Change Practice	2,486	19.6	2.0
Others	127	1.0	0.5
None of the Above	2,924	23.1	2.4

(Data source: Weighted samples from the 2018 AUA Annual Census. Respondents could select multiple answers; the total number of choices may not add up to the total number of practicing urologists and the total percentages may not equal 100 percent.)

TABLE 9-6**Number of Hours Devoted to Learning about the Science of Patient Safety or Quality Improvement Methodology Over the Past 12 Months**

Number of Hours	Practicing Urologists Represented		
	Number	Percent (%)	+/- MOE (%)
None	1,450	11.9	1.9
< 1	1,580	13.0	1.9
1-4	5,782	47.6	2.8
5-9	1,786	14.7	2.1
≥ 10	1,543	12.7	1.8
Total Reported	12,141	100.0	
Not Reported	519		
Total	12,660		

(Data source: Weighted samples from the 2018 AUA Annual Census.)

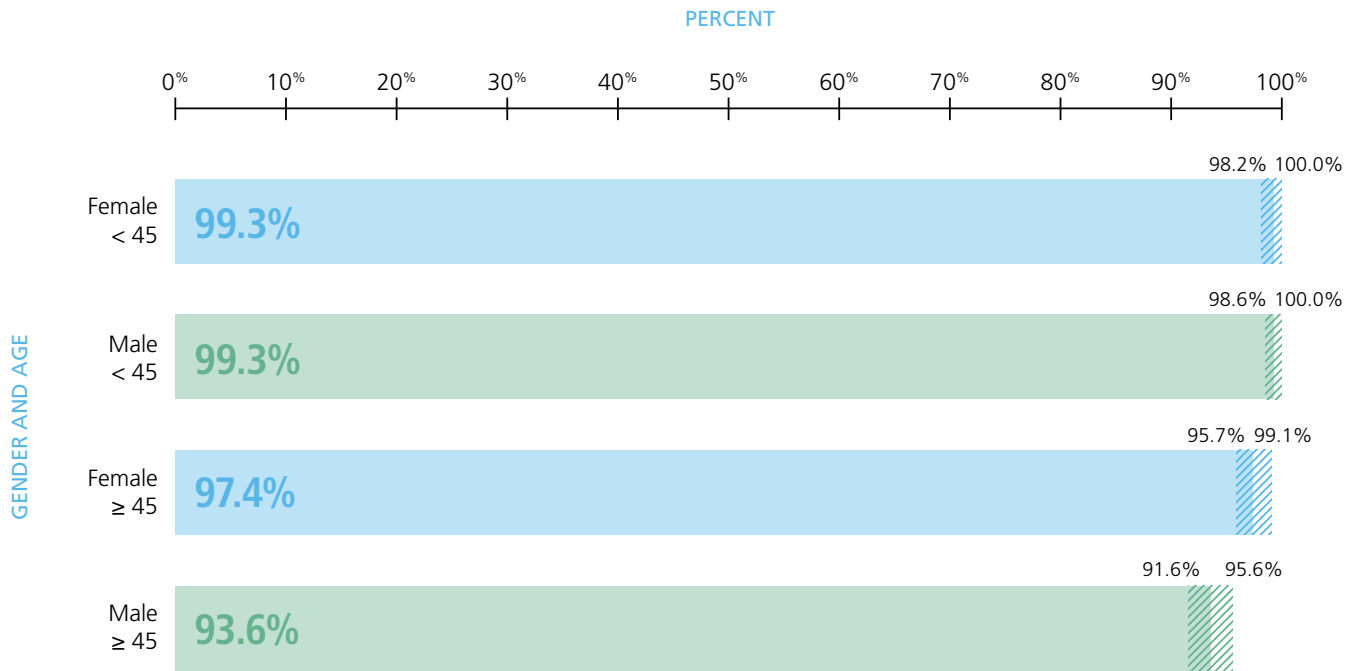
TABLE 9-7**Do You Use an Electronic Health Record (EHR) System in Your Practice?**

Use of EHR	Practicing Urologists Represented		
	Number	Percent (%)	+/- MOE (%)
Yes	12,027	95.3	1.4
No	598	4.7	1.4
Total Reported	12,625	100.0	
Not Reported	35		
Total	12,660		

(Data source: Weighted samples from the 2018 AUA Annual Census.)

FIGURE 9-1

Do You Use an EHR System in Your Practice (by Gender and Age)?



(Data source: Weighted samples from the 2018 AUA Annual Census. Bold numbers are point estimates. The dashed bars represent upper and lower 90% confidence limits.)

TABLE 9-8

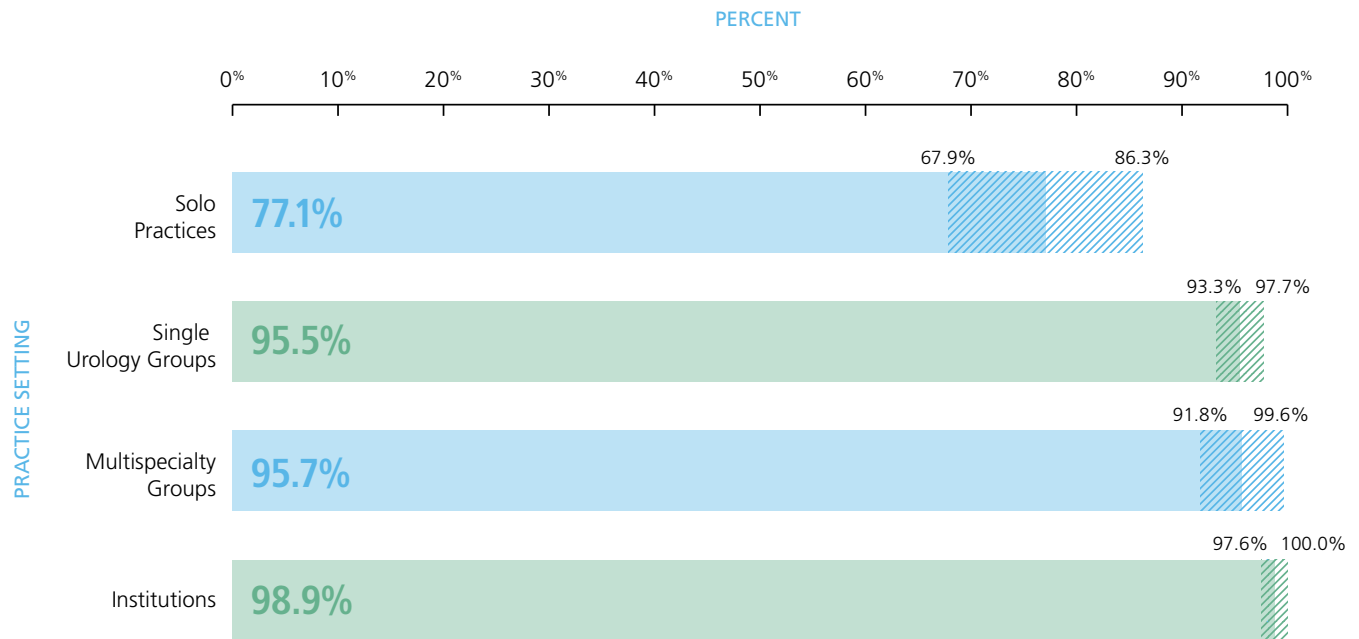
Use of a Medical Scribe in Your Practice for EHR Documentation

Use of Medical Scribes	Practicing Urologists Represented		
	Number	Percent (%)	+/- MOE (%)
Yes	2,197	18.5	2.1
No	9,659	81.5	2.1
Total Reported	11,856	100.0	
Not Reported	171		
Total	12,027		

(Data source: Weighted samples from the 2018 AUA Annual Census. The results represent those who reported that they use an EHR in their practice.)

FIGURE 9-2

Do You Use an EHR System in Your Practice (by Practice Setting)?



(Data source: Weighted samples from the 2018 AUA Annual Census. Bold numbers are point estimates. The dashed bars represent upper and lower 90% confidence limits.)

TABLE 9-9

Reasons for Using a Medical Scribe for EHR Documentation

Reasons	Practicing Urologists Represented		
	Number	Percent (%)	+/- MOE (%)
Improve Clinic Workflow/Efficiency	1,672	76.1	5.4
Decrease Overall Documentation Time	1,601	72.9	5.1
Improve Providers' Quality of Life	1,576	71.7	5.7
Increase Productivity	1,436	65.4	5.9
Reduce Transcription Errors	311	14.1	4.6
Other	176	8.0	2.9

(Data source: Weighted samples from the 2018 AUA Annual Census. The results represent those who reported using a medical scribe for EHR documentation. Respondents could select multiple answers; the total number of choices may not add up to the total number of practicing urologists and the total percentages may not equal 100 percent.)

TABLE 9-10**Does Using an EHR Increase the Quality and Accuracy of Your Work?**

Increase the Quality and Accuracy of Work	Practicing Urologists Represented		
	Number	Percent (%)	+/- MOE (%)
Strongly Agree	1,335	11.1	1.7
Agree	3,634	30.2	2.6
Neutral	2,927	24.3	2.3
Disagree	2,612	21.7	2.3
Strongly Disagree	1,520	12.6	1.9
Total	12,027	100.0	

(Data source: Weighted samples from the 2018 AUA Annual Census. The results represent those who reported that they use an EHR in their practice.)

TABLE 9-11**Using an EHR Has Enhanced My Productivity**

Productivity Enhancement	Practicing Urologists Represented		
	Number	Percent (%)	+/- MOE (%)
Strongly Agree	913	7.6	1.4
Agree	1,883	15.7	2.0
Neutral	2,266	18.8	2.2
Disagree	3,972	33.0	2.6
Strongly Disagree	2,994	24.9	2.4
Total	12,027	100.0	

(Data source: Weighted samples from the 2018 AUA Annual Census. The results represent those who reported that they use an EHR in their practice.)

TABLE 9-12

If the AUA Could Produce Templates for Specific Visit Types for Your EHR (e.g., Localized Prostate Cancer, Overactive Bladder [OAB]), Would You Use Them in Your Practice?

Use of EHR Templates	Practicing Urologists Represented		
	Number	Percent (%)	+/- MOE (%)
Yes	9,254	88.6	1.9
I Am Confident That the Templates Could Be Inserted into My EHR	4,245	40.6	3.0
I Am Not Confident That the Templates Could Be Inserted into My EHR	5,009	48.0	3.0
No	1,191	11.4	1.9
Total Reported	10,445	100.0	
Not Reported	2,215		
Total	12,660		

(Data source: Weighted samples from the 2018 AUA Annual Census. The results represent those who reported using an EHR in their practice.)

Section 10: Prescription of Opioids

Primary Observations

- Approximately 90 percent of practicing urologists prescribed opioids for their patients undergoing surgical procedures (Table 10-1).
- Nearly 15 percent of practicing urologists prescribe opioids based on procedure-specific guidance developed by their practice or institution (Table 10-2).
- Nearly three-fourths of urologists decreased their number of opioid prescriptions compared to three years ago for patients undergoing surgical procedures (Table 10-4).

TABLE 10-1

Do You Prescribe Opioids for Patients Undergoing Surgical Procedures?

Prescription of Opioids	Practicing Urologists Represented		
	Number	Percent (%)	+/- MOE (%)
Yes	11,205	89.4	1.9
No	1,334	10.6	1.9
Total Reported	12,539	100.0	
Not Reported	121		
Total	12,660		

(Data source: Weighted samples from the 2018 AUA Annual Census.)

TABLE 10-2

I Choose the Number of Opioid Pills at Discharge Due to the Following Reasons

Reasons	Practicing Urologists Represented		
	Number	Percent (%)	+/- MOE (%)
This Worked Well for My Patients in the Past	9,554	85.3	2.1
I Want to Avoid Patients Having to Call My Office During Their Recovery	2,665	23.8	2.4
My Practice/Institution Developed Guidelines for Procedure-Specific Prescribing	1,647	14.7	2.1

(Data source: Weighted samples from the 2017 AUA Annual Census. The results represent those who reported prescribing opioids for patients undergoing surgical procedures.)

TABLE 10-3

How Many Opioid Pills, on Average, Do You Prescribe (by Procedure)?

Number of Pills by Procedure	Practicing Urologists Represented		
	Number	Percent (%)	+/- MOE (%)
Open Abdominal Surgery			
None	111	1.2	*
≤10	1,386	15.3	2.2
>10	7,557	83.5	2.3
Total	9,053	100.0	
Laparoscopic Surgery			
None	349	4.8	1.7
≤10	2,266	31.3	3.1
>10	4,615	63.8	3.2
Total	7,230	100.0	
Scrotal Surgery			
None	917	8.5	1.7
≤10	4,802	44.3	2.9
>10	5,116	47.2	2.9
Total	10,835	100.0	
Endoscopic Surgery			
None	2,256	21.2	2.4
≤10	4,491	42.1	2.9
>10	3,913	36.7	2.7
Total	10,660	100.0	
Pelvic Floor Surgery			
None	438	6.6	1.8
≤10	2,377	35.6	3.3
>10	3,860	57.8	3.4
Total	6,675	100.0	

(Data source: Weighted samples from the 2018 AUA Annual Census. The results represent those who reported prescribing opioids for patients undergoing surgical procedures. *Represents the estimated value should be used with caution due to small samples.)

TABLE 10-4

Compared to Three Years Ago, How Has the Number of Opioid Prescriptions You Prescribe for Patients Undergoing Surgical Procedures Changed?

Changes in Opioid Prescription	Practicing Urologists Represented		
	Number	Percent (%)	+/- MOE (%)
Increased	96	0.9	*
Remained Unchanged	2,999	26.8	2.6
Decreased	8,078	72.3	2.6
Total	11,173	100.0	

(Data source: Weighted samples from the 2018 AUA Annual Census. The results represent those who reported prescribing opioids for patients undergoing surgical procedures. *Represents the estimated value should be used with caution due to small samples.)

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