



JOURNAL OF ORTHOPAEDICS FOR
PHYSICIAN ASSISTANTS

Executive Research Brief | September 2016



PHYSICIAN ASSISTANTS IN ORTHOPAEDICS

A STUDY OF JOB SATISFACTION,
EDUCATION & LIFESTYLES

EXECUTIVE SUMMARY

A new study from the *JBJS Journal of Orthopaedics for Physician Assistants (JOPA)* finds that PAs in Orthopaedics, for the most part, love their jobs and take great personal satisfaction in their work. Some 84% of PAs in Orthopaedics describe themselves as either very or extremely satisfied with the profession and their jobs, and some 86% say they would choose the same career path all over again if presented with the opportunity.

Here are some key highlights from the study, which looked at their roles in surgery and clinical practice, job satisfaction, educational needs, conference & seminar participation, and other information sources they use to stay up to date with contemporary orthopaedic practice.

- **PAs in Orthopaedics agree unanimously (100%)** that physician assistants are playing a greater role in orthopaedic practices.
- **Eight in 10 PAs in Orthopaedics** agree that they experience a healthy work-life balance.
- **Nearly 7 in 10 PAs in Orthopaedics** agree that they are paid fairly for the work they do.
- **Some 83% of PAs in Orthopaedics** chose the specialty for many positive reasons including helping patients return to their usual routines, making a difference in orthopaedic care, and being involved in surgery.
- **Successful patient outcomes** are what many PAs in Orthopaedics say is most rewarding – patients' injuries and conditions are usually fixable within finite time frames and patient quality of life is typically improved.
- **When asked to cite negative aspects of their jobs**, PAs in Orthopaedics sometimes feel overburdened in terms of workload, hours, and/or call duties. While many say they receive a great deal of autonomy and respect in practice, there are instances – in specific practices or with some orthopaedic surgeons – where this is not the case. Another area where PAs in Orthopaedics face



obstacles is with changes in the industry, including practice administration, CME/recertification, liability in prescribing narcotics. With that said, the proportion of PAs in Orthopaedics voicing such complaints is less than two in 10.

- **PAs in Orthopaedics display strong dedication** to both expanding and keeping current with their medical knowledge, often paying out of pocket to attend conferences and seminars that are not fully reimbursed by their practice.
- **The top CME activity preference among PAs in Orthopaedics** is for live, in-person conferences and seminars, though they supplement attendance at live events by routinely using print journals, web sites, textbooks, and apps dedicated to orthopaedics as well as general medicine.

Additional details around these high-level findings can be found in subsequent pages of this report.

PROFILE

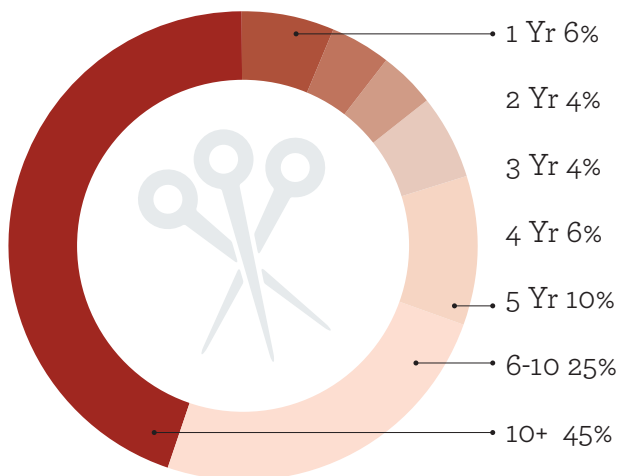
OF PHYSICIAN ASSISTANTS IN ORTHOPAEDICS

The typical physician assistant (PA) in Orthopaedics participating in the profile study is just shy of 40 years old and has specialized in orthopaedics for an average of 9.7 years. PAs in Orthopaedics are relatively evenly distributed between single- and multi-specialty group

practices (roughly one-third each), with another 18% practicing in hospital settings. It is most common for PAs in Orthopaedics to work with just one orthopaedic surgeon, though one-quarter support 2 to 3 surgeons and 29% support four or more orthopaedic surgeons.

Average age = **40**

9.7 = Average number of years practicing as a PA in orthopaedics



Single specialty group, 36%

Multi specialty group, 33%

Hospital, 18%

Solo, 6%

Military/federal, 4%

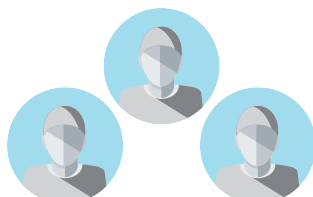
Other*, 2%

*Medical device education, academic, retired, HMO, hospital outpatient.

2.6 = Average number of orthopaedic surgeons supported



One: 46%



Two to three: 25%



Four to five: 11%

5+

Five-plus: 18%

PROFILE

OF PHYSICIAN ASSISTANTS IN ORTHOPAEDICS

Few PAs practice in just one orthopaedic subspecialty area. Indeed, the study finds that PAs support, on average, some 5.5 different subspecialties in practice. Of PAs citing just a single area of practice, 41% are in general practice, followed

by 14% focused exclusively in sports medicine, and another 14% exclusively in trauma. Overall, adult knee is the most popular subspecialty supported by PAs in practice with orthopaedic oncology being least popular.



Adult knee, 68%



General, 67%

Sports medicine, 63%



Shoulder, 62%

Adult hip, 61%



Elbow, 44%

Hand/wrist, 43%



Trauma, 42%

Foot/ankle, 38%



Spine, 28%

Pediatrics, 23%

Rehabilitation, 9%

Oncology, 5%

Other*, 2%

**Total joints, revisions, ACL and ACL revisions, pre-op medicine, upper extremity, urgent care.*

TOP INFLUENCERS

FOR PAs PURSUING ORTHOPAEDICS AS A SPECIALITY

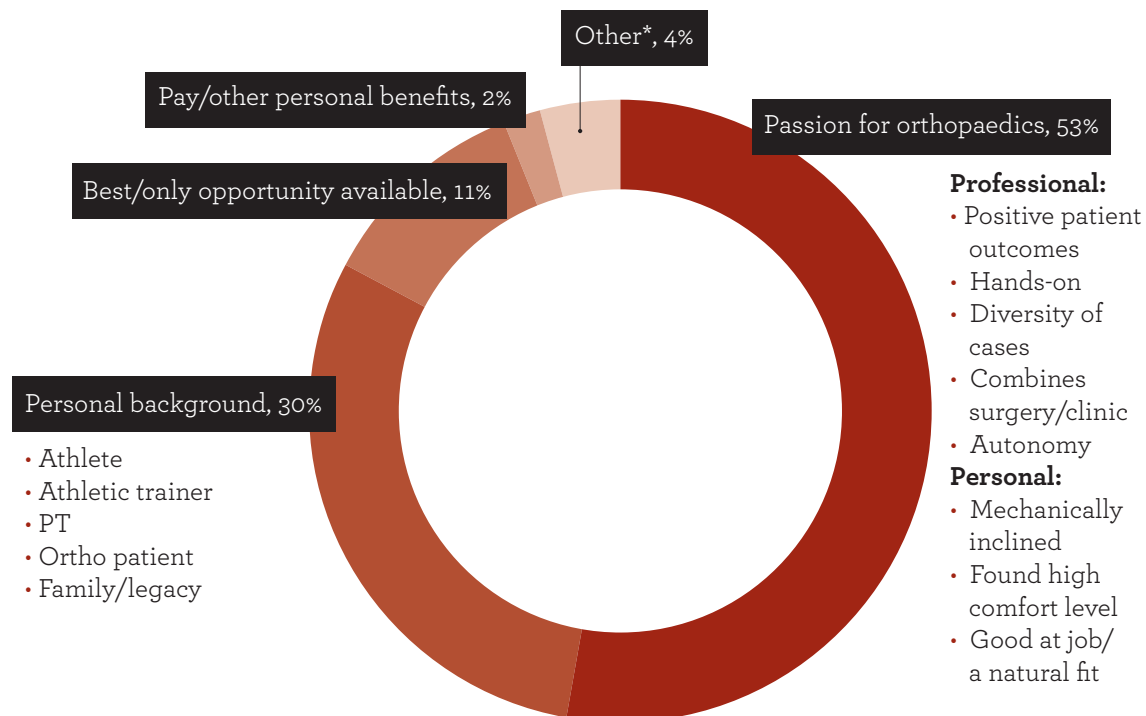
Some 53% of PAs who have specialized in orthopaedics did so because – in school or clinical rotations – they discovered a true passion for the specialty. For many, the source of that passion lies in an ability to consistently affect positive patient outcomes; to fix patients versus managing chronic diseases. As one PA expresses:

“I love that we can make significant positive impacts on our patients’ lives and that most of our patients get better. I love that I can educate my patients in terms they understand, and that, with this education, comes empowerment for them to make wise health choices.”

Other key aspects of orthopaedics appreciated by many PAs are: the hands-on nature of the work, the variability and diversity of cases they see on a daily basis, and the autonomy they are often given to use their knowledge and skills in clinical practice. A large number falling into the ‘passion for orthopaedics’ group also cite personal

interests and natural talents that mesh with orthopaedics. This includes being mechanically inclined; loving surgery, clinical practice, or a combination of the two; being deeply interested in anatomy, physiology, bones, and joints; and feelings of being a ‘natural’ and excelling at the practice of orthopaedic medicine.

A second fairly large group of PAs (some 30%) say they chose the specialty as a natural outgrowth of past pursuits – either as athletes, athletic trainers, physical therapists, and even injured patients who benefited greatly from orthopaedic treatment. A few in this group were following family legacies in the field of orthopaedics. A small but still notable cohort (11%) say they entered orthopaedics simply because it was the only (or best) opportunity available at the time they were finishing PA school, training, or certification. A very small number of PAs (just 2%) say their motivation for choosing orthopaedics as a specialty is linked to pay or other personal benefits, while some 4% offer more unique people- or practice-specific reasons.



*Includes: specific mentor/physician(s), relaxed practice setting, ‘normalcy of physicians’, military experience.

JOB SATISFACTION

OF PHYSICIAN ASSISTANTS IN ORTHOPAEDIC PRACTICE

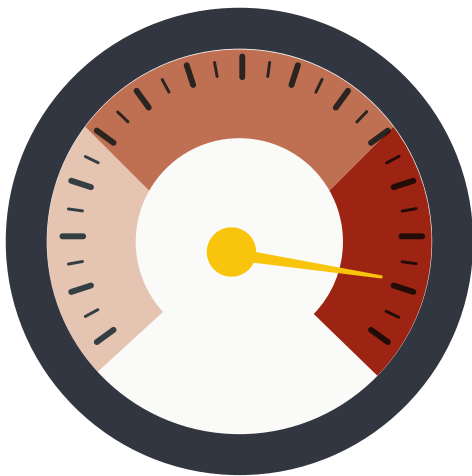
Job satisfaction is very high amongst PAs in Orthopaedics, with 84% describing themselves as either very or extremely satisfied in their work and some 86% affirming they would choose the same career path again.

Among less satisfied PAs in Orthopaedics, the trouble seems to be more with medicine in general – due to growing administrative, insurance-related, workload, continuing education, and recertification burdens, for example – than with orthopaedics in particular. As one PA says: “Medicine is not an easy place to be at this point.” Says another: “Based on the direction in healthcare, I

would likely choose another field altogether.” Others falling into the less-than-satisfied cohort frequently cite problems with specific surgeons’ or physicians’ personalities in their practices.

Overall, PAs agree that they are playing an increasingly significant role in orthopaedic practice, enjoy healthy work/life balance, and are paid fairly. There is somewhat less agreement on the question of whether PAs are sufficiently valued by the physicians and surgeons they support and whether orthopaedic practices are making optimal use of their PAs’ knowledge and skills.

How satisfying is your work?



84% extremely/very satisfied, 14% satisfied, and 2% not satisfied.

84%

**EXTREMELY OR
VERY SATISFIED**

86%

**WOULD CHOOSE SAME
CAREER PATH AGAIN**

	AGREE STRONGLY	AGREE	DISAGREE
PAs are playing a greater role in orthopaedic practices	72%	28%	0%
PAs are not valued enough by their supervising physicians	13%	40%	48%
I have a healthy work/life balance as a PA	31%	49%	19%
PAs are paid fairly for the work they do	13%	56%	30%
I could do more if my supervising surgeon allowed me to	22%	36%	42%
Adapting to different surgeons’ styles and personalities is challenging	25%	58%	16%

BEST ASPECTS OF THE JOB

AS A PA IN ORTHOPAEDICS

The things PAs in Orthopaedics appreciate most about their work closely mirror their reasons for choosing the speciality in the first place.

The ability to deliver positive patient outcomes – to participate in fixing patient ailments permanently within finite time frames, versus managing or controlling chronic illnesses over the longer term – ranks, by far, as the number one favorable aspect of the job.

In this open-ended/write-in survey question, PAs in Orthopaedics also discuss the virtues of being able to work in both surgical and clinical settings (keeps the job challenging and interesting), the relative autonomy they have to practice in clinic, and the relative variety and diversity of the cases they see as other leading positive aspects.

Personal benefits, such as excellent colleagues or teams, good pay, work-life balance, and scheduling flexibility receive far fewer mentions overall when compared to the innate virtues of practicing orthopaedic medicine and surgery.

“I feel like I make a difference. I can fix people’s injuries and make their lives better. I enjoy the operating room and procedures like injections.”

“Getting patients back to what they enjoy doing.”

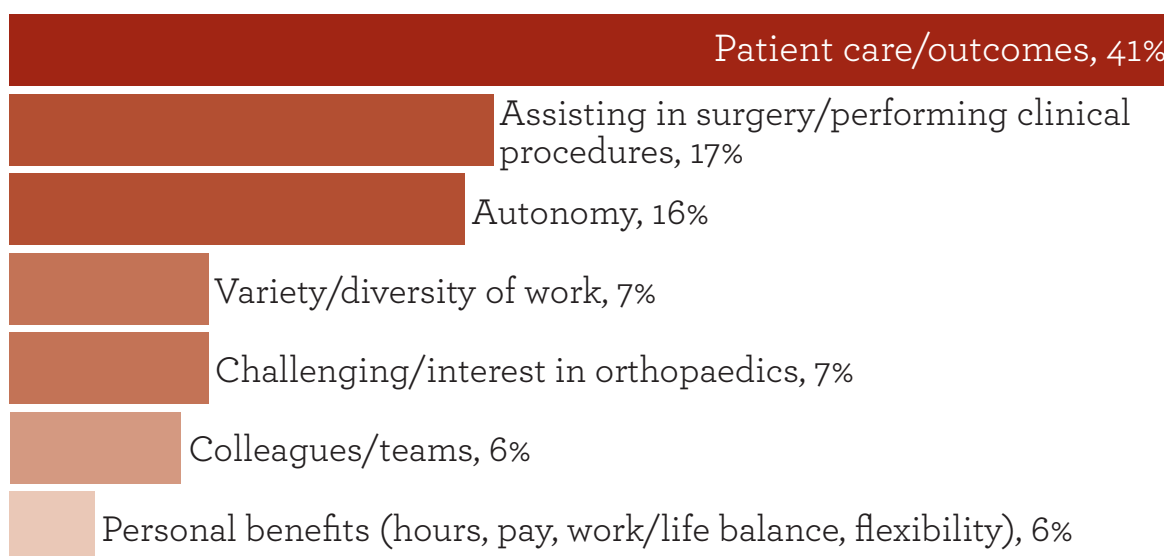
“I love the patients, doing surgery, follow up with happy patients with good surgical outcomes. I have a great physician who supports me.”

“Autonomy. Making patients better - improving pain, quality of life.”

“Helping people get back to recreational and daily activities.”

“Variety of daily schedule and good pay.”

WHAT DO YOU LIKE BEST ABOUT BEING A PA IN ORTHOPAEDICS?



Note: Data shown in this chart reflect coding and categorization of verbatim/write-in responses.

WORST ASPECTS OF THE JOB

AS A PA IN ORTHOPAEDICS

Personal factors do not weigh heavily on the list of things PAs in Orthopaedics really love about their jobs, but workload, hours, and call duties make up the lion's share of their least favorite aspects.

One PA, for example, cites “not having enough PAs to cover workload,” as a prominent negative aspect. While PAs often cite autonomy as a highly positive job aspect, when they are denied autonomy or otherwise constrained or undervalued, this becomes a significant negative. A related negative for some is a pervasive sense that PAs are not well respected by physicians, patients, or the general public. One PA laments having “all the responsibility with no significant authority,” while another cites a “lack of understanding in the practice on how to use PAs effectively, efficiently, and proficiently.”

Negative healthcare industry trends – coding and other rising admin burdens, unwillingness of payers to support certain treatments, and increasingly burdensome requirements for CME and recertification, all figure prominently in the negative column for PAs in Orthopaedics. And, while PAs generally cite positive patient outcomes as a big plus, there are some who lament having to cope with rare difficult patients – those holding

HOW ORTHOPAEDIC PHYSICIANS COULD IMPROVE THE PA EXPERIENCE:

“Be available more.”

“Ensure that I have support, resources, mentoring as needed to allow me to grow and be as successful as possible in serving our patients.”

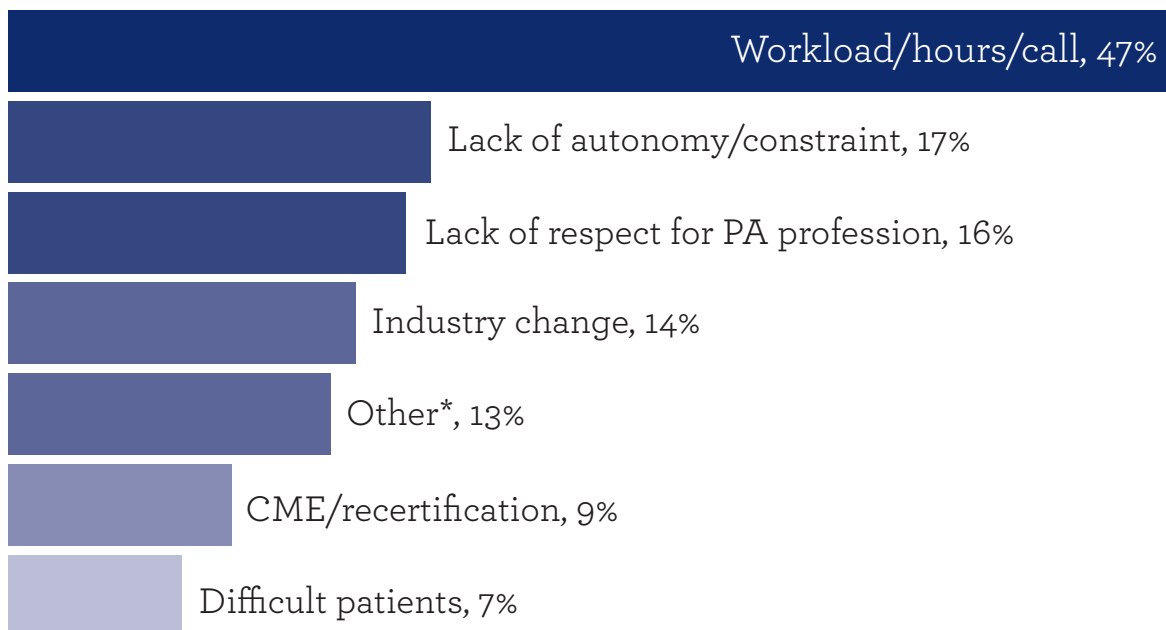
“Better compensation.”

“Respect me more as a professional and have a better understanding and respect for what we do as PAs.”

“More teaching/learning opportunities.”

unrealistic expectations for pain relief or displaying pill-seeking and other negative, high-risk behaviors.

WHAT DO YOU LIKE LEAST ABOUT BEING A PA IN ORTHOPAEDICS?



*Note: Data shown in this chart reflect coding of verbatim/write-in responses. *Includes: liability, risks associated with prescribing narcotics for pain relief, a feeling of eroding general medical knowledge with long tenure in specialty, and boredom when patient/case diversity is lacking.*

INFORMATION

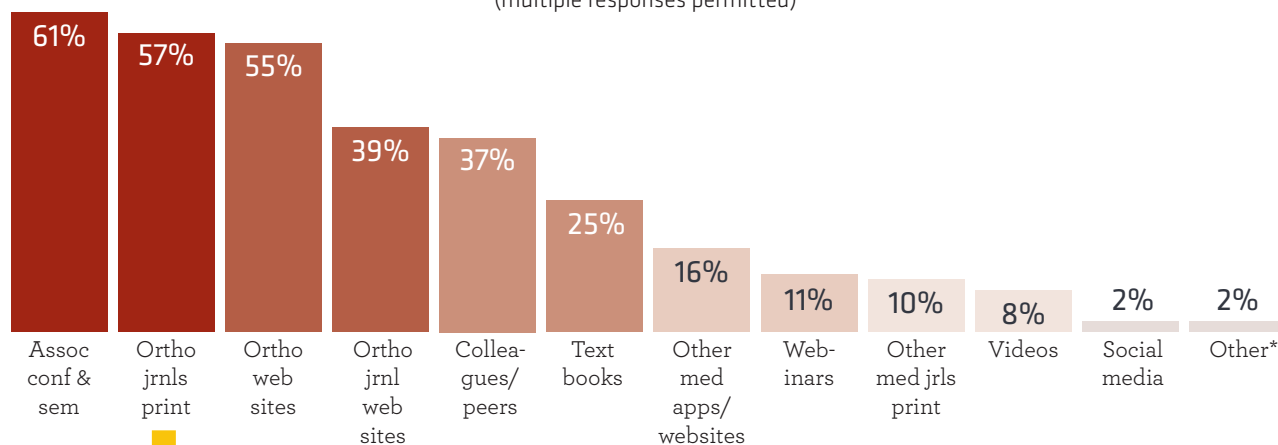
PREFERENCES AMONG PAs IN ORTHOPAEDICS

PAs in Orthopaedics display strong dedication to lifelong medical learning and ongoing professional development. The top three preferred channels for medical learning in general are association conferences and seminars,

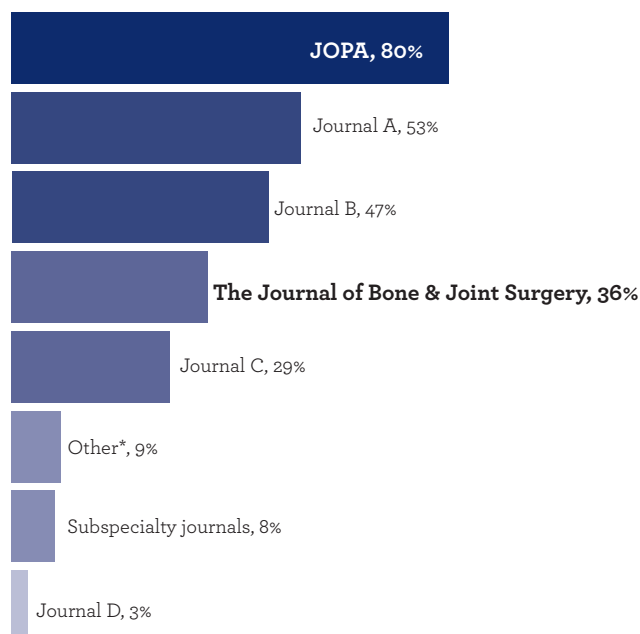
orthopaedic print journals, and orthopaedic web sites. The same top three emerge when PAs are asked to cite the most commonly used and desired sources of CME (see page 10).

Which are your preferred resources for ongoing orthopaedic education?

(multiple responses permitted)



*Audio digest, comprehensive publications.



"[I] usually skim for interesting articles."



CME PREFERENCES

AMONG PAs IN ORTHOPAEDICS

PAs in Orthopaedics feel strongly that live conferences are the most desirable way to obtain required CME credits. Key stats around reimbursement practices, however, suggest that attending conferences – especially national ones requiring travel – are often at least partially a personal expense for PAs in orthopaedics.

TO OBTAIN CME: #1 CONFERENCES
MOST USED: 78% MOST DESIRED: 67%



	USE	MOST DESIRED
Conferences	78%	67%
Journal CME	71%	22%
Online CME	62%	25%
In-state/local lectures	38%	12%
Association websites	24%	3%
Webinars	16%	2%

Other important sources for CME credit: Epocrates, Prescribers' Letter, Audio Digest, weekly grand rounds, CCF, Medscape, Up To Date

REIMBURSEMENT FOR CME ACTIVITIES

\$2,000

Average annual CME reimbursement

\$400

Lowest reported reimbursement

\$5,000

Highest reported reimbursement

\$1,500

Most common reimbursement level

10%

Zero reimbursement

IMPORTANCE BY CME TYPE

Percent rating as extremely or very important

73% LECTURE-BASED CME

66% JOURNAL CME

34% SELF-ASSESSMENT CME

22% PERFORMANCE IMPROVEMENT (PI) CME

"Have not had luck collecting [reimbursement]; usually just write off on my taxes."

"Comes from a pool for our entire department."

"\$2,000, but that includes my licensing and hospital dues."

"No set amount; prefers in-state meetings if possible."

"Five paid days."

"In process of raising [reimbursement]."

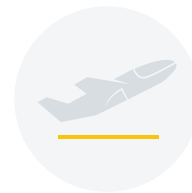
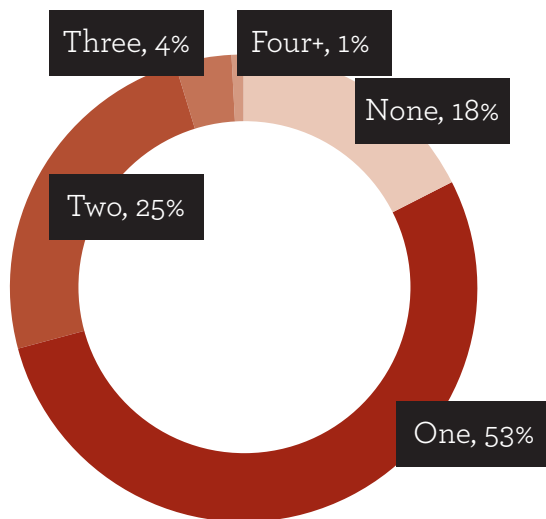
CONFERENCE & SEMINAR

ATTENDANCE TRENDS AMONG PAs IN ORTHOPAEDICS

Relatively limited practice reimbursement policies appear to be confining most PAs in Orthopaedics to attendance at just one or two CME conferences or seminars at most each year. Nearly one in five PAs say they will attend no live events this year. Though conference and seminar

attendance may drop slightly in the current year (17% say they will attend fewer events compared to 12% attending more), the trend for the year ahead looks to be quite positive, with some 28% planning to increase event attendance in 2017 versus only 2% expecting to decrease.

1.2 = Average number of conferences PAs in Orthopaedics will attend in 2016



59%
BY PLANE



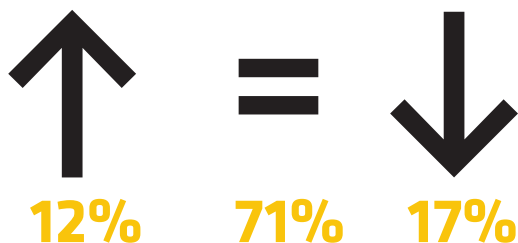
41%
BY CAR
Within driving distance



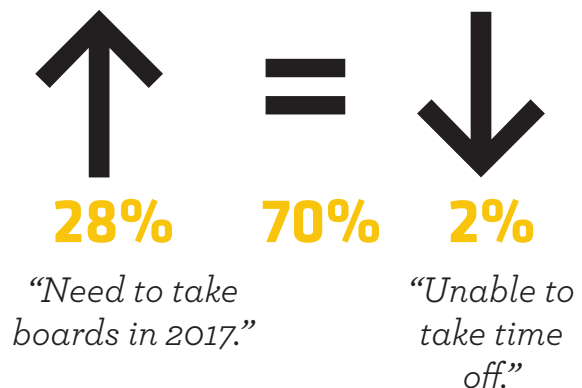
6%
BY TRAIN
OR OTHER

Multiple responses permitted.

COMPARED TO LAST YEAR



PLANS FOR NEXT YEAR



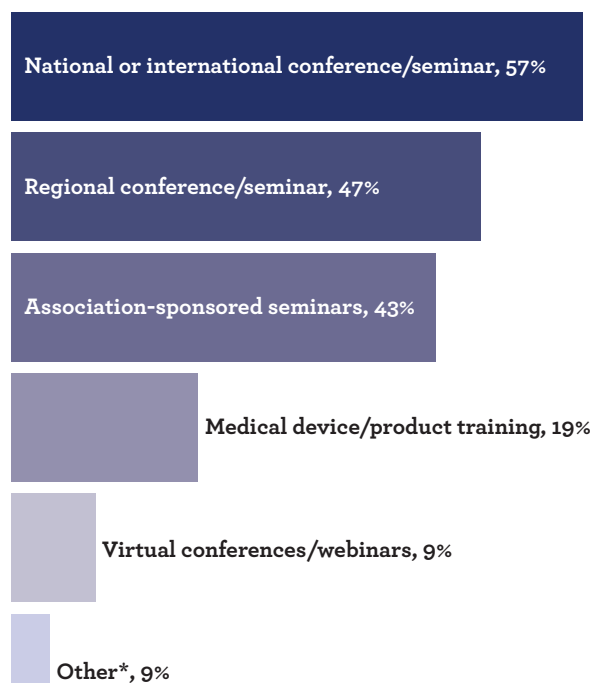
MOST POPULAR CONFERENCES

AMONG PAs IN ORTHOPAEDICS AND WHY

In selecting which conferences and seminars they will attend, PAs in Orthopaedics display a clear preference

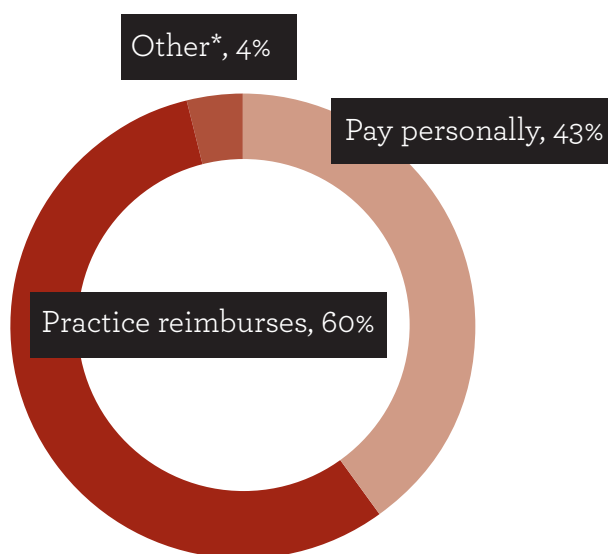
for highly focused events that are geared both to the PA profession and to the subspecialties supported in practice.

PREFERRED EVENT TYPES



*Includes: Board review/certification courses, local annual.

How is attendance financed?



*Combination, hospital or school covers.

PREFERRED EVENTS (UNAIDED) by producing organization

Tier 1	Number of mentions
PAOS	72
AAOS	22
AAPA	20
Tier 2	
OTA	7
Orthopedics Today	5
AOSSM	4
GAPA	3
POSNA	3
NATA	2
SOMOS	2
CCJR	2

NOTE: More than a dozen other conferences were mentioned; only events receiving more than one mention are listed here.

What makes a conference a favorite?

- "Many topics covered."
- "Largest, meet many people."
- "In-depth, current."
- "Relevant content."
- "Mostly in line with my practice."
- "Specialty specific."
- "Geared to PAs specifically."
- "Hands-on portion."
- "Location."

ABOUT THE STUDY

The *JBJS Journal of Orthopaedics for Physician Assistants (JOPA)* conducted this research to gain insights into orthopaedic physician assistants' job satisfaction, educational needs and conference and seminar participation. The survey also looked at how *JOPA* can provide even greater utility to PAs in orthopaedics in order to make their jobs easier.

AREAS STUDIED

- Respondent profile: Numbers of surgeons PAs in Orthopaedics assist, subspecialties they support, practice settings, age, years of experience
- Resources used: journal readership and preferred resources for CME, sources used and preferred for CME, rating of types of CME, practice reimbursement for CME, conference and seminar participation: number attended in 2016, plans for 2017, types of conferences/seminars attend regularly, favorite CME conferences
- Job satisfaction: likes and dislikes, what surgeons could do to improve overall satisfaction, reasons why PAs selected orthopaedics and would/would not choose the field again

METHODOLOGY:

The study was conducted by email during July 2016. *JBJS Journal of Orthopaedics for Physician Assistants (JOPA)* sent an online survey to 3,123 *JOPA* subscribers. Two email broadcasts were sent approximately one week apart. Response: 283 physician assistants in orthopaedics responded, representing a response rate of 9%. At a 95% confidence level, results are projected at a plus or minus 5.7% margin of error.



JOURNAL OF ORTHOPAEDICS FOR
PHYSICIAN ASSISTANTS

ABOUT JBJS JOURNAL OF ORTHOPAEDICS FOR PHYSICIAN ASSISTANTS (JOPA)

The *JBJS Journal of Orthopaedics for Physician Assistants (JOPA)* is now published by *The Journal of Bone and Joint Surgery (JBJS)*, in recognition of the growing expertise and support that physician assistants (PAs) and nurse practitioners (NPs) provide to enhance patient care. *JBJS JOPA* enables PAs and NPs to contribute their unique experiences and perspectives to the orthopaedic literature.

JBJS JOPA is an academic resource that delivers ongoing orthopaedic education for physician assistants (PAs) and nurse practitioners (NPs) by providing them with a unique forum to share their knowledge and experiences. *JOPA* publishes clinically relevant content across all orthopaedic subspecialties to advance the knowledge of PAs in Orthopaedics and NPs.

Subscribers to the *JBJS Journal of Orthopaedics for Physician Assistants (JOPA)* also receive complimentary access to *JBJS Reviews*, an online reviews journal with comprehensive, objective, and authoritative review articles written by recognized experts.