

GRADUATE MEDICAL EDUCATION TRENDS IN NEVADA – 2019

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Graduate Medical Education Trends in Nevada – 2019

Graduate Medical Education Trends in Nevada – 2019 contains current information about physicians (MDs and DOs) who have completed residency and fellowship programs in Nevada. This research brief utilizes data from an annual survey of physicians completing graduate medical education (GME) in Nevada over the past decade. The survey has been undertaken by the Office of Statewide Initiatives (OSI) at the University of Nevada, Reno School of Medicine since 2004. The OSI survey data contained in this report is supplemented with licensure data from the Nevada State Board of Medical Examiners and the Nevada State Board of Osteopathic Medicine.

Figure 1: Post-GME Employment, Training, and Location Plans of Physicians Completing GME in Nevada – 2019

	Beginning Clinical Practice	Continuing Training	Total
Remaining in Nevada	69 (37.7%)	14 (7.7%)	83 (45.4%)
Leaving Nevada	61 (33.3%)	39 (21.3%)	100 (54.6%)
Total	130 (71.0%)	53 (29.0%)	183 (100.0%)

Figure 1 highlights the post-GME plans of the 183 physicians who graduated from GME programs in Nevada in 2019. In 2019, 45.4% of physicians completing GME training report that they will remain in Nevada upon graduation, as compared to a majority of graduates (54.6%) who intend to relocate to another state.

A key finding of this report is that 39 of the 53 physicians pursuing additional training (73.6%) are leaving the state for fellowship and subspecialty training that does not exist or is in short supply in Nevada. This finding suggests that the development of fellowship programs in Nevada holds the potential for increasing the number and percent of GME graduates who ultimately remain in Nevada to begin practice. Finally, 83 physicians or 45.4% of GME graduates in 2019 will begin practice or continue training in Nevada.

Figure 2 presents the post-residency plans of 1,089 physicians completing GME in Nevada from 2010 to 2019. Over the past decade, 41.5% of physicians completing GME training report that they will remain in Nevada upon graduation, as compared to a majority of graduates (58.5%) who intend to relocate to another state. Nevada retained 452 physicians over the past ten years.

Figure 2: Post-GME Employment, Training, and Location Plans of Physicians Completing GME in Nevada – 2010 to 2019

	Beginning Clinical Practice	Continuing Training	Total
Remaining in Nevada	393 (36.1%)	59 (5.4%)	452 (41.5%)
Leaving Nevada	412 (37.8%)	225 (20.7%)	637 (58.5%)
Total	805 (73.9%)	284 (26.1%)	1,089 (100.0%)

Figure 3 shows that over the past decade, the number of GME graduates in Nevada has increased by 144.0% from 75 graduates in 2010 to 183 graduates in 2019. Additionally, the proportion of GME graduates who have remained in Nevada upon graduation has varied from year to year. For example, 57.4% were retained in 2010 as compared to 29.2% in 2013 with the most recent retention rate of 45.4% in 2019. These trend data highlight the substantial proportion of GME graduates leaving the state for additional fellowship training that does not exist or is in short supply in Nevada.

Figure 3: Annual Post-GME Employment, Training, and Location Plans of Physicians Completing GME in Nevada – 2010 to 2019

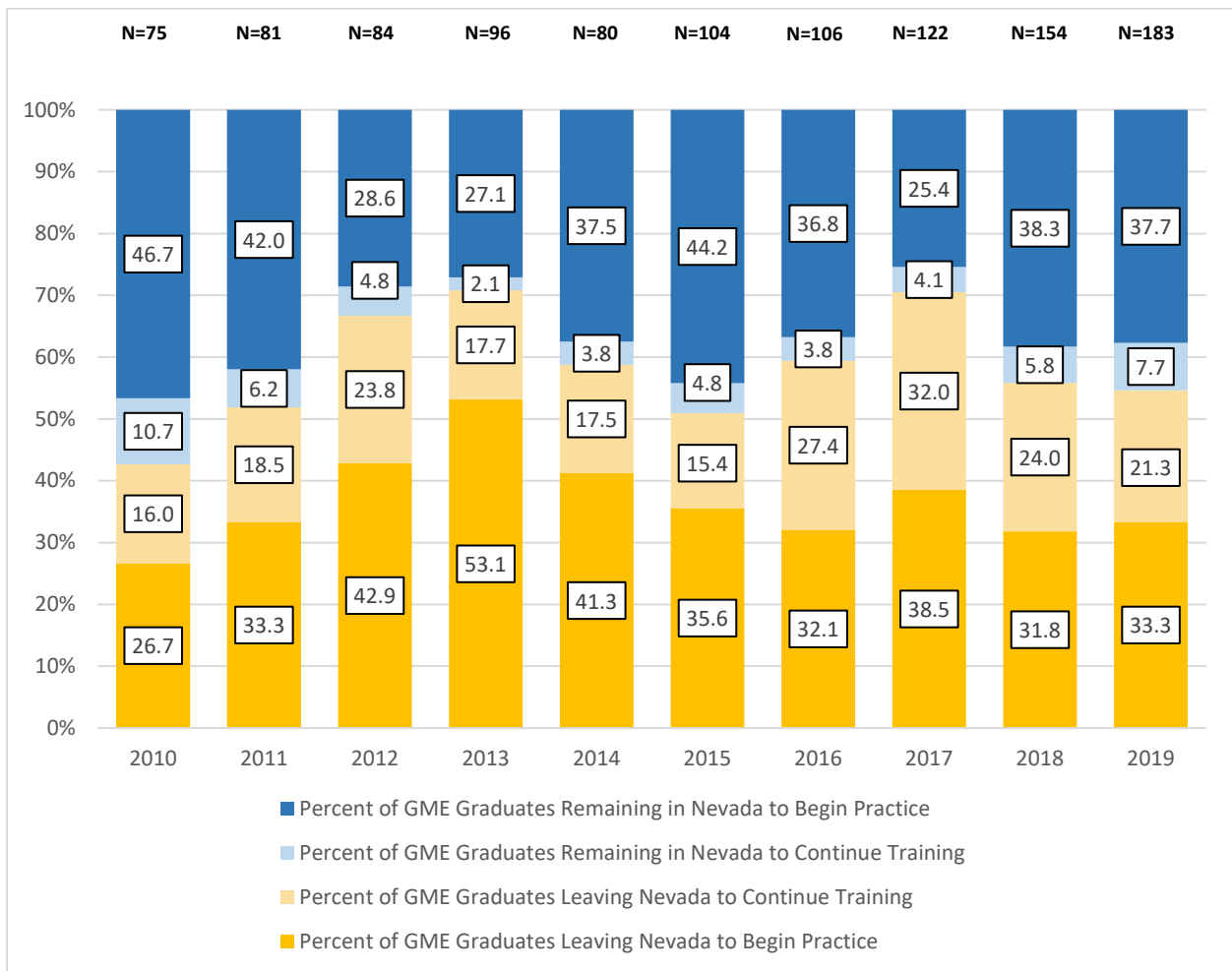
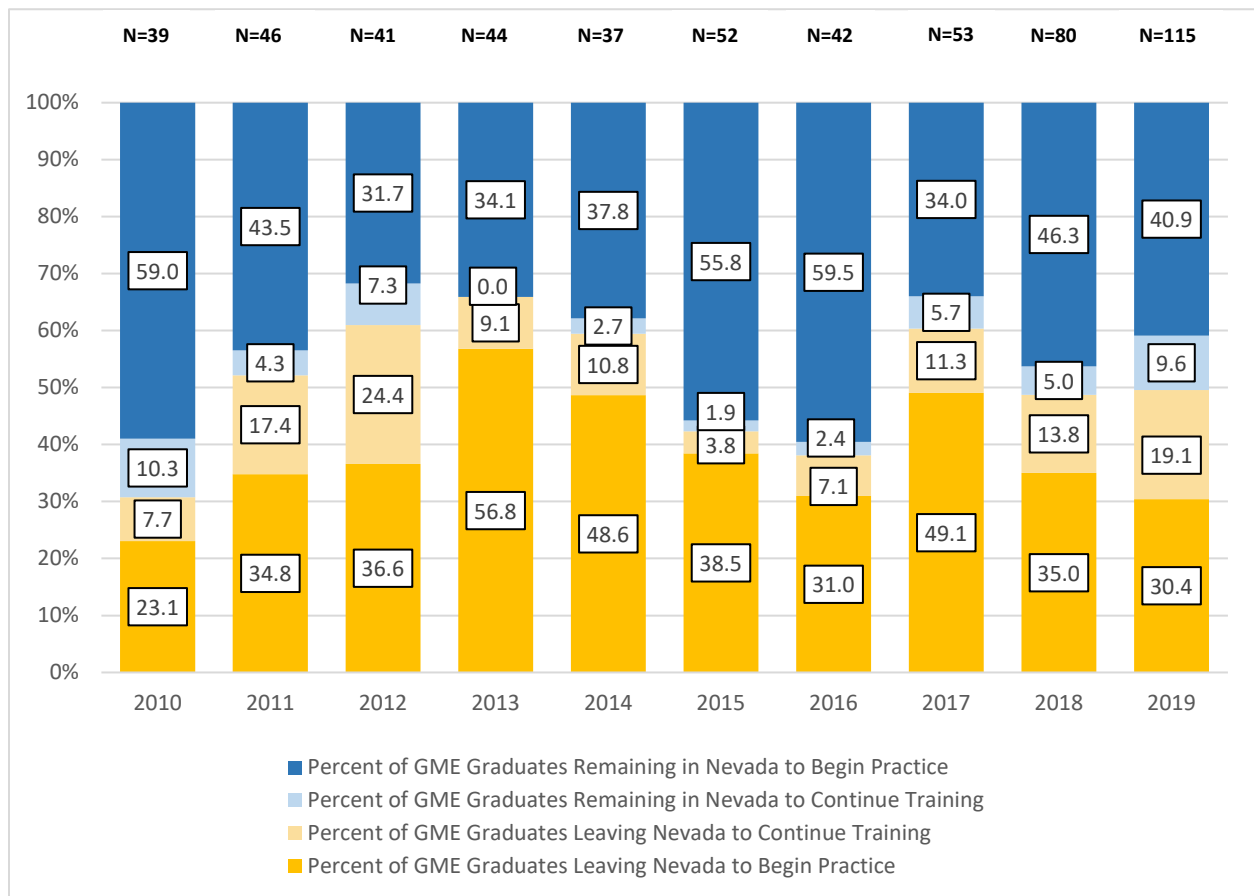


Figure 4 presents data on the post-residency plans of physicians completing primary care residency programs – Family Medicine, Internal Medicine, and Pediatrics – in Nevada from 2010 to 2019. Over the past decade, the number of primary care GME graduates in Nevada has increased by 194.9% from 39 graduates in 2010 to 115 graduates in 2019. With the increased physician enrollment in GME programs in Nevada, the number of primary care physicians retained in Nevada increased 114.8% over the same time period from 28 primary care physicians in 2010 to 58 primary care physicians in 2019.

Figure 4 highlights that over the past decade, primary care retention rates exceeded 50% in five of the past ten years. In 2019, 50.5% of physicians completing primary care GME programs report that they will remain in Nevada upon graduation, as compared to 49.5% of primary care GME graduates who plan to relocate to another state to begin practice or pursue additional training.

Figure 4: Annual Post-GME Employment, Training, and Location Plans of Physicians Completing Primary Care Residency Programs in Nevada – 2010 to 2019



Figures 5 and 6 illustrate, respectively, the variety of job search tools used by GME graduates remaining in Nevada versus those leaving the state – key factors that affect a physician’s decision to remain or leave the state to begin practice or pursue additional training. These data are from a subset of survey respondents who provided information about their professional job search. An increase in personal networking over the past five years highlights this tool for those who remained in Nevada. In contrast, Figure 6 shows those leaving the state rely more on physician recruiters over the past five years.

Figure 5: Job Search Tools Used by Physicians Completing GME and Remaining in Nevada to Begin Practice – 2014 and 2019

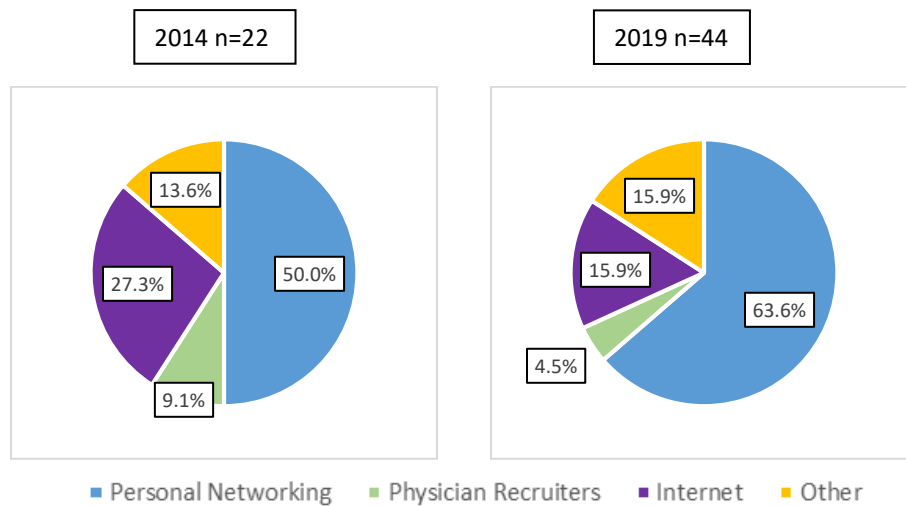


Figure 6: Job Search Tools Used by Physicians Completing GME and Leaving Nevada to Begin Practice – 2014 and 2019

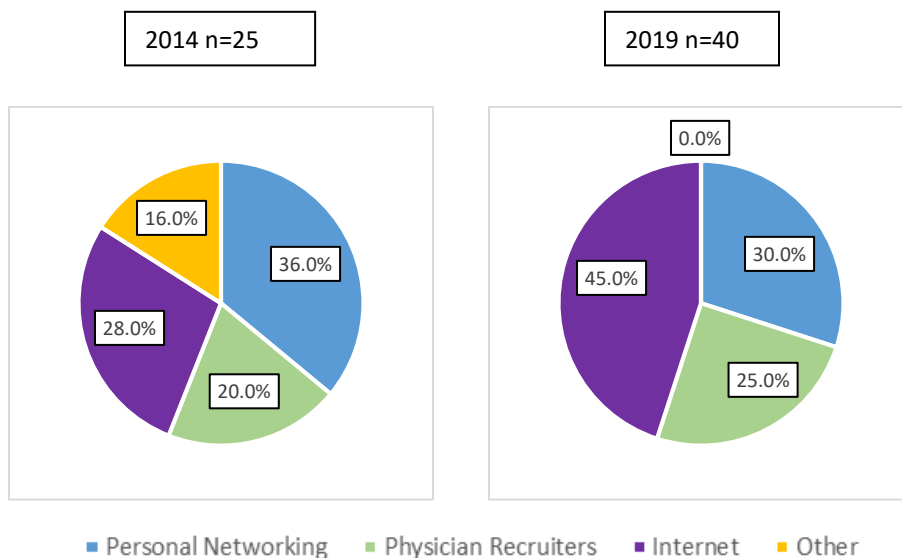


Figure 7 summarizes the average level of debt of all physicians completing GME in Nevada over the past five years. In 2019, the average debt was \$183,500. Excluding physicians with no level of debt (37.8% of graduates), the remaining physicians are carrying some level of debt averaging \$306,500. The level of debt for those reporting any debt has exceeded \$250,000 for the past five years and topped \$300,000 in the current survey.

Figure 7: Educational Debt of Physicians Completing GME Programs in Nevada – 2015 to 2019 (Thousands of Dollars)

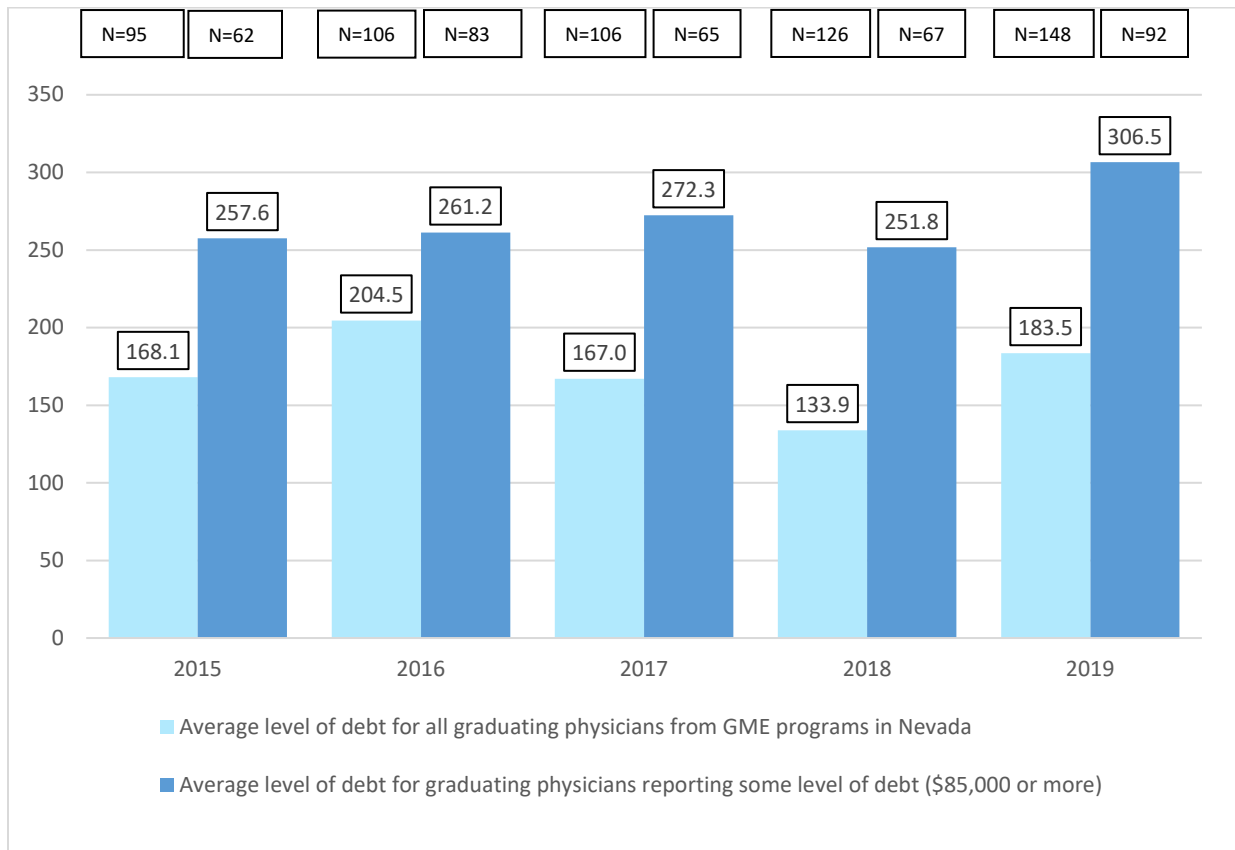


Figure 8 provides a profile of physicians in 2019 completing GME programs in Nevada. Data show that 62.6% of the physicians have debt and one in seven are from Nevada. Unique to international medical school graduates is the MBBS (12.6%) degree in addition to the MD (51.9%) and DO (24.6%) medical degrees. US/American medical school graduates (63.8%) are either MDs or DOs as there are no international schools of osteopathy. There are male physicians (58.7%) than female physicians (41.3%). Interestingly, there appears a relationship between physicians with no debt (38.1%) and international medical school graduates (36.2%).

Figure 8: Profile of Physicians Completing GME Residency Programs in Nevada – 2019

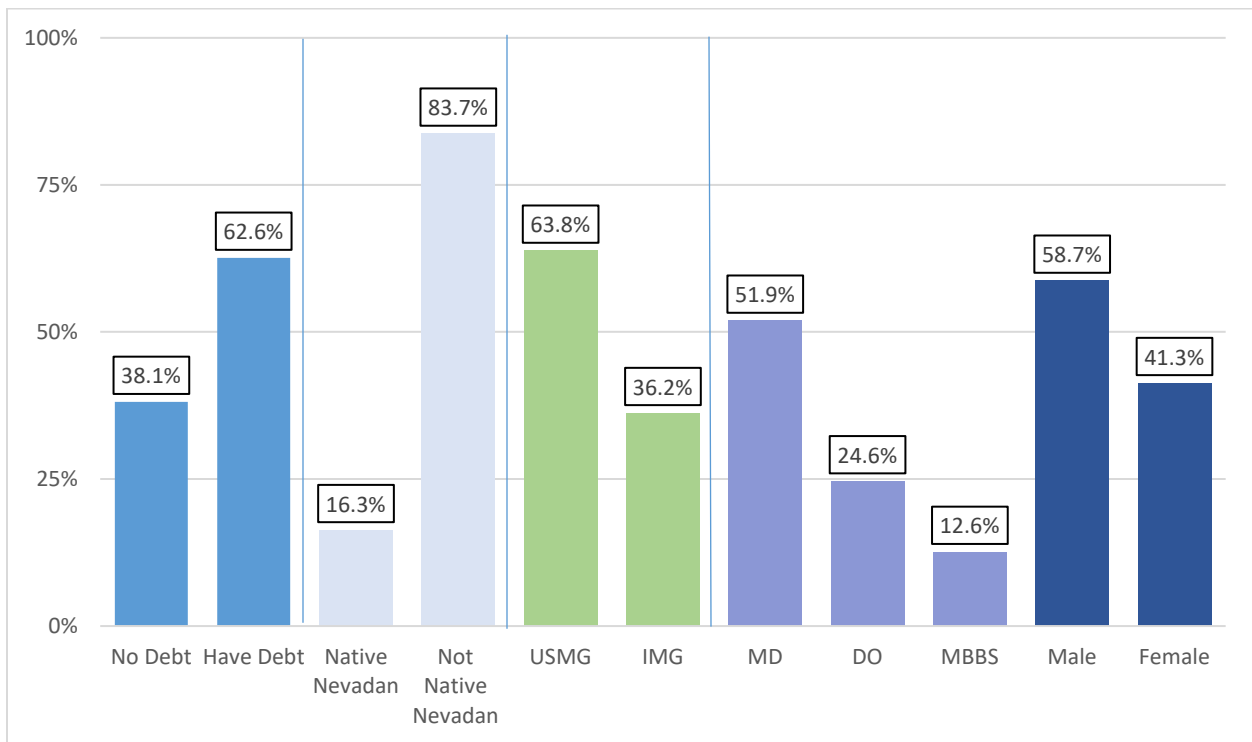
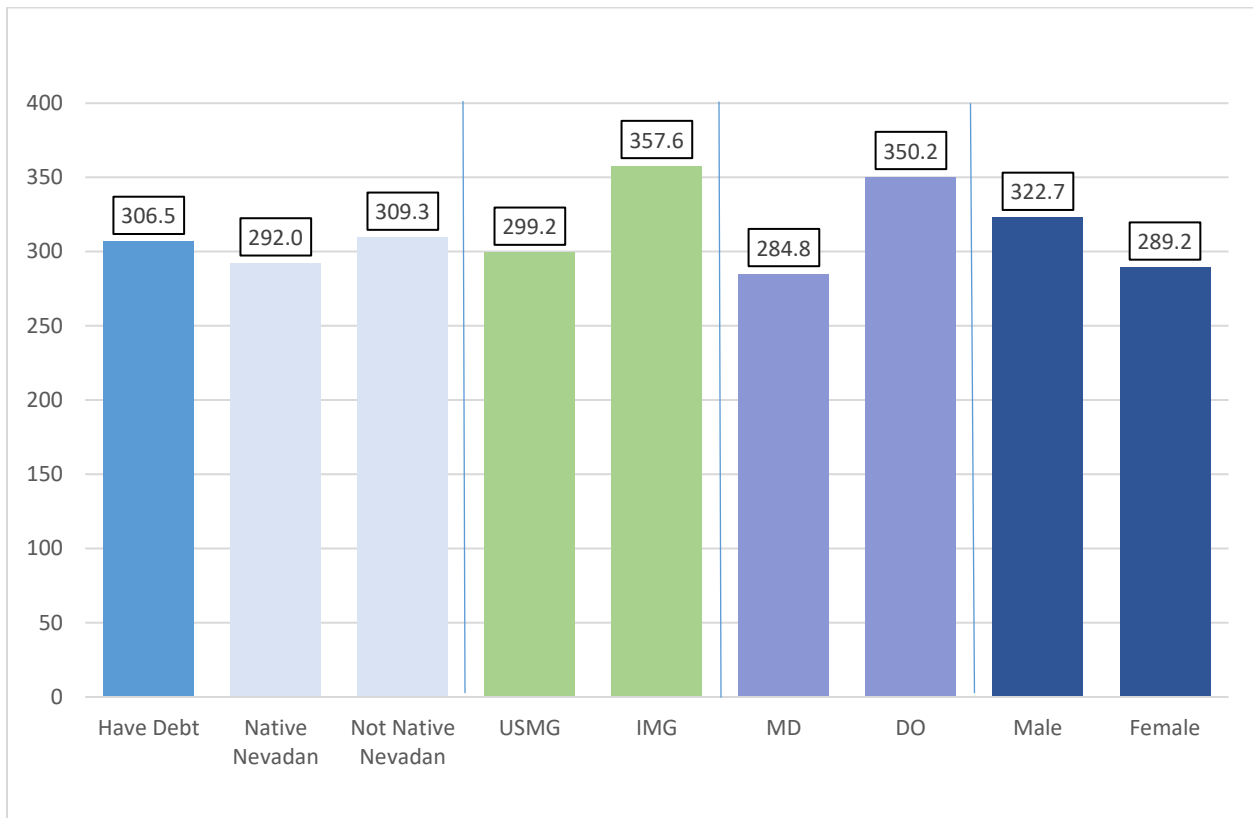


Figure 9 shows variation in debt levels among graduating physicians reporting some level of debt. On average, there are higher levels of debt for international medical school graduates than US medical school graduates, similar levels of debt between non-native and native Nevadans, higher debt for osteopathic physicians, and higher debt for male physicians.

**Figure 9: Average Debt of Physicians with Debt Completing GME Programs in Nevada – 2019
(Thousands of Dollars)**



For additional information about the physician workforce in Nevada and the health work force in Nevada, please visit the Nevada Health Workforce Research Center at

<https://med.unr.edu/statewide/nhwrc>



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