

Department of Surgery
2026 Research Day
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Title:

On the Move: Tracking 25 Years of Pediatric Surgeon Migration in the United States

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Background:

Pediatric general surgeons in the U.S. have the flexibility to practice in any location and relocate as needed throughout their careers. Various factors influence these moves, including job satisfaction, geographic preference, and family considerations. While previous workforce studies have primarily provided static snapshots at single points in time, our study examines the migration patterns of pediatric surgeons over a 25-year period.

Methods:

We analyzed data from the American Medical Association Physician Masterfile Database to assess workforce trends among pediatric surgeons in the U.S. This database assigns a unique identifier to each physician, enabling longitudinal tracking. We included surgeons who identified pediatric surgery as their primary specialty, excluding those in training or retired. Four time points were selected for analysis: 1996 (the first year of available data), 2000, 2010, and 2020. The latter three years were chosen to align with the decennial census.

Results (or Preliminary Results):

A total of 1,489 unique pediatric surgeons were identified, of whom 1,136 (76.3%) were male. The vast majority (99.9%) held an "MD" degree, with only five physicians having a "DO" degree. The number of active pediatric surgeons grew from 627 in 1996 to 1,124 in 2020. During this period, the proportion of female surgeons increased from 12.6% to 27.8%. Among the 1,010 surgeons with records spanning multiple time points, 356 (35.3%) practiced in more than one location. Female surgeons were more likely to change locations than their male counterparts (44.6% vs. 33.3%). Of those who relocated, 288 (28.5%) moved once, 61 (6.1%) moved twice, and 7 (0.7%) worked in four unique locations. Additionally, 313 surgeons (31%) relocated to at least one other state. Notably, those entering the workforce between 1996 and 2000 exhibited the highest mobility, with nearly 53% practicing in more than one location.

Conclusions (or Preliminary Conclusions):

Over this 25-year period, the pediatric surgical workforce demonstrated significant mobility, particularly among surgeons who began practicing between 1996 and 2000. These relocations were most common early in their careers. Further research is needed to explore the factors driving these practice changes and their impact on patient access to care.