

OECD Health Statistics 2025

Definitions, Sources and Methods

Physicians licensed to practice

Physicians licensed to practice include practising and other (non-practising) physicians who are registered and entitled to practice as healthcare professionals.

Inclusion

- Physicians who provide services for individual patients
- Physicians for whom their medical education is a prerequisite for the execution of the job
- Physicians for whom their medical education is NOT a prerequisite for the execution of the job
- Physicians licensed to practice but who due to various reasons are not economically active (e.g. unemployed or retired)
- Physicians working abroad

Exclusion

- Dentists, stomatologists, dental and maxillofacial surgeons

Note: The number should be at the end of the calendar year.

Sources and Methods

Australia

Source of data:

- 2013 onwards: **Department of Health (DoH)**. NHWDS Medical Practitioners Data. Data request. Also available at <http://hwd.health.gov.au/>. Data are as at the end of the re-registration period for the profession in the reference year.
- 2012: **Australian Institute of Health and Welfare 2014**. Medical workforce 2012. National health workforce series no. 8. Cat. No. HWL 54. Canberra: AIHW. Also available at www.aihw.gov.au.
- 2011: **Australian Institute of Health and Welfare 2013**. Medical workforce 2011. National health workforce series no. 3. Cat. No. HWL 39. Canberra: AIHW. Also available at www.aihw.gov.au.
- 2010: Comprehensive data for Australia are unavailable.
- 1997-2009: **Australian Institute of Health and Welfare 2011**. Medical labour force 2009. AIHW bulletin no. 89. Cat. no. AUS 138. Canberra: AIHW (and previous issues). Also available at www.aihw.gov.au.

Coverage:

- Data include all practitioners who are registered with the Medical Board of Australia (MBA) to practice in Australia, including physicians who provide services directly to patients, whom medical education is or is not a prerequisite for their job, those who are unemployed or retired and those who are working abroad.

Break in time series:

- Data was not provided by some states in 2010. Data is not available for a national comparison between 2010 and other years.
- From 2011, data are based on estimates derived from the National Health Workforce Data Set (NHWDS). The NHWDS combines data from the National Registration and Accreditation Scheme (NRAS) with health workforce survey data. Before 2010, the AIHW Medical Labour Force Survey was managed by each state and territory health authority. A detailed description of the Medical Workforce Survey 2011, including a

summary of changes from the 2009 AIHW Medical Labour Force Survey and data collected, is provided in Appendix A of *Medical workforce 2011* at

www.aihw.gov.au/WorkArea/DownloadAsset.aspx?id=60129542629. Comparison of 2011 and later data with 2009 and earlier data should be made with caution.

- From 2013 the NHWDS is held by the Department of Health and the data has minor differences from the previous AIHW holdings due to the method of imputation for survey non-response and enhanced geocoding methods.

Austria

Data not available.

Belgium

Source of data: **SPF Santé publique, sécurité de la chaîne alimentaire et de l'environnement**, DG2 Soins de Santé primaires et gestion de Crises - FOD Volksgezondheid, Veiligheid van de Voedselketen en Leefmilieu DG2 Basisgezondheidszorg en Crisisbeheer. Cellule Planification des professionnels de santé - Cel planning Gezondheidsberoepen.

- Since 2005: Base de données fédérale des professionnels de soins de santé - Federale databank van de beoefenaars van de gezondheidszorgberoepen. Further information: www.health.fgov.be.

- Before 2005: Administrative database.

Reference period: 31st December.

Coverage: Complete.

- Since 2005, stomatologists are excluded.

- 2018: double cohort (due to the 1 year-reduction of studies).

Estimation method:

Deviation from the definition:

Break in time series: Change in source since 2005: Base de données fédérale des professionnels de soins de santé-Federale databank van de beoefenaars van de gezondheidszorgberoepen.

Canada

Source of data:

- **Canadian Institute for Health Information**, Scott's Medical Database (SMDB).

- **Canadian Post-M.D. Education Register (CAPER)**.

Coverage: Physicians licensed to practice include professionally active physicians (see definition for professionally active physicians for details) and Canadian trained physicians working abroad less than 70 years old. Physicians 70 years old or older are not included as they would likely not be working abroad, but be retired.

- Detailed data tables and methodological notes concerning SMDB are available free for download at <https://www.cihi.ca/en/physicians>.

Break in time series: Prior to 1988, professionally active physician counts represent a summation of physician counts from SMDB and intern and resident data collected from provincial sources (CAPER did not exist as a data source until 1988).

Chile

Source of data: **Ministry of Health** using as original source the National Registry of Individual Health Providers from the **Health Superintendence** (www.superdesalud.cl), which was created by a law-ranking decree of November 2008, progressively installed since 2009, and is henceforth used. Its creation and maintenance are in charge of the Health Superintendence. This Registry is now the official Health Human Resources data source of the Statistics National Institute of Chile.

- The inscription in the Register has been progressive, and the changes in the figures that can be observed between 2010 and 2013 are principally due to its progressive extension.

Coverage: Nationwide.

- Data include both public and private sectors.

- The difference between 2010 and 2013 data is due both to the incorporation in the Registry of the new graduates (approximately 1000 in 2010, 1300 in 2011, 1000 in 2012 and 1500 in 2013; the graduates data of a year is published at the middle of the following year) and to the extensibility of the Registry. Since 2014, it could be considered that the extensibility of the Registry effect on the tendency is lower than in the previous period, except for Caring Personnel.
- When the professional has more than one grade, the last obtained has been chosen. This rule was applied to all professional categories considered (physicians, midwives, nurses, etc.).

Colombia

Data not available.

Costa Rica

Data not available.

Czechia

Source of data: **Czech Medical Chamber.**

Reference period: 31 December.

Coverage: Physicians registered in the Czech Medical Chamber as of 31 December of the respective year (including not only practising physicians but also e.g. retired physicians or physicians working outside health services). Registration in the Czech Medical Chamber is obligatory by law for persons who want to work as physicians.

Note: The time series was revised in 2022 to include all physicians registered in the Czech Medical Chamber.

Deviation from the definition:

Estimation method:

Break in time series:

Denmark

Source of data: **The Danish Health Data Authority**, Registered Health Professionals, the Danish Register for Evaluation of Marginalisation, The Danish Civil Registration System

Reference period: 31st December.

Coverage: 1980-2023

Deviation from the definition:

Estimation method:

Break in time series: 1992. Change in the data collection, 2022 change in the data collection.

Estonia

Source of data: Registry of Health Care Professionals, **Health Care Board.**

Reference period: January of the following year.

Coverage:

- The number of licensed physicians presents overall potential, not persons by the last obtained specialty.

Deviation from the definition:

Estimation method:

Break in time series:

Finland

Source of data: **THL Health Personnel Statistics**; The data are based on the Register on Qualified Health Care Personnel kept by **VALVIRA - National Supervisory Authority for Welfare and Health.**

Reference period: At the end of the calendar year.

Coverage: Physicians licensed to practice includes all licensed physicians with a permanent license, who are presumed to live in Finland. These include everyone with known permanent residency in Finland and non-Finnish nationals for whom there is no information on residency. Physicians whose most recent specialisation is in dental or maxillofacial surgery have been excluded. As any acquired licenses do not expire, even upon retirement, this data includes only individuals under the age of 65 to better reflect the actually available workforce.

Deviation from the definition:

Estimation method: Before 2011, there were additional temporary licenses used for physicians – and these licenses were transferred to basic licenses in 2011. For those individuals for whom we have no data regarding the earlier licenses, we have assumed that their licenses have started on the year they have graduated from medical school.

Break in time series: Break in time series in 2011 due to a change in the licensing process. In 2011, VALVIRA replaced their two-staged licensing system using provisional licenses with a one-staged system.

France

Data not available.

Germany

Source of data: **German Medical Association**, Medical practitioner statistics 2023; <http://www.gbe-bund.de> or <http://www.baek.de>.

Reference period: 31st December.

Coverage:

- The number of registered physicians includes all practising and non-practising physicians licensed to practice (head-count data).
- Included are practising physicians, professionally active physicians, physicians working abroad, unemployed, and retired physicians.
- The number of registered physicians excludes dentists, stomatologists and physicians with specialty “dental, oral and maxillofacial surgery” as well as students who have not yet graduated.

Greece

Source of data: **Hygiene Divisions and Sections** attached to prefectures, **Panhellenic Medical Association, Annual Doctors and Dentists survey**, <http://www.statistics.gr/el/statistics/-/publication/SHE09/>.

Reference period: 31st December.

Coverage: Data are available for “licensed to practice” physicians (i.e., including doctors in administrative, academic or research functions that are not providing direct care to patients and unemployed physicians).

Deviation from the definition: Retired physicians and physicians working abroad are not included.

Note: In 2019, the time series was revised since 2008 in order to correct an error of the data initially transmitted by the administrative sources. There was a double recording of practicing physicians on the data initially transmitted by the administrative sources. The error was corrected and time series since 2008 were revised. This correction resulted to a decrease in the total number of physicians as well as in the number of “Medical doctors not further defined” and the “Physicians licensed to practice”.

Estimation method:

Break in time series:

Hungary

Source of data:

- Up to 1999: **Ministry of Health**.

- In 2001: Data are estimates from the National Institute for Strategic Health Research (ESKI) based on the basic registration of the **Hungarian Medical Chamber** (MOK: www.mok.hu)

- Between 2002 and 2006: Basic Register of the **Hungarian Medical Chamber** (MOK: www.mok.hu)

- Between 2007 and 2014: Basic Register of the **Office of Health Care Authorisation and Administrative Procedures** (EEKH: www.eekh.hu) Full title of the database: Basic register.
- Between 2015 and 2016: Basic Register of the **Health Registration and Training Center** (ENKK: www.enkk.hu) Full title of the database: Basic register.
- Between 2017 and 2020: Basic Register of the **National Healthcare Service Center** (ÁEEK: www.enkk.hu) Full title of the database: Basic register.
- From 2021, **National Directorate General for Hospitals** (OKFŐ in Hungarian) www.okfo.gov.hu. Full title of the database: Basic register.

Reference period: 31st December.

Coverage: national level

Deviation from the definition:

Estimation method:

Break in time series: 2001, 2002, 2005, 2007, 2008.

- In 2005, the Hungarian Medical Chamber (MOK) performed data cleaning in the database to identify more precisely physicians licensed to practice.
- From 2007, the Office of Health Authorisation and Administrative Procedures (EEKH) – unlike in the previous years – provided data not on the basis of last acquired specialisation, but according to the dominant specialisation practiced during medical work.
- In 2008, the Office of Health Care Authorisation and Administrative Procedures significantly revised the data in the registry by calling for refinement, according to the 1997. CLIV. Act.

Note: The data source of physicians licensed to practice is the Basic (Diploma) Register, not the Operational Registry.

The basic register is a national register that includes all professionals having a healthcare qualification obtained in Hungary or obtained abroad and recognised in Hungary, regardless of whether they have a valid operational registration to pursue healthcare activities or not. There are two cases of the deletion from the register: if the professional dies or if the diploma turns out to be false.

Iceland

Source of data:

- 2016 and onwards: **The Directorate of Health**, Register of Licenced Health Care Professionals.
- 2003 - 2015: **The Directorate of Health**, Register of Physicians.
- Until 2002: **The Directorate of Health**. Data from inpatient care institutions, health centres and The State Social Security Institute.

Reference period: 31st December.

Coverage:

- All physicians in the Register of Licenced Health Care Professionals that have a license to practice, regardless of age, status of employment or residence, are included. Foreigners that have received a license in Iceland but do not have a residence in Iceland are also included. Some of these may have passed away.

Deviation from the definition:

Estimation method:

Break in time series: Break in series in 2016 is due to change in data source. The data source is the Register of Licenced Health Care Professionals instead of the Register of Physicians, which no longer exists.

Ireland

Source of data: **Medical Council of Ireland** (<https://www.medicalcouncil.ie/>).

Reference period: Since 2006, figures refer to as at end of December.

Coverage:

- Figures refer to all persons (including physicians working abroad) who have entered and maintained their name as fully registered doctors in the Register of Medical Practitioners, regardless of the area in which they are engaged or whether or not they are practising medicine. Physicians licensed refer to those registered by the Medical Council of Ireland. Registration is a pre-requisite for practice in Ireland.

Deviation from the definition:

Estimation method:

Break in time series:

- Up to 2004, data refer to all persons with addresses in the Republic of Ireland (i.e., excludes physicians working abroad) who have entered and maintained their name as fully registered doctors in the Register of Medical Practitioners, regardless of the area in which they are engaged or whether or not they are practising medicine. From 2005 onwards, those with overseas addresses are also included.
- Figures prior to 1992 only include persons under 65 years old. From 1992 onwards, figures include persons of all ages.

Israel

Source of data: The data are based on the Physicians License Registry maintained by the Medical Professions Division and the Health Information Division in the **Ministry of Health**, for which the demographic information and date of death are periodically updated from the Population Registry at the Ministry of Interior.

Reference period: End of the year.

Coverage:

- Data are for all licensed physicians (including residents). The data include only physicians with valid licenses at the end of each reference year.
- Includes physicians staying abroad. In 2008, 11.3% of the physicians licensed to practice (recorded in the Physicians License Registry) were not resident in Israel for more than 12 months. In 2012 – 10.1%, in 2013 – 9.4%, in 2014 and 2015 – 9.2%, in 2016 – 9.3%, in 2017 – 9.1%, in 2018 – 8.7%, in 2019 – 8.6% and in 2020 – 8.4% of the physicians licensed to practice were not resident in Israel for more than 12 months.
- At the beginning of the 1990s, there was a large immigration wave from the Former USSR countries to Israel which included a large number of physicians who received a license to work in Israel.

Note: The statistical data for Israel are supplied by and under the responsibility of the relevant Israeli authorities. The use of such data by the OECD is without prejudice to the status of the Golan Heights, East Jerusalem and Israeli settlements in the West Bank under the terms of international law.

Italy

Source of data:

- Until 2020: **ENPAM** (National Insurance Institute of physicians and dentists). www.enpam.it.
- Since 2021: **ISTAT** Integrated Data System on Health Personnel.

Reference period: 31st December.

Coverage: All physicians licensed to practice.

Deviation from the definition: Data include dentists until 1999.

Estimation method: None.

Break in time series:

- 2000. Physicians licensed to practice included dentists until 1999. Since 2000, dentists are excluded.
- 2021: change in data source.

Japan

Data not available.

Korea

Source of data: **Ministry of Health and Welfare**, Yearbook of Health and Welfare Statistics.

Reference period: 31st December.

Coverage:

- Includes physicians who work in the private and public medical institutions.
- Includes interns and resident physicians.
- Includes Korean oriental medicine doctors.
- Includes physicians who do not work in the fields of medical activities (i.e., who work in administration, management and research sectors).
- Includes employees working abroad.
- Includes retired physicians.

- Includes unemployed physicians.
- Excludes dentists.

Latvia

Source of data: **Health Inspectorate of Latvia**; Register of Medical Practitioners and Medical Support Staff.

Reference period: 31 December.

Coverage: There has been an improvement in the quality of the Register of Medical Practitioners and Medical Support Staff data in 2018. The data before 2018, not comparable, are not shown.

Deviation from the definition:

Estimation method:

Break in time series:

Lithuania

Source of data:

- Up to 2006: **State Health Care Accreditation Agency** under the Ministry of Health, Register of licenses.
- Since 2011: Health Information Centre of Institute of Hygiene, data is calculated from Compulsory Health Insurance Fund information system (subsystem METAS). Report "Health Statistics of Lithuania", available <https://www.hi.lt/sveikatos-statistikos-leidiniai/#--lietuvos-sveikatos-statistika>. Available on Official Statistics Portal of Statistics Lithuania <http://osp.stat.gov.lt/en>.

Reference period: 31st December.

Coverage:

- The number of physicians licensed to practice includes all physicians having valid license at the end of the year.
- In 2001-2003 the number of physicians licensed to practice was lower than the number of professionally active physicians as the license was not needed for not practising physicians, e.g. working in health administration, public health (hygiene physicians and epidemiologists), education, research.

Deviation from the definition:

Estimation method:

Break in time series:

- 2011: Data source changed.
- 2018: Change of data calculation method: licence expiration date is not checked if licence is treated as valid.

Luxembourg

Source of data: **Ministère de la Santé**. Register of doctors and health professionals.

Reference period: 31st December.

Coverage:

Deviation from the definition: Includes stomatologists, dental and maxillofacial surgeons.

Estimation method:

Break in time series: 2015 (adjustment to methodology and definition).

Mexico

Data not available.

Netherlands

Source of data: **The BIG register** (register installed by the Individual Health Care Professions Act), database as received by Statistics Netherlands. 2020: External data from the BIG register.

Reference period:

2012 and later: last Friday before Christmas.

1999-2011: last Friday of September.

Coverage:

- 2018 and later: Data refer to physicians who are licensed to practice. Their license requires that they have been practising in the past five years.

- 1999-2018: The figures refer to physicians 'entitled to practice': all authorised physicians entered in the **BIG register** (register of (para) medical professions).

- Up to 1991, and 1998: The figures refer to physicians 'entitled to practice': all authorised physicians entered in the register (of physicians) of the Chief Medical Officer of Public Health. The number of licensed physicians who are actively practising whether in private practice or as an employee in a health-care institution, is not known. The figures include an unknown number of physicians working in administration, research, and industry.

Head count. Includes non-practising physicians and retired professionals. Excludes professionals working abroad. Partly includes professionals who are foreigners – data do not include a number of physicians actually living abroad near the border in Belgium or Germany and working in the Netherlands.

Deviation from the definition:

Estimation method:

Break in time series:

- 2018: re-registration of physicians without speciality;

- 1999: including all registered physicians, including those living and working abroad.

New Zealand

Source of data: **NZ Medical Council Medical Register**, based on number of doctors on the New Zealand medical register with a current practising certificate.

Reference period:

- Up to 2019: Data refer to the fourth quarter of the year (December).

- From 2020 onwards: Data refer to the second quarter of the year (June).

Coverage:

- In New Zealand, doctors are entitled to retain their name on the medical register, but they may not practice medicine without a current practising certificate.

- The Medical Council of New Zealand's definition of the practice of medicine includes any of the following:

- advertising, holding out to the public, or representing in any manner that one is authorised to practice medicine in New Zealand;

- signing any medical certificate required for statutory purposes, such as death or cremation certificates;

- prescribing medicines, the sale or supply of which is restricted by law to prescription by medical practitioners;

- assessing, diagnosing, treating, reporting or giving advice in a medical capacity, using the knowledge, skills, attitudes and competence initially attained for the MB ChB degree (or equivalent) and built upon in postgraduate or continuing medical education (CME), wherever there could be an issue of public safety.

- "Practice" in this context is wider than clinical medicine and also includes teaching, research, medical or health management, as well as working in hospitals, clinics, general practices and community and institutional contexts, whether paid or voluntary.

- Both interns and residents are included in NZ figures for practising physicians. 'Interns' in New Zealand are generally understood to be doctors in their first year as a doctor following graduation who work under the overall supervision of an intern supervisor. After this initial year, they generally get a general scope of practice (full registration). The term 'residents' most closely matches doctors in vocational training in New Zealand.

Break in time series: 2020. Up to 2019 the final end-of-year figures were supplied directly by the Medical Council of New Zealand. From 2020 the final figures are calculated by the Ministry of Health based on Medical Register data at the end of June supplied by the Medical Council. There is a slight discrepancy between the two time series because of the difference in the time of year when the data was extracted.

Note: In recent years, approximately 500 students graduated each November from NZ's two medical schools. In pre-COVID years, almost all of the graduates were quickly licensed to practise (i.e. were registered and obtained an annual practising certificate) and began work as doctors in their first postgraduate year (PGY1) in late November or early December. This was in fact the main reason for a difference between June and December numbers up to 2019. In addition, overseas-qualified doctors were

recruited particularly to assist hospitals during the winter-spring influenza season, i.e. the September and December quarters. In each calendar year the lowest number is in the second quarter, as the number of physicians giving up their licence to practise in the first two quarters has exceeded the newly licensed, while the highest number is in the fourth quarter. In 2020, even if December numbers had been reported, there would have been only small growth from 2019 because as a result of the pandemic, there was a delay to the start of PGY1 placements for the 2020 graduates, from November-December to January-February 2021.

Norway

Source of data: **Statistics Norway**. Statistics on health-care personnel. Administrative registers. See www.ssb.no/hesospers_en/.

Reference period: 3rd week of November.

Coverage:

Deviation from the definition:

Estimation method:

Break in time series: 2015.

- As from 2015, the register-based employment statistics will be based on a new data source for employees. Until the end of 2014, the main data source was The Central Register on Employers and Employees (EE register), produced by the Norwegian Labour and Welfare Organisation (NAV). In 2015, this reporting to NAV was coordinated with the reporting of earnings and personnel data to the Tax Administration and Statistics Norway. This common reporting system is called “a-ordningen” (the a-system).

Poland

Source of data:

- Until 2018: Polish Chamber of Physicians, Register of licensed physicians.

- From 2019 onwards: **Statistics Poland**. Calculations based on administrative sources, i.e. register of licensed physicians (Polish Chamber of Physicians).

Reference period: 31st December.

Coverage: From 2019 - Physicians living in Poland

Deviation from the definition:

Estimation method:

Break in time series:

Portugal

Source of data: Statistics Portugal, Health personnel statistics

<http://www.ine.pt/xurl/ind/0012838>

<http://www.ine.pt/xurl/ind/0012836>

Reference period: 31st December .

Coverage:

- Head count data.

- Includes all physicians registered in the Portuguese Medical Association at the time of data collection, practising or not practising medicine.

- Includes non-practising physicians, retired professionals, professionals working abroad (if their declared residence is in Portugal), nationals and foreigners practising in Portugal.

- Includes qualified physicians practising in hospitals and official clinics.

- Includes physicians working in private ambulatory health establishments, including private cabinets.

- Includes all physicians registered in the Portuguese Medical Association on 31st December of the reference year (non-specialised physicians and specialised physicians).

- The specialties Stomatology and Maxillo-facial surgery are not included here.

- Physicians with a declared residence abroad are also not included.

Deviation from the definition:

Estimation method:

Break in time series:

Slovak Republic

Data not available.

Slovenia

Data not available.

Spain

Source of data: **National Statistics Institute (INE)** from **Register of Physicians Council** (several issues).
https://www.ine.es/dyngs/INEbase/es/operacion.htm?c=Estadistica_C&cid=1254736176781&menu=ultiDatos&idp=1254735573175.

Reference period: Data as at 31st December.

Coverage:

- The annual information is taken from the Register of the Physicians Council. Stomatologists and Odontologists are not included.

Deviation from the definition:

Estimation method:

Break in time series:

Sweden

Source of data: **National Board of Health and Welfare**. LOVA-register.

Reference period: 1st November.

Coverage:

- Non-retired personnel.

- Full coverage.

Deviation from the definition:

Estimation method:

Break in time series:

Switzerland

Data not available.

Türkiye

Data not available.

United Kingdom

Source of data: **General Medical Council (GMC)**.

Coverage:

- Data from 1996 onwards at UK level.

- Prior to 1996, data are unreliable due to system migrations, so they have not been included.

- 1996 to 2008 data refer to registered doctors prior to licencing being introduced. These doctors were still entitled to practice though.

- 2009 data onwards refer to licenced doctors.

- 'Physicians licensed to practice' reports all registered doctors from 1996 -2008, as of the 31st December in each year.

- Licencing was introduced in 2009, so the 2009-onwards numbers are limited to doctors that hold a licence, rather than the overall figure registered.

Break in time series: 2009.

United States

Source of data: **American Medical Association (AMA)**/Physician Characteristics and Distribution in the US, various editions. AMA Physician Masterfile unpublished data for 2014 and later. Used with the permission of AMA. <http://www.ama-assn.org/>.

Coverage: All physicians, including members and non-members of the AMA and graduates of foreign medical schools who are in the United States and meet educational standards for recognition as medical doctors (M.D.s).

Deviation from the definition:

- Includes physicians in patient care, other professional activities (administration, medical teaching, research, and other), not classified, inactive.
- International medical graduates comprising graduates of foreign medical schools residing in the United States are included in the AMA Physician Masterfile, generally upon entry into graduate medical training programs accredited by the Accreditation Council on Graduate Medical Education (ACGME).
- Includes IMGs who have been granted a state license to practice medicine but may not have entered ACGME training programmes.
- Also includes physicians licensed to practice in the United States but temporarily located abroad.

Estimation method: Annual census. Calculation methods match OECD definition.

Break in time series: No break in time series.

NON-OECD ECONOMIES

Bulgaria

Data not available.

Croatia

Source of data: Croatian Medical Chamber.

Reference period: Status on December 31st.

Coverage:

Deviation from the definition:

Estimation method:

Break in time series:

Cyprus

Source of data:

Statistical Service of Cyprus; Public Sector Administrative Sources and Cyprus Medical Association (CYMA) and Cyprus Medical Council (Ministry of Health).

In order for a physician to be authorised to practice in Cyprus year he/she has to renew his/her registration with CYMA on an annual basis. In order for CYMA to issue the license to practise, the physician's qualifications (degree) have to be validated from the Cyprus Medical Council. Hence, the combination of data from these two registers provides almost complete coverage.

Annual survey on "Health and Hospital Statistics".

For the years 1985, 1987, 1995 and 2000 figures were obtained from the Census of Doctors, Dentists and Clinics.

Reference period: 31st of December of the reference year.

Coverage:

The data covers the Government Controlled Area of the Republic of Cyprus, both Public and Private Sectors. Complete coverage. The figures refer to practising physicians, as well as physicians fully activated at the administration of public hospitals and retired physicians having renewed their license to practise and physicians working abroad who have renewed their license in Cyprus.

Deviation from the definition:

No deviation exists.

Estimation method:

Break in time series: No break exists.

Romania

Source of data: **College of Physicians** from Romania.

Reference period: data as of 31st December.

Coverage:

According to national legislation (Law No. 95/2006 on the reform in health care), resident physicians haven't a full right to practice in Romania and are not required to enrol in the College of Physicians. They are employed as physicians in assisted practice and are not included in the total number of physicians licensed to practice. According to the same law in the total number of physicians are included, also, physicians who are citizens of an EU Member State, EEA, or Swiss Confederation, by assimilation, physicians who are family members of a citizen of an EU member state, EEA or Swiss Confederation and beneficiaries of the long-term resident status granted by an EU Member State, EEA, or Swiss Confederation.

For this reason, the number of practicing (and active) physicians is higher than those licenced to practice. While in the number of practicing (and active) physicians the residents are included, in the number of physicians licenced to practice residents are not included.

Foreign trained physicians who provide medical services temporary or occasionally in Romania are not included.

Deviation from the definition: data includes oral and maxillofacial surgeons.

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<https://www.oecd.org/en/data/datasets/oecd-health-statistics.html>