Gender Disparities in Annual and Lifetime Salary Compensation Among Orthopaedic Sports Medicine Faculty at US Medical Schools

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INTRODUCTION: This study evaluates disparities in salary compensation for academic orthopaedic sports medicine surgeons. Specifically, we determined the association between gender and public or private employment status on annual and lifetime salary compensation for orthopaedic sports medicine faculty at US medical schools.

METHODS: Salary compensation benchmarks were analyzed from US medical schools through the American Association of Medical Colleges Faculty Salary Survey for the 2023 fiscal year. Median salaries were analyzed for assistant professors, associate professors, and full professors. Financial models were created to determine the impact of gender and institutional status on total salary compensation assuming different scenarios in academic promotion and career longevity.

RESULTS: There were 312 full-time orthopaedic sports medicine faculty and 44 were female (14%). There were 154 assistant professors (49%), 87 associate professors (28%), and 71 full professors (23%). Most faculty were male across academic ranks (range, 84%-90%). Faculty at public institutions had similar salary compensation compared to faculty at private institutions (range, 89%-104%). Male faculty had higher salary compensation at higher academic ranks including assistant professor (\$597,229), associate professor (\$710,563), and full professor (\$732,519) (Figure 1). Gender disparities in salary compensation were greatest among senior faculty. Compared to male faculty, female faculty had lower salary compensation at assistant professor (\$472,250, 79%), associate professor (\$534,883, 75%), and full professor (\$423,762, 58%) (Figure 2). Gender disparities in total salary compensation amounted to a cumulative difference of \$3.9 to 9.5 million during an academic orthopaedic sports medicine career.

DISCUSSION AND CONCLUSION: Gender disparities in salary compensation exist for orthopaedic sports medicine faculty at US medical schools and are most pronounced at senior academic ranks. These disparities translate into profound differences in total lifetime salary compensation. More work is needed to create strategies that promote salary equity in orthopaedic sports medicine at US medical schools.

