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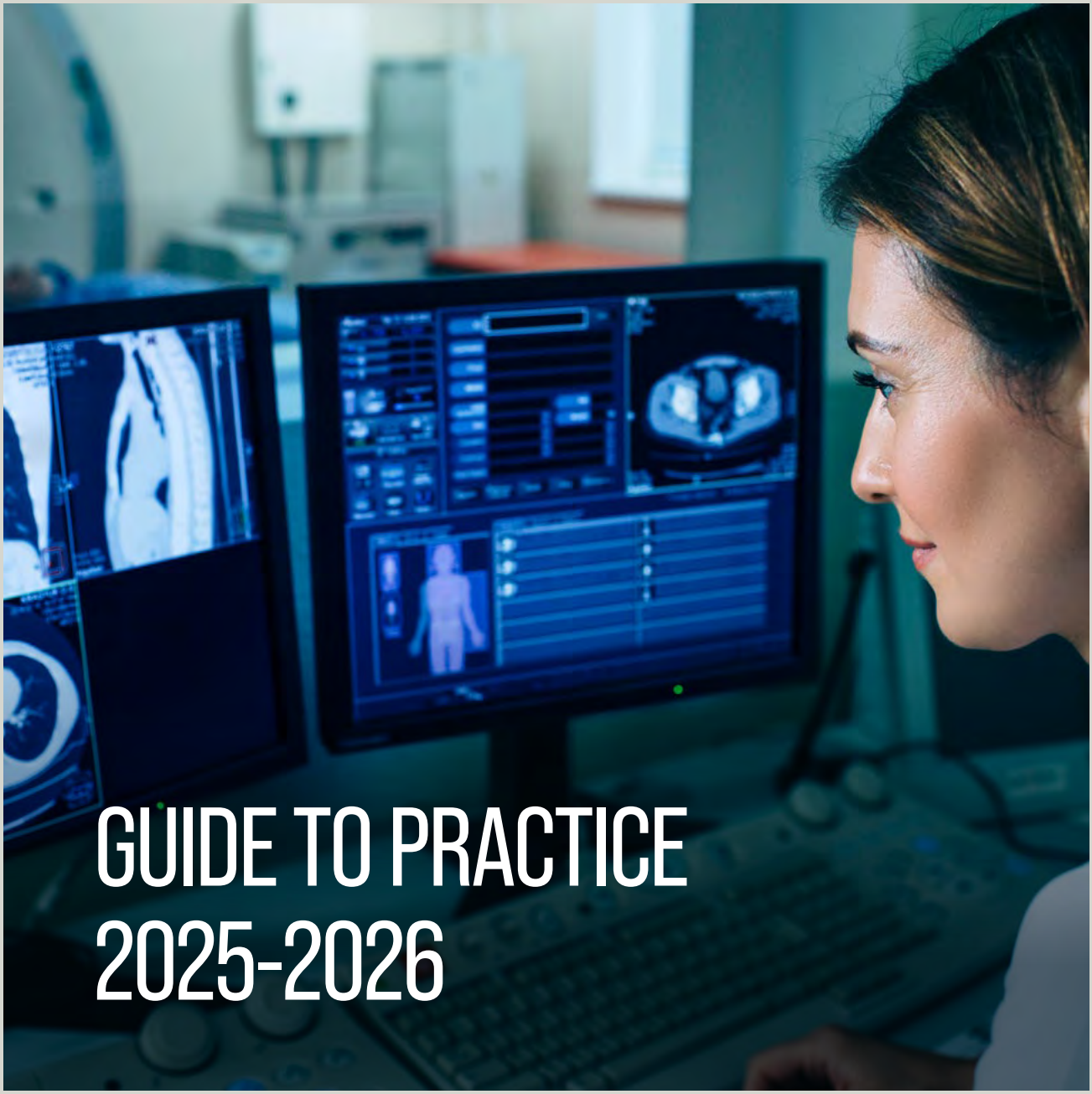

GUIDE TO PRACTICE 2025-2026

FÉDÉRATION DES MÉDECINS RÉSIDENT·E·S DU QUÉBEC

AVAILABLE POSITIONS

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TRANSITION TO PRACTICE

TIPS AND TRICKS TO HELP YOU FIND YOUR WAY

Are you actively looking for a position? Would you like to perform additional training or a fellowship in Quebec or elsewhere? Do you need information on positions available in the different establishments and regions of Quebec? This Guide contains all the information you need to ensure a smooth transition from residency to practice.

For several years, the FMRQ has published this ***Guide to Practice*** to help you through the process of identifying and obtaining the position you're looking for, a position in line with your competencies, certainly, but also, and above all, matching your professional and personal expectations. Obtaining a position in family medicine (PTEM) or a PEM in a hospital is often a challenge. The final years of postgraduate education are crucial in that regard. Unfortunately, they're also the years where you have to contend with certification exams and an ever heavier clinical workload.

Several tools are placed at your disposal to find your way through this. Physician resource plans in family medicine and other specialties, the FMRQ website, the Federation's mobile app, which identifies many positions as they become vacant during the year, and more besides. You also have access to resource persons on the FMRQ staff who are very familiar with what's happening in the field, and can help show you the ropes.

At the FMRQ's Career Day, held on September 19, 2025, more than 1,000 resident doctors attended lunch-hour conferences organized to inform them about different aspects of practice. Among the exhibitors were the FMOQ and FMSQ, along with Santé Québec and the MSSS. More than 100 establishments and clinics were also on site to answer participants' questions and present the advantages of a practice in their regions.

Note that the FMRQ also publishes a ***Personalization and Poursuite de formation in Family Medicine Guide***, which provides a detailed profile of Enhanced Skills training in that specialty. It is posted on our website, and is available via the FMRQ app.

If you have any questions, please feel free to consult the FMRQ's fully confidential personalized service—just email ptem-mf@fmrq.qc.ca (positions in family medicine) and pem-sp@fmrq.qc.ca (positions in other specialties). Your Federation works actively on continuous improvement of your work and practice conditions during residency, but a great deal of resources are also devoted to ensuring that you have the smoothest possible transition to practice. This Guide is proof positive of that commitment.

Enjoy the *Bulletin*,

Louis-Charles Desbiens, M.D.
President

1.

FAMILY MEDICINE

This section contains information on the process for granting PTEMs in family medicine. It begins with a glossary, to make the rules easier to understand, and includes full details on the procedure for obtaining a PTEM, a PTEM in a University Family Medicine Group (UFMG) or a PEM in an establishment, the 55%-45% rule, specific medical activities (AMPs), and locums.

GLOSSARY 101

Special medical activity (*Activité médicale particulière*, or AMP)
Medical activities listed in the Act respecting health services and social services as having a priority dimension. Conditions for physicians' participation in AMPs have been determined through a special agreement between the Minister and the FMOQ.

Upon obtaining a notice of compliance with the territorial physician resource plan (PTEM), a physician with 15 years of practice or less must choose an AMP offered by the region to meet local needs. This AMP will be performed in one of the services named, for the equivalent of 12 hours per week.

Compliance notice (*Avis de conformité*)
Family physicians practising under the Quebec health insurance plan are subject to the Special agreement on compliance with territorial physician resource plans (PTEMs). Under that agreement, the physician has to obtain a notice of compliance with the PTEM from the Territorial department of family medicine (DTMF) of the practice region in question. Obtaining this compliance notice implies the physician's commitment to maintaining the majority of his practice, i.e., 55% or more of his billing days, in a sub-area (local services network, or RLS) of that region. The frequently used expression "to have a PTEM" is shorthand for holding a notice of compliance with a given region's PTEM.

University needs (*Besoins universitaires*) (UFMG PTEM) (*PTEM GMF-U*)
Compliance notice reserved for doctors wishing to teach. This involves teaching positions set aside to meet priority academic needs.

WARNING

For this type of PTEM, it is the director of the family medicine program of the faculty concerned who selects the candidate and confirms his choice with his region's DTMF and the MSSS by December 15.

Selection criteria (*Critères de sélection*)
When the number of candidates exceeds the number of positions available in the PTEM, a selection is made via interview. This selection is made primarily on the basis of the physician's interest in practising in the priority needs identified by the DTMF.

Locum (*dépannage*)
Part-time locum (Dépannage à temps partiel)
A physician who holds a compliance notice but wants to perform locums part-time. Note that this practice is included in the 55%-45% ratio.

PREM exclusively for locums (PREM dépannage exclusif)
A doctor wishing to practise exclusively under the locum mechanism can obtain a waiver in lieu of a compliance notice if positions are available. This has to be applied for on registering for locums with the provincial *Centre national médecins-Québec*. To register for locums, the physician has to hold a permit to practise from the *Collège des médecins du Québec* (CMQ) and malpractice insurance corresponding to the areas of activity covered by his locum practice. A practice is considered exclusive when it includes 95% or more of the physician's total billing days.

Opting out of a PTEM (*Désistement à un PTEM*)
You may opt out of a PTEM at any time if you have not started your practice.

Territorial department of family medicine
(DTMF, for *Département territorial de médecine familiale*)
Each region has a Territorial department of family medicine (DTMF) consisting of all the general practitioners in the region who receive compensation from the Quebec Health Insurance Board (RAMQ). The DTMF's responsibilities are carried out by a Steering Committee consisting of physicians who belong to the department. In particular, the DTMF's mandate is to make recommendations concerning PTEMs, general medical services, and AMPs. It defines and proposes a regional organization plan for general medical services and a network of access to general medical care.

DTMF director (Directeur·rice du DTMF)
Territorial department of family medicine director
The Director of the Territorial department of family medicine is in charge of authorizing and signing compliance notices.

Healthcare establishment (*Établissement de santé*)
A healthcare establishment is a group of healthcare facilities (hospital, local community services centre [CLSC], long-term care facility [CHSLD], etc.) which covers services for a given region. Following the adoption of Bill 10 in 2015, the Minister grouped the 182 existing healthcare establishments into 34 establishments. Rounding out the network are the university health centres, and institutes.

Facility (*Installation*)
A facility is a physical site where healthcare is delivered. Facilities are hospitals, local community service centres (CLSCs), residential and long-term care facilities (CHSLDs), rehabilitation centres, etc., which are grouped together under a healthcare establishment within the meaning of the law.

Billing day (*Journée de facturation*)
A billing day is counted only if the compensation (pay) associated with that day is equal to or greater than $523. A half day can be counted if the compensation associated with that half day is equal to or more than $261.50 and less than $523.

Inter-regional mobility (*Mobilité interrégionale*, or MIR)
Status of a physician who has worked a minimum of 200 days (synonymous with "doctor already practising").

Non-compliance with compliance notice conditions
(*Non-respect des conditions de l'avis de conformité*)
A physician who does not meet his commitment to perform 55% or more of his billing days in the geographical area covered by his PTEM compliance notice is subject to a 30% cutback of his total compensation for the year in question, i.e., from March 1 to February 28-29. The physician is notified by the Quebec Health Insurance Board (RAMQ) around September 1 of the following year. He may, however, request an exemption; his file will then be reviewed by the MSSS-FMOQ Parity Committee responsible for the Special Agreement concerning PTEM compliance.

New biller (*Nouveau facturant*)
New billers are physicians who have not yet completed at least 200 days of practice under Quebec's public health insurance plan. During those 200 days of practice, the physician must have held a valid notice of compliance with the region's PTEM or obtained a waiver in lieu of a notice of compliance with the PTEM.

Physician resource plan (PEM, for *Plan d'effectifs médicaux*)
Physician resource plan of a facility, healthcare establishment
In family medicine, the term "PEM" is used to designate positions in hospitals. You need a PEM to be able to work in a hospital setting.

Initial application period (*Période initiale de dépôt des candidatures*)
The initial application period runs from December 1 to 15 each year.

Practice without a compliance notice (*Pratique sans avis de conformité*)
Physicians practising under the Quebec Health Insurance Plan (RAMQ) without having obtained a notice of compliance with the PTEM from the Director of the Territorial department of family medicine (DTMF) of a region will have their total compensation cut back by 30%. A five-year waiting period will also be imposed on them before they can apply for a compliance notice in that region.

Territorial physician resource plan
(PTEM, for *Plan territorial d'effectifs médicaux*)
Territorial physician resource plans (PTEMs) in family medicine authorize, for each of Quebec's administrative regions, a quantitative target for recruitment of family physicians designed to distribute additional physician resources equitably. These plans are updated yearly on the basis of the differences observed between the resources in place and the needs to be met in each region. They take into account the mobility of physicians already practising and the expected number of new doctors. Since Quebec's regions do not all enjoy the same level of access to healthcare services, PTEMs aim to provide Quebecers with more equitable access to medical services.

In family medicine, the term "PTEM" is used to designate positions allocated in one of the 18 administrative regions, with priority hiring in a local services network (RLS). Obtaining a compliance notice implies that the doctor undertakes to maintain the majority of his practice, i.e., 55% or more of his billing days, in a sub-area (RLS) of the region where he holds a PTEM.

PTEMs are associated not with a type of practice but with a practice location.

Region (*Région*)
Quebec is divided into 18 administrative regions. When you apply for a compliance notice, you do so to one of these regions:
Region 1 – Bas-Saint-Laurent
Region 2 – Saguenay–Lac-St-Jean
Region 3 – Quebec City (Capitale-Nationale)
Region 4 – Mauricie–Centre-du-Québec
Region 5 – Estrie
Region 6 – Montreal
Region 7 – Outaouais
Region 8 – Abitibi-Témiscamingue
Region 9 – Côte-Nord
Region 10 – Nord du Québec
Region 11 – Gaspésie–Iles-de-la-Madeleine
Region 12 – Chaudière-Appalaches
Region 13 – Laval
Region 14 – Lanaudière
Region 15 – Laurentides
Region 16 – Montérégie
Region 17 – Nunavik
Region 18 – James Bay Cree Territory

Local services network (*Réseau local de service*, or RLS)
Each region is divided into sub-areas. So you have a notice of compliance with a region's PTEM, with priority hiring in a sub-area (RLS).

SCOPE OF A PTEM COMPLIANCE NOTICE

Positions in a PTEM have a geographical scope and are not in any way associated with a facility, doctor's office, or specific activity. None the less, the DTMF must, within the framework of its mandate, identify its region's priority needs, both primary and secondary. Identification of needs should guide the DTMF in the selection of candidates when there are more applications than positions in the PTEM. Also, the needs identified in a sub-area will guide candidates in their choice of location and activities.

EFFECTIVE DATE OF PTEMS

The PTEM for a year comes into effect on December 1 of the previous year and ends on November 30. So, for instance, the 2026 PTEM will take effect on December 1, 2025 and terminate on November 30, 2026.

OBTAINING A PTEM IN FAMILY MEDICINE

Candidates may not submit their compliance notice applications for the following year's PTEM before December 15 of the current year. Applications submitted after December 15 are dealt with at the end of the process, starting February 28, 2026.

Submitting a compliance notice application
The initial period for submission of applications runs from December 1 to 15 of the current year, inclusive. All applications received during that period are deemed to be received on December 15.

N.B.

Candidates applying after December 15 will be assigned a position on the basis of the date and time their compliance notice application was received, from February 28, 2026 onward.

All compliance notice applications are forwarded by the candidate to *Santé Québec* on the electronic form for 2026 PTEM compliance notices (available on the MSSS website). This form is the sole document to be sent in.

Santé Québec sends each applicant an acknowledgment of receipt.

Any response from a DTMF following the submission of a compliance notice application has to be made by email.

Processing of a compliance notice application by the DTMF
The initial period for processing compliance notice applications runs from December 16, 2025 to February 27, 2026.

Starting December 15, *Santé Québec* forwards the applications received to the DTMFs in the regions selected by the candidates.

When the number of positions available in the PTEM of a sub-area which candidates have marked as their first choice is lower than or equal to the number of applications received for that sub-area, no selection is carried out, and the DTMF has to issue the compliance notice.

When the number of applications received for a sub-area exceeds the number of positions available in that sub-area's PTEM, all applications are evaluated by the DTMF via interview. This evaluation must comply with the following selection process.

EXAMPLES

1. There are fewer applicants than positions – automatic selection – all these individuals receive their PTEM:
   - 10 candidates apply with RLS de Verdun as their first choice
   - RLS de Verdun has 12 PTEMs available
   - All 10 candidates receive their PTEM automatically
2. There are more applicants than positions – selection by interview:
   - 15 candidates apply with RLS de Verdun as their first choice
   - RLS de Verdun has 12 PTEMs available
   - ALL these individuals are interviewed

Selection process

If the number of applications received exceeds the number of positions available in the PTEM, the DTMF has to conduct candidate selection, in line with the following principles:

- A selection committee is formed;
- The DTMF establishes candidate selection criteria. The selection criteria have to be limited to matters within the DTMF's jurisdiction;
- All candidates are interviewed individually.

Interview and selection criteria

Interviews are conducted in person, but could in exceptional cases be carried out remotely by means of a medium permitting visual contact, such as ZOOM.

The objectives of the interview are the following:

- **Find out intentions in terms of professional interests and activities envisaged;**
- Evaluate the candidate's level of knowledge of special regional features, approach carried out, reason for this choice;
- Evaluate experience acquired, career path, achievements, challenges, and goals;
- Evaluate level of knowledge of the healthcare system;
- Evaluate personality, capabilities, and behaviour through scenarios whereby candidates can show their qualities;
- Provide relevant information on the region;
- Answer the candidate's questions.

WARNING

With respect to patient management, it is your interest in that type of practice that questions should be asked about, and not your interest in a specific clinic.

The choice of clinic where you will perform your patient management is up to you.

Interviews must be conducted in line with the hiring conditions established by the provincial human rights and youth rights commission.

Acceptance and withdrawal

On January 30, 2026, all DTMFs respond in writing to candidates, confirming the geographical area corresponding to their 1st or 2nd choice, offering another sub-area that has remained vacant, or informing them that their application has been denied.

Candidates have a maximum of five days to respond to the DTMF in writing. Candidates' failure to respond within five days is considered a refusal.

For compliance notices sent out during the rest of the year, candidates also have five days to respond.

Candidates who accept the compliance notice offered by the DTMF are removed from the process for that region alone.

Candidates who refuse the compliance notice offered by the DTMF continue the process.

Candidates who do not respond within the prescribed timeframe are deemed to have withdrawn.

Candidates who first accepted and then withdrew from their compliance notice will have to submit a new PTEM compliance notice application. These new applications will be processed in the order in which they are received at *Santé Québec*.

Effective February 28, 2026

When positions are available in the PTEM, the first come, first served principle is applied.

OBTAINING A PTEM IN A UNIVERSITY FAMILY MEDICINE GROUP (UFMG) THESE ARE POSITIONS SET ASIDE FOR UNIVERSITY NEEDS

For this type of PTEM, it is the director of the family medicine program of the faculty concerned who selects the candidate.

As soon as a candidate is identified to fill one of these positions, but no later than December 15, the director of the family medicine department of the medical faculty concerned must confirm his choice to Santé Québec and the DTMF responsible for issuing the selected candidate's compliance notice.

When an academic applicant comes forward during the year to meet a UFMG priority recruitment, hiring will be possible provided the candidate is selected by the director of the family medicine department of the medical faculty concerned and a position is available in the sub-area's PTEM.

When a recruitment is used to meet priority academic needs, the DTMF may, on certain conditions and subject to approval from the Physician Resource Management Committee – Family Medicine (COGEM), grant a compliance notice over and above its regional target for authorized recruitment. The physician contemplated by the recruitment must:

- Qualify with respect to inter-regional mobility and have accumulated at least three years' active practice within the meaning of Appendix II of the Special agreement concerning PTEMs (EP-PREM);
- Have obtained the recommendation of the director of the university family medicine department of the medical faculty concerned;
- Have the expected practice profile in line with the guidelines recognized by COGEM;
- Carry out all his patient registrations within the UFMG concerned.

EARLY-CAREER FAMILY PHYSICIAN RESEARCHER

A family physician researcher may, upon the recommendation of the Joint Evaluation Committee, be considered, over and above the positions authorized in the PTEM, as an early-career clinical investigator, provided the following conditions are met:

- They must undertake to maintain this profile for five years, notwithstanding the occurrence of a major event or pregnancy;
- They must devote a minimum of 50% of their professional activities to research;
- As long as this level of research activity is maintained, their professional clinical investigation activities will be substituted for specific medical activities (AMPs);
- The number of these positions will be four per year, i.e., one per medical faculty;
- Positions unfilled in the PTEM of one year cannot be carried forward to a subsequent year;
- Compliance notice applications are submitted upon the nomination of the candidate by the university concerned.

To make an application, the university department head must submit to COGEM an application for authorization to hire over and above the target authorized by the Minister. The following documents must be attached to the application:

- Letter of support confirming the doctor's commitment to performing his percentage of activity devoted to research;
- Hiring letter from the university;
- Favourable recommendation from the Joint Evaluation Committee.

Once the hiring has been authorized by COGEM, the person selected must apply to the AMP Parity Committee to be exempted from the application of the penalties set out in the AMP Special Agreement. If the percentage of professional activities in research is below 50%, the doctor will have to sign up for AMPs on the basis of the AMPs available in the region.

OBTAINING A PEM IN AN ESTABLISHMENT (for family physicians)

Identification of sectors of activity authorized to recruit, and priority needs

The DTMF, in conjunction with the medical and professional services directors (DMSPs) of its region and its area partners, draws up a list, by sub-area, of the sectors of activity with recruitment needs in its region.

The DTMF posts on its website a list of recruitment needs in establishments, and a list of priority needs for delivering primary care to patients in doctors' offices.

To apply for a compliance notice in an establishment:

- You must send your appointment application form to the executive director of the establishment;
- Your application will be reviewed by the Executive Committee of the Council of Physicians, Dentists, Pharmacists and Midwives (CMDPSF);
- The head of department or service or the Medical and Professional Services Director where you wish to practise will be able to assist your in the procedure.

YOUR OBLIGATIONS WITH RESPECT TO YOUR PTEM COMPLIANCE NOTICE

Deadline for setting up in practice

To be eligible for obtaining a notice of compliance with a region's PTEM, a candidate has to undertake to start his practice in that region **within 12 months following the receipt of his compliance notice application by *Santé Québec***.

The physician may, however, ask for his start of practice to be deferred for a maximum of six months. It is up to the DTMF to agree to or deny the deferral request on grounds it deems fair and equitable.

55% - 45% rule

Doctors must devote at least 55% of their annual billing days to the sub-area where they hold their PTEM compliance notice.

A day is considered as soon as the physician has billed at least $523 in the geographical area, and a half day with billing between $261.50 and $523.

The distribution of the doctor's practice is evaluated on an annual basis with regard to days worked, from March 1 to February 28-29 of the following year, from the date of issue of the PTEM compliance notice.

If the physician begins after the year has begun, the calculation is prorated, from the date of issue of the compliance notice.

A doctor may therefore devote up to 45% of his billing days to practising outside the area where he holds his compliance notice, either in another RLS in the same region, in one of Quebec's 17 other regions, or on part-time locums.

* WARNING: Currently, only the Quebec City (*Capitale-Nationale*) region (except for the Portneuf and Charlevoix sub-areas) is subject to the following rule: a doctor who has no compliance notice from that region may not perform more than 5% of his billing days there.

SPECIFIC MEDICAL ACTIVITIES (AMPS)

Specific medical activities (AMPs) stem from the *Act respecting health services and social services*, and physicians with 15 years' service or less are required to sign on to them. Non-compliance with the AMP Special Agreement can lead to a 30% cutback in compensation.

It is the DTMF that manages the AMPs of doctors in its region. *Santé Québec* assigns them according to an established order and in line with the region's priority needs. If several AMPs are available, an agreement may be reached with the DTMF. Such an agreement must be signed no later than the end of the first complete quarter following the start of your practice in the region, but physicians may choose their AMPs when they sign their PTEM compliance notices.

For the 2025 PREMs, physicians may now choose their AMPs when they sign their PREM compliance notices.

AMPs are grouped together in three priority blocks:

1st BLOCK: I – Emergency/Super-clinic (GMF-R)

2nd BLOCK: II – Primary-care delivery of medical services, including registration and patient management
III – Short-term hospitalization with on-call duty
IV – Obstetrics
V – Long-term care facility (CHSLD), rehabilitation centre, or home support, all with on-call duty

3rd BLOCK: VI – Any other activity established by the CEO of Santé Québec (a list of these activities is available in Appendix 1 of the Agreement). Each such activity must, however, be approved as an AMP by the Parity Committee before being authorized by the DTMF.

You must undertake to perform one of these activities for the equivalent of 12 hours, 44 weeks per year. Below is a list of recognized equivalences for each of the areas of activity identified:

- **Emergency:** 16 call shifts of 8 hours per quarter.
- **Patient management:** 500 registered patients (vulnerable and non-vulnerable).
- **Hospitalization:** 18 active beds per day, one week in five, including on-call duty.
- **CHLSD:** 50 beds on a weekly basis, including on-call duty.
- **Home support:** 10 home visits per week to patients enrolled in the CLSC's home support program.
- **Obstetrics:** 15 deliveries per quarter, including on-call duty.
- **Palliative care:** 10 beds on a weekly basis, including on-call duty.
- **Intensive functional rehabilitation unit (URFI):** 20 beds on a weekly basis, including on-call duty.

* Note that the DTMF may choose exclusive AMPs, i.e., the equivalent of 12 hours per week in a single area of activity, or mixed AMPs, i.e., two types of activities, the equivalent of six hours a week for each type of activity.

IF YOU PRACTISE WITHOUT A PTEM (in the public system, not private practice)

- Your compensation will be cut back by 30%;
- You will have to wait five years before applying for a compliance notice in that region;
- You will retain new biller status;
- But, if you obtain a compliance notice in another region and work there for three years, you will subsequently be able to apply for a position in the region where you practised without a PTEM.

PHYSICIANS RETURNING FROM REMOTE REGIONS AFTER THREE YEARS' CONTINUOUS PRACTICE

A PTEM compliance notice cannot be denied to a doctor who has practised continuously for at least three years in one of the areas listed in Appendix XII of the FMOQ-MSSS Agreement, even if the PTEM is full:

- The doctor must undertake to practise principally in a sub-area;
- Practice carried out under the locum mechanism is not considered in the calculation of principal practice in a remote region;
- Principal practice is deemed to be continuous if it is carried out without interruption of more than 24 months in one or more regions contemplated in Appendix XII of the Agreement.

OPTING FOR LOCUMS

The locum mechanism enables a doctor to come to the assistance of sites designated by the MSSS-FMOQ Parity Committee in three sectors of activity: Emergency, Short-term, and Obstetrics.

There are two situations where a doctor may practise under the locum mechanism:

I. PTEM EXCLUSIVELY FOR LOCUMS

He holds a waiver in lieu of a compliance notice for practising exclusively on locums with a commitment to practising on locums for at least 95% of his annual billing days.

II. PART-TIME LOCUM

He holds a compliance notice from a region and registers as a locum (*médecin dépanneur*). In this scenario, the doctor has to maintain his commitment for the majority of his practice (55% of his billing days) to be carried out in the area where the PTEM compliance notice is signed. For further information, consult the *Information handbook for general practitioners performing locums* and the *Locum mechanism registration form*.

Information handbook for general practitioners performing locums:
h38.pub.msss.rtss.qc.ca/Fichiers/H38_Depannage_20181011132054.pdf

Locum mechanism registration form:
h38.pub.msss.rtss.qc.ca/fichiers/h38_depannage_20190830142914.pdf

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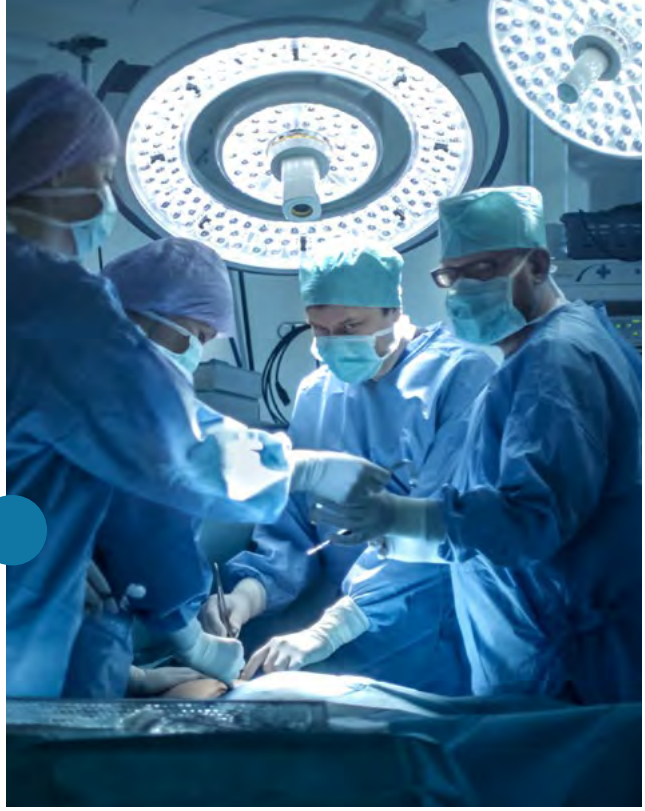


OTHER SPECIALTIES

Holding a position in an establishment's physician resource plan (PEM) is a prerequisite for delivering care there, in all medical, surgical, and laboratory specialties. Doctors may obtain privileges in more than one establishment, but will be counted only in the PEM of the establishment where they perform most of their practice. Also, it is possible to obtain associate member privileges in another establishment's PEM, with the agreement of the medical and professional services directors of both the establishments concerned. The purpose of this measure is to ensure compliance with physicians' obligations in the establishment where they hold their PEM, while enabling them to help offset a physician resource shortage or offer specific expertise to this other establishment.

In December 2020, the Quebec Ministry of Health and Social Services (MSSS) released its five-year plan for positions in specialties other than family medicine, for 2021-2025. This plan enables terminating residents to check where there are vacant positions. PEMs are posted according to the year in which they come into effect, by specialty, and by establishment and facility (hospital), on the Ministry website, which is updated monthly. You may consult the table at: www.msss.gouv.qc.ca/professionnels/medecine-au-quebec/plans-d-effectifs-medicaux-pem-en-specialite/#postes-disponibles-medecine-specialisee.

The Ministry's physician resource plan will now be renewed every three years. The 2026-2028 three-year plan will be released on December 1, 2025, and will take effect on that date.

Also, it is important to know that it is possible for the establishment granting you a position to require you to practise in two of its facilities in the same PEM, on the basis of needs identified in the different geographical areas covered by the establishment.

Finally, if an establishment considers that it has needs exceeding the number of positions allocated to it in the plan, it will be able to apply for a waiver to add a position to its physician resource plan (PEM). The rules concerning waiver applications are available for free download on the MSSS website under *Règles de gestion – Plan d'effectifs médicaux en spécialité* publications.msss.gouv.qc.ca/msss/document-002982/.

RULES CONCERNING RETIREMENT

Beneficial for terminating residents

New rules for managing physician resources in non-FM specialties were announced by the MSSS, following negotiations between the FMSQ and the Ministry. These rules came into effect on January 1, 2021. Below we list the rules affecting end-of-career conditions for specialist physicians belonging to the FMSQ, which have the effect, at the same time, of freeing up full-time PEMs, notably for recently terminated residents as soon as the specialist physician in place starts a reduced practice.

End-of-career management

- Specialist physicians **aged 63** may reduce their practice to 50% in an establishment for two years.
- Specialist physicians **aged 65 and over** may reduce their practice in an establishment for three years by contributing 20% of their usual practice in an establishment (equivalent to 1 day per week).
- Signing on to these terms and conditions is voluntary, and requires the agreement of the head of service/department.
- This measure has the effect of freeing up 1 full-time PEM for a terminating resident or any other physician already in practice.
- Note that physicians taking advantage of the 63-year-old rule (50% of their practice for two years) will subsequently be able to apply for the program offered to those 65 and over (20% of their practice for three years).

RULES CONCERNING RETIREMENT

Retirement

- Practising physicians may confirm their retirement to their establishment three years before the date on which their association with the establishment ends. **The overlap with a successor is still only six months, though**.

Early-career practice without PEM

- Newly certified doctors may practise in hospitals with major succession needs without a PEM for up to two years.
- These positions are often in remote or isolated regions.
- After these two years, it is still possible to continue one's career without a PEM, but for this there is a requirement of 32 weeks (160 days) of practice in a single establishment with major needs.

Moonlighting

- It is still possible for resident doctors with a regular permit in a first specialty to perform moonlighting, but this rule normally holds for regions with major needs (usually where the PEMs are not full).

PROCESS FOR OBTAINING A PEM IN A NON-FM SPECIALTY

- First, make yourself known in the establishment where you are seeking a position. If you have the opportunity ahead of time, include a rotation in the facility;
- Get in touch with the head of department and the Medical and Professional Services Director (DMSP) or Deputy Director;
- When you have made your choice, send the appointment notice application form to the medical and professional services director of the establishment concerned (this form is available from the DMSP's office);
- The application will then be evaluated by the Credentials Review Committee, which makes a positive or negative recommendation concerning your application to the Council of Physicians, Dentists, Pharmacists and Midwives (CMDPSF), which follows the same procedure with respect to the establishment's Board of Directors;
- If your application is accepted, the establishment's Board of Directors submits an application to fill this position to *Santé Québec* to obtain confirmation that this appointment is in compliance with the establishment's PEM;
- If *Santé Québec* agrees, it issues a notice of compliance with the establishment's physician resource plan (PEM) and forwards it to the establishment;
- The establishment (CISSS, CIUSSS, Institute, etc.) must, as early as possible or within no more than 90 days following receipt of an appointment notice application, send the applicant a written decision setting out his privileges;
- The grounds for any refusal must also be given in writing;
- The physician must confirm his decision and acceptance of his conditions of appointment in writing within 60 days following the notification date in order for his privileges to be validated.

For positions in university settings, candidates must perform a fellowship of 3-12 months' duration. Training in Quebec is paid by RAMQ. A second year is possible, but requires justification from the establishment to the Ministry. Note that the medical faculties with which the establishments are linked often require at least a 1-year fellowship to award those positions, owing to the teaching responsibility associated with them. **Some non-university establishments** may also require a fellowship in order to cater to a specific need that will meet the requirements of the population in their territory. Furthermore, **training of 6 months or less** does not require MSSS approval, and is negotiated with the department concerned and the Office of the faculty Associate Dean. For further information on fellowships, consult the section on that topic on page 14.

TO START YOUR PRACTICE, YOU MUST HAVE AT LEAST:

- your specialist certification (have passed the Royal College exam);
- confirmation of your participation in an ALDO-Quebec information session from the Collège des médecins du Québec (CMQ);
- your permit to practise;
- your proof of malpractice insurance coverage;
- paid your annual membership fee (be registered on the CMQ membership roll);
- finalized your registration with the Quebec Health Insurance Board (RAMQ) for billing purposes (this may be done subsequently, online).

RECRUITMENT IN ANTICIPATION OF A DEPARTURE DURING THE YEAR (retirement or other)

Even when an establishment's PEM is full, a compliance notice may be issued for a recruitment in anticipation of the departure of a physician who has provided written notice of his intention to cease practising in the establishment and whose resignation will take effect within three years. The recruited physician may not, however, take up his duties until six months prior to the departure date of the incumbent doctor.

LOCUMS

The purpose of a locum (temporary replacement) is to enable a doctor to take on the clinical and administrative duties of another physician who holds a PEM, who has to take time away from his or her position (illness, sabbatical leave, maternity, etc.). **This does not constitute a permanent position** for the replacing doctor, who loses his privileges once the locum is over, and has to find another position. It is also possible in an emergency to obtain authorization to practise in an establishment without a position in the PEM. But this measure is valid for no more than three months, and cannot be renewed, barring exceptional circumstances determined by the establishment and accepted by the MSSS.

NETWORK POSITIONS (PROs/PRFs)

Some agreements allowing for positions to be added are associated with a network position. These positions may be used to recruit a specialist physician in the establishment holding a position, or to recruit a specialist physician in another establishment, i.e., an optional network position (known by its French acronym, PRF, for *poste en réseau facultatif*), provided a service agreement has been reached between two establishments. Some establishments have a mandatory network position (PRO, for *poste en réseau obligatoire*). These positions are generated when a service corridor is created permanently between two establishments (e.g., MUHC and Nunavik).

IMPORTANT

These positions cannot be based on a single individual, and have to demonstrate a commitment from the establishments' entire medical team and their administrations to meet the associated obligations (service corridors).

RESEARCH SCIENTIST POSITIONS

There are certain situations where a doctor can be hired outside the PEM. Research scientists are a case in point. It is, however, necessary in such cases for the candidate to obtain a PEM ahead of time from the establishment where he wishes to practise. When the person concerned has obtained research grants, his position can be recognized by the Ministry as being outside the PEM, for the purpose of hiring other candidates in the department. Research scientists must then sign on to the Memorandum of understanding concerning the establishment of special pay terms and conditions for research scientists (*Protocole d'accord concernant la mise en place de modalités de rémunération particulière pour les chercheurs-boursiers*).

In the event of a change in a research scientist's career, he will be able to remain in his facility to practise there even if he withdraws from the Memorandum of understanding. He will then be deemed to be surplus to the PEM, the status of which will be corrected upon the departure of a colleague in that specialty. The same rule applies to those with an exclusive practice in palliative care and intra-operative assistance. For further details, please consult the management rules for physician resource plans in specialties (*Règles de gestion des plans d'effectifs médicaux en spécialité*) on the MSSS website publications.msss.gouv.qc.ca/msss/document-002982/.

RETURNING FROM THE REGIONS (three-year rule)

After three years' continuous practice in a remote or isolated region, a physician cannot be refused entry to another region on the grounds that the region's physician resource plan or establishments' PEMs are full. Nevertheless, to obtain a position in a university hospital, he will have to meet the fellowship requirements and receive the agreement of the region's medical faculty. A physician taking advantage of this rule will be able to do so once only, within no more than 12 months from the date on which he left the establishment in the regions. To obtain a position in a new region, he will first have to fill the positions available in the PEMs of the new region where he will be setting up in practice. If all the PEMs in his discipline are full, he will be sent a list of five establishments determined according to Ministry priorities, from among which he may choose. In such cases, the MSSS may authorize the PEM of the establishment concerned to be temporarily exceeded. To obtain the list of remote or designated regions, please email the FMRQ at pem-sp@fmrq.qc.ca.

RECRUITMENT VIA WAIVER

When an establishment's needs warrant, the Medical and Professional Services Director (DMSP) may apply for its physician resource plan (PEM) to be exceeded temporarily via waiver. A PEM waiver is an exceptional measure, and requests to that effect have to meet strict criteria: candidate's specific expertise; volume of establishment's activity; waiting lists; development (addition of equipment); stabilization of teams (age of practising physicians); establishment of a service agreement; and, in very rare cases, humanitarian grounds. **The waiver confers a permanent position on the candidate**. The establishment's PEM will then have been temporarily exceeded, and the next departure in the specialty concerned will not be replaced. Waiver applications are reviewed by the members of the Physician resource management committee for specialties (COGEMS), which includes the *Fédération des médecins spécialistes du Québec* (FMSQ), Ministry of Health and Social Services (MSSS), and *Fédération des médecins résident·e·s du Québec* (FMRQ).

WATCH OUT FOR VIRTUAL PEMs

If you come across virtual positions, i.e., positions available in the physician resource plan on the Ministry site but that the establishment tells you have already been filled or it has no intention of filling, we advise you to take the following steps:

1) Send in a formal appointment notice application anyway;
2) Wait for the establishment's response;
3) **If the response to your application is negative and the letter specifies that the establishment does not intend to recruit for the position allocated by the MSSS, get in touch with the FMRQ so we can investigate the situation and lobby the Ministry to have the position moved elsewhere, as applicable.**

WATCH OUT FOR PROFESSIONAL SUICIDE PEMs

Some positions are located in regions where practice in a given specialty is limited, owing to the excessively low quantity and limited diversity of cases, or because the doctor will be practising on his own. These positions are seen as professional suicide, because they could mean the physician is unable to return to practise in another setting owing to loss of expertise, which is known to occur rather quickly in medicine, depending on the conditions. In such cases, the FMRQ recommends that service corridors (network positions) be established instead, to enable candidates for these positions to maintain their knowledge and technical skills, by sharing responsibility for delivering care with the other doctors in the partner hospital department.

PRACTISING EXCLUSIVELY IN AN OFFICE/NO PEM REQUIRED

Practice in an office in specialties other than family medicine is not governed by establishments' physician resource plans (PEMs). Doctors wishing to practise exclusively in an office in the public healthcare system have no steps to take to obtain a PEM. We are referring here to working in a private office, not to withdrawing from RAMQ, but in such cases they will be unable to obtain hospital privileges, however, limited, because new doctors have to practise in the public system for five years, since the adoption of Bill 83, before being allowed to work in the private sector. But this option applies to a limited number of specialties, such as dermatology, psychiatry, and rheumatology, for instance.

Note that the government wishes to impose specific medical activities (AMPs) on specialist physicians who do not have a PEM and thus work only in an office. These AMPs are under discussion, and will be established for each of the specialist physician associations concerned, to help meet needs in hospitals. We will send you details of these AMPs once they have been agreed on.

Obligation to practise for three years on your PEM

Since July 1, 2021, performing a fellowship in Quebec has carried with it a rule whereby the candidate will have to practise for three years in the setting that granted him a position (PEM) in connection with his fellowship. Indeed, a clause to that effect on page 3 of the fellowship application form must be signed by the applicant. In the same perspective, the establishments undertake not to solicit a candidate who already has a commitment with respect to his fellowship/further training for three years following that training.

FURTHER TRAINING/FELLOWSHIPS IN QUEBEC

To obtain a position in a university setting

To obtain a position in a university setting, 3 to 12 months' further training/fellowship is required, but the duration of this training is usually from at least 1 year and up to 3 years, depending on the requirements of the faculty and discipline concerned. The purpose of fellowships is to acquire ultraspecialized clinical expertise surpassing the usual requirements of training in the specialty or subspecialty, along with the development of competencies in teaching, research, and evaluation of technology and intervention methods. Any proposed fellowship to be carried out in Quebec required for a position in a university setting must be supported by the recruiting establishment (Medical and Professional Services Director [DMSP]) and the medical faculty concerned.

IMPORTANT

- Your fellowship must be carried out in a facility of a university network other than the network where you performed your residency.
- In the case of a fellowship for recruitment in an establishment with university designation, the faculty submitting your application is the one where you will be recruited once the fellowship is completed.
- You may also perform a fellowship in the university network that offered you a position, although usually the practice sites want you to bring different expertise to meet the needs in the team.

Fellowships in specialties paid by RAMQ, in brief

- **Complete the** fellowship application **form** (available on the FMRQ site under Positions (PEMs/PTEMs) then Other specialties);
- **Before having it signed**, email the form to the Office of the Associate Dean for Postgraduate Medical Education of the faculty concerned for validation and confirmation that everything is complete and in order;
- Once it is validated, **print out the form and obtain the necessary signatures**;
- **In the case of an application for university or non-university recruitment**, the MSSS requires that your PEM be confirmed, and that **your application be accompanied by the letter of confirmation from the DMSP for your recruitment and from the Board of Directors of the establishment recruiting you**. Failing this, your application could be denied;
- **In the case of a PEM linked to the retirement** of a physician, a letter from that doctor confirming the effective date of his retirement is required;
- **When you have all the signatures, email the form, in a single PDF file, with the letter and other required documents**;
- **Incomplete applications will not be considered**;
- **Confirmation** of your fellowship will be emailed to you by the MSSS early in March preceding the start of your fellowship;
- **Upon receipt of this positive response**, you will be invited by the Office of the Associate Dean for Postgraduate Medical Education to complete your application for admission online and, as applicable, to forward the documents required for your admission file;
- **The deadline for submitting an application to the Office of the Associate Dean concerned is on or about December 1, 2025 for fellowships starting on July 1, 2026. Keep an eye on your emails or consult your faculty's website for further details.**

Time frame for applications for fellowship positions for July 2026

- DEADLINE FOR SUBMITTING APPLICATIONS TO FACULTIES
  NOVEMBER 28, 2025, 23:59
- Review of all applications by associate deans for postgraduate medical education and transmittal to MSSS
  mid-December 2025
- Transmittal of files to MSSS
  December 31, 2025
- Review of files by MSSS and emailing of results to candidates by Ministry
  no later than March 1, 2026
- Start of fellowship
  July 1, 2026

For obtaining a position in a non-university setting/1 year and less than six months
Fellowships for obtaining a position in a non-university setting may be of less than 12 months' duration. They must be supported by a medical faculty, and the candidate must hold a position in a PEM to be able to perform such training in Quebec. In the case of a fellowship for recruitment in a non-university setting, the faculty submitting the application is the one where the candidate will be performing his training, and not the recruiting establishment. Training of less than six months' duration does not require confirmation of a PEM, and is negotiated directly with the faculty authorities (program directors, associate deans). We invite you to consult your faculty about the rules established concerning the process for obtaining these extensions of training.

Time frame for applications for fellowship positions of less than six months' duration

- Deadline for submitting applications to faculties
  February 1, 2026, 23:59
- Meeting of associate deans to review files
  mid-February 2026
- Confirmation of positions to candidates
  March 2026

EXTENSIONS OF TRAINING

Any application for an extension of training other than a fellowship must be sent to the Office of the Associate Dean for Postgraduate Medical Education of the medical faculty where you intend to perform your extension of training and, as applicable, the home medical faculty of the hospital establishment that will be recruiting you when you have completed that extended training. It is not necessary to hold a PEM to be authorized to perform this training, but a position must be available for you in line with the quotas imposed by the MSSS, without exceeding the maximum number of positions authorized in each program, category, and subcategory, as determined by the government decree to that effect.

Exceptions

Extensions of training targeting Enhanced Skills in Emergency Medicine and Adult Critical Care Medicine, and specialized training in Pediatrics whose matching is handled by CaRMS, are not subject to this procedure.

To access the instructions and application form for fellowships and extension of training, you may consult the following sites:

Fédération des médecins résidents du Québec
fmrq.qc.ca/en/postgraduate-training

University of Montreal
medpostdoc.umontreal.ca/etudiants/reglement-et-politiques/poursuites-de-formation-et-demandes-de-formation-complementaires/

McGill University
www.mcgill.ca/pgme/residency-programs/admissions/poursuite-de-formation

Laval University
Email the **Postgraduate Medical Education Advisor** at gestionempd@fmed.ulaval.ca

University of Sherbrooke
Contact **Jean-François Duval**, Co-ordinator of Postgraduate Medical Education, in the Office of the Secretary of the Associate Dean for Postgraduate Medical Education by emailing jean-francois.duval@usherbrooke.ca

No fellowships not paid for by RAMQ may be performed in Quebec

Physicians having done their pre-MD or postgraduate (residency) training in medicine in Quebec who wish to perform a fellowship in Quebec have to obtain a position from among those authorized by the MSSS for which the pay is covered by RAMQ. Failing that, those doctors will have to look for fellowships in another province, the United States, or elsewhere. This rule is contained in the Ministry's Terms and conditions for determining resident physician positions (*Modalités de détermination des postes de résidents en médecine*). It reflects the MSSS's wish that the Quebec government limit fellowships performed in Quebec in line with the population's needs and encourage training outside the system where candidates have already undergone their training. Note that, as is the case elsewhere, Quebec establishments may offer fellowships to candidates trained outside Canada, but without any funding from RAMQ in such cases. Those undertaking such training cannot be hired by a Quebec establishment within three years after completing their extension of training/fellowship. For more information on this topic, email the FMRQ at pem-sp@fmrq.qc.ca.

CAREER IN RESEARCH

Royal College Clinician Investigator Program

Applications for admission to the Royal College of Physicians and Surgeons of Canada (RCPSC) Clinician Investigator Program do not require the DMSP's signature or confirmation of a position in a PEM. But they are subject to a specific process, the rules for which vary slightly from one faculty to another. This program offers integrated, structured, rigorous research training during residency, with a view to a career as a clinician investigator. **There are three possible streams or pathways:**

- Continuous training pathway, involving 24 months of continuous research starting in the final year of the specialty program (PGY-5 for a 5-year program, PGY-6 for a 6-year program) and running for 1 year after the end of the specialty program;
- Discontinuous training pathway, involving research distributed over a 27-month period that can begin from the first year of residency, for resident doctors who already have an MSc or PhD;
- Fractionated training pathway, involving 24 months of training in blocks of 3 months or more starting in the second or third year of residency, and one continuous 1-year block after the end of the specialty program.

Research fields do not concern only the traditional aspects of clinical and laboratory-based biomedical research, but also cover such disciplines as the economy, management, social science, and behavioural and information science as they apply to health and disease. Resident doctors successfully completing this program receive a Diploma of Specialized Studies (*Diplôme d'études spécialisées*) from the university and a Certificate from the Royal College of Physicians and Surgeons of Canada (RCPSC). Candidates have to register in an MSc or PhD program, unless they have already obtained such a degree in the past. Resident doctors are paid normally during the specialty program and during the year of extended training.

Procedure (example)

- Complete the admission form for the RCPSC's Clinician Investigator Program;
- Forward the form and the required documents to the Office of the Associate Dean for Postgraduate Medical Education by the deadline (January 15 for the academic year beginning the following July 1);
- The documents will be sent on to the program concerned;
- The program Admissions Committee will review the application, determine whether it grants an interview, and make its recommendation to the faculty, which will notify the candidate of the decision;

- Required documents for a clinician investigator fellowship application include:
  - a letter of intent;
  - an application form for admission to the Clinician Investigator Program;
  - a letter from the specialty program director;
  - a letter from the professor who undertakes to direct the candidate;
  - a copy of the candidate's up-to-date Canadian Common CV (CCV); and
  - an official transcript of university courses taken, excluding the MD.

For further information, consult the Royal College site at news.royalcollege.ca/content/dam/documents/ibd/clinician-investigator-program/clinician_investigator_program_otr_e.html.

Quebec health research fund (*Fonds de recherche du Québec – Santé*, or FRQS) research scientists

Research scientist positions are intended for specialist physicians signing onto the Memorandum of understanding concerning the establishment of special pay terms and conditions for research scientists (*Protocole d'accord concernant la mise en place de modalités de rémunération particulière pour les chercheurs-boursiers*). Any doctor wishing to perform a fellowship to obtain such a position must hold a compliance notice in the establishment where he wishes to practise. Should the doctor withdraw from the Memorandum of understanding, he must take a position available in his original specialty or subspecialty. If the PEM is full, he will be considered surplus to the PEM until the next departure of a resource in the same specialty.

For full details concerning the FRQS/MSSS training program for specialty medicine residents with an interest in pursuing a research career, consult the FRQS site at frq.gouv.qc.ca/en/open-competitions.

FELLOWSHIPS OUTSIDE QUEBEC

The MSSS does not fund fellowships outside Quebec, because doctors on such fellowships do not deliver care to Quebecers during this additional training. Candidates for that type of fellowship must obtain funding through their own devices (establishment where they will be training, hospital department where they intend to return to practise, bursaries from organizations and foundations, bank loans, etc.). Nevertheless, although obtaining a position is not a prerequisite, it is preferable to obtain a PEM prior to your departure confirming that you will be joining an establishment in Quebec. Otherwise, you cannot be guaranteed a position on your return.

Fellowships elsewhere in Canada

Those planning to pursue further training in another province enjoy certain benefits, though. Such training may be paid, either through non-taxable bursaries from the establishment or from funds awarded by the fellowship director. It is also much easier to obtain a permit to practise in the province in question, as Royal College specialist certification is recognized Canada-wide. So you can practise part-time, by moonlighting, and that provides an additional source of funding. Moreover, health insurance coverage for you and your family is much simpler to confirm, as provincial health insurance programs are recognized across Canada, and the school system is more easily accessible for children.

Fellowships in the United States

To perform a fellowship in the United States, you must find out from the Medical Board (College of Physicians) of the state concerned what the requirements are for doctors from outside the United States. If you have to perform medical acts, you will have to make sure you have the permit appropriate to this practice, and the malpractice insurance coverage that will enable you to practise without any concern.

United States Medical Licensing Examination (USMLE)

The basic exam you must pass to obtain a permit to practise medicine in the United States, the USMLE can be required of doctors performing further training in the U.S., but this requirement is not mandatory in all states. For more information on the requirements concerning the exam, consult the 2026 Bulletin of Information on the USMLE site at www.usmle.org/bulletin-information.

To find out the requirements for practising in the U.S. state where you will be performing your fellowship, you may get in touch with the Medical Board (College of Physicians) of the state concerned (see list on the Federation of State Medical Boards website): www.fsmb.org/contact-a-state-medical-board.

Fellowships in France

The procedure for performing a fellowship in France involves steps specific to that country. Training is usually of 3 months' to a maximum of 2 years' duration. The official procedure for obtaining temporary authorization to practise from the French authorities is carried out by the host establishment. No applications from individuals directly to the French authorities are accepted.

The application for temporary authorization to practise file consists of:

- the commitment to host from the French host establishment;
- a photocopy of their ID;
- a copy of the specialist physician's training credentials;
- their resumé;
- certification from the competent authorities in their home country specifying that their credentials entitle them to practise the specialty in that country;
- their fellowship proposal, in which the link with the specialty is stated;
- an extract from their criminal record or equivalent document, issued less than three months earlier by a competent authority in their home country or country of origin;
- an extract from their police record in France;
- certification of successful completion of the French-language test (unless exempted).

For more information, consult the site *Le fellowship : se former en France* www.cng.sante.fr/procedures-dautorisation-dexercice/venir-exercer-se-former-en-france/fellowship-autorisation-temporaire-dexercice.

You may also consult the Social Affairs, Regional World Health and/or Cooperation and Cultural Action Counsellors at the French Consulate General in Montreal or the French Embassy in Ottawa.

Fellowships in other countries

We suggest you initiate matters well ahead of time if you want to perform a fellowship abroad, including the United States. Each venue has different rules. Ideally, you should visit ahead of time, to meet with the fellowship director and the team you would have to work with in the context of your further training. That being said, interviews are increasingly being conducted via Skype, ZOOM, or other platforms.

For further details, **consult the personal accounts on our website (fmrq.qc.ca/en/postgraduate-training/extension-of-training-other-specialties/outside-quebec/personal-accounts) from colleagues who have completed or are performing fellowships outside Quebec**.

Other aspects to consider

Permit to practise/malpractice insurance

To deliver care in another jurisdiction, you will first have to obtain a permit to practise there. Contact the Medical Board or College of Physicians in the U.S. state, for instance, or the country concerned, or the establishment, to find out the requirements in this regard. You will also have to take out malpractice insurance coverage that meets the requirements of the state or country concerned. The medical authorities in the country or the establishment will be able to guide you in this. Unfortunately, the Canadian Medical Protective Association (CMPA) does not cover medical acts performed outside Canada.

Health insurance coverage

Find out from the Quebec Health Insurance Board (RAMQ) whether you will be covered during your stay outside Canada. Although RAMQ's coverage is insufficient, it is still necessary. To cover any additional costs, you can take out health insurance coverage on-site, through the department or establishment where you will be pursuing your training. They can usually include you in the insurance programs in effect for resident doctors or staff physicians on-site, as applicable.

Work visa

You will need a work visa in the country where you perform your fellowship. Make sure you apply in advance to the embassy, high commission, or consulate concerned. Also, if your spouse is to accompany you on your fellowship, make sure they have a visa allowing them to stay there with you beyond the period allowed for a tourist—six months in the USA, for instance. You will have to find out, too, about the rules concerning the possibility of you or your spouse working during this visit. Some countries, such as the U.S., are very strict about this, and a job that does not comply with the rules could lead to your expulsion from the program, and the country.

Home and automobile insurance

To insure your property in the host country, check with your insurance company whether there are comparable firms there, or get in touch with FMSQ subsidiary and FMRQ partners, SOGEMEC Assurances, who offer special services in such cases. You can reach them at 514-350-7070 or 1-800-361-5303, or consult their website at sogemec.com/en/professionals/medical-specialist/home.

Driver's licence

As a general rule, you will also have to obtain a driver's licence from the jurisdiction where you will be pursuing your further training. You could be asked to pass a new driving test. You may check, too, whether obtaining an International Driving Permit (available from the CAA, for example) is sufficient for compliance with the rules in effect where you will be doing your training. Some states do, however, recognize the Quebec driver's licence.

Bank account/Power of attorney

You will need a bank account in Quebec to perform transactions toward your host country, especially if your remuneration comes from Quebec and is paid directly into your account here. You are also advised to identify someone close to you to whom you will give power of attorney to manage some of your affairs in Quebec, as necessary.

Alternative funding sources

Funding sources for those pursuing further training outside Quebec include the following:

- Training or research grants
  - Specialist physician associations in Quebec and Canada
  - Canadian Medical Association
  - Royal College of Physicians and Surgeons of Canada (RCPSC)
  - Medical product and equipment companies
  - Specialist physician association foundations
  - Private medical foundations (particularly in connection with research)
  - Quebec health research fund (*Fonds de recherche du Québec – Santé*, or FRQS)
  - Hospitals hosting you (department or other)
  - Canadian Institutes of Health Research (CIHR)
  - Universities
- Grants from the department to which you will be returning after your fellowship
- Bank loans

Some further tips

- Obtain confirmation of your notice of appointment (PEM) before you leave, if possible;
- Plan prior visits to the team with whom you hope to perform your fellowship;
- Take steps to agree on funding sources available here and abroad;
- Acquire certified true copies of your diplomas and other academic documents. You might have to demonstrate that you are a licentiate of the Medical Council of Canada and, in some cases, that you have passed the United States Medical Licensing Examination (USMLE), depending on the requirements of the state concerned;
- Ensure you have an up-to-date passport, and obtain your visitor's visa;
- Obtain your permit to practise from the country or U.S. state concerned;
- Take out malpractice insurance coverage consistent with the requirements of the further training site.

FINANCIAL INCENTIVES IN NON-FM SPECIALTIES ON STARTING OUT IN PRACTICE

Specialist physicians who choose to set up in remote and isolated regions have their remuneration increased. Availability premiums are also offered. In addition, professional development and retention premiums, enhancement bonuses, and establishment and maintenance premiums are awarded by the Ministry. These vary depending on the practice location. The annual maintenance premium cannot exceed the amount of an annual bursary and varies in line with the length of retention, the isolated area in question, and available regional budgets. Each establishment and maintenance premium comes with the obligation for the physician to practise for one year in an area with an insufficient supply of physician resources. Some enjoy additional benefits, such as annual remote area/isolation bonuses depending on the physician's personal situation—spouse, number of children, etc.—home leave expenses, and moving expenses.

Isolated areas

Specialist physicians at all times receive 145% of their basic remuneration for the services they provide in these areas, whether in a context of itinerancy, support, or replacement, in an office, or in an establishment in isolated areas defined as sectors 3, 4 and 5 in Appendix 20 of the Master Agreement, and at the Chibougamau health centre.

Remote areas

A more advantageous increase over the basic remuneration is provided for specialist physicians who practise primarily in an establishment on a regular, ongoing basis in the different territories, as specified in Article 1.2.4 of Appendix 19 of the (French only) FMSQ-MSSS Master Agreement, which may be downloaded at: www.ramq.gouv.qc.ca/SiteCollectionDocuments/professionnels/manuels/syra/medecins-specialistes/154-brochure-1-specialistes/Specialistes_Brochure_no1.html.

In 2024, following a comprehensive assessment of its carbon footprint over 12 months, the Federation decided not only to offset double the 196 tons of pollutant emissions to achieve carbon neutrality, but also to go further through an additional environmental investment. Organizations to which FMRQ contributed are: *Carbone boréal, CarboneScol'ÈRE* educational credits, the *Planetair Mondialportfolio* and the *Adopte un lac* campaign.

3.

PRACTICE

REGULAR PERMIT

If you are planning to complete your training on June 30 of the current year, you must submit your permit to practise application to the *Collège des médecins du Québec* (CMQ) **no later than May 1, 2026**. The CMQ requires applications to be submitted early enough to ensure it is able to issue permits to practise to all terminating residents in time for their start of practice, July 1. This application is completed online.

Steps

Permit application

- Complete the form available at www.inscriptionmed.ca;
- Send the Collège all the documents required on the form, along with a cheque for the permit to practise application ($875 in 2025-2026);
- An additional $175 fee is added if you receive a second specialist certificate (Internal Medicine + Cardiology), and if you hold a regular permit in family medicine and obtain a specialist certificate;
- **For further details on the rates for 2025-2026 (effective April 1, 2025), consult the Collège site at** www.cmq.org/page/fr/grille-tarifs.aspx.

Registration on the Collège membership roll

- You will receive your permit number by email;
- When you have received it, you must complete the notice of assessment form (First registration on the membership roll) available online at www.cmq.org/page/fr/premiere-inscription-au-tableau.aspx;
- Include payment (by cheque or credit card) in the amount of the annual membership fee ($1,938.00 as at April 1, 2025). Those registering after July 1 pay reduced fees, while those registering after October 1 pay about half the annual fee.
- Your permit will be forwarded to you no less than one week before the scheduled date for completion of your training;
- A $35 fee is payable for registration with the Quebec Professions Board (*Office des professions*);
- **In the event you fail the exam**, the CMQ will reimburse you for the payment made to have the permit issued;
- Certificate of professional conduct, where required ($107);
- For any question concerning the permit to practise from the *Collège des médecins du Québec*, **email demandepermis@cmq.org or call 514-933-4253**.

Malpractice insurance

- You absolutely must take out malpractice insurance when you start out in practice;
- To do so, you must get in touch with the Canadian Medical Protective Association (CMPA) via www.cmpa-acpm.ca. Tariffs are established on the basis of your specialty and the region (Quebec-Ontario-Other) where you will be practising. For details on how to apply for coverage, consult the CMPA site at: www.cmpa-acpm.ca/en/become-a-member/how-to-apply;
- The insurance coverage you had during your residency terminates when you have completed your training, but remains valid for any legal action associated with a medical act performed during your residency, for your entire career.

ALDO-Quebec (mandatory training)

To obtain your permit, you also have to have attended a three-hour ALDO-Quebec training session, given by the *Collège des médecins du Québec*, on the **legal, ethical, and organizational aspects of medical practice in Quebec**. This training is mandatory for doctors wishing to practise in Quebec. It is available in French only and can be taken at any time during residency. It is given twice a month, in the three university cities (Montreal, Quebec City, and Sherbrooke). The cost of this training is $195 (2025-2026). For a list of dates and locations and to register, visit the *Collège* site at www.cmq.org/fr/acceder-a-la-profession/demande-de-permis/aldo-quebec. You must register at least one month prior to the training activity to avoid additional fees.

Billing

For billing purposes, you must register with the Quebec Health Insurance Board (RAMQ). When you have obtained your permit number, the Collège will send that information to RAMQ, which will then send you a letter with a personal identification number (PIN) that you will be able to use to register online for the Board's fee payment services. To complete your registration, you will also have to provide them with a copy of your malpractice insurance certificate.

For those deferring the start of their practice (fellowship or other)

You can obtain your regular permit to practise as soon as you complete your training, if you wish, without registering on the Membership Roll or paying your membership fees, if you do not intend to practise in Quebec immediately. In that case, the only fees you will have to pay will be those associated with obtaining the permit to practise. The permit is paid for only once, at the start of practice.

For further information and to access the forms, go to the *Collège* site at www.cmq.org and click on *Pour accéder à la profession/Demande de permis*. You may also get in touch with the CMQ Permits Section by calling 514-933-4253 or 1-888-MEDECIN, or emailing demandepermis@cmq.org.

MOONLIGHTING

Moonlighting is reserved for resident doctors holding a first certification for which they can seek a regular permit to practise. **That means PGY-3s in Family Medicine, PGY-5s in Internal Medicine and Pediatrics, and PGY-6s and higher who have completed their residency and are on fellowships**. To obtain their regular permit to practise, eligible resident doctors should apply to the Permits Section of the Collège des médecins du Québec.

Resident doctors holding a regular permit who take advantage of this opportunity can perform moonlighting in all Quebec establishments with a PEM that is not full, except the establishment where they are on rotation at that time. This rule stems from the *Act respecting health services and social services*, which stipulates that a doctor cannot have dual status in a healthcare facility. Furthermore, if you perform a fellowship and already hold a PEM in a Quebec healthcare facility, you may perform moonlighting on your own PEM, provided it is in effect before the date on which you ultimately start your practice.

In addition to the permit to practise, you must take out **supplementary malpractice insurance** with the Canadian Medical Protective Association (CMPA) if you perform moonlighting, because the insurance coverage you have for your residency is not valid for moonlighting. You will find information about this on the CMPA site at www.cmpa-acpm.ca (click on the My Membership tab). You will also have to register with the Quebec Health Insurance Board (RAMQ), which you will bill for medical acts performed and other charges, in line with the tariffs in effect for physicians in your specialty and the billing mode agreed upon within the department (fee-for-service, mixed, etc.). For further information on establishments' needs if you are in family medicine, consult the provincial *Centre national Médecins-Québec* (CNMQ) website or call the *Fédération des médecins omnipraticiens du Québec* at 514-878-1911 or 1-800-361-8499 for information concerning locums. For those of you training in another specialty, *Santé Québec* publishes a list of establishments with major resource needs (*établissements en besoin important d'effectifs*, or EBI) which outlines needs in the medical and surgical disciplines in different Quebec facilities.

IMPORTANT

When you have received your permit to practise, you must use this practice number when you perform moonlighting. When you are on rotation, you use your resident doctor registration number (R-XXXXX).

To access the **list of establishments with major physician resource needs** (*établissements en besoin important d'effectifs médicaux*, or EBI), conduct an Internet search for "*PEM en spécialité*" and select that item.

In line with our Policy for Socially and Ecologically Responsible Action, the *Bulletin* is no longer automatically mailed out to members. An electronic version is available at all times via the FMRQ's mobile app and on our website.

If you no longer wish to receive the Bulletin by mail, please let us know via the FMRQ's mobile app. To do so, click on the **Resources** tab at the bottom of the screen, then on ***Bulletin*, a theme-based publication designed for you**, then on **I no longer wish to receive the *Bulletin* by mail**.

MANDATORY CONTINUOUS EDUCATION FROM START OF MOONLIGHTING, AND MAINTENANCE OF PROFICIENCY

Since January 1, 2019, all physicians registered as active members on the *Collège* membership roll have been subject to the CMQ's mandatory continuous education regulation (*Règlement sur la formation continue obligatoire des médecins:* www.legisquebec.gouv.qc.ca/fr/document/rc/M-9%2C%20r.%2022.1%20/), from the day of their registration. Activities carried out before that date are not counted in the continuous education declaration. Physicians have to complete (and declare to the CMQ) each year 25 hours of recognized continuous education, no later than March 31 of the following year, as well as 250 hours for the 5-year period from 2024-01-01 to 2028-12-31). This period is fixed; for registrations taking place after the period has begun, the requirements are adjusted downward.

Details of the requirements are as follows:

I) Annual requirements (January 1 to December 31): **25 hours** of recognized professional development activities (Category A) or recognized practice assessment activities (Category B), **and**

II) IPeriodic requirements over 5 years (January 1, 2024 to December 31, 2028): **250 hours** of continuous education activities, including :
   i) At least **125 hours** of Category A, and
   ii) At least **10 hours** of Category B, and
   iii) **115 hours** of Category C (other eligible activities). If the total number of hours declared in Categories A and B reaches 250, no Category C activities need to be declared.

Each physician has to declare his continuous education activities on the CMQ website, in line with the terms and conditions of the regulation. For doctors participating in another program (My MOC at the RCPSC, Mainpro+ at the CFPC/QCFP) or using PADPC at the FMOQ or MÉDUSE at the FMSQ, this declaration may be made via transfer of activities from one of the external platforms to the CMQ. Anyone taking advantage of this option has to initiate this transfer themselves, and confirm its result.

Waiver

A waiver for the start of professional practice may be granted, on request, to a physician who has pursued postgraduate education or a fellowship/additional training in a program accredited by the *Collège des médecins du Québec*, College of Family Physicians of Canada, Royal College of Physicians and Surgeons of Canada, or Accreditation Council of Graduate Medical Education (ACGME) for at least six months during the same calendar year.

A waiver may also be granted to a physician who, while registered on the Collège membership role as an active member, is pursuing postgraduate education or a fellowship/additional training. Other grounds for granting waivers include: maternity, paternity, or parental leave; or a medical reason entailing complete cessation of professional activities.

A guide concerning continuous education waivers along with the necessary form become available via the Accès M.D. tab on the CMQ home page on the day of registration on the *Collège* membership roll. For any questions concerning the continuous education declaration, email fco@cmq.org.

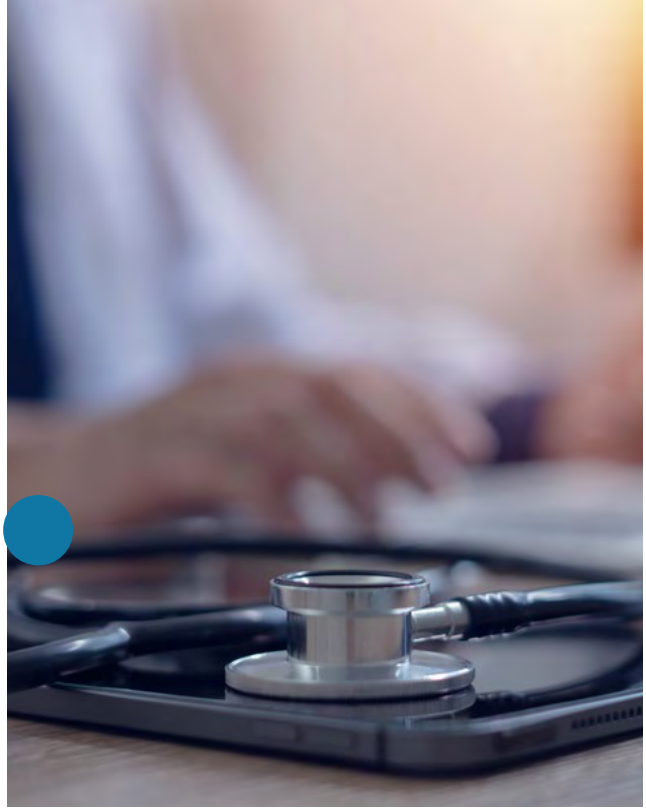
FÉDÉRATION DES MÉDECINS RÉSIDENTS DU QUÉBEC

THE FMRQ MOBILE APP, A MUST!

Available on the App Store

GET IT ON Google Play

4.



CERTIFICATION EXAMS

FAMILY MEDICINE

For information concerning family medicine exam dates and fees, consult the College of Family Physicians of Canada (CFPC) site at www.cfpc.ca/en/home under Exams, Education & CPD/Examinations and Certification. Keep an eye on the site and your electronic inbox for more information in that regard.

OTHER SPECIALTIES

To find out the deadlines for registering for non-FM specialty exams and forwarding your applications for preliminary assessment or an application for final assessment, go to the Royal College of Physicians and Surgeons of Canada (RCPSC) site at www.royalcollege.ca and click on the *Eligibility & Exams* tab, followed by *Exam* process, then *Assessment and exam fees*. First, you will have to submit an application to the RCPSC for assessment of your postgraduate education. To do so, you must contact the Royal College Credentials Unit at least one year before sitting the exams. Submit your application well before the deadline for your specialty, so as to avoid late payment fees. The assessment usually takes six months, but can take longer, and there are fees associated with it. On the Royal College website (www.royalcollege.ca), click on the *Eligibility & Exams* tab. The spring and fall 2026 exam schedule is available on the site.

Exam accommodation

The Royal College will attempt to accommodate candidates with specific requirements for the examination provided that the validity of the examination is maintained. Accommodations will be granted on an individual basis and depend on the nature and extent of the special requirement, documentation provided, and the requirements of the examination. **Applicants who require particular consideration or accommodation at the examination must notify the Office of Specialty Education by November 4, for the spring examinations, or April 15, for the fall exams.** For further information, consult the Royal College site. For access to exam accommodations, candidates must provide the following documents to the Royal College by the registration deadline:

- A signed letter with a description of your need for accommodation and its severity, along with a description of the type of accommodation required;
- Documentation of the accommodations provided by your university or other medical education programs, if you have been granted previous accommodations;
- Supporting documentation from a qualified treating professional confirming the need for accommodation, its severity, your functional limitations and specific recommendations for the accommodation. All supporting documentation must be provided on office letterhead, from your fully licensed practising physician, clinical psychologist, or other appropriate licensed health care provider (the practitioner cannot be a relative or spouse);
- Written confirmation is required from a qualified professional that your functional limitations are still valid should the supporting documentation be more than two years old.

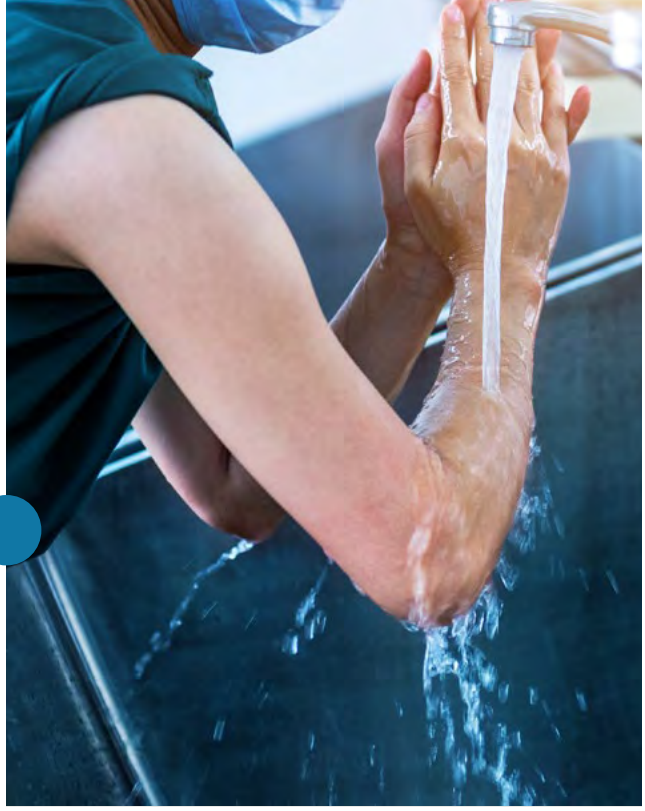
PREGNANCY LATE IN RESIDENCY AND FINAL EXAMS

Maternity or paternity leave involves extending the residency program by a period of time equivalent to the duration of the leave. In such a case, we suggest you bear in mind the specific rules of the *Collège des médecins du Québec* and the Canadian colleges concerning exam dates for certification in specialties and family medicine.

HELPFUL TIP: BEWARE OF PROMISES

Do not count on positions promised by your staff physicians or department heads. Even if these promises are made in good faith, if there is no PEM available in the facility or establishment concerned, you will not have access to the position you seek.

5.



REMUNERATION AND BILLING

MODES OF REMUNERATION

Different modes of remuneration have been adopted in Quebec, both in family medicine and in other specialties: **fee-for-service, fixed fee, hourly rate, lump sum, per diem, mixed (fee-for-service + per diem), and salary**. There is also remuneration geared specifically to research scientists in specialties. Normally, you will be subject to the remuneration mode in effect in your chosen practice setting. For instance, salary is the mode in effect in CLSCs, while mixed remuneration is seen in certain specialties, depending on the establishment. Make sure that the mode of remuneration in effect in the establishment or clinic you wish to be associated with suits you.

REGISTRATION WITH RAMQ

In order to receive this remuneration, you will have to register with the Quebec Health Insurance Board (RAMQ) as a new biller. When the *Collège des médecins du Québec* (CMQ) grants you your permit to practise, you will receive a note from RAMQ with a personal identification number (PIN) to register online with the RAMQ fee payment department. If you already hold a regular permit associated with a first certification, you will have to modify your status so you can bill in your subspecialty. You can register or make changes by completing the French-only form available on the RAMQ site (www.ramq.gouv.qc.ca/fr/professionnels), in the *Services aux professionnels* section. This registration serves to confirm your practice location and your address for correspondence for payment purposes.

FMOQ AND FMSQ MASTER AGREEMENTS

The amounts allocated for family doctors and specialist physicians are based on the Master Agreements between the Ministry and the *Fédération des médecins omnipraticiens du Québec* (FMOQ) and Fédération *des médecins spécialistes du Québec* (FMSQ), respectively. You may consult the billing guide and all the associated letters of understanding on the RAMQ site: go to *Services aux professionnels*, click on *Médecins omnipraticiens or Médecins spécialistes*, and then on *Facturation*.

JOINING THE *FÉDÉRATION DES MÉDECINS SPÉCIALISTES DU QUÉBEC*

Technically, you do not have to do anything to join the *Fédération des médecins spécialistes du Québec*. We strongly recommend, however, that you send a valid email address to the FMSQ (info@fmsq.org) or your medical association a few weeks before you start practising in specialized medicine, to ensure that your personal information is up to date.

Your membership in the FMSQ will take place automatically as soon as you practise in the Quebec public health system and are paid by RAMQ. In fact, once you start invoicing acts as a specialist physician, RAMQ will deduct the membership fees and forward them to the FMSQ. Note, however, that there is a one-month delay between when you start invoicing and when the FMSQ receives your first fees, so you will become an active member of that Federation only the month following your first fee payment.

JOINING THE *FÉDÉRATION DES MÉDECINS OMNIPRATICIENS DU QUÉBEC*

The FMOQ is a group of legally autonomous associations. You must contact your regional association to become a member in good standing of the FMOQ and benefit from your association's services. You will then be able to vote in the FMOQ presidential elections and ratify framework agreements relating to the renewal of the General Agreement. To become a member, you must go through the membership process put forward by each of the affiliated associations. You must therefore contact the association in your geographical area. For physicians working in CLSCs, you can contact the Association of CLSC Physicians of Quebec (AMCLSCQ).

BILLING AGENCIES

Most practising physicians use the services of billing agencies to help them in this regard. A list of such agencies (www.ramq.gouv.qc.ca/fr/professionnels/agence-facturation/liste-agences-facturation) is available on the RAMQ site, in the section reserved for professionals. You may also consult colleagues in your department, who will be able to advise you on this.

RESEARCH SCIENTISTS IN SPECIALTIES

The conditions of remuneration for research scientists in specialties take into account the average annual remuneration in the specialties of the research scientists concerned. This remuneration is equivalent to the percentage of time devoted to research (50% of time devoted to research = 50% of average annual remuneration in the specialty concerned). The doctor can also bill RAMQ for clinical activities on a fee-for-service basis. But the total remuneration that can be received by a physician for his clinical and research activities is limited to 110% of the average for his specialty. For further details, contact the FMSQ by calling 514-350-5000 or 1-800-561-0703, or emailing info@fmsq.org.

MALPRACTICE INSURANCE

Upon completion of your residency, you will cease to be covered by the malpractice insurance included in the FMRQ's collective agreement, so you will have to take out coverage with another organization. Most physicians in Canada are insured by the Canadian Medical Protective Association (CMPA). You can sign up with the CMPA by telephone, fax or email. Registration procedures and forms along with a list of current rates for each specialty are to be found on the CMPA site at www.cmpa-acpm.ca, under Membership. We suggest you take steps at least one month before the end of your residency, to make sure you are covered as soon as you start your autonomous practice. Note that, while premiums are high, on the basis of risk, particularly in certain specialties, part of this cost is reimbursed by the Quebec Health Insurance Board (RAMQ) under clauses in the FMOQ and FMSQ Master Agreements.

Coverage for acts performed during residency

We remind you that the malpractice insurance you had during your residency will cover you for life for any medical act performed during residency for which legal action is taken against you in the future. Only complaints of an administrative nature filed with the *Collège des médecins du Québec* (CMQ) or a hospital are not covered by this insurance after the end of your residency.

INCORPORATION

Physicians wishing to incorporate their practice are subject to different rules that are explained in the *Guide sur l'exercice de la profession médicale en société* (Guide on Practising the Medical Profession Within a Partnership or a Company), which is available, in French only, on the CMQ site at www.cmq.org/fr/pratiquer-la-medecine/exercice-societe. But that guide does not cover the accounting, legal, and fiscal aspects in any depth, in view of the large variety of situations that can arise. Incorporation offers two advantages: **tax deferral** through a corporation, since the tax rate on operating revenues is beneficial; and **income splitting**, notably payment of a dividend to the spouses and children 18 or over, leading to taxation in a lower bracket. For further information, get in touch with Professionals' Financial (fdp Private Wealth Management) and ask to speak with one of the advisors dedicated to young professionals, by emailing www.fprofessionnels.com/en/contact-us or calling one of the following numbers:

Montreal	514-350-5050 or 1-888-377-7337
Quebec City	418-658-4244 or 1-800-720-4244
Sherbrooke	819-564-0909 or 1-866-564-0909

EXTENDING LIFE, HEALTH, AND DISABILITY INSURANCE COVERAGE

Your group insurance coverage as a resident doctor with Beneva (formerly La Capitale) **will be deactivated at midnight on your last day of residency**. In order to comply with the Act respecting prescription drug insurance, you are **required thereafter to take out insurance coverage with any organization or federation (FMOQ or FMSQ) offering a group insurance plan for which you become eligible**.

For specialist physicians and family physicians, SOGEMEC Assurances offer a group drug insurance program along with life insurance, disability insurance, and office overhead insurance, without proof of good health, if you take out coverage within 180 days after you receive your permit to practise. For further information, call **SOGEMEC Assurances** at 514-350-5070 or 1-800-361-5303.

AUTOMOBILE AND HOME INSURANCE

Through our agreement with **TD Insurance**, you enjoy beneficial group rates as well as high-quality home and automobile insurance products. These services can be maintained or modified to suit you once you have completed your residency. For further information, call 514-384-1112 or 1-800-339-1847 or visit their site at www.tdinsurance.com/affinity/fmrq.

FINANCIAL SERVICES

The banking packages offered by RBC and Desjardins were specially designed to meet your needs during residency, but also in a perspective of continuity for the future. Those of you taking advantage of the package for resident doctors or any other benefit offered by these banking institutions will be able to maintain those services or modify them. To do so, you will have to contact your banking institution directly.

For RBC, call 1-800-80-SANTE (1-800-807-2683). You can also consult their website at www.rbcroyalbank.com/healthcare-financial-solutions/medical-dental-residents.html.

For Desjardins, call 514-875-4266 or 1-877-875-1118 or consult their website at www.desjardins.com/fmrq.

INCOME TAX

During residency, tax on your income was deducted at source by the employer. But during your first year of practice, you will receive pay from two different sources, owing to your change in status, part as an employee and part self-employed. So you must plan on setting aside an amount to cover the income tax for the second part of this first year of practice, where generally speaking you will be paid on a fee-for-service basis or through a hybrid formula. In addition, new deductions will be added, notably for books and scientific journals, participation in conferences, certification exam fees paid in the final year of training, and so on, and this could reduce your taxable income. In this context, we strongly suggest you call upon specialized resources, who will be able to advise you in this regard.

MATERNITY, PATERNITY, AND ADOPTION LEAVE WHILE IN PRACTICE

When you start out in practice, you will have access through the FMOQ and FMSQ to a paid maternity leave program.

For family physicians

Any family physician paid for all or part of his or her practice on a fee-for-service, hourly-rate, fixed-fee, or per-diem basis who has been practising for at least 20 weeks under the Quebec health insurance plan for services delivered in Quebec and expects to give birth or adopt is eligible for a maximum of 21 weeks' leave. Different conditions apply for doctors paid on a fixed honorarium. To find out more about maternity and adoption (fmoq.s3.amazonaws.com/pratique/etapes-de-carriere/ANNEXE_XVI-Allocation-Conge-de-maternite-ActeEtTH.pdf) leave for family physicians, you may consult the French-only FMOQ site. If you have any other questions, call the FMOQ at 514-878-1911 or 1-800-361-8499.

For specialist physicians

The FMSQ has offered a parental leave compensation program since 2011. The doctor has to have practised for a minimum of 10 weeks over the 12 months preceding the start of the leave. The benefit payable is applied over a maximum period of 12 weeks for maternity leave and 6 weeks for adoption or paternity leave. For more information on the benefits offered to specialist physicians on the birth or adoption of a child, you may consult the Ministry site, at www.ramq.gouv.qc.ca/fr/professionnels/medecins-specialistes/evenements-carriere/Pages/maternite-adoption.aspx or call the FMSQ at 514-350-5003.

Specialist physicians are entitled to a basic weekly benefit equivalent to 67% of their average weekly earnings from practice, up to a maximum of $3,000 per week. For specialist physicians with an active practice in a private office, there is an additional weekly benefit equivalent to 33% of their average weekly earnings from practice in an office, up to a maximum of $1,500 per week. This does not, however, apply to resident doctors with a valid PGY-5 or higher training card who hold a regular permit, since they are covered by the terms and conditions of the FMRQ collective agreement through the Quebec Parental Insurance Plan. Information on this is available on our site at www.fmrq.qc.ca and is explained in detail in the Interpretation Guide to the FMRQ-MSSS Collective Agreement.

INFORMATION SOURCES

FMRQ Career Day

The FMRQ holds its Career Day each year in the fall. **In 2025, the event took place on September 19, at Montreal's *Palais des congrès* convention centre**, with some 1,000 resident doctors taking part. All residents are released to attend this medical employment fair, which brings together most Quebec healthcare establishments, with no financial penalty and no penalty with respect to the validity of their current rotation (75%), pursuant to our collective agreement and an arrangement with the Quebec Conference of Associate Deans for Postgraduate Medical Education.

Family Medicine Resident Symposium

The Family Medicine Resident Symposium focusses on the process of obtaining a position in family medicine (PTEM) or a PEM in a hospital setting. It also gives participants an opportunity to learn about steps to be taken on starting out in practice. It is a yearly event, organized in conjunction with Fonds FMOQ since 2025. The event is aimed both at PGY-1s and those completing family medicine residency, who are released from their clinical duties with no financial or academic penalty in order to attend.

FMRQ Presentation Tour on positions (PEMs) in specialties

The FMRQ also offers presentations for resident doctors in non-FM specialties on the positions available and the procedure for obtaining a PEM. To confirm a presentation, email Johanne Carrier at tournee-pem-sp@fmrq.qc.ca.

Ministry of Health and Social Services (MSSS) website

Information on all positions contained in the physician resource plans (PEMs) is available at all times on the MSSS website, which is accessible through the FMRQ site at www.fmrq.qc.ca, by clicking on the Positions (PEMs/PTEMs) tab, then on Family Medicine or Other Specialties. The information on the MSSS site is updated at the beginning of each month. The five-year plan for non-FM specialties which came into effect in December 2020 is posted on the Ministry website at www.msss.gouv.qc.ca/professionnels/medecine-au-quebec/plans-d-effectifs-medicaux-pem-en-specialite/#postes-disponibles-medecine-specialisee. A new three-year plan for 2026-2028 will be available on the Ministry site from December 1, 2025.

***Fédération des médecins résident·e·s du Québec* website**

All information about obtaining a position in Quebec may be found on the FMRQ website at www.fmrq.qc.ca, by clicking on the Positions (PEMs/PTEMs) tab, then on Family Medicine or Other Specialties.

Personalized service from the FMRQ

Resident doctors seeking a position or looking for information concerning positions available in Quebec and the process for obtaining a PEM or PTEM in their discipline can email the FMRQ directly.

For positions in family medicine, email Geneviève Coiteux at ptem-mf@fmrq.qc.ca.

For positions in other specialties, email Johanne Carrier at pem-sp@fmrq.qc.ca.

SECTORS AND TERRITORIES FOR BILLING PURPOSES

DIFFERENTIAL PAY FOR SPECIALIST PHYSICIANS			
SECTORS III, IV, V	145%	TERRITORY 3	125%
TERRITORY 5	145%	TERRITORY 2	115%
TERRITORY 4	130%	TERRITORY 1	107%

SECTORS III, IV, V

TERRITORY 5

Région de l'Abitibi-Témiscamingue.
Région de la Côte-Nord, à l'exception des localités du secteur III des territoires isolés.
Région de la Gaspésie–Îles-de-la-Madeleine.
Localités des secteurs I et II qui ne sont pas comprises dans les territoires isolés précédents, à l'exception du Centre de santé Chibougamau.

TERRITORY 4

Dans la région du Saguenay–Lac-Saint-Jean, le territoire du CLSC Maria-Chapdelaine.
Dans la région du Bas-Saint-Laurent, les territoires de CLSC de Cabano,Saint-Éleuthère, Rimouski-Neigette, La Mitis, Les Basques, Matane et La Matapédia.
Dans la région de l'Outaouais, les territoires de CLSC Pontiac et Des Forestiers.
Dans la région des Laurentides, le territoire de CLSC Antoine-Labelle.
Dans la région de la Mauricie–Centre-du-Québec, le territoire de CLSC Haut-Saint-Maurice, à l'exception des localités de ce territoire comprises dans le secteur II.

TERRITORY 3

Dans la région du Saguenay–Lac-Saint-Jean, les territoires de CLSC Domaine-du-Roy et Lac-Saint-Jean Est.
Dans la région du Bas-Saint-Laurent, les territoires de CLSC de Kamouraska et de Rivière-du-Loup.

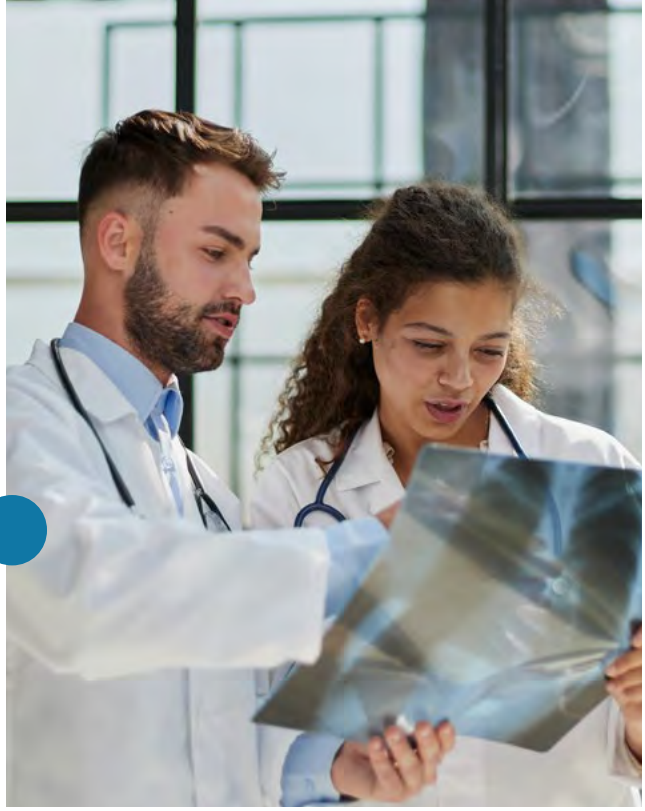
TERRITORY 2

Dans la région du Saguenay–Lac-Saint-Jean, les territoires de CLSC Saguenay, Jonquière, Chicoutimi et Fjord.

TERRITORY 1

Dans la région de la Mauricie–Centre-du-Québec, le territoire du CLSC Haut-Saint-Maurice.
Dans la région de l'Outaouais, les territoires de CLSC Les Collines-de-l'Outaouais, Aylmer, Hull, Gatineau, Vallée-de-la-Lièvre et Petite-Nation.
Dans la région de Québec, les territoires de CLSC Charlevoix-Ouest et Charlevoix-Est.
Dans la région de Chaudière-Appalaches, les territoires de CLSC de Montmagny, L'Islet, Lotbinière, L'Amiante, La Nouvelle-Beauce, Robert-Cliche, Beauce-Sartigan et Lac-Etchemin.
Dans la région de la Montérégie, le territoire de CLSC Bas-Richelieu.
Dans la région de l'Estrie, le territoire CLSC Granit.

6.



LES ANNEXES
APPENDICES

LISTE DES COLLÈGES ÉMETTANT DES PERMIS D'EXERCICE AU CANADA
CANADIAN REGULATORY AUTHORITIES DISTRIBUTING MEDICAL LICENSES

ALBERTA
College of Physicians and Surgeons of Alberta (CPSA)
2700 - 10020 100 Street N.W.
Edmonton, AB T5J 0N3
T : 780 423-4764
T : 1 800 561-3899
registration@cpsa.ab.ca
www.cpsa.ca

COLOMBIE-BRITANNIQUE
College of Physicians and Surgeons of British Columbia (CPSBC)
300 - 669 Howe Street
Vancouver, BC V6C 0B4
T : 604 733-7758
T : 1 800 461-3008
F : 604 733-3503
registration@cpsbc.ca
www.cpsbc.ca

ÎLE-DU-PRINCE-ÉDOUARD
College of Physicians and Surgeons of Prince Edward Island (CPSPEI)
14 Paramount Drive
Charlottetown, PE C1E 0C7
T : 902 566-3861
F : 902 566-3986
info@cpspei.ca
www.cpspei.ca

MANITOBA
College of Physicians and Surgeons of Manitoba (CPSM)
1000 - 1661 Portage Ave
Winnipeg, MB R3J 3T7
T : 204 774-4344
T : 1 877 774-4344
cpsm@cpsm.mb.ca
www.cpsm.mb.ca

NOUVEAU-BRUNSWICK
College of Physicians and Surgeons of New Brunswick (CPSNB)
1 Hampton Road, Suite 300
Rothesay, NB E2E 5K8
T : 506 849-5050
T : 1 800 667-4641
F : 506 849-5069
info@cpsnb.org
www.cpsnb.org

NOUVELLE-ÉCOSSE
College of Physicians and Surgeons of Nova Scotia (CPSNS)
Suite 400 – 175 Western Parkway
Bedford, NS B4B 0V1
T : 902 422-5823
T : 1 877 282-7767
registration@cpsns.ns.ca
www.cpsns.ns.ca

NUNAVUT

Registrar, Health Professions, Department of Health, Government of Nunavut
P.O. Box 390,
Kugluktuk, NU X0B 0E0
T : 1 867 982-7668 **or** 1 867 982-7655
F : 1 867 982-3256 **or** 1 867 982-7640
hssnunavutregistrar@gov.nu.ca
www.gov.nu.ca/health/information/health-professionals-0

ONTARIO

College of Physicians and Surgeons of Ontario (CPSO)
80 College Street
Toronto, ON M5G 2E2
T : 416 967-2600
T : 1 800 268-7096 ext. 617
inquiries@cpso.on.ca
www.cpso.on.ca

QUÉBEC

Collège des médecins du Québec (CMQ)
Bureau 3500
1250, boulevard René-Lévesque Ouest
Montréal (Québec) H3B 0G2
T : 514 933-4441
T : 1 888 MÉDECIN
F : 1 514 933-3112
info@cmq.org
www.cmq.org

SASKATCHEWAN

College of Physicians and Surgeons of Saskatchewan (CPSS)
101 - 2174 Airport Drive
Saskatoon, SK S7L 6M6
T : 306 244-7355
T : 1 800 667-1668
F : 306 244-7355 (Registration/Licensing)
cpssreg@cps.sk.ca
www.cps.sk.ca

TERRE-NEUVE ET LABRADOR

College of Physicians and Surgeons of Newfoundland (CPSNL) **and Labrador**
120 Road, Suite Torbay W 100
St. John's, NL A1A 2G8
T : 709 726-8546
F : 709 726-4725
cpsnl@cpsnl.ca
www.cpsnl.ca

TERRITOIRES DU NORD-OUEST

Department of Health and Social Services, Government of the Northwest Territories
Professional Licensing
P.O. Box 1320
Yellowknife, NT X1A 2L9
T : 855 846-9601
professional_licensing@gov.nt.ca
www.hss.gov.nt.ca/fr

YUKON

Conseil médical du Yukon
Registraire des médecins praticiens
Boîte 2703 C18
Whitehorse, Yukon Y1A 2C6
T : 867 667-3774
ymc@gov.yk.ca
www.yukonmedicalcouncil.ca

VOUS CHERCHEZ UN PTEM OU UN PEM ?
VOUS VOULEZ PLUS D'INFORMATION SUR LES RÈGLES DE GESTION ?

Postes disponibles en médecine familiale
www.msss.gouv.qc.ca/professionnels/medecine-au-quebec/prem/places-disponibles-medecine-de-famille/

Postes disponibles dans les autres spécialités
https://www.quebec.ca/gouvernement/travailler-gouvernement/sante-services-sociaux/travailler-comme-medecin-specialiste-quebec#c377650

LES RESSOURCES ET ORGANISMES EN LIEN AVEC LA PRATIQUE DE LA MÉDECINE
RESOURCES AND ORGANIZATIONS RELATED TO MEDICAL PRACTICE

Association canadienne de protection médicale (ACPM)
***Canadian Medical Protective Association** (CMPA)*
T : 613 725-2000 **ou** 1 800 267-6522
renseignements@cmpa.org
www.cmpa-acpm.ca

Assurance Beneva
Beneva Insurance
T : 1 800 463-4856
www.beneva.ca/fr/regroupement

Collège des médecins du Québec (CMQ)
T : 514 933-4441 **ou** 1 888 633-3246
info@cmq.org
www.cmq.org
Section des permis
T : 514 933-4253 **ou** 1 888 633-3246 poste 4253
demandepermis@cmq.org

Collège des médecins de famille du Canada (CMFC)
College of Family Physicians of Canada
T : 905 629-0990 **ou** 1 800 387-6197
www.cfpc.ca

Collège royal des médecins et chirurgiens du Canada (CRMCC)
***Royal College of Physicians and Surgeons of Canada** (RCPSC)*
T : 613 730-8177 **ou** 1 800 668-3740
www.royalcollege.ca/fr/about/help

Départements territoriaux de médecine de famille (DTMF)
fmoq.org/pratique/installation-en-pratique/liste-des-dtmf/

Fédération des médecins omnipraticiens du Québec (FMOQ)
T : 514 878-1911 **ou** 1 800 361-8499
info@fmoq.org
www.fmoq.org

Fédération des médecins résident·e·s du Québec (FMRQ)
T : 514 282-0256 **ou** 1 800 465-0215
info@fmrq.qc.ca
www.fmrq.qc.ca
Mme Geneviève Coiteux, PTEM/PEM en MF ptem-mf@fmrq.qc.ca
Mme Johanne Carrier, PEM Autres spécialités pem-sp@fmrq.qc.ca

Fédération des médecins spécialistes du Québec (FMSQ)
T : 514 350-5000 **ou** 1 800 561-0703
info@fmsq.org
www.fmsq.org

Fonds de la recherche du Québec - Santé (FRQS)
T : 514 873-2114 **ou** 1 888 653-6512
www.frqs.gouv.qc.ca

Groupe Desjardins
T : 514 522-4771 ou 1 877 522-4773
www.desjardins.com/fmrq

fdp Gestion privée
Montréal **T :** 514 350-5050 **ou** 1 800 377-7337
Québec **T :** 418 658-4244 **ou** 1 800 720-4244
Sherbrooke **T :** 819 564-0909 **ou** 1 866 564-0909
www.groupefdp.com

Ministère de la Santé et des Services sociaux du Québec (MSSS)
Quebec Ministry of Health and Social Services
www.msss.gouv.qc.ca

RBC
T : 1 800 769-2511
www.rbcbanqueroyale.com/carriere-med

Régie de l'assurance maladie du Québec (RAMQ)
Quebec Health Insurance Board
T : 514 873-3480 ou 418 643-8210 **ou** 1 800 463-4776 **ou** 1 800 561-9749
www.ramq.gouv.qc.ca

Santé Québec
sante.quebec

SOGEMEC Assurances
T : 514 350-5070 **ou** 1 800 361-5303
www.sogemec.qc.ca

TD Assurance Meloche Monnex
T : 1 877 777-7136
www.MelocheMonnex.com/fmrq

LISTE DES DTMF
LIST OF DTMFs

RÉGION 01

CISSS DU BAS-SAINT-LAURENT
DOCTEUR ÉRIC LAVOIE
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288, rue Pierre-Saindon
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F : 418 723-1597
eric.lavoie.0105.cisssbsl@ssss.gouv.qc.ca
cc: premiere.ligne.drmg.DMSP.cisssbsl@ssss.gouv.qc.ca

RÉGION 02

CISSS DU SAGUENAY-LAC-SAINT-JEAN
DOCTEURE MARION DUBOIS
Directrice médicale
2230, rue de l'Hôpital
Jonquière (Québec) G7X 7X2
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marion.dubois.med@ssss.gouv.qc.ca
02.ciusss.drmg@ssss.gouv.qc.ca
cc: ingrid.arneberg.joncas.csssc@ssss.gouv.qc.ca

RÉGION 03

CIUSSS DE LA CAPITALE-NATIONALE
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7843, rue des Santolines, local A153.1
Québec (Québec) G1G 0E3
T : 418 529-0707, poste 2519
F : 418 663-5874
drmg.ciussscn@ssss.gouv.qc.ca

RÉGION 04

CISSS DE LA MAURICIE ET DU CENTRE-DU-QUÉBEC
DOCTEUR PHILIPPE MCNEIL
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phillippe_mcneil.met@ssss.gouv.qc.ca
04equipesoutienpl@ssss.gouv.qc.ca

RÉGION 05

CIUSSS DE L'ESTRIE
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F : 819 829-7153
stephanie.blais-boilard.med@ssss.gouv.qc.ca
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jessica.evans.ciussse-chus@ssss.gouv.qc.ca
francis.beauregard-lepage.med@ssss.gouv.qc.ca

RÉGION 06

CISSS DE MONTRÉAL
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1560, rue Sherbrooke Est, local H-3109
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T : 514 896-3459
F : 514 593-2603
dtmfmontreal@ssss.gouv.qc.ca

RÉGION 07

CISSS DE L'OUTAOUAIS
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135, boul. St-Raymond, bureau 1212
Gatineau (Québec) J8Y 6X7
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marcel_guilbault@ssss.gouv.qc.ca
eliane.disso@ssss.gouv.qc.ca
edith.chartier@ssss.gouv.qc.ca
07_DRMG@ssss.gouv.qc.ca

RÉGION 08

CISSS DE L'ABITIBI-TÉMISCAMINGUE

DOCTEUR JEAN-YVES BOUTET
Directeur médical
1, 9e rue
Rouyn-Noranda (Québec) J9X 2A9
T : 819 764-5131, poste 49336
F : 819 732-6977
jeanyves.boutet.med@ssss.gouv.qc.ca
08.cisssat.drmg@ssss.gouv.qc.ca

RÉGION 09

CISSS DE LA CÔTE-NORD

DOCTEUR ROGER DUBÉ
Directeur médical
635, boul. Jolliet
Baie-Comeau (Québec) G5C 1P1
T : 418 962-9761, poste 452666
roger.dube.09cisss@ssss.gouv.qc.ca
julie.cote.09cisss@ssss.gouv.qc.ca
dtmf.09cisss@ssss.gouv.qc.ca

RÉGION 10

NORD-DU-QUÉBEC

DOCTEURE JOSÉE BRASSARD
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312, 3e rue
Chibougamau (Québec) G8P 1N5
T : 418 748-3575, poste 72472
F : 418 748-6739
josee.brassard.med@ssss.gou.qc.ca
10_drmg@ssss.gouv.qc.ca

RÉGION 11

CISSS DE LA GASPÉSIE ET DES ÎLES-DE-LA-MADELEINE

DOCTEUR SYLVAIN DRAPEAU
Directeur médical
451, rue Monseigneur-Ross Est
Chandler (Québec) G0C 1K0
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sylvain.drapeau.med@ssss.gouv.qc.ca
erika.gagne.cisssgaspesie@ssss.gouv.qc.ca
denis.bujold.cisssgaspesie@ssss.gouv.qc.ca

RÉGION 12

CISSS DE CHAUDIÈRE-APPALACHES

DOCTEURE GENEVIÈVE CARON-FAUCONNIER
Directrice médicale
DOCTEURE ANNIE LANTHIER
Co-directrice médicale
Hôtel-Dieu de Lévis
143, rue Wolfe, bureau 7757
Lévis (Québec) G6V 3W6
T : 418 835-7121
genevieve.caron-fauconnier.med@ssss.gouv.qc.ca
annie.lanthier.med@ssss.gouv.qc.ca
dtmf.cisssca@ssss.gouv.qc.ca

RÉGION 13

CISSS DE LAVAL

DOCTEUR JONATHAN LEFEBVRE
Directeur médical
800, boulevard Chomedey, Tour A
Laval (Québec) H7V 3Y4
T : 450 978-2121, poste 32018
jonathan.lefebvre.med@ssss.gouv.qc.ca
dtmf.cissslav@ssss.gouv.qc.ca

RÉGION 14

CISSS DE LANAUDIÈRE

DOCTEUR HARRY-MAX PROCHETTE
Directeur médical
260, rue Lavaltrie Sud
Joliette (Québec) J6E 5X7
T : 450 759-1157, poste 402440
harry-max.prochette.med@ssss.gouv.qc.ca
drmg.cissslan@ssss.gouv.qc.ca

RÉGION 15

CISSS DES LAURENTIDES

DRE GENEVIÈVE GAUTHIER
Directrice médicale
1, Place de la Gare
Sainte-Eustache (Québec) H7R 2C4
T : 450 473-6811, poste 44483
15-drmg@ssss.gouv.qc.ca

RÉGION 16

CISSS DE LA MONTÉRÉGIE

DOCTEUR MICHEL BRODEUR
Directeur médical
1255, rue Beauregard
Longueuil (Québec) J4K 2M3
dtmf.monteregie@ssss.gouv.qc.ca

RÉGION 17

RÉGION DU NUNAVIK

DOCTEURE GENEVIÈVE AUCLAIR
Directrice médicale
Case postale 900
Kuujjuaq (Québec) J0M 1C0
Centre de santé Inuulitisivik
F : 819 964-2338
genevieve.auclair@ssss.gouv.qc.ca
effectifsmedicaux.nunavik@ssss.gouv.qc.ca

RÉGION 18

CISSS TERRES-CRIES-DE-LA-BAIE-JAMES

DOCTEURE CAROLE LAFOREST
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T : 819 855-9001
C : 514 231-1462
carole.laforest@ssss.gouv.qc.ca

LISTE DES DMSP
LIST OF MDPS's

RÉGION 01

BAS-SAINT-LAURENT

CISSS du Bas-Saint-Laurent
355, boul. Saint-Germain Ouest
Rimouski (QC) G5L 3N2

Dr Richard Bernier
Mme Stéphanie Bernier
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richard.bernier.med@ssss.gouv.qc.ca
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www.cisss-bsl.gouv.qc.ca

RÉGION 02

SAGUENAY—LAC-SAINT-JEAN

CIUSSS du Saguenay—Lac-Saint-Jean
930, rue Jacques-Cartier Est
Chicoutimi G7H 7K9

Dre Marlène Landry
Mme Annie Tremblay
T : 418 541-1234, poste 2512
marlene.landry.chs@ssss.gouv.qc.ca
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CHU de Québec – Université Laval
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www.chudequebec.ca

Institut universitaire de cardiologie et de pneumologie de Québec – Université Laval
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Mme Marthe Lemieux
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CIUSSS de la Capitale-Nationale
2915, avenue du Bourg-Royal
Québec (QC) G1C 3S2

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karine.paquet.ciussscn@ssss.gouv.qc.ca
www.ciusss-capitalenationale.gouv.qc.ca

RÉGION 04

MAURICIE-ET-CENTRE-DU-QUÉBEC

CIUSSS de la Mauricie-et-du-Centre-du-Québec
858, terrasse Turcotte
Trois-Rivières (QC) G9A 5C5

Dr Olivier Roy
Mme Mélissa Daigle
T : 819 357-2030, poste 2787
olivier_roy@ssss.gouv.qc.ca
melissa_daigle@ssss.gouv.qc.ca
www.ciusssmcq.ca

RÉGION 05

ESTRIE

CIUSSS de l'Estrie – Centre hospitalier universitaire de Sherbrooke (CHUS)
500, rue Murray, Sherbrooke J1G 2K6

Dr Adam Frenette
Mme Mélanie Samson
T : 819 822-6738
T : 819 346-1110, poste 22503
adam.frenette.med@ssss.gouv.qc.ca
melanie.samson.ciussse-chus@ssss.gouv.qc.ca
www.santeestrie.qc.ca

RÉGION 06

MONTRÉAL

CIUSSS de l'Ouest-de-l'Île-de-Montréal
160, avenue Stillview
Pointe-Claire (QC) H9R 2Y2

Dre Louise Miner
Mme Lilian Daniel
T : 514 693-2448
lminer.med@ssss.gouv.qc.ca
lilian.daniel.comtl@ssss.gouv.qc.ca
ciusss-ouestmtl.gouv.qc.ca

CIUSSS du Centre-Ouest-de-l'Île-de-Montréal
3755, chemin de la Côte Sainte-Catherine
Bureau A-142
Montréal (QC) H3T 1E2

Dr Stephen Rosenthal
Mme Maria Ghosn
T : 514 340-8222, poste 26707
stephen.rosenthal.med@ssss.gouv.qc.ca
maria.ghosh.ccomtl@ssss.gouv.qc.ca
ciusss-centreouestmtl.gouv.qc.ca

CIUSSS du Centre-Sud-de-l'Île-de-Montréal
Hôpital Notre-Dame
F1133, Pavillon Deschamps
1560, rue Sherbrooke Est
Montréal (QC) H2L 4M1

Dre Diane Poirier
Mme Nathalie Roberge
T : 514 413-8777, poste 27012
diane.poirier.ccsmtl@ssss.gouv.qc.ca
nathalie.roberge.ccsmtl@ssss.gouv.qc.ca
ciusss-centresudmtl.gouv.qc.ca

CIUSSS du Nord-de-l'Ile-de-Montréal
555, boulevard Gouin Ouest
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Dre Stéphanie Raymond-Carrier
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T : 514 519- 5738
stephanie.raymond-carrier.cnmtl@ssss.gouv.qc.ca
veronique.levasseur.cnmtl@ssss.gouv.qc.ca
ciusss-nordmtl.gouv.qc.ca

CIUSSS de l'Est-de-l'Île-de-Montréal
5415, boulevard de l'Assomption
Montréal (QC) H1T 2M4

Dre Martine Leblanc
Mme Mélanie Lajoie
T : 514 252-3453
martine.leblanc.cemtl@ssss.gouv.qc.ca
melanie.lajoie.hmr@ssss.gouv.qc.ca
www.ciusss-estmtl.gouv.qc.ca

Centre hospitalier de l'Université de Montréal (CHUM)
850, rue Saint-Denis
Bureau S06-256
Montréal (QC) H2X 0A9

Dr Pierre Bourgouin
Mme Analia Castellari
T : 514 890-8003
pierre.bourgouin.med@ssss.gouv.qc.ca
analia.castellari.chum@ssss.gouv.qc.ca
www.chumontreal.qc.ca

Centre universitaire de santé McGill (CUSM)
2155, rue Guy, 14e étage
Montréal (QC) H3H 2R9

Dre Nicolas Gillot
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cusm.ca

Centre hospitalier universitaire Sainte-Justine
3175, chemin de la Côte Sainte-Catherine
Montréal (QC) H3T 1C5

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marc.girard.med1@ssss.gouv.qc.ca
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www.chusj.org

Institut de Cardiologie de Montréal (ICM)
5000, rue Bélanger Est
Montréal (QC) H1T 1C8

Dr Jean-Denis Roy
Mme Adalina Pierre
T : 514 593-2502
dmsp@icm-mhi.org
www.icm-mhi.org/fr/institut-de-cardiologie-de-montreal

Institut Philippe-Pinel de Montréal
10905, boulevard Henri-Bourassa Est
Montréal (QC) H1C 1H1

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www.pinel.qc.ca

RÉGION 07

OUTAOUAIS

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genevieve.gagnon.med@ssss.gouv.qc.ca
nadine.desjardins@ssss.gouv.qc.ca
cisss-outaouais.gouv.qc.ca

RÉGION 08

ABITIBI-TÉMISCAMINGUE

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Rouyn-Noranda (QC) J9X 2A9

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www.cisss-at.gouv.qc.ca

RÉGION 09

CÔTE-NORD

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T : 418 962-9761, poste 452401
jean-francois.labelle.med@ssss.gouv.qc.ca
cendy.porlier.09cisss@ssss.gouv.qc.ca
www.cisss-cotenord.gouv.qc.ca

RÉGION 10

NORD-DU-QUÉBEC

Centre régional de santé et de services sociaux de la Baie-James
312, 3e Rue
Chibougamau (QC) G8P 1N5

Dre Lyse Landry
Mme Jessica Caron
T : 418 748-3575 x72480
lyse.landry.med@ssss.gouv.qc.ca
jessica.caron@ssss.gouv.qc.ca
www.crsssbaiejames.gouv.qc.ca/1/accueil.crsssbaiejames

RÉGION 11

GASPÉSIE-ÎLES-DE-LA-MADELEINE

CISSS de la Gaspésie
215, boulevard de York Ouest
Gaspé (QC) G4X 2W2

Dr Nathalie Guilbeault
Dr Jean-François Sénéchal
Mme Marie-Ève Huet
T : 418-368-3301, poste 3151
nathalie.guilbeault.med@ssss.gouv.qc.ca
jean-francois.senechal.cisssgaspesie@ssss.gouv.qc.ca
marie-eve.huet.cisssgaspesie@ssss.gouv.qc.ca
www.cisss-gaspesie.gouv.qc.ca

CISSS des Îles
430, chemin Principal
Cap-aux-Meules (QC) G4T 1R9

Dre Françoise Giard
Mme Sara Molaison
T : 418 986-2121, poste 8318
francoise.giard.med@ssss.gouv.qc.ca
sara.molaison.cisssdesiles@ssss.gouv.qc.ca
www.cisssdesiles.com

RÉGION 12

CHAUDIÈRE-APPALACHES

CISSS de Chaudière-Appalaches
363, route Cameron
Sainte-Marie (QC) G6E 3E2

Dre Monique St-Pierre
Mme Vanessa Turgeon
T : 418 835-7121, poste 16164
moniquest-pierre@ssss.gouv.qc.ca
vanessa.turgeon.cisssca@ssss.gouv.qc.ca
www.cisssca.com/accueil

RÉGION 13

LAVAL

CISSS de Laval
1755, boulevard René-Laennec
Bureau C1-48
Laval (QC) H7M 3L9

Dre Marie-Ève Perron
Mme Chantal Paquette
T : 450 975-5588 (ligne directe)
marie.e.perron.cissslav@ssss.gouv.qc.ca
chantal_paquette.cissslav@ssss.gouv.qc.ca
www.lavalensante.com

RÉGION 14

LANAUDIÈRE

CISSS de Lanaudière
1000, boulevard Sainte-Anne
Saint-Charles-Borromée, Québec (QC) J6E 6J2

Dre Bouchra Reggad
Mme Emilie Paquet
T : 450 759-8222, poste 2504
bouchra.reggad.med@ssss.gouv.qc.ca
emilie.paquet.cissslan@ssss.gouv.qc.ca
dmsp-secretariat.cissslan@ssss.gouv.qc.ca
www.cisss-lanaudiere.gouv.qc.ca

RÉGION 15

LAURENTIDES

CISSS des Laurentides
290, rue De Montigny
Saint-Jérôme (QC) J7Z 5T3

Dr Elie Boustani
Mme Danielle Binette
T : 450 433-2777, poste 64176
elie.boustani.cissslau@ssss.gouv.qc.ca
danielle.binette.lddm@ssss.gouv.qc.ca
www.santelaurentides.gouv.qc.ca

RÉGION 16

MONTÉRÉGIE

CISSS de la Montérégie-Centre
3120 , boulevard Taschereau
Greenfield Park (QC) J4V 2H1

Dre Inthysone Rajvong
Mme Julie Veilleux
T : 450 466-5000, poste 5407
inthysone_rajvong.cisssmc16@ssss.gouv.qc.ca
julie.veilleux.cisssmc16@ssss.gouv.qc.ca
www.santemc.quebec

CISSS de la Montérégie-Est
2750, boulevard Laframboise
Sainte-Hyacinthe (QC) J2S 4Y8

Dr Jocelyn Dodaro
Mme Julie Savoie
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jocelyn.dodaro.cisssme16@ssss.gouv.qc.ca
julie.savoie.cisssme16@ssss.gouv.qc.ca
dmsp.cisssme16@ssss.gouv.qc.ca
www.santeme.quebec

CISSS de la Montérégie-Ouest
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Châteauguay (QC) J6K 4W8

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Mme Annie Bouchard
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santemo.quebec

RÉGION 17

NUNAVIK

Centre de santé Inuulitsivik

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christian.deschenes.med1@ssss.gouv.qc.ca
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effectifsmedicaux.nunavik@ssss.gouv.qc.ca

Centre hospitalier Tulattavik de l'Ungava

Dre Nathalie Boulanger
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dmsp.enseignement.cstu@ssss.gouv.qc.ca
effectifsmedicaux.nunavik@ssss.gouv.qc.ca

RÉGION 18

TERRES-CRIES-DE-LA-BAIE-JAMES

Conseil Cri de la santé et des services sociaux de la Baie-James
20, Fort George
C.P. 250
Chisasibi (QC) J0M 1E0

Dr Francois Prévost
M. Olivier Meyer
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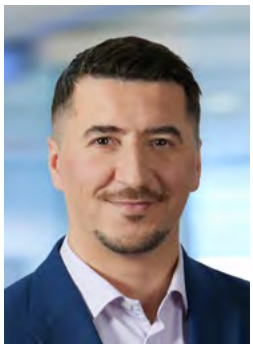
francois.prevost.med@ssss.gouv.qc.ca
olivier.meyer@ssss.gouv.qc.ca
https://www.creehealth.org/fr/home

VOUS CHERCHEZ DE L'INFORMATION SUR… LES PTEM, LES PEM, LE DÉPANNAGE, LE *FELLOWSHIP*, LES DÉROGATIONS

Communiquez avec le responsable des effectifs médicaux au sein de votre association ou avec la FMRQ par courriel à **ptem-mf@fmrq.qc.ca** pour la médecine familiale ou **pem-sp@fmrq.qc.ca** pour les autres spécialités.

Méziane Larab M. Sc. Fin.
Directeur du développement des affaires
Segment jeunes professionnels
Conseiller en sécurité financière et en assurance collective



BIEN CHOISIR SON CONSEILLER EN ASSURANCES: L'IMPORTANCE D'ÊTRE BIEN ENTOURÉ

En résidence, les journées sont bien remplies. Entre les gardes, les études et la vie personnelle, réfléchir aux assurances peut sembler secondaire. Pourtant, ces décisions auront un impact durable sur votre sécurité financière. Et pour prendre les bonnes décisions, un élément essentiel est souvent sous-estimé : le choix du conseiller.

POURQUOI UN BON CONSEILLER CHANGE TOUT

Les besoins des résidents et des jeunes médecins sont uniques. Contrairement à d'autres professionnels, votre parcours implique des transitions particulières : résidence, fellowship, début de pratique autonome, incorporation… Un conseiller spécialisé dans le domaine médical saura vous guider à travers ces étapes en tenant compte de vos réalités.

Un bon conseiller peut notamment vous aider à :

- Souscrire à une **assurance invalidité adaptée**, évolutive et conçue pour votre carrière médicale, en profitant des **options spéciales réservées aux médecins**, comme les augmentations de protection sans preuve médicale ;
- Anticiper vos besoins futurs en assurance vie, maladies graves ou frais de bureau, pour vous et votre famille.

Sans cet accompagnement, vous risquez de vous retrouver avec des produits inadaptés ou de passer à côté d'opportunités uniques.

LES CRITÈRES POUR BIEN CHOISIR SON CONSEILLER

1. **Expertise :** comprendre vos besoins spécifiques, vos spécialités et vos étapes de carrière.
2. **Objectivité :** proposer des solutions alignées sur vos besoins réels, et non sur une commission de vente.
3. **Accès large au marché :** idéalement, pouvoir magasiner auprès de tous les assureurs pour comparer et choisir la meilleure option.
4. **Accompagnement continu :** être présent non seulement en résidence, mais aussi lors du fellowship, du début de pratique et tout au long de votre carrière.
5. **Écoute et personnalisation :** adapter les protections à votre réalité (famille, dettes, projets de pratique).

POURQUOI CHOISIR SOGEMEC ASSURANCES ?

Sogemec Assurances a été créée par des médecins, pour des médecins. Elle est la firme des fédérations médicales FMSQ et FMOQ, et accompagne les résidents à travers son partenariat historique avec la FMRQ. Elle est la seule à vous donner accès :

- Aux offres exclusives négociées par vos fédérations ;
- Aux produits spécialement conçus pour les médecins par RBC et Canada Vie.

Cela vous offre plusieurs avantages uniques :

- Nos conseillers sont **salariés et non commissionnés**, ce qui assure des recommandations impartiales.
- Nous avons accès à **tous les assureurs du marché**, pour comparer et trouver la solution la plus avantageuse pour votre situation.
- Et ultimement, comme vous deviendrez **membres des fédérations médicales, Sogemec vous appartiendra aussi**. Vous êtes donc conseillé par une firme qui agit dans votre intérêt… puisque vous en serez collectivement propriétaire.

Bien choisir son conseiller, c'est s'assurer d'être accompagné par quelqu'un qui comprend vos besoins uniques, qui a accès à toutes les solutions du marché y compris les offres exclusives des fédérations, et qui est réellement aligné sur vos intérêts. En tant que résident, vous avez la chance de bénéficier de l'expertise de **Sogemec Assurances**. Être bien entouré aujourd'hui, c'est la garantie d'une sécurité solide et adaptée pour toute votre carrière.

L'ÉQUIPE DE CONSEILLERS DE SOGEMEC EST LÀ POUR VOUS AIDER ET NAVIGUER AVEC VOUS ENTRE LES DIFFÉRENTES OPTIONS.

1 800 361-5303
information@sogemec.com

FONDS FMOQ

Diana Zapata, Pl. Fin.
Représentante en épargne collective
Clientèle jeunes médecins

PLANIFICATION BUDGÉTAIRE : DES QUESTIONS À SE POSER

Après de longues années d'études et d'efforts, il est naturel de vouloir se faire plaisir et de songer à des achats qui reflètent cette réussite. Cependant, avant d'engager des sommes importantes, il peut être utile de se poser certaines questions sur l'impact financier à long terme. En planifiant dès le départ, il est possible de concilier les envies personnelles et les objectifs financiers sans compromettre son équilibre budgétaire.

LE CAS DE L'AUTOMOBILE

Une fois en pratique, il est tout à fait naturel de penser à vous offrir un véhicule plus récent. Après tout, vous avez le droit de vous récompenser pour vos années d'efforts. Cependant, il peut être utile de réfléchir à quelques aspects financiers avant de prendre votre décision.

Par exemple, une Audi Q4 Sportback e-tron, affichée à 87 000 $, coûtera environ 100 000 $ une fois les taxes ajoutées. En optant pour un prêt auto, les intérêts pourraient avoisiner 16 000 $ sur cinq ans, et la perte de valeur de la voiture pourrait atteindre 50 % sur cette période. Dans ce contexte, il peut être intéressant de se demander si l'achat de cette voiture s'inscrit dans vos priorités financières actuelles, ou s'il y a d'autres projets auxquels vous aimeriez consacrer ces ressources.

Cela dit, il n'y a pas de mauvaise décision : choisir un véhicule plus modeste ou conserver votre voiture actuelle vous permettrait peut-être d'investir les économies réalisées. Par exemple, en investissant 100 000 $ avec un rendement net de 5 %, ce montant pourrait atteindre 550 000 $ sur 35 ans. L'essentiel est de choisir ce qui est en accord avec vos valeurs et vos objectifs à long terme.

PLANIFICATION BUDGÉTAIRE

Avant de procéder à des achats importants, il peut être utile de vérifier que votre budget — soit la différence entre vos revenus et vos dépenses — est en équilibre. Nous suggérons aux jeunes médecins de commencer par se fixer un objectif d'épargne annuel. Vos choix de dépenses, qu'il s'agisse de logement, de transport, de loisirs ou d'autres postes, peuvent jouer un rôle clé dans votre indépendance financière.

Le temps et la charge de travail sont également des facteurs sur lesquels vous avez du contrôle. Si vous commencez à investir tôt, le temps peut travailler en votre faveur et alléger l'effort nécessaire pour atteindre vos objectifs à long terme. L'impôt est souvent l'un des postes de dépenses les plus importants pour les médecins. Après avoir couvert vos dépenses d'affaires et payé vos impôts, vous pourriez envisager de réserver une partie de vos revenus pour l'épargne. Par exemple, économiser 20 % de vos revenus bruts pourrait représenter quelques dizaines de milliers de dollars par année, une base solide pour développer votre patrimoine.

Pour tirer le meilleur parti de vos placements, il peut être avantageux de faire appel à des professionnels qualifiés. Nous pouvons vous accompagner dans votre bilan financier, la gestion de vos dettes d'études, la constitution d'un fonds d'urgence et l'optimisation de votre fiscalité. Vos économies serviront alors non seulement à faire face aux imprévus, mais aussi à bâtir votre retraite et votre patrimoine.

BIEN S'ENTOURER

Bien que l'investissement autonome gagne en popularité, il comporte certains risques. Sans accompagnement, il peut être plus difficile d'obtenir des conseils éclairés en matière de fiscalité, d'incorporation, de séparation, et d'investissement adapté à vos besoins. Comment être certain que vos investissements sont bien alignés avec vos objectifs et votre tolérance au risque ? Seriez-vous tenté de vendre dans la panique si le marché chute ? Les clés du succès peuvent être résumées en trois mots : patience, prudence et discipline.

En contrepartie de frais de gestion, un conseiller peut vous offrir un soutien précieux, notamment pour éviter des décisions impulsives et faire les choix financiers qui vous conviennent le mieux.

Vous ne savez pas par où commencer ? Appelez-nous.
Spécialisés dans l'accompagnement des médecins, nos experts vous bâtiront un plan personnalisé qui évoluera en fonction de vos priorités et de votre situation. Les bons réflexes, ça nous connaît !

NOUS JOINDRE :
info@fondsfmoq.com **ou** 1 888 542-8597

LA GESTION PRIVÉE DÈS LE DÉBUT DE PRATIQUE ? ABSOLUMENT !

Olivia Kubicki, B. COMM., Pl. Fin.
Conseillère en gestion de patrimoine jp et planificatrice financière

Votre arrivée prochaine en début de pratique sera une période à la fois exigeante et stimulante : nouvelle étape de carrière, nouvel environnement professionnel, nouveaux défis… Comment faciliter la transition ? Les connaissances et l'expérience d'une conseillère ou d'un conseiller en gestion privée sont un atout de première ligne pour maximiser ce passage.

À CHAQUE ÉTAPE, SES DÉFIS

Vos changements de vie impliqueront de nouvelles responsabilités et la capacité d'assimiler cette évolution à la vitesse grand V.

Une fois la résidence terminée et les examens réussis, vous devrez déposer une demande de permis auprès du Collège des médecins du Québec, qui vous sera envoyé lorsqu'approuvé. Comme vous deviendrez sans doute travailleur ou travailleuse autonome, vous devrez ensuite vous inscrire à la RAMQ pour votre facturation médicale. La méthode de facturation sera à déterminer : soit avec un système que vous gérez vous-même (Xacte), ou avec une agence (MultiD). Vous devrez aussi adhérer à la fédération correspondant à votre pratique (FMOQ ou FMSQ) et revoir vos couvertures d'assurance (dont l'assurance invalidité).

Ce sera le moment de réfléchir à votre avenir financier et de déterminer s'il serait pertinent de vous incorporer, l'une des premières grandes décisions financières de votre vie professionnelle

COMMENT LA GESTION PRIVÉE PEUT-ELLE VOUS AIDER ?

C'est une façon de bien vous entourer pour que votre réussite financière soit à la hauteur de votre carrière. En tant que médecin et quel que soit votre choix de pratique ou votre spécialisation, vous travaillerez en équipe, avec d'autres professionnels compétents dans leur sphère d'activités et sur lesquels vous pourrez compter. Pour vos finances, c'est pareil !

Avec votre planificatrice ou planificateur financier, vous faites un plan qui couvre l'ensemble de vos besoins personnels et professionnels, notamment le remboursement de vos dettes, les stratégies fiscales pour vos impôts et vos acomptes provisionnels, l'analyse d'incorporation et des stratégies personnalisées pour vos objectifs de vie ou de travail tels que l'achat d'une propriété. N'oubliez pas la mise sur pied éventuelle d'un plan de retraite, votre profession ne vous offrant pas de plan de pension.

PAR DES MÉDECINS, POUR LES MÉDECINS

Chez fdp Gestion privée, nos conseillères et conseillers, qui sont également des planificatrices et planificateurs financiers, connaissent chaque étape de votre profession. Vous avez accès à une équipe d'experts dans une diversité de sujets (placements, planification financière, fiscale et successorale), en plus des domaines d'expertise de nos collaborateurs externes (facturation médicale, assurances, financement). Vous pouvez formuler vos attentes et vos objectifs financiers à moyen et long terme, et ils seront intégrés dans la structure de vos finances. La décision de vous incorporer, par exemple, impliquera un accompagnement de votre conseillère ou conseiller et de son équipe pour s'assurer que votre structure corporative corresponde précisément à vos objectifs.

POURQUOI LA GESTION PRIVÉE MAINTENANT ?

Parce que c'est du sur mesure et qu'avec fdp Gestion privée, vous n'avez pas à attendre d'avoir franchi certaines étapes de carrière pour y accéder.

Pour faciliter votre arrivée en pratique, vous bénéficierez d'offres exclusives[1] qui ont été pensées en fonction de vos besoins et qui incluent :

- Le remboursement (jusqu'à 1 500 $) des frais liés à l'incorporation de votre pratique;
- Le remboursement (jusqu'à 1 000 $) sur la production de la première déclaration de revenus de votre société par actions;
- Des rabais avantageux sur les services de facturation médicale.

Au fur et à mesure que votre situation évolue, vous pouvez compter sur votre équipe fdp Gestion privée pour vous aider à prendre les décisions financières qui produiront les résultats que vous recherchez. C'est une relation dans la durée, bâtie sur la confiance et le respect, à chaque étape de votre vie.

Créée par et pour les médecins, fdp Gestion privée travaille pour eux depuis près de cinquante ans. Notre but ? Votre réussite. N'attendez plus : accédez dès maintenant à des services de gestion privée taillés à votre mesure !

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[1] Certaines conditions s'appliquent : informez-vous auprès de votre conseillère ou conseiller.

Une offre pour les médecins résidents

Une offre financière pensée et développée pour vos besoins personnels et professionnels.

Faites comme plusieurs membres de la FMRQ et profitez de l'offre Exclusive.

desjardins.com/fmrq
1 844 778-1795 poste 30

FÉDÉRATION DES MÉDECINS RÉSIDENTS DU QUÉBEC | Desjardins

MULTI D MD

Solution administrative
et financière en santé

Prendre soin de ce qui compte

Découvrez comment prendre soin de vos activités.

Facturation médicale

Gagnez du temps avec notre service de facturation médicale.

Chez MultiD, nous vous offrons la synergie d'une équipe dévouée et d'un réseau d'experts en facturation médicale. Un avantage unique intégré à notre offre de service globale, pour faciliter votre pratique.

Comptabilité

Ayez l'esprit tranquille grâce à nos services de comptabilité.

Nous croyons que votre comptabilité devrait être simple et transparente. C'est pourquoi nous vous offrons un service de gestion comptable qui vous assure une vision claire de vos finances. Une valeur ajoutée pour les travailleurs autonomes ou incorporés, les fiducies, les cliniques, les pools de service et les sociétés de personnes.

Impôt et fiscalité

Maximisez vos avoirs avec nos solutions pour l'impôt et la fiscalité.

Forts de nos 50 ans d'expérience auprès des professionnels de la santé, nous connaissons bien les diverses particularités qui vous touchent et nous vous permettons d'optimiser votre fiscalité tout en respectant les obligations en vigueur.

Planification stratégique

Optimisez vos finances avec des stratégies personnalisées.

Nous possédons une expertise multidisciplinaire qui fait toute la différence dans l'optimisation de votre pratique professionnelle. Notre mission : vous faire économiser du temps et de l'argent dans l'atteinte de vos objectifs.

1 800 363.3068
multid.ca

Que ce soit pour un service précis ou une solution 360, nous avons tous les outils en main pour alléger votre quotidien et vous permettre de vous concentrer sur vos priorités.

Passez à l'action avec des solutions pensées pour vous

Faites de votre résidence un tremplin vers une réussite professionnelle et financière

Un coup de pouce pour démarrer en force

- **Bonification de 300 $** de votre premier compte Fonds FMOQ[1]
- **Remises en argent** sur vos prêts hypothécaires[2]
- **2e avis gratuit** sur vos placements
- **Déclarations d'impôts gratuites** pendant votre résidence[3]
- Analyse de vos besoins en assurances, **sans frais**[4]

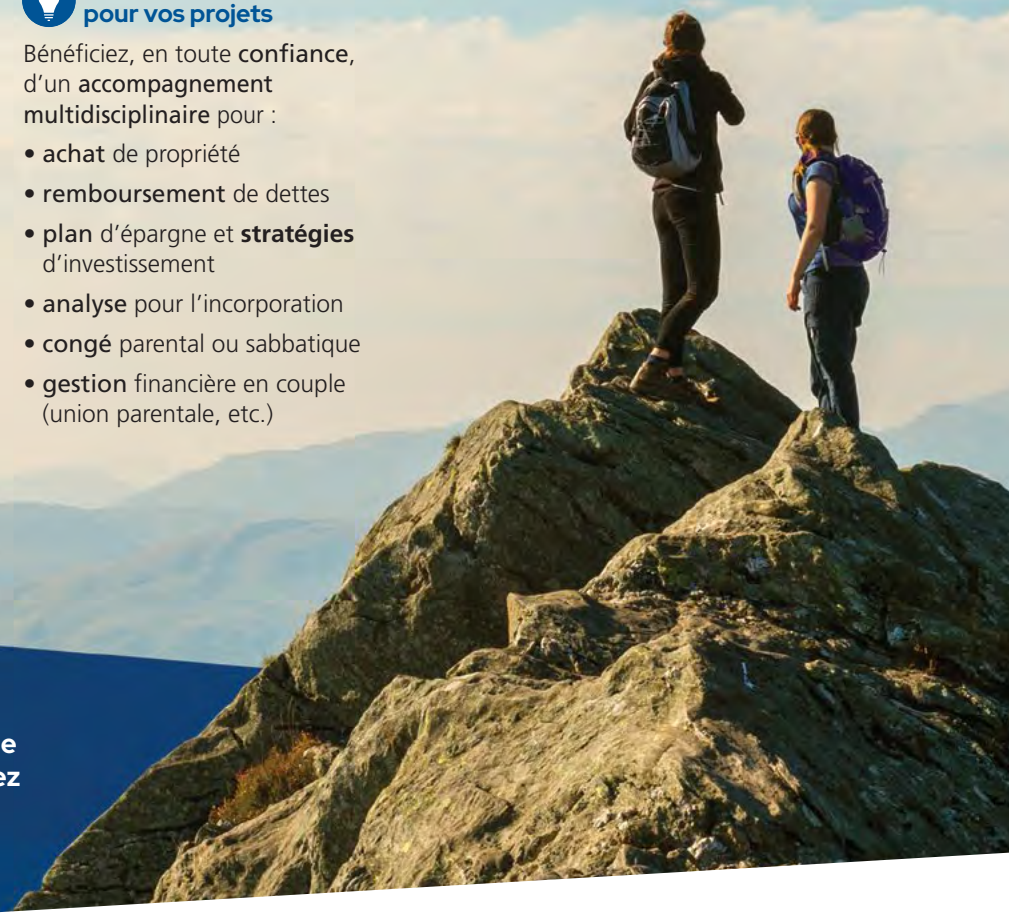
Facturation médicale et solutions cliniques

- 6 mois de facturation médicale gratuite[1]
- Soutien en gestion de clinique et entrepreunariat médical

Des conseils personnalisés pour vos projets

Bénéficiez, en toute **confiance**, d'un **accompagnement multidisciplinaire** pour :

- **achat** de propriété
- **remboursement** de dettes
- **plan** d'épargne et **stratégies** d'investissement
- **analyse** pour l'incorporation
- **congé** parental ou sabbatique
- **gestion** financière en couple (union parentale, etc.)



Depuis 45 ans, Fonds FMOQ accompagne les médecins à chaque étape de leur parcours. Commencez le vôtre avec ceux qui connaissent vraiment votre réalité.

PARLONS DE VOS PROJETS!
CONTACTEZ-NOUS.

fondsfmoq.com | info@fondsfmoq.com

FONDS **FMOQ**

[1] Certaines conditions s'appliquent.
[2] Partenariat avec la Banque Nationale. Certaines conditions s'appliquent.
[3] Partenariat avec des firmes comptables. Certaines conditions s'appliquent.
[4] Partenariat avec Sogemec Assurances. Certaines conditions s'appliquent.

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Vous êtes résident.e?

Bénéficiez d'un accompagnement sur mesure pour votre carrière

Sogemec ASSURANCES

- **Le seul cabinet affilié** aux fédérations médicales du Québec
- Conseillers salariés : zéro pression, **100 % conseil**
- Accès aux **meilleures offres** : RBC, Canada Vie, Sogemec/Fédérations médicales
- **2e opinion gratuite** sur ton contrat actuel
- **Transfert facile** d'un contrat existant
- **Accompagnement** pour le Fellowship et le début de pratique
- **Solutions complètes** selon ton parcours

CONTACTEZ-NOUS DÈS MAINTENANT
pour un accompagnement personnalisé

Vos conseillères dédiées :

MÉLISSA CLOUTIER
Conseillère en sécurité financière
Segment jeunes professionnels
m.cloutier@sogemec.com
514-350-6366

JESSICA SMEDO
Conseillère en sécurité financière
Segment jeunes professionnels
j.smedo@sogemec.com
514 350-5031

SERVICE SANS FRAIS, SANS OBLIGATION

FÉDÉRATION DES MÉDECINS RÉSIDENT·E·S DU QUÉBEC · FMSQ · FMOQ

sogemec.com

Services aux professionnels de la santé RBC[MC]

Passez en toute confiance de la résidence à la pratique

À RBC, nous savons que la transition de la résidence à la pratique est une importante étape de votre parcours professionnel. Et nous sommes là pour vous aider. Les spécialistes, Services aux professionnels de la santé RBC, comprennent votre parcours de carrière unique et sont en mesure de vous apporter un soutien et des conseils au cours de votre résidence et pendant que vous devenez praticien.

Parlez-nous de vos objectifs dès aujourd'hui.

rbc.com/sante

125603 (02_2022)

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FACTURATION MÉDICALE PAR PETAL

OFFRE EXCLUSIVE POUR LES RÉSIDENT·E·S FINISSANT·E·S

Prix réduit Service Premium Pendant 12 mois

Balayez le code QR pour planifier une rencontre avec un expert et activer votre promotion.

50%
de rabais
pendant 12 mois

- Ligne téléphonique prioritaire et service-conseil
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- Démarchages avec la RAMQ et autres intervenants pour ajuster votre facturation
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- Contestation des refus de paiement non légitimes
- Réconciliation des rapports d'erreurs

« *Le début de la pratique en tant que spécialiste s'accompagne de nombreux défis avec beaucoup d'adaptation. J'ai été très satisfait par les services de facturation donnés par Xacte. Ses intervenants sont toujours à l'écoute, très disponible, ils répondent vite à nos interrogations et sont toujours prévoyants et rassurants.* »

- Dr Lionel Cailhol, Psychiatre

* Offre réservée aux nouveaux patrons débutant en 2025. Inclut les services et fonctionnalités du plan Premium. Certaines conditions s'appliquent.

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Xacte est une marque enregistrée de Solutions Petal inc.

xacte.net
1 888 949-8601

Réalisez des économies avec TD Assurance.

Vous pourriez obtenir des tarifs préférentiels sur l'assurance habitation et auto. De plus, découvrez d'autres produits de TD Assurance qui peuvent répondre à vos besoins.

Pour en savoir plus ou pour obtenir une soumission, visitez
tdasssurance.com/fmrq

TD Assurance

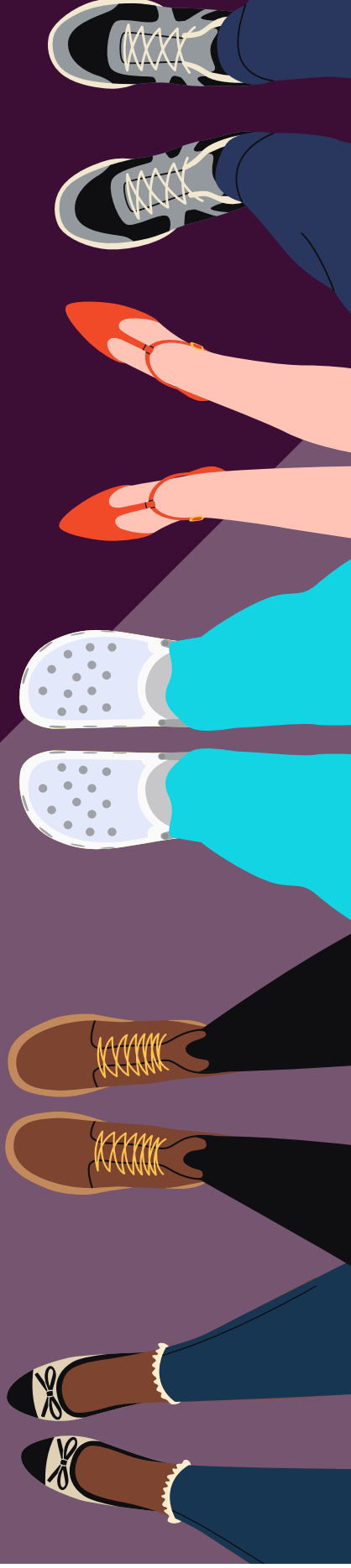
Le programme TD Assurance Meloche Monnex est offert par SÉCURITÉ NATIONALE COMPAGNIE D'ASSURANCE. Il est distribué par Meloche Monnex assurance et services financiers inc., au Québec, par Meloche Monnex services financiers inc., en Ontario, et par Agence Directe TD Assurance Inc. ailleurs au Canada. Notre adresse est le 50, place Crémazie, 12e étage, Montréal (Québec) H2P 1B6. En raison des lois provinciales, ce programme d'assurances auto et véhicules récréatifs n'est pas offert en Colombie-Britannique, au Manitoba ni en Saskatchewan. Toutes les marques de commerce appartiennent à leurs propriétaires respectifs. MD Le logo TD et les autres marques de commerce TD sont la propriété de La Banque Toronto-Dominion ou de ses filiales.

2022-23307-7027_HomeAutoGeneric

fdp Gestion privée

Ta différence, ça passe aussi par tes finances.

Visitez-nous au **fdpgp.ca**



Filiale de

FMSQ

Partenaire de

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La Gaspésie au coeur de ta pratique

Postes disponibles

Médecine spécialisée

- Anesthésiologie
- Chirurgie orthopédique
- Ophtalmologie
- Psychiatrie adulte
- Radiologie
- Urologie

Médecine familiale

- CHSLD
- Hospitalisation
- Obstétrique
- Prise en charge
- Urgence

Centre intégré de santé et de services sociaux de la Gaspésie
Québec

Pour des renseignements supplémentaires et la planification d'une visite exploratoire:
recrutement.medical.cisssgaspesie@ssss.gouv.qc.ca

Faire de l'Outaouais son chez-soi

Lieux de pratique diversifiés et dynamiques

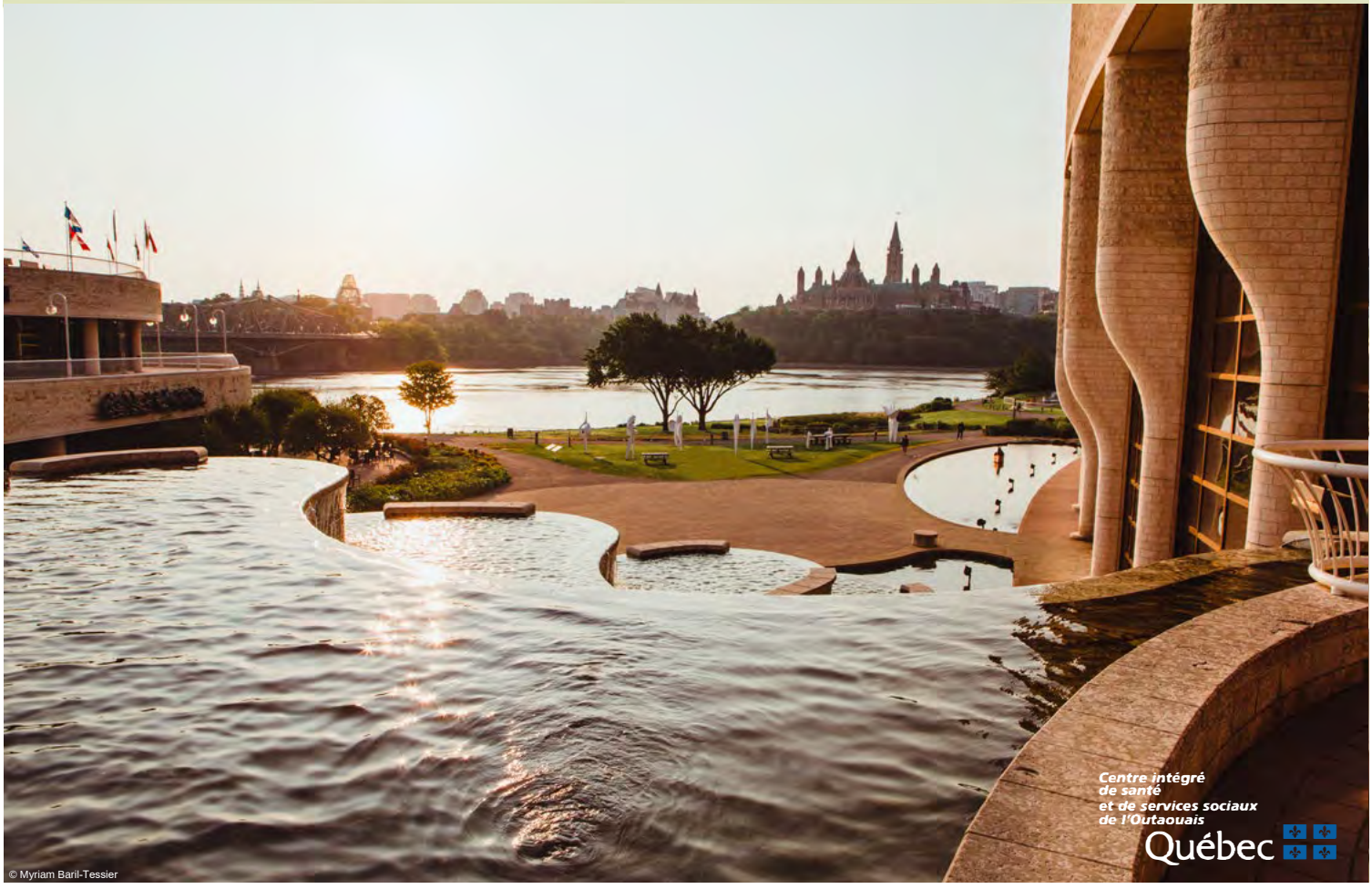
- 33 000 KM^2 de nature à explorer tout en n'étant jamais loin des grands centres

Envoyez votre CV :

recrutement.md.outaouais@ssss.gouv.qc.ca

Pour plus d'information

outaouais.gouv.qc.ca/recrutement/recrutement-des-medecins



© Myriam Baril-Tessier

Ici,
pour une
qualité de vie
et de pratique

Choisissez le CISSS de Lanaudière

Soignez chez nous

Diverses possibilités d'emploi, plus particulièrement dans les secteurs suivants :

- Médecine générale
- Anesthésiologie
- Gériatrie
- Pédiatrie
- Pédopsychiatrie
- Médecine physique
- Rhumathologie
- Obstétrique-gynécologie
- Urologie
- Hémato-oncologie
- Neurologie
- Santé publique
- Toutes autres spécialités, selon le besoin.

Pourquoi nous choisir?

- Pratique diversifiée et stimulante
- Plus de 800 médecins
- 63 installations, dont 2 hôpitaux
- Équipes dynamiques
- Travail interdisciplinaire
- Modernisation et agrandissement (projets immobiliers d'envergure)

Nous offrons un **cheminement de carrière** centré sur vos intérêts et sur vos projets de vie dans une **région majestueuse et innovante** qui est remplie d'espaces verts, urbains et culturels.

Pour information

Lyne Marcotte, Directrice adjointe à la supervision des activités médicales
450 654-7525, poste 43644 | lyne.marcotte@ssss.gouv.qc.ca

cisss-lanaudiere.gouv.qc.ca/carrieres

Centre intégré
de santé
et de services sociaux
de Lanaudière
Québec

Fiers d'être médecins à La Tuque!

MAURICIE CENTRE-DU-QUÉBEC
CHALEUREUSE
INSPIRANTE
DYNAMIQUE

SARROS

L'installation de La Tuque, seule région SARROS en Mauricie et Centre-du-Québec, est à la recherche d'un à deux médecins de famille souhaitant pratiquer dans un milieu stimulant et diversifié, au sein d'une équipe dynamique et engagée.

Optez pour une pratique **PEC et obstétrique** au Centre multiservices de santé et de services sociaux du Haut-Saint-Maurice à La Tuque.

Tous les services de santé et les services sociaux sont sous un même toit, même le GMF!

Pour information ou pour planifier une visite, contactez :

Charlene Bolger
Agente de planification, de programmation et de recherche
819 523-4581 poste 2108
charlene_bolger@ssss.gouv.qc.ca

ciusssmcq.ca
sarros.ca
choisirlatuque.ca

Centre intégré universitaire de santé et de services sociaux de la Mauricie-et-du-Centre-du-Québec
Québec

Futur hôpital de Vaudreuil-Soulanges

D'ici l'ouverture, venez pratiquer dans l'une de nos installations

Médecine spécialisée
recrutement_md_specialiste.cisssmo16@ssss.gouv.qc.ca

Médecine familiale
recrutement_omnis.cisssmo16@ssss.gouv.qc.ca

emplois-cisssmo.ca/pratique-medicale

Centre intégré de santé et de services sociaux de la Montérégie-Ouest
Québec

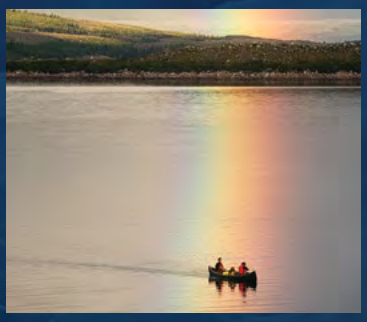
LE NUNAVIK T'ATTEND!

DÉVELOPPE TES COMPÉTENCES CLINIQUES

tout en vivant une expérience inoubliable.

Tu cherches à conjuguer impact social, aventure humaine et défi professionnel? Rejoins une équipe médicale dévouée au cœur d'un territoire unique.

Pour en savoir plus sur les carrières au Nord et sur les conditions de travail :



POSTES DISPONIBLES

Médecine de famille • Pédiatrie
Pédopsychiatrie • Médecine interne
Gastroentérologie

Contact – Médecine familiale

Dre Geneviève Auclair
Cheffe du Département régional de médecine générale du Nunavik
genevieve.auclair@ssss.gov.qc.ca

Contact – Médecine spécialisée

Dre Nathalie Boulanger – DSP, CSTU
Dr Christian Deschênes – DSP, CSI
effectifsmedicaux.nunavik@ssss.gov.qc.ca

RÉGIE RÉGIONALE DE LA SANTÉ ET DES SERVICES SOCIAUX DU NUNAVIK
NUNAVIK REGIONAL BOARD OF HEALTH AND SOCIAL SERVICES

UNGAVA TULATTAVIK HEALTH CENTER
CENTRE DE SANTÉ TULATTAVIK DE L'UNGAVA

Inuulitsivik

Facturation.net
Solutions et services de facturation médicale

Bientôt nouveau médecin-facturant ?

Six mois gratuits.
Six avantages.
On s'occupe de tout.

Le choix #1
des médecins au Québec.

Vous prendre sous notre aile gratuitement pour six mois, c'est notre façon de vous souhaiter bienvenue dans votre nouvelle carrière. Un plan Agence bonifié, spécialement adapté à votre début de pratique. Flexible et sans engagement.

Ne manquez pas cette chance unique !

Prenez rendez-vous pour en savoir plus.
1 866 332-2638

« Je savais que je voulais toucher à tout, être une espèce de couteau suisse de la médecine. »

Dr. Antoine Séguin, médecin de famille
Bas-Saint-Laurent

SARROS

Vous souhaitez...

- Accéder à une **pratique diversifiée** et polyvalente
- Faire partie d'une équipe où **l'esprit d'entraide** est important
- Faire une **réelle différence**
- Avoir facilement **accès à la nature**
- Obtenir une belle **qualité de vie**

Avantages de travailler en région

- Rémunération majorée
- Prime d'installation
- 20 journées de ressourcement
- Programme de bourses (médecine de famille et médecine spécialisée)

La pratique en région SARROS est pour vous !

VIDÉOS | BALADOS
IMAGES 360° | MAGAZINE

SARROS | Soutien aux régions pour le recrutement d'omnipraticiens et de spécialistes

EQUIPESARROS
SARROS_QC
SARROS

SARROS.CA

RÉSEAU MACLINIQUE

Vous avez aimé discuter avec nos médecins lors de la Journée carrière FMRQ ?

Et si la prochaine étape était de rejoindre notre grande équipe ?

Montréal

MAclinique Brunswick
Pointe-Claire

MAclinique Sault-au-Récollet
Montréal-Nord

Laval / Laurentides

MAclinique Santé 440
Laval

MAclinique St-Antoine
Saint-Jérôme

Capitale Nationale

MAclinique Lebourgneuf
Québec

MAclinique Sainte-Foy
Québec

Ouverture 2027
MAclinique Quartier-Central
Québec (Limoilou)

Chaudière-Appalaches

MAclinique Lévis
Lévis

MAclinique des Ponts
Lévis

Ouverture prochaine
MAclinique des Appalaches
Thetford Mines

Montérégie

Ouverture 2027
MAclinique Saint-Hyacinthe
Saint-Hyacinthe

Estrie

Ouverture 2027
MAclinique Sherbrooke
Sherbrooke

Le seul réseau de cliniques par des médecins pour des médecins !

Rejoignez Réseau MAclinique !
reseaumaclinique.com/batir-sa-pratique

UN MONDE QUI TE RESSEMBLE

Joignez l'équipe médicale du service d'urgence du Centre multiservices de santé et de services sociaux de Rivière-Rouge!

Le CMSSS de Rivière-Rouge, situé à environ 2 h de Montréal, recrute des médecins d'urgence pour joindre leur équipe dynamique! Le service d'urgence de cet hôpital de catégorie 1B/1C reçoit annuellement 15 433 visites (2024-2025).

La pratique y est diversifiée et le médecin bénéficie d'une autonomie de pratique importante tout en étant soutenu par une équipe interdisciplinaire engagée.

Secteurs cliniques

Cette installation regroupe plusieurs secteurs cliniques dont :

- Une unité d'hospitalisation de santé physique de courte durée de 18 lits
- Des unités spécialisées en santé mentale
- Un CLSC qui inclut le GMF de la Rouge
- Des unités spécialisées en déficience et en réadaptation
- Des services externes d'hémodialyse et hémato-oncologie
- Un CHSLD

La diversité des services offerts dans cette installation favorise la collaboration et le développement d'une belle fraternité entre les différentes équipes médicales.

Rémunération

La rémunération dans ce service est au mode mixte. Les médecins pratiquant à plus de 75 % dans ce secteur d'activité pourront bénéficier de la rémunération majorée en vertu de l'annexe XII. Par ailleurs, comme ce milieu est reconnu comme étant un territoire désigné, les médecins venant s'y établir peuvent bénéficier d'une prime d'installation en vertu du programme SARROS.

Pour de plus amples informations sur les postes disponibles au CISSS des Laurentides :

ENTRE DANS NOTRE UNIVERS CARRIÈRE

CISSSLAUembauche.ca

Centre intégré de santé et de services sociaux des Laurentides

Québec

CROIX BLEUE MEDAVIE

PROGRAMME FÉDÉRAL DE SANTÉ INTÉRIMAIRE (PFSI)

Remboursement des soins dispensés aux demandeurs d'asile, aux personnes protégées ou réfugiées ou à d'autres groupes admissibles

Le PFSI est un programme financé par Immigration, Réfugiés et Citoyenneté Canada (IRCC) qui offre une couverture des coûts liés aux soins de santé à des groupes de personnes, notamment les personnes réfugiées et les demandeurs d'asile, lorsque le bénéficiaire n'est pas couvert par l'assurance maladie ou un régime d'assurance maladie privée.

Plusieurs types de soins sont couverts : hospitalisations, sages-femmes, services de laboratoire et d'ambulance, soins dentaires et de la vue (limités), soins à domicile et de longue durée.

Pour plus d'information et pour vous inscrire :

https://s3.ca-central-1.amazonaws.com/ircc-resources/help-centre-docs/Manuel-dinformation-%C3%A0-l%E2%80%99intention-des-professionnels-de-la-sant%C3%A9-Canada.pdf

Financé par : Immigration, Réfugiés et Citoyenneté Canada
Funded by: Immigration, Refugees and Citizenship Canada

COOP DE SOLIDARITÉ
SANTÉ WENTWORTH-NORD

À qui la chance d'allier défis professionnels et qualité de vie exceptionnelle en pleine nature ?

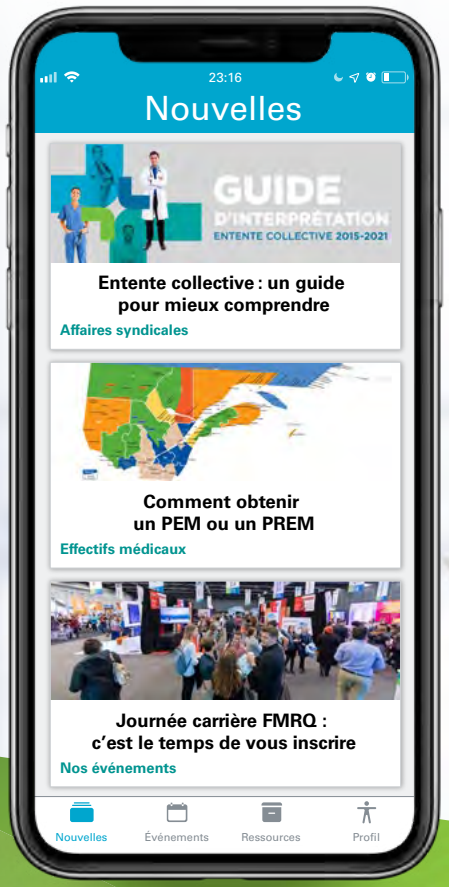
La clinique de la Coop Solidarité Santé Wentworth-Nord est à la recherche de médecins à temps complet ou partiel afin de servir une communauté qui s'est mobilisée pour avoir des services.

Située dans le secteur de St-Michel, la clinique est à 25 km au nord de la ville de Lachute où se trouve un hôpital régional et à 100 km de Montréal. Mais le dépaysement est total.

Les locaux fraîchement rénovés vous attendent.

Pour plus d'informations, veuillez contacter
Richard Daoust (819) 321-5700 daoustrichard@hotmail.com
ou Robert Hémond (514) 891-4962 info.coopsantewn@gmail.com

www.coopsantewn.org



FÉDÉRATION DES MÉDECINS RÉSIDENTS DU QUÉBEC

L'appli FMRQ MOBILE, un INCONTOURNABLE !

Disponible sur App Store

DISPONIBLE SUR Google Play