REPORT

2026 Physician Salary Guide

INSPIRE
Medical Staffing

EXPANDED NATIONAL SPECIALTY EDITION

2026 National Physician Salary Guide

Expanded edition covering 52 physician specialties with a single national average compensation benchmark for each specialty.

Prepared by Inspire Medical Staffing

How to read the numbers

The specialty figures in this guide are average annual compensation, not guaranteed base salary. They may include salary, productivity income, bonuses, and other physician-reported earnings. Individual offers vary by geography, experience, call, schedule, practice setting, and productivity expectations.

Executive Summary

Physician compensation continued to rise entering 2026, but growth remained modest relative to workforce pressure, reimbursement strain, and the complexity of clinical practice. Medscape reported average U.S. physician compensation of approximately $386,000 for 2025, a gain of about 3%. AMGA reported a 4.9% increase across its 2024 provider dataset, with compensation growth outpacing productivity growth.

This expanded guide preserves the original Inspire Medical visual identity while replacing the prior five-specialty snapshot with a complete, comparable table of the 52 specialties for which Doximity published national averages. The guide also adds specialty profiles, compensation graphics, practice-setting benchmarks, recruiting demand, and updated strategic guidance.

$386K
AVERAGE U.S. PHYSICIAN COMPENSATION
Medscape 2026 report; physician-reported 2025 compensation.

52
SPECIALTIES BENCHMARKED
All specialties with publishable national averages in Doximity's comprehensive table.

$749K
HIGHEST SPECIALTY AVERAGE
Neurosurgery leads the current comprehensive specialty benchmark.

3.7%
DOXIMITY YEAR-OVER-YEAR GROWTH
Average U.S. physician compensation growth from 2023 to 2024.

Key 2026 takeaways

- Procedural specialties remain at the top. The highest national averages continue to cluster in surgery, interventional care, radiology, cardiology, and procedure-intensive specialties.
- Primary care demand is stronger than compensation rank alone suggests. Internal medicine, family medicine, and pediatrics were among the most recruited specialties in Doximity's 2024 job-posting analysis.
- Pediatric pay remains structurally lower. Pediatric subspecialties occupy many of the lowest compensation positions despite intensive training and complex care.
- Practice setting matters. Single-specialty groups, multispecialty groups, and solo practices reported the highest average compensation in Doximity's analysis.
- Compensation is increasingly blended. AMA research found salary made up 58.2% of physician compensation on average in 2024, while productivity remained significant at approximately 28%.

Sources: Medscape 2026 Physician Compensation Report; Doximity 2025 Physician Compensation Report; AMGA 2025 Medical Group Compensation and Productivity Survey; AMA Physician Practice Benchmark Survey.

Guide Structure & Methodology

This guide is designed for hospital leaders, recruiters, physicians, and advanced practice providers evaluating national compensation benchmarks.

SECTION	WHAT IT INCLUDES
National landscape	Market trends, key statistics, and interpretation guidance.
52-specialty compensation table	A ranked national average for every specialty published in Doximity's comprehensive specialty table.
Compensation graphics	Highest and lowest specialties, broad category ranges, and practice-setting comparisons.
Specialty profiles	A concise compensation card and recruiting-market note for each of the 52 specialties.
APP compensation	Updated national median benchmarks for nurse practitioners and physician assistants.
Strategy	Practical guidance for administrators and physicians evaluating total compensation.

Primary specialty data source

Doximity's 2025 report is the most complete public national specialty table used in this guide. It draws on more than 37,000 compensation surveys completed by full-time U.S. physicians in 2024 and more than 230,000 surveys over six years. Doximity controls for specialty, metro area, gender, years in practice, and hours worked. Some specialties are not published when sample size is insufficient.

Why the report is titled 2026

The guide is compiled for the 2026 recruiting and contracting market using the latest public national sources available as of July 2026. Specialty-level figures reflect Doximity's latest comprehensive public table; market context is supplemented by Medscape 2026, AMGA 2025, AMA 2024 benchmark research, and current BLS wage data.

Average compensation vs. base salary

A national compensation average is useful for market orientation, but it should not be treated as an offer target without adjustment. Guaranteed base salary may be lower than reported total compensation when production bonuses, quality incentives, call pay, ownership income, and other earnings are included.

Important limitation	This report benchmarks compensation, not fair-market value for a specific arrangement. Health systems should use specialty-, geography-, and job-specific survey data and appropriate legal review when structuring compensation.

The 2026 Compensation Landscape

National compensation is rising, but reimbursement pressure, shortages, workload, and practice consolidation continue to reshape physician economics.

1. Modest compensation growth	Medscape reported physician compensation increased about 3% in 2025. Doximity reported 3.7% growth from 2023 to 2024, while AMGA reported a 4.9% increase across its 2024 provider dataset.
2. Demand remains broad	Doximity's most recruited specialties included internal medicine, family medicine, psychiatry, pediatrics, OB/GYN, emergency medicine, neurology, general surgery, anesthesiology, and radiology.
3. Reimbursement pressure matters	Physicians continue to report concern about Medicare and Medicaid reimbursement, while inflation-adjusted Medicare physician payment remains substantially below its 2001 level.
4. Private practice is shrinking	AMA data show the share of physicians in private practice declined to 42.2% in 2024, increasing the importance of employed compensation design and organizational culture.
5. Work-life balance has monetary value	Doximity reported 77% of surveyed physicians had accepted or would accept lower pay for greater autonomy or work-life balance.
6. Pediatric economics remain challenging	Doximity found large compensation gaps between pediatric and adult counterparts and widespread concern that reimbursement impairs recruitment and retention.

Sources: Doximity 2025 Physician Compensation Report; Medscape 2026 Physician Compensation Report; AMGA 2025 survey; AMA physician practice research.

National Average Physician Compensation by Specialty

Ranked national averages for 52 specialties - page 1 of 3.

Rank	Specialty	Category	National Average Compensation
1	Neurosurgery	Surgical & Procedural	**$749,140**
2	Thoracic Surgery	Surgical & Procedural	**$689,969**
3	Orthopaedic Surgery	Surgical & Procedural	**$679,517**
4	Pediatric (General) Surgery	Surgical & Procedural	**$647,721**
5	Plastic Surgery	Surgical & Procedural	**$621,445**
6	Oral & Maxillofacial Surgery	Surgical & Procedural	**$616,748**
7	Radiation Oncology	Surgical & Procedural	**$588,678**
8	Cardiology	Surgical & Procedural	**$587,360**
9	Vascular Surgery	Surgical & Procedural	**$576,452**
10	Interventional Radiology	Surgical & Procedural	**$572,617**
11	Radiology	Surgical & Procedural	**$571,749**
12	Urology	Surgical & Procedural	**$559,474**
13	Gastroenterology	Surgical & Procedural	**$537,870**
14	Otolaryngology (ENT)	Surgical & Procedural	**$523,369**
15	Anesthesiology	Surgical & Procedural	**$523,277**
16	Dermatology	Surgical & Procedural	**$508,401**
17	Oncology	Surgical & Procedural	**$502,465**
18	Colon & Rectal Surgery	Surgical & Procedural	**$487,085**

Source: Doximity 2025 Physician Compensation Report. Compensation reflects average annual earnings reported by full-time U.S. physicians for 2024. Some specialties are excluded by the source because of sample-size limitations.

National Average Physician Compensation by Specialty

Ranked national averages for 52 specialties - page 2 of 3.

Rank	Specialty	Category	National Average Compensation
19	General Surgery	Surgical & Procedural	**$482,574**
20	Ophthalmology	Surgical & Procedural	**$477,232**
21	Pulmonology	Medical, Diagnostic & Hospital-Based	**$425,700**
22	Hematology	Medical, Diagnostic & Hospital-Based	**$421,482**
23	Emergency Medicine	Medical, Diagnostic & Hospital-Based	**$411,133**
24	Obstetrics & Gynecology	Medical, Diagnostic & Hospital-Based	**$389,566**
25	Physical Medicine & Rehabilitation	Medical, Diagnostic & Hospital-Based	**$374,886**
26	Pathology	Medical, Diagnostic & Hospital-Based	**$373,384**
27	Nephrology	Medical, Diagnostic & Hospital-Based	**$367,425**
28	Neurology	Medical, Diagnostic & Hospital-Based	**$360,519**
29	Neonatology/Perinatology	Pediatric Specialties	**$354,841**
30	Pediatric Cardiology	Pediatric Specialties	**$352,197**
31	Psychiatry	Medical, Diagnostic & Hospital-Based	**$341,977**
32	Occupational Medicine	Medical, Diagnostic & Hospital-Based	**$326,993**
33	Internal Medicine	Primary Care & Generalist	**$326,116**
34	Rheumatology	Medical, Diagnostic & Hospital-Based	**$324,954**
35	Infectious Disease	Medical, Diagnostic & Hospital-Based	**$320,730**
36	Family Medicine	Primary Care & Generalist	**$318,959**

Source: Doximity 2025 Physician Compensation Report. Compensation reflects average annual earnings reported by full-time U.S. physicians for 2024. Some specialties are excluded by the source because of sample-size limitations.

National Average Physician Compensation by Specialty

Ranked national averages for 52 specialties - page 3 of 3.

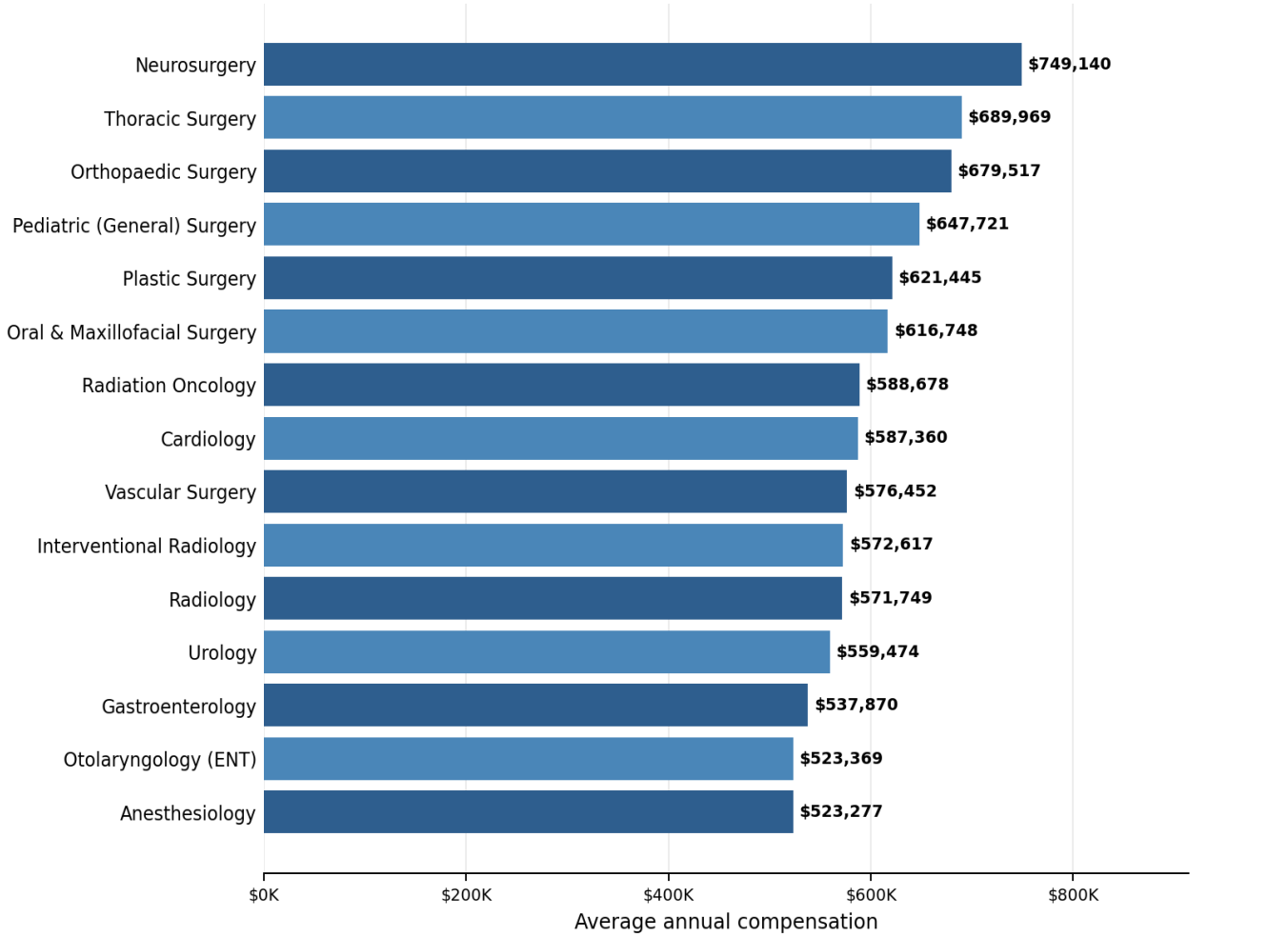
Rank	Specialty	Category	National Average Compensation
37	Pediatric Emergency Medicine	Pediatric Specialties	**$312,271**
38	Preventive Medicine	Primary Care & Generalist	**$310,177**
39	Allergy & Immunology	Medical, Diagnostic & Hospital-Based	**$308,846**
40	Pediatric Gastroenterology	Pediatric Specialties	**$298,457**
41	Medicine/Pediatrics	Primary Care & Generalist	**$296,665**
42	Geriatrics	Primary Care & Generalist	**$291,968**
43	Endocrinology	Medical, Diagnostic & Hospital-Based	**$290,606**
44	Child Neurology	Pediatric Specialties	**$289,738**
45	Pediatric Pulmonology	Pediatric Specialties	**$282,000**
46	Pediatrics	Pediatric Specialties	**$265,230**
47	Pediatric Nephrology	Pediatric Specialties	**$263,013**
48	Medical Genetics	Medical, Diagnostic & Hospital-Based	**$259,564**
49	Pediatric Hematology & Oncology	Pediatric Specialties	**$255,733**
50	Pediatric Infectious Disease	Pediatric Specialties	**$248,322**
51	Pediatric Rheumatology	Pediatric Specialties	**$231,574**
52	Pediatric Endocrinology	Pediatric Specialties	**$230,426**

Source: Doximity 2025 Physician Compensation Report. Compensation reflects average annual earnings reported by full-time U.S. physicians for 2024. Some specialties are excluded by the source because of sample-size limitations.

Highest-Paid Specialties

Surgical and procedural specialties dominate the upper end of the national compensation distribution.

15 Highest National Average Compensation Benchmarks



Recruiting implication

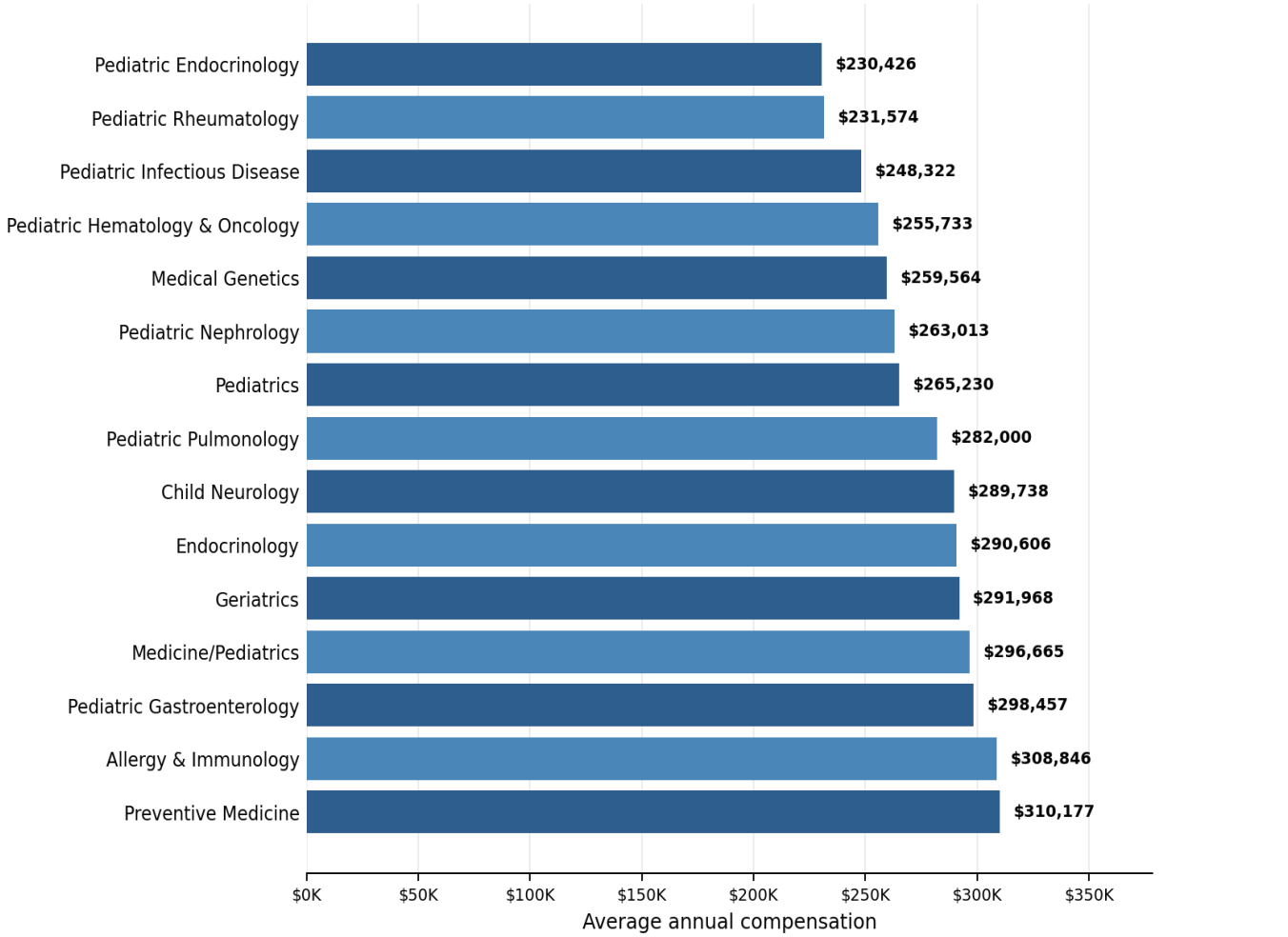
Compensation alone may not secure these specialists. Call burden, operating-room access, advanced equipment, referral support, block time, and leadership opportunities can materially affect acceptance and retention.

Source: Doximity 2025 Physician Compensation Report.

Lower-Paid Specialties

Primary care and pediatric subspecialties are concentrated at the lower end of the national compensation distribution.

15 Lowest National Average Compensation Benchmarks



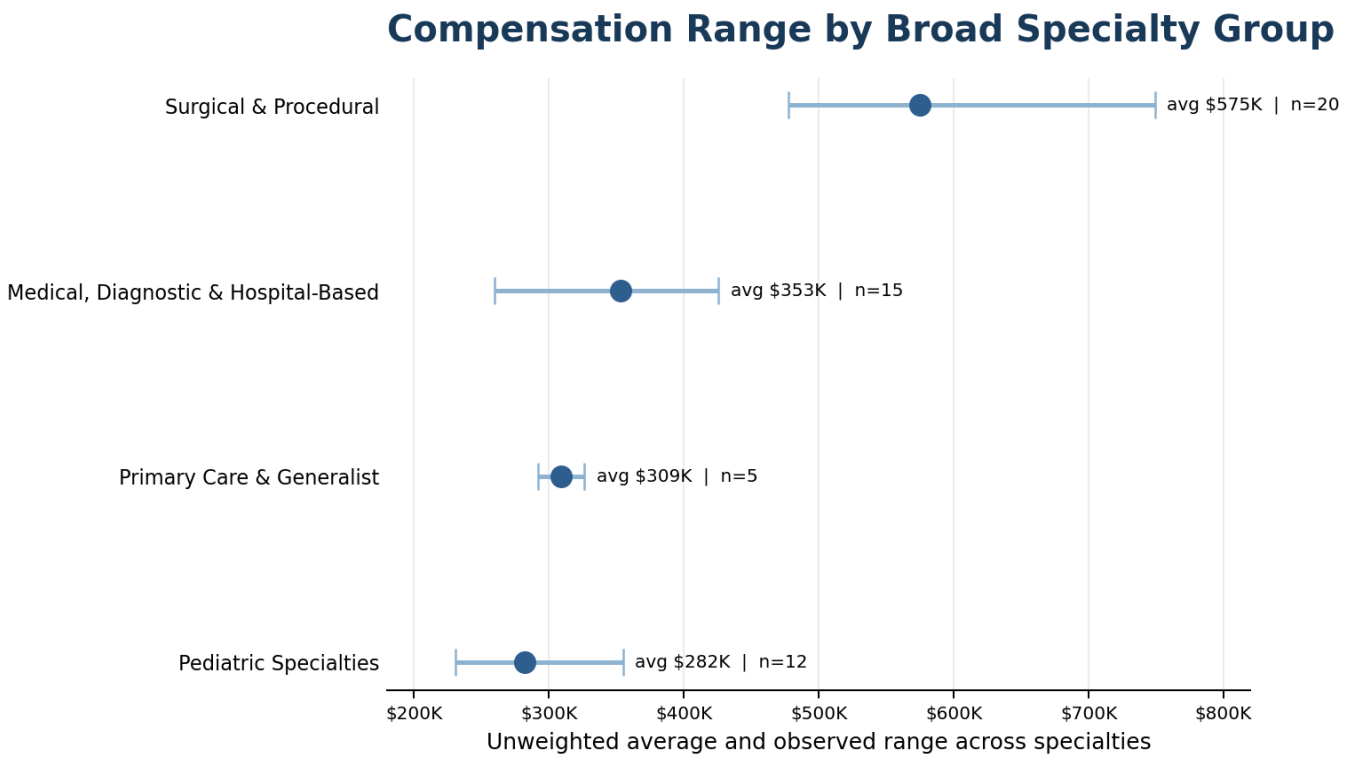
Recruiting implication

Lower national averages do not necessarily indicate lower demand. Several primary care and pediatric fields face significant shortages, making schedule design, loan support, team resources, and mission alignment especially important.

Source: Doximity 2025 Physician Compensation Report.

Compensation Ranges by Specialty Group

The dots show the unweighted average within this guide's broad categories; the whiskers show the lowest and highest specialty benchmark in each group.



The category view highlights two structural realities. First, compensation varies more within broad groups than a single category average implies. Second, pediatric specialties remain compressed at the lower end of the market even where clinical complexity and workforce scarcity are substantial.

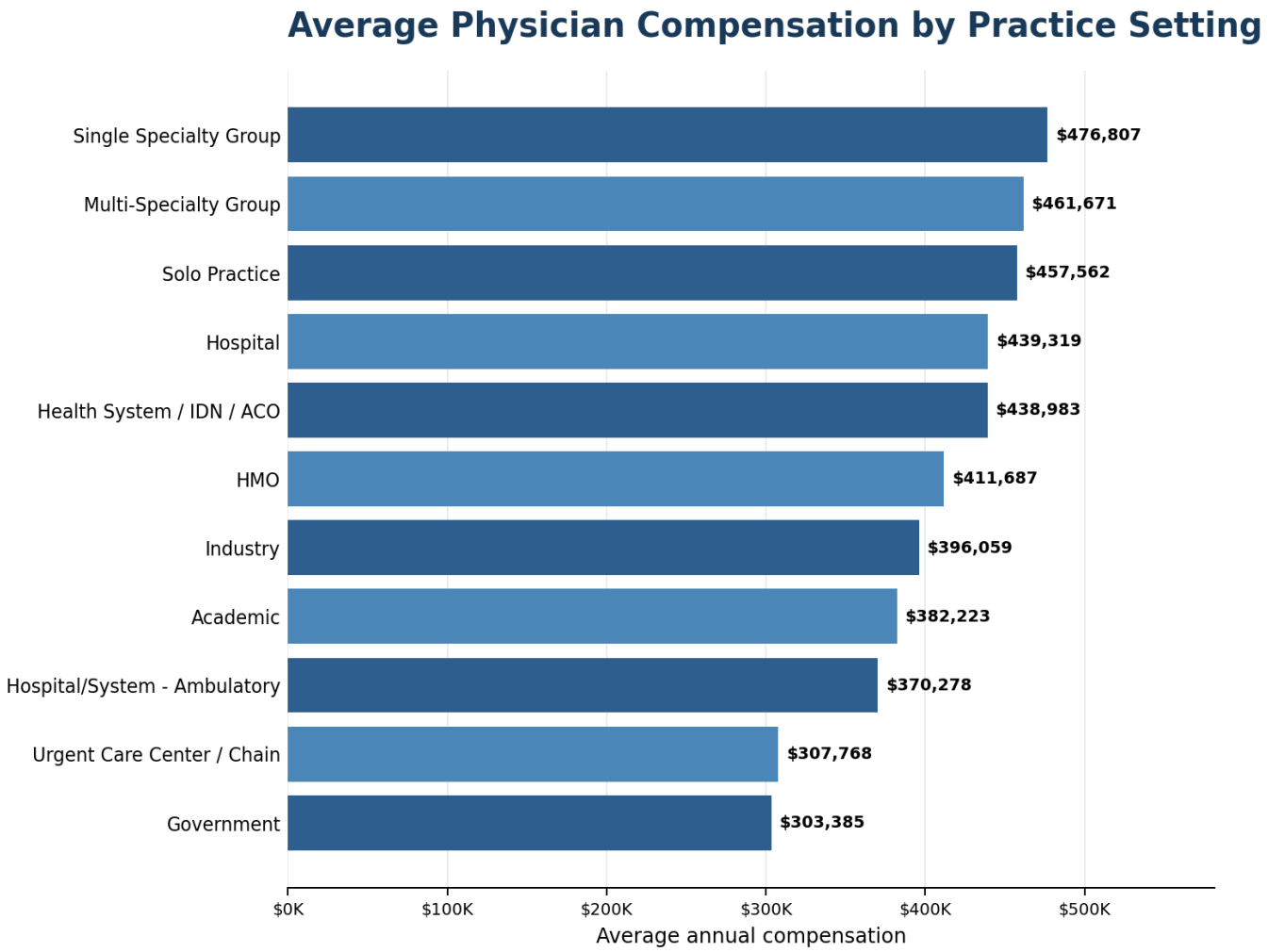
Use with care

Category averages are descriptive and unweighted. They are not a substitute for a specialty-specific benchmark, and they should never be used to value an individual position without geography and job-design adjustments.

Calculated from the 52 specialty averages published in Doximity's 2025 Physician Compensation Report.

Practice Setting Matters

Average compensation differs materially across employment models, even after Doximity adjusts for specialty, location, and years of experience.



Single-specialty groups, multispecialty groups, and solo practices led the reported setting averages. Academic, ambulatory health-system, urgent-care, and government settings reported lower averages, often in exchange for different schedules, missions, benefits, research opportunities, or administrative responsibilities.

Source: Doximity 2025 Physician Compensation Report. Practice-setting averages are adjusted analyses and should not be compared directly with a specific specialty offer.

Surgical & Procedural

Procedural intensity, call coverage, training length, and specialist scarcity are the most consistent compensation drivers.

SURGICAL & PROCEDURAL

Neurosurgery

Complex operative care, intensive call coverage, long training, and limited specialist supply support premium compensation.

$749,140

NATIONAL AVERAGE
ANNUAL COMPENSATION

SURGICAL & PROCEDURAL

Thoracic Surgery

Cardiac and thoracic procedures, hospital call, and high-acuity referral care are the principal compensation drivers.

$689,969

NATIONAL AVERAGE
ANNUAL COMPENSATION

SURGICAL & PROCEDURAL

Orthopaedic Surgery

High surgical volume, trauma coverage, and subspecialization in spine, joints, sports, or hand can materially affect earnings.

$679,517

NATIONAL AVERAGE
ANNUAL COMPENSATION

SURGICAL & PROCEDURAL

Pediatric (General) Surgery

A small national workforce, tertiary referral concentration, and complex neonatal and pediatric surgery sustain strong demand.

$647,721

NATIONAL AVERAGE
ANNUAL COMPENSATION

Source: Doximity 2025 Physician Compensation Report (2024 full-time U.S. physician compensation). Figures represent average annual compensation, not guaranteed base salary.

Surgical & Procedural

National average annual compensation benchmarks - continued.

SURGICAL & PROCEDURAL

Plastic Surgery

Compensation reflects the mix of reconstructive, hospital-based, and elective procedures, with wide practice-setting variation.

$621,445

NATIONAL AVERAGE ANNUAL COMPENSATION

SURGICAL & PROCEDURAL

Oral & Maxillofacial Surgery

Hospital and office procedures, trauma, and dual dental-medical expertise contribute to high earning potential.

$616,748

NATIONAL AVERAGE ANNUAL COMPENSATION

SURGICAL & PROCEDURAL

Radiation Oncology

Technology-intensive cancer treatment, complex planning, and multidisciplinary oncology care shape compensation.

$588,678

NATIONAL AVERAGE ANNUAL COMPENSATION

SURGICAL & PROCEDURAL

Cardiology

High-acuity diagnostics, procedures, inpatient call, and subspecialty differences drive a broad compensation range.

$587,360

NATIONAL AVERAGE ANNUAL COMPENSATION

Source: Doximity 2025 Physician Compensation Report (2024 full-time U.S. physician compensation). Figures represent average annual compensation, not guaranteed base salary.

Surgical & Procedural

National average annual compensation benchmarks - continued.

SURGICAL & PROCEDURAL

Vascular Surgery

Open and endovascular procedures, emergency call, and limited supply support premium recruitment packages.

$576,452

NATIONAL AVERAGE ANNUAL COMPENSATION

SURGICAL & PROCEDURAL

Interventional Radiology

Image-guided procedures, hospital call, and hybrid diagnostic-procedural responsibilities support above-average pay.

$572,617

NATIONAL AVERAGE ANNUAL COMPENSATION

SURGICAL & PROCEDURAL

Radiology

High reading volume, broad demand, subspecialty expertise, and teleradiology coverage influence total compensation.

$571,749

NATIONAL AVERAGE ANNUAL COMPENSATION

SURGICAL & PROCEDURAL

Urology

A blend of surgery and office procedures, an aging population, and subspecialty demand sustain strong compensation.

$559,474

NATIONAL AVERAGE ANNUAL COMPENSATION

Source: Doximity 2025 Physician Compensation Report (2024 full-time U.S. physician compensation). Figures represent average annual compensation, not guaranteed base salary.

Surgical & Procedural

National average annual compensation benchmarks - continued.

SURGICAL & PROCEDURAL

Gastroenterology

Endoscopy, procedural productivity, and growing digestive-disease demand remain central compensation drivers.

$537,870

NATIONAL AVERAGE ANNUAL COMPENSATION

SURGICAL & PROCEDURAL

Otolaryngology (ENT)

Compensation reflects a broad mix of surgery, office procedures, oncology, airway, and subspecialty care.

$523,369

NATIONAL AVERAGE ANNUAL COMPENSATION

SURGICAL & PROCEDURAL

Anesthesiology

Operating-room coverage, call burden, procedural demand, and care-team models strongly influence market rates.

$523,277

NATIONAL AVERAGE ANNUAL COMPENSATION

SURGICAL & PROCEDURAL

Dermatology

A high-volume ambulatory model combining medical, surgical, and procedural services supports strong compensation.

$508,401

NATIONAL AVERAGE ANNUAL COMPENSATION

Source: Doximity 2025 Physician Compensation Report (2024 full-time U.S. physician compensation). Figures represent average annual compensation, not guaranteed base salary.

Surgical & Procedural

National average annual compensation benchmarks - continued.

SURGICAL & PROCEDURAL

Oncology

Complex longitudinal cancer care, treatment oversight, and multidisciplinary demand support competitive packages.

$502,465

NATIONAL AVERAGE ANNUAL COMPENSATION

SURGICAL & PROCEDURAL

Colon & Rectal Surgery

Subspecialty colorectal procedures and concentrated referral patterns contribute to above-average surgical compensation.

$487,085

NATIONAL AVERAGE ANNUAL COMPENSATION

SURGICAL & PROCEDURAL

General Surgery

Broad operative scope, emergency coverage, and rural or community need create meaningful geographic variation.

$482,574

NATIONAL AVERAGE ANNUAL COMPENSATION

SURGICAL & PROCEDURAL

Ophthalmology

Ambulatory surgery, office procedures, and high-throughput practice models are key compensation drivers.

$477,232

NATIONAL AVERAGE ANNUAL COMPENSATION

Source: Doximity 2025 Physician Compensation Report (2024 full-time U.S. physician compensation). Figures represent average annual compensation, not guaranteed base salary.

Medical, Diagnostic & Hospital-Based

These specialties span acute hospital care, diagnostics, consultative medicine, and longitudinal disease management.

MEDICAL, DIAGNOSTIC & HOSPITAL-BASED

Pulmonology

Compensation varies with critical care, bronchoscopy, sleep medicine, inpatient coverage, and call responsibilities.

$425,700

NATIONAL AVERAGE ANNUAL COMPENSATION

MEDICAL, DIAGNOSTIC & HOSPITAL-BASED

Hematology

Complex consultative care and frequent overlap with oncology create substantial variation by practice model.

$421,482

NATIONAL AVERAGE ANNUAL COMPENSATION

MEDICAL, DIAGNOSTIC & HOSPITAL-BASED

Emergency Medicine

Shift coverage, patient acuity, night and weekend work, and rural staffing needs shape market compensation.

$411,133

NATIONAL AVERAGE ANNUAL COMPENSATION

MEDICAL, DIAGNOSTIC & HOSPITAL-BASED

Obstetrics & Gynecology

Deliveries, surgery, call coverage, liability exposure, and local access needs materially affect compensation.

$389,566

NATIONAL AVERAGE ANNUAL COMPENSATION

Source: Doximity 2025 Physician Compensation Report (2024 full-time U.S. physician compensation). Figures represent average annual compensation, not guaranteed base salary.

Medical, Diagnostic & Hospital-Based

National average annual compensation benchmarks - continued.

MEDICAL, DIAGNOSTIC & HOSPITAL-BASED

Physical Medicine & Rehabilitation

Inpatient rehabilitation, musculoskeletal care, procedures, and pain or sports focus create varied earning models.

$374,886

NATIONAL AVERAGE ANNUAL COMPENSATION

MEDICAL, DIAGNOSTIC & HOSPITAL-BASED

Pathology

Diagnostic volume, laboratory leadership, subspecialty expertise, and practice scale influence compensation.

$373,384

NATIONAL AVERAGE ANNUAL COMPENSATION

MEDICAL, DIAGNOSTIC & HOSPITAL-BASED

Nephrology

Chronic kidney disease, inpatient consultation, dialysis oversight, and call demands shape compensation.

$367,425

NATIONAL AVERAGE ANNUAL COMPENSATION

MEDICAL, DIAGNOSTIC & HOSPITAL-BASED

Neurology

Strong demand and major subspecialty differences - including stroke, epilepsy, and neuromuscular care - affect pay.

$360,519

NATIONAL AVERAGE ANNUAL COMPENSATION

Source: Doximity 2025 Physician Compensation Report (2024 full-time U.S. physician compensation). Figures represent average annual compensation, not guaranteed base salary.

Medical, Diagnostic & Hospital-Based

National average annual compensation benchmarks - continued.

MEDICAL, DIAGNOSTIC & HOSPITAL-BASED

Psychiatry

Persistent workforce shortages, outpatient demand, and telepsychiatry expansion support broad recruiting need.

$341,977

NATIONAL AVERAGE ANNUAL COMPENSATION

MEDICAL, DIAGNOSTIC & HOSPITAL-BASED

Occupational Medicine

Employer-based care, injury management, regulatory work, and generally predictable schedules define the market.

$326,993

NATIONAL AVERAGE ANNUAL COMPENSATION

MEDICAL, DIAGNOSTIC & HOSPITAL-BASED

Rheumatology

Growing autoimmune-disease demand, longitudinal care, and infusion services influence compensation.

$324,954

NATIONAL AVERAGE ANNUAL COMPENSATION

MEDICAL, DIAGNOSTIC & HOSPITAL-BASED

Infectious Disease

Consultative complexity, antimicrobial stewardship, and public-health value are high despite lower procedural revenue.

$320,730

NATIONAL AVERAGE ANNUAL COMPENSATION

Source: Doximity 2025 Physician Compensation Report (2024 full-time U.S. physician compensation). Figures represent average annual compensation, not guaranteed base salary.

Medical, Diagnostic & Hospital-Based

National average annual compensation benchmarks - continued.

MEDICAL, DIAGNOSTIC & HOSPITAL-BASED

Allergy & Immunology

Outpatient testing, immunotherapy, chronic disease management, and predictable schedules shape compensation.

$308,846

NATIONAL AVERAGE ANNUAL COMPENSATION

MEDICAL, DIAGNOSTIC & HOSPITAL-BASED

Endocrinology

High demand for diabetes and thyroid care is balanced by predominantly cognitive, longitudinal practice.

$290,606

NATIONAL AVERAGE ANNUAL COMPENSATION

MEDICAL, DIAGNOSTIC & HOSPITAL-BASED

Medical Genetics

A small workforce, consultative care, and concentration in academic or tertiary settings influence compensation.

$259,564

NATIONAL AVERAGE ANNUAL COMPENSATION

Source: Doximity 2025 Physician Compensation Report (2024 full-time U.S. physician compensation). Figures represent average annual compensation, not guaranteed base salary.

Primary Care & Generalist

National demand remains high, with compensation increasingly influenced by geography, value-based incentives, and scope of practice.

PRIMARY CARE & GENERALIST

Internal Medicine

Compensation varies widely between outpatient primary care, hospital medicine pathways, and geographic markets.

$326,116

NATIONAL AVERAGE ANNUAL COMPENSATION

PRIMARY CARE & GENERALIST

Family Medicine

Broad scope, high national demand, rural premiums, and value-based incentives support a rising market.

$318,959

NATIONAL AVERAGE ANNUAL COMPENSATION

PRIMARY CARE & GENERALIST

Preventive Medicine

Population health, public health, employer, and health-system leadership roles create diverse compensation structures.

$310,177

NATIONAL AVERAGE ANNUAL COMPENSATION

PRIMARY CARE & GENERALIST

Medicine/Pediatrics

Dual training provides flexibility across adult and pediatric care, hospital medicine, and transition programs.

$296,665

NATIONAL AVERAGE ANNUAL COMPENSATION

PRIMARY CARE & GENERALIST

Geriatrics

Aging demographics and complex care-management needs drive demand, though reimbursement remains largely cognitive.

$291,968

NATIONAL AVERAGE ANNUAL COMPENSATION

Source: Doximity 2025 Physician Compensation Report (2024 full-time U.S. physician compensation). Figures represent average annual compensation, not guaranteed base salary.

Pediatric Specialties

Pediatric compensation remains lower than comparable adult specialties, despite complex care and persistent workforce shortages.

PEDIATRIC SPECIALTIES

Neonatology/Perinatology

NICU acuity, in-house coverage, high-risk deliveries, and tertiary referral care drive compensation.

$354,841

NATIONAL AVERAGE ANNUAL COMPENSATION

PEDIATRIC SPECIALTIES

Pediatric Cardiology

Congenital heart disease, advanced imaging, procedures, and tertiary-center concentration shape the market.

$352,197

NATIONAL AVERAGE ANNUAL COMPENSATION

PEDIATRIC SPECIALTIES

Pediatric Emergency Medicine

Specialized acute-care shifts, children's hospital coverage, and night or weekend work influence compensation.

$312,271

NATIONAL AVERAGE ANNUAL COMPENSATION

PEDIATRIC SPECIALTIES

Pediatric Gastroenterology

Endoscopy, chronic digestive disease, and limited specialist supply support demand in regional centers.

$298,457

NATIONAL AVERAGE ANNUAL COMPENSATION

Source: Doximity 2025 Physician Compensation Report (2024 full-time U.S. physician compensation). Figures represent average annual compensation, not guaranteed base salary.

Pediatric Specialties

National average annual compensation benchmarks - continued.

PEDIATRIC SPECIALTIES

Child Neurology

A scarce workforce and complex chronic neurologic care create persistent recruitment challenges.

$289,738

NATIONAL AVERAGE ANNUAL COMPENSATION

PEDIATRIC SPECIALTIES

Pediatric Pulmonology

Asthma, cystic fibrosis, sleep, and inpatient consultation needs are concentrated in children's hospitals.

$282,000

NATIONAL AVERAGE ANNUAL COMPENSATION

PEDIATRIC SPECIALTIES

Pediatrics

Compensation varies by outpatient, hospitalist, academic, and underserved-market practice settings.

$265,230

NATIONAL AVERAGE ANNUAL COMPENSATION

PEDIATRIC SPECIALTIES

Pediatric Nephrology

Complex kidney disease, dialysis, transplant care, and a very small workforce create high recruitment need.

$263,013

NATIONAL AVERAGE ANNUAL COMPENSATION

Source: Doximity 2025 Physician Compensation Report (2024 full-time U.S. physician compensation). Figures represent average annual compensation, not guaranteed base salary.

Pediatric Specialties

National average annual compensation benchmarks - continued.

PEDIATRIC SPECIALTIES

Pediatric Hematology & Oncology

Highly complex care is concentrated in academic and children's hospitals, where reimbursement pressures remain significant.

$255,733

NATIONAL AVERAGE ANNUAL COMPENSATION

PEDIATRIC SPECIALTIES

Pediatric Infectious Disease

Consultation, stewardship, immunocompromised care, and academic concentration shape compensation.

$248,322

NATIONAL AVERAGE ANNUAL COMPENSATION

PEDIATRIC SPECIALTIES

Pediatric Rheumatology

One of the smallest pediatric workforces, with chronic autoimmune care concentrated in tertiary centers.

$231,574

NATIONAL AVERAGE ANNUAL COMPENSATION

PEDIATRIC SPECIALTIES

Pediatric Endocrinology

Diabetes and endocrine care demand is high, while predominantly cognitive reimbursement constrains compensation.

$230,426

NATIONAL AVERAGE ANNUAL COMPENSATION

Source: Doximity 2025 Physician Compensation Report (2024 full-time U.S. physician compensation). Figures represent average annual compensation, not guaranteed base salary.

Advanced Practice Provider Compensation

APP compensation remains highly sensitive to specialty, call, overtime, shift differentials, and practice setting.

Role	National Median Annual Pay	Benchmark Note
Nurse Practitioner	**$132,050**	BLS combined category median for nurse anesthetists, nurse midwives, and nurse practitioners; specialty-specific NP pay varies significantly.
Physician Assistant	**$133,260**	BLS median annual wage, May 2024; the highest-paid settings and surgical or procedural roles can exceed the national median.

APP market factors

- Specialty premium: Emergency, surgical, critical care, anesthesia, and procedure-oriented APP roles often command higher compensation.
- Shift and call design: Night, weekend, holiday, overtime, and call structures can materially change annual earnings.
- Scope and autonomy: State law, organizational policy, experience, and prescribing or procedural responsibilities influence market rates.
- Team economics: The strongest APP models evaluate contribution to access, physician capacity, throughput, and team productivity - not just individual volume.

Benchmarking reminder

The BLS figures are occupational medians, not specialty-specific total compensation. Employers should supplement them with AANP, AAPA, MGMA, AMGA, or other role-specific survey data when designing offers.

Sources: U.S. Bureau of Labor Statistics Occupational Outlook Handbook and Occupational Employment and Wage Statistics.

Understanding Total Compensation

A competitive physician offer is a portfolio of guaranteed pay, incentives, benefits, schedule design, and professional support.

Guaranteed base salary	The predictable annual amount. Clarify whether it is tied to a defined clinical FTE, shift count, schedule, or wRVU threshold.
Productivity incentives	Often tied to wRVUs, collections, encounters, procedures, or shifts. The formula, threshold, conversion factor, and reconciliation process should be transparent.
Quality and value incentives	May include clinical quality, patient experience, access, documentation, citizenship, or population-health measures.
Call and coverage pay	Define included call, excess call, callback, overnight coverage, holiday premiums, and whether post-call relief is provided.
Signing and retention incentives	Signing bonuses, commencement bonuses, retention payments, and forgivable loans should include clear repayment terms.
Student-loan support	Especially influential in primary care, rural, pediatric, and other hard-to-recruit markets.
Benefits and professional expenses	Health coverage, retirement, malpractice and tail, CME, dues, licenses, relocation, and paid time off all affect offer value.
Equity or partnership	Ownership, ancillary distributions, buy-in terms, governance rights, and exit provisions can materially change long-term economics.

AMA research on compensation structure

In 2024, salary accounted for 58.2% of physician compensation on average, while productivity accounted for approximately 28%. The broader trend is toward blended models that combine salary with productivity and/or bonuses rather than relying on a single method.

Source: American Medical Association, Physician Practice Benchmark Survey analysis of compensation methods, 2014-2024.

Strategic Guidance for Hospital Administrators

The right compensation package must be market-aligned, operationally supportable, transparent, and sustainable.

Benchmark the actual job, not just the specialty	Account for FTE, clinical hours, call, shifts, procedures, leadership, teaching, supervision, and expected productivity.
Use multiple credible surveys	Triangulate current specialty and regional data. National averages provide orientation but can conceal large geographic and practice-setting differences.
Lead with total value	Show base, realistic incentive opportunity, retirement, malpractice and tail, loan support, signing incentives, PTO, CME, and schedule advantages in one clear summary.
Design attainable incentives	A bonus that few physicians can earn is not competitive. Validate thresholds against historical volumes, staffing, referral supply, OR access, and payer mix.
Treat retention as a compensation strategy	Annual market reviews, leadership access, schedule flexibility, support staffing, and administrative burden reduction can prevent expensive turnover.
Address rural recruitment creatively	Compensation premiums help, but housing, spousal support, loan repayment, schedule blocks, telehealth, and community integration often determine success.
Build APP teams intentionally	Define scope, supervision, escalation, attribution, and team metrics. APP deployment should expand access and physician capacity rather than simply transfer workload.
Document fair-market-value support	Use qualified compensation expertise and legal review for arrangements involving referrals, leadership duties, call, or unusual incentive structures.

Strategic Guidance for Physicians

Evaluate the full economic and professional package over the expected life of the contract.

Know which number you are comparing	Base salary, cash compensation, total compensation, owner income, and benefits are not interchangeable. Match the offer component to the survey definition.
Test the productivity model	Ask for the wRVU or collections threshold, conversion rate, quality gates, attribution rules, current physician performance, and historical payout distribution.
Price call and schedule burden	Night work, weekend frequency, backup call, callback, post-call expectations, PTO coverage, and schedule control can be worth more than a modest salary difference.
Value malpractice and tail	Understand whether coverage is occurrence or claims-made and who pays tail at departure, termination, retirement, or a change in carrier.
Review restrictive covenants and termination	State law is changing. Obtain legal review of notice periods, repayment obligations, noncompetes, nonsolicitation, and compensation during notice.
Examine organizational capacity	Recruiting promises require operational support: nurses, APPs, scribes, OR time, equipment, referral development, beds, imaging, and administrative responsiveness.
Model the three-to-five-year value	Include signing incentives, loan repayment, retirement contributions, realistic bonus attainment, partnership economics, and the cost of relocation or departure.

Most recruited specialties in Doximity's 2024 job-posting analysis

1. Internal Medicine	2. Family Medicine
3. Psychiatry	4. Pediatrics
5. Obstetrics & Gynecology	6. Emergency Medicine
7. Neurology	8. General Surgery
9. Anesthesiology	10. Radiology

Source: Doximity 2025 Physician Compensation Report, based on tens of thousands of job postings across the Doximity network in 2024.

Data Sources & Methodology

Compensation benchmarks should be interpreted in the context of source definitions, sample design, and reporting period.

Doximity 2025 Physician Compensation Report	Primary source for all 52 specialty averages, compensation growth, practice setting, physician demand, and selected workforce trends. Specialty data reflect 2024 compensation from full-time U.S. physicians.
Medscape Physician Compensation Report 2026	Source for the current overall U.S. physician compensation headline of approximately $386,000 and 2025 market growth context.
AMGA 2025 Medical Group Compensation and Productivity Survey	Used for medical-group compensation and productivity trend context. The published survey included more than 184,500 providers across nearly 500 medical groups.
American Medical Association research	Used for compensation-method structure, physician practice ownership, and the shift toward blended salary, productivity, and bonus models.
U.S. Bureau of Labor Statistics	Used for national occupational wage benchmarks for physician assistants and the combined APRN category.
Original Inspire Medical 2026 Physician Salary Guide	Preserved the visual identity, strategic framing, APP section, compensation-component discussion, administrator and physician guidance, and Inspire Medical company information while substantially expanding specialty coverage.

Specialty table limitations

Doximity notes that some specialties are not included because of sample-size limitations. Accordingly, this guide covers every specialty in Doximity's current public comprehensive table, not every possible ABMS board and subspecialty designation. Averages are national and may differ materially from regional, employed, academic, private-practice, ownership, or locum-tenens benchmarks.

Rounding and calculations

Published specialty figures are shown to the nearest dollar, matching the source. Category averages and ranges are calculated from the specialty values in this guide and are unweighted; they are provided only as descriptive graphics.

About Inspire Medical Staffing

A healthcare recruitment and staffing partner for physicians and advanced practice providers.

Inspire Medical Staffing partners with healthcare organizations to identify, recruit, and retain physician and advanced practice provider talent. The company's services include emergency services management, permanent placement across specialties, locum tenens staffing, APP recruitment, compensation consulting, and retention strategy development.

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Disclaimer

This report is intended for informational and recruiting-market purposes only. It is not legal, financial, tax, valuation, or career advice. Compensation data represent national averages or medians from the cited sources; individual circumstances vary significantly based on geography, practice setting, ownership, specialty focus, experience, schedule, call, productivity, payer mix, benefits, and market conditions.

Healthcare organizations should conduct independent market review and obtain appropriate legal and compensation expertise before establishing or approving physician compensation. Physicians and APPs should obtain legal, financial, and professional advice before entering an employment or independent-contractor agreement.

Guide compiled July 2026. Compensation figures are subject to change.