

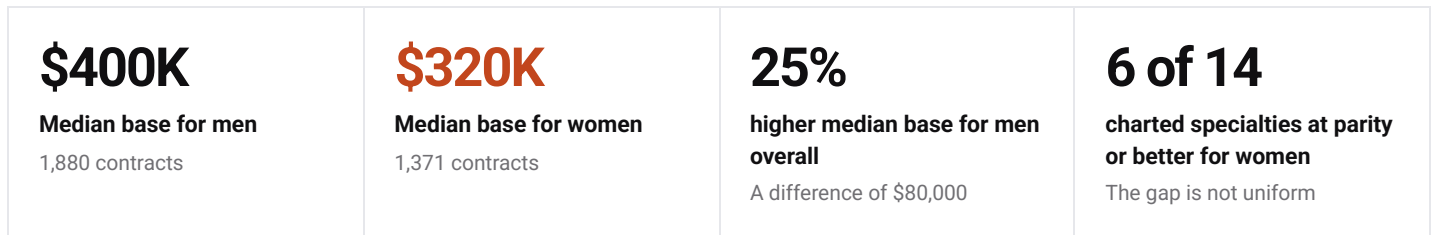
An \$80,000 gap sits in the signed contracts.

Most pay-gap research relies on self-reported survey data. This view comes from the agreements themselves: median base salary as written into physician employment contracts submitted to Resolve for review, split by gender across the specialties with enough contracts on both sides to report.

3,251 CONTRACTS WITH GENDER RECORDED 1,880 MEN 1,371 WOMEN ≥20 PER GROUP TO CHART

01 — ALL PHYSICIANS

MEDIAN BASE SALARY, SIGNED CONTRACTS



02 — WHERE THE GAP OPENS, AND WHERE IT CLOSES

MEDIAN BASE BY SPECIALTY · MEN VS. WOMEN



Median base salary only — not adjusted for hours, FTE, subspecialty mix, or years in practice. Specialties with fewer than 20 contracts in either group are excluded.

The same contracts show that compensation increasingly arrives through mechanisms other than base pay. Median bonus opportunity rose 12% while median base rose 2%. Where those mechanisms are discretionary, unwritten, or tied to volume assumptions, small differences at signing compound over a career.

Signing bonus \$20K–\$100K+	Near-universal in hospital-based and shortage specialties. Repayment risk is high: full repayment over 24–36 months with no proration is common.
Retention bonus \$20K–\$75K	Often added mid-contract in high-turnover roles. Frequently paired with clawbacks and non-compete extensions.
wRVU productivity VARIABLE COMP	Conversion rates and target thresholds moved higher in 2026. The rate (not the target) determines what additional volume is actually worth.
Parental leave	Rarely quantified in the compensation section. Paid duration, benefit continuation, and how leave interacts with productivity targets and bonus eligibility are usually addressed elsewhere in the agreement, or not at all.
Flexibility	Adjusted FTE, block scheduling, and phased schedules are commonly discussed and rarely written down. Verbal assurances do not survive a change in department leadership.

85% of reviewed contracts received changes of some kind The first offer is not the final offer	\$16.5M+ in additional base pay negotiated Across reviewed agreements	\$350K largest single base increase negotiated OB/GYN, South Carolina — \$700K final
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The gap is measurable before it is signed

Median base by specialty, state, and gender is published in the full report. A physician who knows the median for their specialty and market, and what the incentive structure is actually worth, is negotiating with data-backed leverage.

FREE • NO COST TO READ

Read the full 2026 Physician Salary & Employment Report

The complete report is free in exchange for an email address and specialty. It includes the full gender breakdown, every specialty benchmark, and the contract-term detail summarized here.

RESOLVE.COM/2026-PHYSICIAN-SALARY-EMPLOYMENT-REPORT

Your information is never sold or shared with recruiters or employers.