

The Emerging Profile of the Residency Trained Family Physician

John P. Geyman, MD
Seattle, Washington

A full decade has passed since the formation of the American Board of Family Practice in 1969, which led to the development of formally structured three-year graduate training programs in this specialty. Over 8,500 family physicians have been graduated from US family practice residency programs, and it is now both possible and timely to assess the impact and products of these programs.

The overall goal of this monograph is to describe the practice patterns, perceptions, and geographic distribution of representative samples of

residency trained family physicians in the United States. Four regional graduate follow-up studies are reported, representing different parts of the country and almost 600 graduates. Three of these studies involve well-established statewide networks of affiliated family practice residencies which agreed to collect similar and comparable information from their graduates. In addition, a separate but complementary national study by the American Academy of Family Physicians is included which involves over 3,000 respondents.

Together these studies provide, for the first time, a profile of the residency trained family physician which has important implications for medical education and medical practice in this country. Among some of the highlights of these studies are the following.

- The great majority of graduates (over 95 percent) are practicing as family physicians.

Dr. Geyman is Professor and Chairman, Department of Family Medicine, University of Washington, Seattle, Washington.

- Single specialty group and partnership practice attract well over one half of graduates, with only about one fifth of graduates entering solo practice.

- A broad spectrum of ambulatory and hospital practice is conducted by the graduates:

1. well over 90 percent of graduates hold hospital privileges in pediatrics, medicine, and family practice, including intensive care unit privileges in most instances

2. about two thirds of graduates nationally provide obstetric care, and over one third have some privileges for complicated obstetrics

3. almost two thirds of graduates serve as first assistants for major surgical procedures, while most include minor surgery in their practices

4. less than four percent of hospital privileges that have been requested have been denied in any category.

- About three fifths of the graduates are involved in teaching, usually on a part-time basis.

- The graduates of three statewide residency networks feel well prepared for practice as a result of their graduate training in the large majority of 60 content and process areas.

- High levels of practice satisfaction are reflected by the responses of the graduates of these statewide networks.

- Graduates are well represented in all sizes of communities, and gravitate to smaller and non-metropolitan areas more than do other specialties.

- Retention rates are consistently high in the

states where graduates completed their residency training.

A number of differences are demonstrated or can be reasonably inferred between the characteristics of residency trained family physicians and the still much larger general/family practice group. For example, in comparison to the latter group, residency trained family physicians:

1. have similar work weeks (usually about 60 hours), but see 15 to 25 percent fewer patients (commonly about 140 patient visits/week)

2. are more likely to be in partnership and group practice than in solo practice

3. include more women, with current trends pointing to about one fifth of future graduates being women (five times the proportion of women among all US general/family physicians in 1971)

4. more often utilize the problem oriented medical record and some kind of data retrieval system (eg, the E-book)

5. are more likely to be involved in teaching

6. appear to be more interested in collaborative research.

Further studies of practice patterns in family practice are needed, particularly comparative studies between specialties with respect to the process, outcomes, and costs of care. At this time, however, the results of these graduate follow-up studies effectively demonstrate that the initial promise and expectations for family practice are being met in directly alleviating the nation's deficits in primary health care.