POLICY BRIEF

Wide Gap between Preparation and Scope of Practice of Early Career Family Physicians

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We found substantial gaps between preparation for, and practice of, early career family physicians in nearly all clinical practice areas. With reported intentions of graduates for a broad scope of practice, gaps between practice and preparation suggest family physicians early in their careers may not be finding opportunities to provide comprehensive care. (J Am Board Fam Med 2018;31:181–182.)

Keywords: **Comprehensive Health Care, Family Physicians, Practice Gaps**

Family medicine residents graduating in 2014 reported much higher intentions to practice all clinical practice activities and procedures queried than what practicing family physicians reported when registering for the American Board of Family Medicine examination.[1] Residency graduates in a single state indicated a lack of training to be a common reason for not providing procedures[2], but the gap between preparation for and practice of a broad array of clinical services common in family medicine has not been rigorously studied. Our objective was to investigate differences in reported preparation for practice and actual scope of practice for early career family physicians.

We used data from the 2016 National Graduate Survey, which was sent to American Board of Family Medicine Diplomates who completed residency in 2013.[3] This survey included a series of paired dichotomous questions asking whether the respondent was prepared to practice and was practicing 25 specific services. We limited our sample to those providing primarily outpatient continuity care and calculated the frequency of reported preparation and practice. The American Academy of Family Physicians Institutional Review Board approved this study.

The overall response rate was 67.8% (2069 of 3051). After limiting our sample to those practicing outpatient continuity care, our final sample comprised 1617 respondents. Practice exceeded preparation only for behavioral health care (Figure 1). For specific services, the largest gaps between preparation and practice were for neonatal circumcision, maternity care, and pediatric hospital care. A majority of respondents reported being prepared to provide 14 services, whereas a majority provided only 4 of the services queried.

A substantial gap exists between the training and preparation family medicine residents receive and the services they deliver in practice. This gap was noted for maternity care among recent family medicine graduates over a decade ago[4], but our work extends this to other reported key areas of family medicine. With >50% of physicians now employed[5], the specialty of family medicine should address the possibility of employers influencing scope of practice. With evidence that comprehensive care is associated with lower overall health care

This article was externally peer reviewed.
Submitted 30 August 2017; revised 8 November 2017; accepted 13 November 2017.
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Funding: none.
Conflict of interest: LEP, BF, and JCP are employees of the American Board of Family Medicine.
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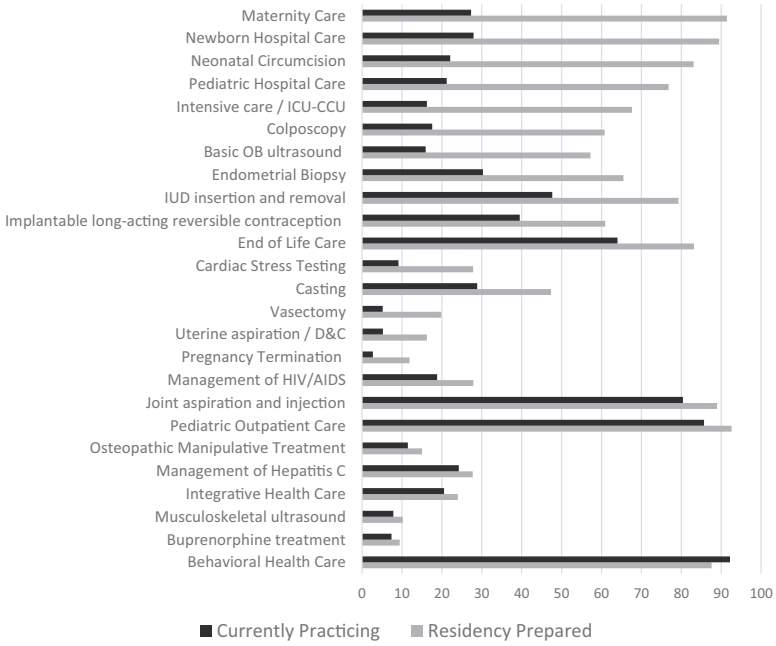
Figure 1. Reported preparation for practice, and provision of clinical services in 2016, by 2013 family medicine residency graduates (n = 1617). CCU, critical care unit; D&C, dilation and curettage; ICU, intensive care unit; IUD, intrauterine device; OB, obstetrics.



costs[6], patients, physicians, payers, and health care delivery organizations should work together to ensure family physicians can deliver care commensurate with their training.

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