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# Primary Care Physician Education

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The Medical Interview

1994 MOU Regarding Primary Care Physician  
Training by the University of California

A Manpower Policy for Primary Health Care

Primary and Team Health Care Education

Progress and Problems in Training and Use of  
Assistants to Primary Care Physicians,

Department of Health, Education, and Welfare

The Economics of Health Professional Education  
and Careers

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The Primary Care Toolkit

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Medicare and Graduate Medical Education

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Education* *Downloaded  
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## **ERICK MOONEY**

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### **The Medical**

**Interview** McGraw-Hill Professional Publishing Through ninety-five in-depth interviews with primary care physicians (PCPs) working in different settings, as well as medical students and residents, *Practice Under Pressure* provides rich insight into the everyday lives of generalist physicians in the early twenty-first century—their work, stresses, hopes, expectations, and values. Timothy Hoff supports this dialogue with secondary data, statistics, and in-depth comparisons that capture the changing face of primary care medicine—the larger

numbers of younger, female, and foreign-born physicians.

### **1994 MOU**

#### **Regarding Primary Care Physician**

#### **Training by the University of**

**California** McGraw-Hill/Appleton & Lange Research Paper (undergraduate) from the year 2017 in the subject Health Science, grade: B+, Loyola University Chicago, language: English, abstract: We are proposing the following solutions to the challenge of primary healthcare provider shortages in rural Washington: that undergraduate medical education (UME) pathway in the two medical schools in the state be altered; visa-waivers, loan-forgiveness and direct incentive programs

expanded; and residency funding be increased. These are workable with the right support and resources. We understand that primary healthcare physician shortages will worsen more and more over the next decade if nothing is done now; and there is no doubt that communities have been feeling the impacts of shortages. Since none of the plans proposed here can work to reduce the expected decrease, the right combination of strategies will result in an increase in the number of primary healthcare physicians per population in rural Washington, which is the main aim of this proposal.

A Manpower Policy for Primary Health Care  
Springer

The formation of health professionals is critical for the health system to function and to achieve its universal health coverage (UHC) goals, and this is well recognized by the majority of governments that plan to ensure enough training places and aim to regulate in order to ensure quality. But the importance of market forces is often overlooked, resulting in interventions and regulations that often fail to achieve their intended effects. This publication aims to inform the design of health professionals' education policies to better manage health labor market forces toward UHC. It documents what is known about the influence of market forces on the health-

professional formation process. The report sought to answer the following questions: - What have been the large global and regional trends in the development of health professions? - How have these trends affected the career decisions of current and potential health professionals? - What is the evidence base on the value and effectiveness of health professional education of different types? - How has the market for health professional education evolved, and with what interrelationships with the health labor and health care markets? The contexts of the market for health professional training have been subject to important changes in recent decades, in

particular: the growing extent of employment of mid-level cadres of health professionals; changes in technology and the associated growth of high skilled occupations; the increasing interconnectedness of national health systems through globalization, with its implications for international health professional mobility; and the greater complexity of the public-private mix in employment options. There is a need to ensure that market forces align with the intentions of planning and regulation and the needs of UHC goals. This publication provides recommendations to support the design of policies that help to achieve these.

**Primary and Team  
Health Care  
Education** GRIN

Verlag

As a result of a number of factors including compensation, practice environments, and socialization in medical school, there is an accelerating shortage in the number of primary care physicians in the U.S. In 2010, in its 20th Report to Congress, the Council on Graduate Medical Education called for increasing the percentage of primary care physicians from 32% to at least 40% to address this shortage. With the implementation of the Affordable Care Act, millions of uninsured and underinsured persons have become insured and enter the mainstream of

healthcare. The Affordable Care Act contains several important provisions to expand the primary care workforce. Graduate medical education is central to development of this workforce. This study aims to answer the following research question: How is an individual primary care graduate medical education residency program affected by and responding to the implementation of the Affordable Care Act and the current and projected primary care physician shortages exacerbated by the Affordable Care Act? Case study methods were used to pursue this question in the context of a primary care graduate medical education residency program. Several

useful implications for teaching, learning, and policy implementation emerged from this inquiry based on following themes, which emerged; the Affordable Care Act Impact, Model of Care, Advocacy, Resident Encouragement, and the Joy of Practice. This study found for the case study primary care residency program; a positive impact by the Affordable Care Act implementation, the Patient-Centered Medical Home Model of Care is well suited for primary care residency training and faculty role modeling including the Joy of Practice may encourage residents to pursue primary care practice post residency.

*Progress and Problems in Training and Use of*

*Assistants to Primary Care Physicians,*  
*Department of Health, Education, and Welfare*  
John Geyman, M.D.

Max makes an earthworm cake for Grandma's birthday and helps Ruby with her angel surprise cake. At the store, the grocer can't read all of the shopping list, until Max solves the problem by drawing a picture.

*The Economics of Health Professional Education and Careers*  
World Bank  
Publications

"There appears to be some agreement within the medical profession regarding the need to train more primary care physicians in the United States ..."--  
Cover.

Informatics in Primary Care Churchill

Livingstone  
 Primary care medicine is the new frontier in medicine. Every nation in the world has recognized the necessity to deliver personal and primary care to its people. This includes first-contact care, care based in a positive and caring personal relationship, care by a single healthcare provider for the majority of the patient's problems, coordination of all care by the patient's personal provider, advocacy for the patient by the provider, the provision of preventive care and psychosocial care, as well as care for episodes of acute and chronic illness. These facets of care work most effectively when they are embedded in a coherent integrated

approach. The support for primary care derives from several significant trends. First, technologically based care costs have rocketed beyond reason or availability, occurring in the face of exploding populations and diminishing real resources in many parts of the world, even in the wealthier nations.

Simultaneously, the primary care disciplines-general internal medicine and pediatrics and family medicine-have matured significantly.

#### The Primary Care

#### Toolkit Createspace

Independent Pub

Because of changes in the health care system, the hospital has become less suitable as the primary focus of graduate medical education for primary



care physicians. However, the current system of financing health care education and services makes it difficult to accomplish the needed shift to training in primary care ambulatory settings. This book suggests ways of lowering financial barriers to primary care training in ambulatory settings. *Big Doctoring in America* National Academies Press Evaluates Medicare's policy regarding graduate medical education (GME) & addresses concerns about federal budget spending. Provides an overview of the changing physician work force & the effects of Medicare's GME policy on residency training & teaching hospitals at which such training is

based. Presents various options for GME policy & explores their implications. Charts & tables. **A Bibliography on Financing the Education of Physicians for Primary Care** Univ of California Press The Education of Physicians for Primary Care Primary Care National Academies Press **The Education of Physicians for Primary Care** Critical Issues in Health and As a result of a number of factors including compensation, practice environments, and experience in medical school, there is a shortage in the number of primary care physicians that is accelerating. In addition, a percentage of

obstetricians/gynecologists serve as primary care providers, particularly among their younger female adult patients. While there are real shortages in general surgery and key pediatric and internal medicine subspecialties, the shortage in primary care providers, particularly those capable of caring for adults with chronic disease, overshadows the deficits in all other specialties. This shortage is especially critical in the context of health care reform objectives that have the potential of adding 32 million newly insured individuals that will only further increase the need for primary care physicians. The current U.S. primary care

physician workforce is in jeopardy of accelerated decline because of decreased production and accelerated attrition. A review of questionnaires administered to all 2008 allopathic and osteopathic medical school graduates revealed that only 17 percent chose any of the primary care specialties as their first choice. This decreased medical student interest in primary care is caused by multiple factors including the high workload and insufficient reimbursement of this field of practice relative to the earnings of many specialists. These factors, in addition to the “hidden curriculum” in many medical schools that actively discourages

student interest in the adult primary care specialties, the lack of strong primary care role models, and dynamic practice environments in other specialties often absent onerous administrative requirements, contribute to the reluctance to enter primary care disciplines. This workforce is also in jeopardy because of the substantial reduction in the production of primary care physicians from graduate medical education. Expansion of subspecialty training options, loss of primary care training positions (especially in family medicine), and alternate career options (such as general internal medicine graduates

choosing to work as hospitalists) have effectively reduced primary care production by one-third over the last decade. Additive is the overall aging of the current primary care workforce and its anticipated retirement, particularly should the economy continue to improve. There is one essential caveat that should be addressed. While this report's emphasis is on the overall need for primary care physicians, it must be clearly stated that this reflects the need to increase the numbers of physicians capable of caring for adults and their associated chronic disease burden. This does not appear to be the case for general pediatrics. In fact, student interest remains high and has

led to a surplus, relative to other areas of primary care, in the supply of general pediatricians. During the last decade, there have been increases in the numbers of medical students who are choosing general pediatrics. With regard to the supply of general pediatricians and in the context of this report, the major challenge is their geographic maldistribution. The Council on Graduate Medical Education met in April and November 2009 and April 2010 to review the current environment and develop recommendations. The Council identified four challenges and developed five recommendations as presented in this report. The challenges

are: 1) The practice environment, 2) The environment in medical schools, 3) The graduate medical education environment, 4) The geographic maldistribution of physicians in practice. Recommendations to address these challenges are presented in five categories: 1) The number of primary care physicians, 2) Mechanisms of physician payment and practice transformation for primary care, 3) The premedical and medical school environment, 4) The graduate medical education environment, 5) The geographic and socioeconomic maldistribution of physicians

Graduate Medical

Education that Meets  
the Nation's Health  
Needs DIANE

Publishing

Primary care medicine is the new frontier in medicine. Every nation in the world has recognized the necessity to deliver personal and primary care to its people. This includes first-contact care, care based in a positive and caring personal relationship, care by a single healthcare provider for the majority of the patient's problems, coordination of all care by the patient's personal provider, advocacy for the patient by the provider, the provision of preventive care and psychosocial care, as well as care for episodes of acute and chronic illness. These facets of care work

most effectively when they are embedded in a coherent integrated approach. The support for primary care derives from several significant trends. First, technologically based care costs have rocketed beyond reason or availability, occurring in the face of exploding populations and diminishing real resources in many parts of the world, even in the wealthier nations.

Simultaneously, the primary care disciplines-general internal medicine and pediatrics and family medicine-have matured significantly. COGME 1995 Physician Workforce Funding Recommendations for the Department of Health and Human Services' Programs DIANE Publishing

Most of the funding for programs under title VII of the Public Health Service Act goes toward primary care med. and dentistry training and increasing med. student diversity. Health care marketplace signals suggest an undervaluing of primary care med., creating a concern about the future supply of primary care professionals -- physicians, physician assistants, nurse practitioners, and dentists. This report focuses on: (1) recent supply trends for primary care professionals, incl. info. on training and demographic characteristics; (2) projections of future supply for primary care professionals, incl. the factors underlying

these projections; and (3) the influence of the health care system's financing mechanisms on the valuation of primary care services. Behavioral Medicine in Primary Care The Education of Physicians for Primary Care Primary Care Use a Behavioral Medicine Approach to Improve Clinical Outcome "All primary care physicians, their residents, and students would benefit from the central message of this book: medical practice occurs in the context of the physician-patient relationship, and only by understanding, managing, and using that relationship in an ethical, supportive, and effective fashion can primary care practice be conducted appropriately. -- Journal of General Internal

Medicine \* "Cohesively edited...bolstered by clinical vignettes...well positioned as an introduction for the physician-teacher and physician-in-training to the demands of the expanding role of physician as therapist....[Other texts] are not directed at the physician-in-training, are not case based, and are not as useful as a quick reference." -- Annals of Internal Medicine \* "An excellent resource...Our family practice residency program has recently adopted this text as the primary resource for our behavioral science curriculum and provides each resident with a copy. It would be similarly useful for internists, nurse practitioners, and other primary care

practitioners in training...Primary care health psychologists, medical school faculty, and others needing a compact and useful reference in this area will find this book highly valuable." -- Annals of Behavioral Science & Medical Education \* "Doctors Feldman and Christensen have done primary care practice a good and important service with the publication of their book. It remains for clinicians and teachers to open their minds and practices to the ideas within it." -- From the Foreword, by Steven A. Schroeder, MD \* Of the first edition. Authored by nationally recognized experts, this outstanding reference offers essential behavioral

insights and practical management strategies that will help clinicians and students build a strong relationship with their patients and ensure that they provide the best possible treatment for medical and psychiatric disorders. No other resource so effectively examines how behavior - from the standpoint of the clinician as well as the patient - affects treatment decisions and results. Features and Topics Covered:

- \*New chapter on "Complementary & Alternative Medicine"
- \*All chapters substantially revised and updated
- \*Up-to-date information on psychopharmacologic treatment of psychiatric illnesses
- \*Greater emphasis on

evidence-based medicine \*Practical approach to behavior change \*Mental disorders as they commonly occur in medical practice

- \*Issues in the relationship between provider and patient
- \*Adherence to medical treatment
- \*Care of the dying
- \*Dealing with medical errors
- \*Physician well-being
- \*Clinical vignettes
- \*Updated references and web resources

*Medicare and Graduate Medical Education*  
 Praeger Publishers

Integrated care is receiving a lot of attention from clinicians, administrators, policy makers, and researchers. Given the current healthcare crises in the United States, where costs, quality, and access to



care are of particular concern, many are looking for new and better ways of delivering behavioral health services. Integrating behavioral health into primary care medical settings has been shown to: (1) produce healthier patients; (2) produce medical savings; (3) produce higher patient satisfaction; (4) leverage the primary care physician's time so that they can be more productive; and (5) increase physician satisfaction. For these reasons this is an emerging paradigm with a lot of interest and momentum. For example, the President's New Freedom Commission on Mental Health has recently endorsed redesigning the mental health system so that

much of this is integrated into primary care medicine.

*Primary Care Professionals: Recent Supply Trends, Projections, and Valuation of Services*

Springer Science & Business Media

This text is designed to enhance patient care by providing the primary care practitioner with contemporary up-to-date information on the wide variety of topics they will confront in their practice. With the rapid and wide-spread technological advances of recent years, no single aspect of medicine has become as daunting as informatics. Physicians are now confronted with a broad and enormous range and volume of information. Accessing, managing

and implementing this information is a serious task. This text has a practical, reader-friendly approach that provides access to key issues. It will provide the primary care physician with the fundamentals of informatics, including electronic medical record (EMR), electronic scheduling, billing and using scientific databases. As information continues to make the rapid leap from paper to bytes, this book is essential for staying current. It shows how to most effectively implement the changes to the advantage of both the physician and patient.

**Council on Graduate Medical Education**

Springer

"Mullan gets it right! His 'big doctors' are the unsung heroes of

American medicine. Their stories—and they are great stories—tell us where we have to go to build a medical system that will work for everybody. And I mean everybody - the CEO, the family on welfare, you, and me."—Studs Terkel, author of *Working*, *The Good War*, and *Coming of Age* "Big Doctoring is a unique undertaking. We hear people in the frontlines of medicine tell us their story, and tell it in their own voices. In these pages, which are a joy to read, we find proof that medicine is, and always will be, both art and science."—Abraham Verghese, M.D., author of *The Tennis Partner* "Big Doctoring is an extraordinarily compelling effort by a

dedicated and idealistic physician -- who offers us, through the voices of his informants, a clearly written narrative that tells of a profession's contemporary challenges and difficulties. Here is documentary work of the most instructive and telling kind -- a nation's healers become witnesses and teachers for us readers."—Robert Coles, M.D. "At a time when both doctors and patients in record numbers abhor the shadowy mass of gloomy economics and gruesome bureaucracy that has overtaken American medicine, Mullan shows us a path out of the darkness. And his is a desperately needed map, as physicians and nurses are now quitting

in droves, tens of millions of Americans are losing their health insurance, and millions more, though insured, are forbidden treatments and primary care that could save their lives. Bravo!"—Laurie Garrett, author of *The Coming Plague and Betrayal of Trust*  
**Breaking Point**  
Springer Science & Business Media  
Ask for a definition of primary care, and you are likely to hear as many answers as there are health care professionals in your survey. Primary Care fills this gap with a detailed definition already adopted by professional organizations and praised at recent conferences. This volume makes recommendations for

improving primary care, building its organization, financing, infrastructure, and knowledge base--as well as developing a way of thinking and acting for primary care clinicians. Are there enough primary care doctors? Are they merely gatekeepers? Is the traditional relationship between patient and doctor outmoded? The committee draws conclusions about these and other controversies in a comprehensive and up-to-date discussion that covers The scope of primary care. Its philosophical underpinnings. Its value to the patient and the community. Its impact on cost, access, and quality. This volume discusses the needs of special

populations, the role of the capitation method of payment, and more. Recommendations are offered for achieving a more multidisciplinary education for primary care clinicians.

Research priorities are identified. Primary Care provides a forward-thinking view of primary care as it should be practiced in the new integrated health care delivery systems--important to health care clinicians and those who train and employ them, policymakers at all levels, health care managers, payers, and interested individuals. *Addressing Healthcare Workforce Issues for the Future* National Academies Press  
 Mayo Clinic's Complete Guide for Family Physicians and Residents in

Training. Based upon decades of physicians' valuable experience working in the Mayo Clinic Department of Family Medicine, this essential, all-bases-covered guide offers an unparalleled look into real-world family practice medicine and residency. Mayo Clinic's Complete Guide for Family Physicians and Residents in Training captures life inside a family practice and residency, and tackles day-to-day issues that affect every aspect of career satisfaction, professional challenges and performance, and opportunities for growth. Packed with "pearls" on the full spectrum of experience in family-practice medicine and training, from veteran family physicians, this indispensable career

guide takes you through everything from professional associations to achieving balance in your life. It can help you: Learn the history and issues of family practice; Discover what's involved in rotations, hospital rounds, and outpatient clinics; Choose a residency that's right for you; Consider options in family practice, such as a focus on sports medicine, obstetrics, or geriatrics. Learn what to expect in certification and recertification exams; Evaluate financial and liability issues; Obtain a grant and conduct research; Improve time-management skills, patient-physician relationships, and professional interactions; Leverage

computer technology; Handle managed care issues effectively; Be a good mentor; And more. For anyone considering family practice medicine, this hands-on survival guide to professional life is a virtual necessity. For anyone already in this field, it's an invaluable asset, offering techniques and tips that can help you get more out of your career, and manage it more effectively.

Primary Care Provider Shortage National Academies Press  
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