Graduate Education For Primary Care Physicians

The Council of Academic Family Medicine and its constituent organizations have reviewed “A New Pathway for Medical Education,” by Stephen Shannon and coauthors (Nov 2013). As chair of the council, I am writing to express its serious concerns regarding the implications of the views expressed in this article for the future of family medicine education.

The council recognizes the extensive work of the authors and applauds their focus on competency-based education across the medical education spectrum. However, the authors’ conclusions regarding the length of training that is adequate to produce a competent primary care physician are of significant concern. Also, the recently announced merger of the Accreditation Council for Graduate Medical Education’s and the American Osteopathic Association’s processes of accreditation for graduate medical education casts further doubt on the viability of the authors’ recommendations. The council feels that the merger and the change in length of training proposed in the article are not compatible with each other and raise many questions.

In addition, the council feels that the recommended shortening of training has serious implications for the availability of both funded residency training positions and experienced faculty resources. Finally, the proposal to change graduate medical education training so that a primary care physician is not distinguished by specialty-specific training, yet is still eligible for board certification in an existing specialty, is not acceptable.

The council feels that these concerns are substantial enough that the American Osteopathic Association should consider the implications of the recommendations of Shannon and coauthors and reject those that do not advance the primary care needs of the American people. The council feels that there are significant concerns that must be addressed before the recommendations are implemented.

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