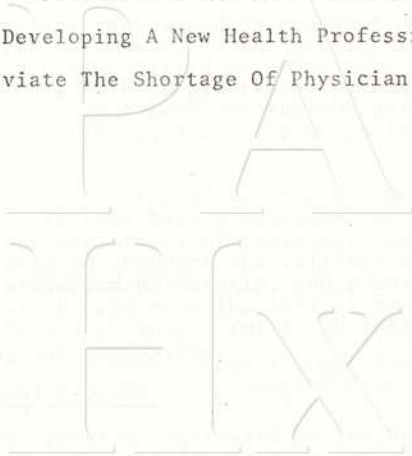


STATUS REPORT
ON PHYSICIAN ASSISTANT PROGRAMS FOR
PHYSICIAN ASSOCIATES AND MEDEX
Developing A New Health Profession To
Alleviate The Shortage Of Physician Manpower



Prepared by:

Department of Medicine and Surgery
Veterans Administration
Washington, D.C.

March 31, 1971

Preface

The availability of physicians, both in terms of numbers and distribution, has reached critical proportions and can not meet the ever-increasing demand for health care services despite the increased output of physicians from our medical schools. As a result, during the past decade the gap between demonstrated need and demand, on one hand, and the supply of such professional services, on the other, has grown wider.

To help narrow this gap, two types of PHYSICIAN'S ASSISTANT programs have been implemented and have already produced a new category of health professional. One type of program is designed to train PHYSICIAN ASSOCIATES and the other is a similar program that trains a group called MEDEX.

Both programs, developed in conjunction with university medical centers, are based on the premise that there is a resource of people qualified by prior education and experience who can, with proper training, complement and supplement physicians' services thereby permitting such physicians to provide quality care to an increased number of patients.

To date 54 graduates of these programs are already at work, and the programs have a combined enrollment of 348 students at various stages of training. As a result, it is not too early to document the validity of these approaches, established projected potentials, and predict success in achieving goals beyond even the initial expectations of those developing the educational efforts and those we are, and will be, employing the graduates.

The Educational Efforts

The MEDEX program, initiated at the University of Washington in 1969 and since expanded to include four other locations (see Chart A), has directed its efforts toward recruiting, training, and deploying to areas of need discharged medical corpsmen who, during their service experience were qualified for "independent duty".

The PHYSICIAN ASSOCIATE programs started at Duke University and now underway in eight other medical centers, (see Chart B) have expanded their enrollment to include not only ex-corpsmen, but other professionals with previous experience and related training.

The educational efforts of both programs are directed toward the ultimate goal of producing PHYSICIAN'S ASSISTANTS who are capable of . . .

- . Eliciting detailed medical histories.
- . Performing comprehensive physical examinations.
- . Organizing and presenting elicited information so that a physician and visualize the medical problem and determine appropriate diagnostic and therapeutic steps.
- . Implementing certain therapeutic procedures either independently or under the general supervision of a physician.
- . Exercising independent judgment in making diagnoses and instituting necessary therapy in emergencies.

To achieve this level of competency . . .

- . The MEDEX programs include three months of didactic training in the medical sciences to meet the individual needs of each student in order to achieve a common level of knowledge. This is followed by a 12 month on-the-job experience with a practicing physician-preceptor.
- . The PHYSICIAN ASSOCIATE programs include a nine month basic medical science curriculum and at least 12 months of clinical teaching in medical centers and with practicing physicians in selected communities.

With adequate funding, both types of programs estimate that by utilizing existing facilities and personnel including those of the Veterans Administration system, they could ultimately provide training for up to a total of 10,000 students each year. To match this potential in terms of students, MEDEX and PHYSICIAN ASSOCIATE programs report that applications are being received at the combined rate of 150 per week. The demand for graduates is reflected by several studies of physician's attitudes which indicate that over 40 percent of the practicing physicians would utilize PHYSICIAN ASSOCIATE or MEDEX graduates if they were available.

Utilization and Productivity

Because the physician's assistant concept has evolved as the joint effort of state medical societies, medical centers, and practicing physicians, it is truly a co-operative endeavor. Acceptance of both the concept and the graduates by physicians, patients, and other members of the health team has helped to remove career barriers within the health profession.

The utilization of PHYSICIAN ASSOCIATE and MEDEX graduates has been essentially limited to the area of primary care. Initial studies have shown that the productivity capability of the physicians with whom they work can be increased by some 75 percent.

Experimental application of the basic concept of the PHYSICIAN ASSOCIATE to other clinical specialities including radiology, pathology, pediatrics, and surgery are now underway. Early productivity studies are being conducted in these specialities.

Physician's assistants of the MEDEX and PHYSICIAN ASSOCIATE types are eligible for federal employment under the Civil Service Commission's occupational series, GS-603. At the present time eight such assistants are employed in hospitals of the Veterans Administration: at Muskogee, Oklahoma, Houston, Texas, and Durham, North Carolina.

Legal Issues

In-depth consideration has been given to legal constraints that might limit the use of such unlicensed personnel. The facts are, however, that no Medical Practice Acts specifically preclude the use of physician's assistants and that, since the inception of these programs, no litigation has been brought against the graduates or their supervising physicians. To overcome any legal uncertainties, six states have already enacted regulatory legislation for this new profession and at least 13 more states are considering similar legislation. Liability insurance is available for MEDEX and PHYSICIAN ASSOCIATE graduates, and their supervising physicians.

Summary

Both MEDEX and PHYSICIAN ASSOCIATE programs have demonstrated their initial potential for making quality care more readily available to patients, but the limited number of graduates now in practice are insufficient to make any large-scale impact. However, current indications are that a ready market exists for PHYSICIAN'S ASSOCIATE and

P.A.

MEDEX graduates; and, 100 physicians utilizing these graduates could provide services that would otherwise require the efforts of up to 175 physicians.

COURT 2

LOCATION OF RESEARCH PROGRAMS

University of Alabama School of Medicine
Birmingham, Alabama

Charles E. Dorr Postgraduate Medical School
Los Angeles, California

Dartmouth Medical School
Hanover, New Hampshire

University of North Dakota School of Medicine
Grand Forks, North Dakota

University of Washington School of Medicine
Seattle, Washington

PART B

LIST OF PARTICIPATING SCHOOLS

University of Alabama School of Medicine
Birmingham, Alabama

New University School of Medicine
New Haven, Connecticut

University of Kentucky Medical Center
Lexington, Kentucky

Mount Sinai Hospital Medical Center
New York, New York

Wake University Medical Center
Raleigh, North Carolina

The Bowman Gray School of Medicine
at Wake Forest University
Winston-Salem, North Carolina

University of Missouri School of Health
Missouri City, Missouri

aylor College of Medicine
Raleigh, North Carolina

Albany Graduate College
Albany, New England

PHYSICIAN ASSOCIATE MEMBERS - 1936

NAME	EDUCATION	CITY	POSITION
V. Anderson	Dr. J. Richard	Durham, N.C.	University Center Clinic
B. Ann	Dr. R. Ann	Wicham, Va.	Private practice
B. Berger	Dr. B. Berger	Portland, Me.	Private clinic
A. Bibby	Dr. A. Bibby	Boston, Mass.	Clinic
J. Branch	Dr. S. Branch	Durham, N.C.	University Center Clinic
B. Brown	Dr. B. Brown	Cambridge, N.Y.	Clinic
C. Brown	Dr. C. Brown	Portland, Me.	Private practice
L. Daley	Dr. L. Daley	Portland, Me.	University Center Clinic
B. East	Dr. J. East	Durham, N.C.	Clinic
B. East	Dr. B. East	Durham, N.C.	Clinic
C. East	Dr. C. East	Durham, N.C.	University Center Clinic
B. Farrell	Dr. B. Farrell	Durham, N.C.	University Center Clinic
B. Fitch	Dr. B. Fitch	Portland, Me.	Private practice
V. Foster	Dr. V. Foster	Durham, N.C.	University Center Clinic
T. Gillies	Dr. T. Gillies	Portland, Me.	Clinic
G. Gossard	Dr. G. Gossard	Portland, Me.	St. Joseph's
B. Gossard	Dr. B. Gossard	Portland, Me.	Private practice
B. Gossard	Dr. B. Gossard	Durham, N.C.	University Center Clinic
B. Joppe	Dr. B. Joppe	Durham, N.C.	Private practice
F. Knight	Dr. F. Knight	Portland, Me.	Private practice
B. Knight	Dr. B. Knight	Portland, Me.	St. Joseph's

NAME	ADDRESSING PHYSICIAN	SPECIALTY	HOSPITAL
A. Lamb	Dr. R. H. Hixson	Birmingham, Ala.	University Medical Center
B. Lane	Dr. R. H. Hixson	Birmingham, Ala.	University Medical Center
C. McKinney	Dr. R. Hixson	Birmingham, Ala.	University Medical Center
D. McCarty	Dr. J. A. Jackson	Birmingham, Ala.	St. Vincent's Hospital
E. McQuinn	Dr. J. A. Jackson	Birmingham, Ala.	University Medical Center
F. Miller	Dr. R. H. Hixson	Birmingham, Ala.	St. Vincent's Hospital
G. Mitchell	Dr. R. H. Hixson	Birmingham, Ala.	University Medical Center
H. Moran	Dr. J. A. Jackson	Birmingham, Ala.	University Medical Center
I. Myers	Dr. J. A. Jackson	Birmingham, Ala.	St. Vincent's Hospital
J. Nichols	Dr. R. H. Hixson	Birmingham, Ala.	University Medical Center
K. Pennington	Dr. R. H. Hixson	Birmingham, Ala.	St. Vincent's Hospital
L. Peterson	Dr. R. H. Hixson	Birmingham, Ala.	St. Vincent's Hospital
M. Quinn	Dr. T. Anderson	Birmingham, Ala.	University Medical Center
N. Reed	Dr. R. H. Hixson	Birmingham, Ala.	University Medical Center
O. Richardson	Dr. R. H. Hixson	Birmingham, Ala.	Private Practice
P. Simpson	Dr. R. H. Hixson	Birmingham, Ala.	University Medical Center
Q. Smith	Dr. R. H. Hixson	Birmingham, Ala.	University Medical Center
R. Taylor	Dr. R. H. Hixson	Birmingham, Ala.	University Medical Center
S. Wagner	Dr. R. H. Hixson	Birmingham, Ala.	Private Practice
T. Williams	Dr. R. H. Hixson	Birmingham, Ala.	University Medical Center

PHYSICIAN ASSOCIATES - MEMBERS OF SOCIETY

T. Walker	Dr. T. Brown	Cullman, Ala.	Private Practice
-----------	--------------	---------------	------------------