

ABSTRACT

Outcomes of the Texas Statewide Family Practice Preceptorship Program: 1989 – 2000

Linda Z. Nieman, Ph.D.

Lewis E. Foxhall, M.D.

Alice Z. Chuang, Ph.D.

Lee Cheng, M.D., M.S.

Thomas C. Prager, M.D., Ph.D., MPH

Context An evaluation of the efficacy of the Texas Statewide Family Practice Preceptorship Program (TSFPPP) in producing family practice and primary care physicians for Texas.

Objectives To determine whether medical students' participation in the TSFPPP is associated with the students' choice of a family practice or other primary care residency and to create a model for evaluating shared institutional goals for preceptorships.

Design Retrospective cohort study of questions developed through a statewide consensus process.

Setting and Participants 10,081 students graduated from 8 Texas medical schools from 1992 to 2000 and the 724 TSFPPP preceptors who supervised them between 1989 and 2000.

Main Outcome Measures The percent of Texas medical school graduates who chose family practice or other primary care residencies following participation or non-participation in the TSFPPP.

Results Increased choice of a family practice residency at the: preclinical level (odds ratio [OR], 1.62; 95% confidence interval [CI], 1.41-1.87), the clinical level (OR, 2.30; 95% CI, 1.98-2.68), and the both levels (OR, 5.0; 95% CI, 3.74-6.68) compared to non-TSFPPP participation. These associations held true for the choice of primary care residencies: preclinical (OR, 1.47; 95% CI, 1.31-1.67), clinical (OR, 1.42; 95% CI, 1.24-1.64), and both levels (OR, 3.84; 95% CI, 2.64-5.62) compared to non-TSFPPP participation. Participation in the rural TSFPPP is strongly associated with the choice of family practice (OR, 1.55; 95% CI, 1.23-1.96). Over the 9 years, the number of preceptors increased from 541 to 779 physicians registered to serve as preceptors.

Conclusions More exposure to TSFPPP programs was associated with a greater likelihood that the student would select a family practice or primary care residency. The process by which the TSFPPP evaluated the large, statewide preceptorship can serve as a model for other medical schools and agencies assessing cooperative medical education programs.