

National MedPeds Residents' Association

Newsletter

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Med-Peds Career and Practice Sessions

John Scheitler, MD NMPRA President

The inaugural Med-Peds Career and Practice session at the AAP meeting in Washington, DC on October 10, 1999 was excellent! Dr. Tom Cross (LSU-Shreveport, NMPRA Advisor) talked about the variety of opportunities offered to Med-Peds graduates. While an overwhelming majority practice out-patient primary care, a significant portion go on to fellowships, ER, Urgent care or other practice settings.

Dr. Danny Edmonson (Vanderbilt) discussed the variety of Med-Peds partnership arrangements. 30% practice with other Med-Peds, which will likely grow as more Med-Peds physicians complete residency. Another 30% practice with family physicians. About 50% practice in multi-specialty groups.

Dr. Lisa Harris (Rochester) discussed marketing and the importance of being visible in the community the first several years of practice. Also, many salient points were made regarding contract negotiations.

Dr. Carla Neal-Haley (Emory) addressed building and maintaining a successful Med-Peds practice and provide the following data:

90th percentile estimates of patients to see

	# of patients	gross charges
Med-Peds	4,963	\$ 524,674
(Mean)	(4,156)	(\$ 351,958)
Pediatrics	6,912	\$ 522,225
Internal Medicine	5,079	\$ 525,921
Family Practice	6,912	\$ 488,267

(this doesn't account for the percentage of reimbursement received, overhead, etc.)

Dr. Ellen Singer discussed the importance of identifying mentors and Dr. John Chamberlain (Rochester, AAP Med-Peds Section Chair) helped to plan effective CME strategies. Finally, I gave a short presentation on the purpose and efforts of NMPRA.

There were approximately 75 people in attendance with over half consisting of Med-Peds residents. The information was very good (and hard to come by in other settings) in addressing the needs of Med-Peds residents as well as providing a chance to network with practicing Med-Peds physicians for advice and opportunities. The evening concluded with with an excellent dinner at Union Station. This provided a rare opportunity for Med-Peds physicians from across the nation to socialize. Overall, I thought the program was outstanding and strongly encourage all Med-Peds residents to attend future meetings.

From the Med-Peds Program Director's Association (MPPDA)

Keith M. Boyd, MD Rush Pres St Luke's MPPDA President

Change: something we in medicine have come to expect; no doubt there's more to come. For the **MPPDA**, the last ten years has brought much **positive change**; we have come a long way since being formed less than a decade ago.

Active membership in the **MPPDA** has grown significantly; we now have 89 dues-paying member institutions. We are a member of **PCOC** (the Primary Care Organization's Consortium). We have successfully formed as a subgroup of **APDIM**. We are involved in preliminary discussions with the pediatric program director's group to become a section of the **APPD**. The **MPPDA** contributed to the successful lobbying of Congress to provide full Federal funding for all four years of combined Med-Peds training.

Although I am still correcting my father when he refers to me as a "family physician", the average medical student no longer asks, "What is this Med-Peds thing anyway?" Other individuals and organizations now routinely seek the opinion and advice of the **MPPDA**. Med-Peds physicians are assuming important administrative positions in organized medicine and at academic institutions.

Cooperative efforts of the **MPPDA**, the **NMPRA**, and the Med-Peds section of the **AAP** have just begun to tap into the combined resources and talents of their memberships.

Med-Peds continues to thrive on a number of fronts. A few recent statistics may be of interest to you:

- Of the pediatric residents nationally, 17% are Med-Peds residents.
- Over half of the institutions with pediatric programs have combined Med-Peds programs.
- The average age of Med-Peds programs nationally is now 11 years.
- After doubling over the past 5 years, the number of Med-Peds physicians will again double in the next 5 years.
- The Med-Peds section of the **AAP** has over 2,200 physicians listed.
- We now have data to confirm what we have known for a long time: Med-Peds physicians care for patients with routine and complex problems over the entire age spectrum in both inpatient and outpatient settings.
- Med-Peds graduates score as well on the certifying exams as their categorical counter-parts.
- In contrast to recent years, most Med-Peds programs now have Med-Peds trained directors and/or Med-Peds trained faculty.

We had an impressive attendance of 63 at the recent **MPPDA** annual meeting, which included the participation of the **NMPRA**.

The influence of Med-Peds physicians and Med-Peds organizations continues to spread.

Change: I expect as much, maybe more, in the coming decade.

Med-Peds Classifieds

PACIFIC NORTHWEST: MED-PEDS JOB OPPORTUNITY

One of the region's most rapidly growing multi-specialty groups seeks a BC/BE Med-Peds physician. You will join one other Med-Peds physician with our 64 member group. This practice offers a balance between full spectrum adult medicine and pediatrics. Excellent call schedule at 1:12 weeknights/ 1/6 weekends. This is an ideal opportunity for a candidate who wants to join a physician driven group committed to quality and compassionate care. We offer competitive compensation, outstanding benefits plus an attractive signing bonus/moving allowance. We are located just 50 minutes north of Portland, Oregon in Longview, Washington.

Longview is a family oriented community noted for it's many parks, excellent library, vital performing arts theatre, schools and proximity to the great PNW outdoors.

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