

# Research Corner

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## What is the impact of postgraduate education for PAs?

While the discussion over the value and impact of postgraduate PA training programs (PA residencies) has persisted for at least three decades, recently the issue has taken on greater importance. The profession has begun an accreditation process for residencies as well as started to seriously debate whether to implement a specialty certification process. A few descriptive studies have been published that may help us understand the role PA residencies currently play within the profession.

**Asprey D, Helms L. A description of physician assistant postgraduate residency training: the director's perspective. *Perspective on Physician Assistant Education*. Summer 1999;10(3):124-131.**

**PURPOSE:** Postgraduate residency training is an optional form of education that has existed within the physician assistant profession since 1971. Despite this longevity, no comprehensive data on the residency programs are available. At the time this study was conducted, 17 residency programs existed dispersed among 10 states. This study was undertaken to characterize physician assistant residency training in the United States. **METHODS:** This study utilizes a nonexperimental, descriptive research design and reports and describes various characteristics, activities, and opinions regarding physician assistant postgraduate residency training from the residency program director's perspective. Data were collected utilizing a survey instrument, and 16 (94%) of the 17 residency directors responded. Descriptive statistical analyses utilized a standard statistical software package. **RESULTS:** Results

from the study are reported for the survey data collected from PA program residency directors. Data are categorized as follows: general characteristics of residency programs, program admissions, program finances, compensation and personnel, program curriculum, and program director opinions regarding PA residency education. **CONCLUSIONS:** Data provided in this study help to describe and characterize PA residency education as it exists today. PA postgraduate residency education provides an important educational vehicle for training graduate physician assistants in specialty care. Important differences exist between the internship and academic model programs. Some residency programs do not maintain records systematically. Additional documentation by the residency programs is needed to describe program functions and provide evidence of the value and outcomes associated with postgraduate PA education.

**Asprey D, Helms L. A description of physician assistant postgraduate residency training: the resident's perspective. *Perspective on Physician Assistant Education*. Spring 2000;11(2):79-86.**

**PURPOSE:** Postgraduate residency training is an optional form of education that has existed within the physician assistant profession since 1971. Despite this longevity, no comprehensive data on the residency programs are available. At the time this study was conducted, 17 residency programs existed dispersed among 10 states. This study was undertaken to characterize PA residency training in the United States from the perspective of participants. **METHODS:** This study utilizes a nonexperimental, descriptive research design to describe residents' perspectives of various characteristics, activities, and opinions regarding PA postgraduate residency training. Data were collected from a survey instrument. Forty-six (59%) of the 78 enrolled residents responded. Data were entered into a relational database and descriptively analyzed. **RESULTS:** Data are categorized as follows: resident demographic information, entry-level PA program information, preridency program information, residency program information, residency curriculum data, residents' perceptions of changes in knowledge and skills, and residents' opinions regarding residency. **CONCLUSIONS:** A substantial proportion of residents proceed directly from entry-level to postgraduate training. Residents report satisfaction with their programs in terms of knowledge and skills acquired. More information comparing the differences between academic and internship models of residency education is needed, as is greater standardization in program record-keeping. Support for research into the longitudinal outcomes associated with postgraduate education is needed.

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**ON THE WEB** Please see the online version of this month's Research Corner at [www.jaapa.com](http://www.jaapa.com) for the accompanying Web-only article "Descriptive research: The nuts and bolts."

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## Research Corner

Anick M, Carlson J, Knott P. Postgraduate PA residency training: effects on employment, earnings and job responsibility. *Advance for Physician Assistants*. January-February 2003:50-59.

**ABSTRACT:** PAs have been practicing medicine since the late 1960s and now work in almost every medical specialty. As PAs continue to specialize, more of them are interested in formal postgraduate training. Like physician residency programs, PA postgraduate residency training programs are designed to further a clinician's knowledge and skills in a focused specialty so as to provide high-quality and efficient medical care. However, while a physician must complete a residency program to practice medicine, PAs are able to practice after graduating from an accredited PA program, without postgraduate training. Most PAs practice medicine immediately after graduating and acquire further clinical knowledge and training on the job.

Brenneman T, Hemminger C, Dehn R. Brief report: surgical graduates' perspectives on postgraduate physician assistant training programs. *Journal of Physician Assistant Education*. 2007;18(1):42-44.

**ABSTRACT:** Postgraduate training (residency) programs for physician assistants (PAs) have existed since 1971, but few studies have looked at their impact on clinical practice. This study surveyed graduates of surgical PA postgraduate programs and compared their responses to AAPA census data for PAs in surgery. The two groups were similar when years since graduation were compared, with the additional year of training for the residency group taken into account. This survey suggests that residency graduates earn salaries similar to those of informally trained surgical PAs when hours worked per week are adjusted for.

### DISCUSSION

Although PA postgraduate residencies have been in existence since the 1970s, little is known about their impact on the profession and PA clinical practice. The available literature provides descriptions of the experience of early programs, such as a 1980 article describing the Norwalk Hospital surgical residency program<sup>1</sup> or a 1991 opinion about the value and future of PA residency training.<sup>2</sup> Up until the current decade, however, little was known about PA postgraduate programs, as no aggregate data on those trained or their impact on the health care delivery system had been published.

In 1999-2000, Asprey and Helms published two articles describing the PA residency educational system that existed at the time and the residents enrolled in it. They found that most programs consisted of 1 year of nonacademic clinical curriculum, that most residents entered directly from their undergraduate training and that most residents were quite

satisfied with their training. This work was the first to describe PA residency training in the United States using aggregate data and has been valuable in providing a baseline for subsequent investigations of this topic.

In 2003, Anick and colleagues published the first aggregate outcomes data of physician assistant residency graduates. They surveyed 517 of the estimated 596 residency graduates, receiving 199 responses (38% response rate). The results were compared to the data from similar survey questions in the American Academy of Physician Assistants (AAPA) Census for PAs in emergency medicine, surgery, cardiovascular surgery, and orthopedics. Little difference was noted in salary between residency-trained PAs and those trained informally; however, the groups were not adjusted to account for the time spent in residency training. The data showed that residency-trained physician assistants viewed their residency experience positively.

In 2007, Brenneman and colleagues addressed the question of whether residency-trained PAs differ from informally trained PAs who practice in the same specialty. E-mail messages were sent to the 151 graduates of three surgical postgraduate programs inviting them to participate in a Web-based survey; 78 subjects completed the survey for a 52% response rate. Survey data were compared to AAPA survey data on surgical PAs. Informally trained respondents averaged 1 additional year of work experience after PA training than residency graduates, making the two groups equal after accounting for the time of residency training. Salaries of residency graduates were 15% higher than those of informally trained PAs; however, residency graduates reported working 16% more hours per week. Thus salaries of the two groups were equal. Residency graduates in this survey also reported viewing their training favorably.

These four studies help describe PA residency education and begin to address a few of the workforce questions important to this issue of the value of residency training. Residency training will add cost and time to PA training, and the most important question is whether that additional investment results in a better physician assistant workforce. The Anick and Brenneman studies imply that residency training may not provide additional salary compensation in the long run compared to informal specialty training but that it may provide residency graduates with intangible benefits such as increased confidence. Additional research should be done on this question utilizing large sample sizes comparing residency graduates to those informally trained, as the value of residency training should be quantified if the profession is to head in this direction. [JAAPA](#)

### REFERENCES

1. Heinrich JJ, Fichandler BC, Beinfield M, et al. The physician's assistant as resident on surgical service. An example of creative problem solving in surgical manpower. *Arch. Surg.* 1980;115(3):310-314.
2. Stanhope WD. Postgraduate training: who needs it [guest editorial]? *Physician Assistant*. November 1991;14,16.