

Internal Medicine Primary Care Track 101

I. Why should I consider applying to an IM Primary Care Track?

IM-Primary Care Tracks are right for you, if you're looking for:

1. Enhanced education that takes a deeper dive into primary care and health systems

Primary Care Tracks give residents enhanced exposure to ambulatory medicine to prepare them for a career in primary care or ambulatory specialties. By spending more time in the primary care setting, residents build the specific knowledge and skills that will equip them to be outstanding generalists, while still receiving robust inpatient training alongside their categorical colleagues. Primary care tracks emphasize longitudinal resident ownership of a patient panel, while also exposing residents to relevant medical disciplines and providing additional training to become leaders in education and healthcare delivery (see table below).

With increased time in the outpatient setting, primary care residents often receive an expanded curriculum and access to unique clinical electives, which vary based on the individual program. Primary care residents pursue a broad variety of careers after training including clinical work, medical education, research and/or healthcare administration.

| Unique Rotations/Experiences for IM-Primary Care Residents | | |
|--|--|--|
| <ul style="list-style-type: none">• Cardiology• Nephrology• Pulmonology• Hematology/Oncology• Rheumatology• Endocrinology• Geriatrics• Addiction medicine | <ul style="list-style-type: none">• Dermatology• Musculoskeletal medicine• Neurology• Chronic pain management• Women's health• Sexual and gender minority health• Psychiatry & Behavioral health | <ul style="list-style-type: none">• Outpatient procedures• Population health management• Health policy/Public health• Quality improvement• Digital Health• Leadership• Advocacy• Research• Medical education |

2. An emphasis on longitudinal relationships, advocacy, and social determinants of health

A defining aspect of primary care is the longitudinal relationships we form with our patients. Knowing our patients on a deep and personal level, and through many phases of their life, is a source of joy and allows us to provide care that is centered around our patients' values and goals. As primary care physicians, we are uniquely positioned to understand the social context of our patients' care and to act to address health inequities. Primary care training will give you the close-up exposure to patients' lives as well as the birds-eye view of the health care system that will enable you to advocate for patients effectively throughout your career.

3. A close-knit family of like-minded peers

Primary care tracks often function as a smaller family within the larger IM residency program. Primary care residents receive the same benefits as categorical IM residents but have the added support of dedicated faculty who are enthusiastic about each resident's growth and development. This community of colleagues and mentors serves as a network far beyond residency and provides guidance through each stage of your career.

4. A specialty that has been **scientifically proven** to help patients live longer, decreases hospital admissions, lowers costs, and improve end of life care,



[Click here](#) for a list of research studies that prove that primary care saves lives!

Internal Medicine Primary Care Track 101

5. Training that will prepare you for wide variety of career paths!

Primary care tracks provide a foundation for creating *your* own path, giving you the education, experiences, mentorship, and support to do it. Here are some of the careers of PC Track Grads (by no means a comprehensive list)

| | | | | |
|---|---|---|--------------------------|---|
| Primary Care Practice: academic or private settings | Specialized primary care: geriatrics, addiction, women's health, LGBTQ+, HIV, etc | Healthcare leadership and management | Global Health | Advocacy/Health policy |
| Telemedicine | Home-based primary care | Research | Medical education | Ambulatory subspecialty: endocrine, rheumatology, etc |

II. Frequently Asked Questions about Primary Care and IM-PC Tracks

1. Will I still have strong inpatient training in a PC Track?

YES! Internal Medicine residencies have traditionally been primarily focused on inpatient training and Primary Care Tracks help residents gain more experience in outpatient internal medicine. For accreditation purposes, all Internal Medicine residencies are required to provide a minimum of 10 months of inpatient time including 2 months of dedicated critical care experience. As a result, PC track remain highly qualified to practice in the inpatient setting if they so choose.

2. Do I need to be 100% sure that I want to do a primary care career to apply to a PC track?

No, you don't need to be 100% sure but candidates applying for primary care tracks should have a strong interest in learning more about a career in general internal medicine. Very often, primary care tracks will offer experiences exclusive to PC trainees only and these activities will help you learn about the immense breadth of opportunities within GIM.

3. Does choosing a primary care program preclude exploring other interests or concentrations in residency, such as research, education, QI, etc?

Not at all. IM-PC programs strongly encourage residents to pursue their interests in research, QI, advocacy, education and more. Most IM-PC programs are highly integrated with their respective categorical programs, affording PC residents the opportunity to engage with the same spectrum of electives, education and research opportunities, leadership development, and other special programming that serves to complement their clinical training

4. If I really like a program, should I apply for every track they have?

You should apply to any residency track if you are interested in participating in its curriculum for the duration of your time in residency. You should not apply to a track if its educational program does not fit your goals. Applying to a categorical track or other track of interest will not harm you as a candidate for a primary care track.

Internal Medicine Primary Care Track 101

5. What are common differences between internal medicine primary care versus family medicine or medicine-pediatrics?

Internal Medicine Primary Care (IM-PC) focuses on adults age 18 years and older including end-of-life care. Med-Peds is a 4 year combined residency program, combining 2 years of internal medicine and 2 years of pediatrics, with the end result that graduates are board-eligible for both pediatrics and internal medicine. In contrast, Family Medicine is a 3 or 4 year residency with a broad scope of pediatrics and adult care as well as behavioral science, obstetrical and surgical training. Take a look at the table below comparing these 3 specialties and their required training:

| | <u>Internal Medicine Primary Care Track</u> | <u>Combined Med – Peds</u> | <u>Family Medicine</u> |
|--|--|---|--|
| <u>Years of training</u> | <u>3</u> | <u>4</u> | <u>3 (some 4 years)</u> |
| <u>Ambulatory training (total number of ½ day sessions/percent)</u> | <u>300-500 sessions over 3 years/ 30-50%</u> | <u>200-240 sessions over 4 years / 20-25%</u> | <u>400-500 sessions over 3 years/40-50-%</u> |
| <u>Number of Required Adult Rotations</u> | <u>36 months (all adults patients)</u> | <u>24 months</u> | <u>8 months</u> |
| <u>Number of Required Pediatric Rotations</u> | <u>none</u> | <u>24 months 1-2 months newborn nursery</u> | <u>4 months</u> |
| <u>Maternity care</u> | <u>None</u> | <u>None</u> | <u>2 months</u> |
| <u>Emergency Medicine</u> | <u>1-2 months</u> | <u>2-3 months</u> | <u>1 month</u> |
| <u>Intensive care</u> | <u>3-6 months</u> | <u>8 months (Peds and Internal medicine)</u> | <u>1 month</u> |
| <u>Gynecology</u> | <u>Integrated; focused experiences</u> | <u>Integrated</u> | <u>1 month</u> |
| <u>General Surgery</u> | <u>None</u> | <u>None</u> | <u>2 months</u> |
| <u>Minor outpatient procedures</u> | <u>Yes</u> | <u>Variable</u> | <u>Yes</u> |
| <u>Sport medicine, orthopedics, rehabilitation</u> | <u>Integrated; focused experiences</u> | <u>Integrated</u> | <u>2 months</u> |
| <u>Behavioral health experience</u> | <u>Yes</u> | <u>Variable</u> | <u>Yes</u> |
| <u>Number of individual fellowships available after Graduation</u> | <u>Over 24</u> | <u>Over 24</u> | <u>At least 10</u> |

Internal Medicine Primary Care Track 101

6. How do I apply for a PC track program?

It depends; each primary care program may be different, so it is important to look for specific instructions for the programs that you are interested in. In general, there are 2 types of Primary Care Programs:

- A. Primary Care Tracks **with** separate ERAS ID numbers: These programs require a separate application from the categorical tracks. You apply to these programs at the same time as the regular ERAS application process for categorical programs.
- B. Primary Care Tracks **without** separate ERAS ID numbers: These programs do not require a separate application; you are typically placed into the track after you match with the categorical program.

7. Will I be boarded certified in a different specialty?

No. You will be eligible to be board certified by the American Board of Internal Medicine, the same as categorical IM residents.

8. Will I get to know residents in the categorical IM program?

Yes! Most primary care track programs are designed where primary care residents work very closely with categorical residents.

9. Am I able to switch between a PC track and categorical track?

It depends. Some programs may have very flexible schedules where it is easy to move between tracks whereas others may not be as easy. Programs understand that you may not be 100% sure about a career in General Internal Medicine and Primary Care, and they want to help you explore your options. It is ok to ask the Primary Care Track director what would happen if a resident wanted to switch to the categorical program.

10. I am worried about a career in primary care because I have a lot of student debt. How can I manage a career in GIM if the salary may be lower than some medicine subspecialties?

Managing debt and student loans is a common concern for many trainees. Fortunately, there are loan forgiveness programs to help, especially for physicians working in primary care.

- a. Public Service Loan Forgiveness: <https://studentaid.gov/manage-loans/forgiveness-cancellation/public-service>
- b. AAMC Directory for Local/State Loan Forgiveness: https://services.aamc.org/fed_loan_pub/index.cfm?fuseaction=public.welcome&CFID=255039&CFTOKEN=96604802
- c. NHSC Loan Repayment Program: <https://nhsc.hrsa.gov/loan-repayment/nhsc-loan-repayment-program>

Click here for a list of organizations that can help you learn more about careers in GIM



Click here for a list of Internal Medicine Primary Care Track Programs

