

AMERICAN MEDICAL STUDENT ASSOCIATION HOUSE OF DELEGATES 2016 RESOLUTION: A13

	Michael Sparks, International Trustee; Perry Tsai, Vice President for Programming Development; Kelly Thibert, National President-Elect
	Ross University School of Medicine; University of North Carolina at Chapel Hill School of Medicine; Nova Southeastern University College of Osteopathic Medicine
SUBJECT:	Principles Regarding Family Medicine Residency Training Programs
ТҮРЕ:	Resolution of Principles

WHEREAS there are two types of Family Medicine Training Programs each with their own strengths, and;

WHEREAS at an opposed family medicine residency training program, there also exists residency training programs in other specialties, and;

WHEREAS at an unopposed family medicine residency training program, there are no other medical residency training programs, and;

WHEREAS "family medicine residents working in opposed programs sometimes report being treated as second-class citizens, [but] they also appreciate the greater diversity of academic content and opportunities to interact regularly with residents in other specialties," [1] and;

WHEREAS "residency in an unopposed, busy urban setting can expose residents to the greatest possible variety of patients, cases, clinical diagnoses, and procedures in preparation for practicing in [rural areas]" [1]

THEREFORE BE IT RESOLVED that the Principles Regarding Primary Care and Family Medicine (p. 31-32) be AMENDED to state:

8. Regarding Family Medicine Residency Training Programs:

G. RECOGNIZES the difference between opposed and unopposed family medicine residency training programs and RECOGNIZES the potential benefits of unopposed programs in training residents for careers in rural or medically underserved areas.

Fiscal note: None