



Medical Education

Edited by Robert M. Golub, MD, guest co-editor, Catherine R. Lucey, MD

Research

MOC Requirement, Hospitalizations, and Health Care Costs 2348

The American Board of Internal Medicine (ABIM) 10-year Maintenance of Certification (MOC) requirement took effect in 2000. In a quasi-experimental study that compared outcomes of care for 154 045 Medicare beneficiaries treated by ABIM-certified general internists—either initially certified in 1991 and subject to MOC in 2001 (n=956) or initially certified in 1989 and not subject to the MOC requirement (n=974)—Gray and colleagues found that imposition of the MOC requirement was not associated with growth in ambulatory care-sensitive hospitalizations but was associated with a small reduction in the growth of Medicare costs. In an Editorial, Lee discusses the evolution of physician certification.

📖 Editorial 2340 Related Article 2358

🎧 Author Audio Interview jama.com

MOC Recertification Requirement and Quality of Ambulatory Care 2358

In a retrospective analysis of performance data from internists who had time-limited (n=71) or time-unlimited (n=34) American Board of Internal Medicine (ABIM) certification and were providing primary care to 68 213 patients at 4 Veterans Health Administration medical centers, Hayes and colleagues found no significant differences between physicians' ABIM certification type and patient outcomes on 10 primary care performance measures.

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Resident Duty Hour Reforms and Patient Outcomes 2364

Patel and colleagues assessed the association between the 2011 Accreditation Council for Graduate Medical Education duty hour reforms and mortality and hospital readmissions in an analysis of 2009-2012 data from nearly 6.4 million Medicare beneficiaries. In analyses that accounted for hospital teaching intensity, the authors found no difference in the change in 30-day mortality or 30-day readmission rates in the year after implementation of duty hour reforms compared with the 2 years before implementation. In an Editorial, Arrighi and Hebert discuss the continuing debate over duty hours, quality graduate medical education, and patient safety.

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🎥 Author Video Interview jama.com Continuing Medical Education jamanetworkcme.com

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Editor in Chief
Howard Bauchner, MD

131 YEARS
OF CONTINUOUS
PUBLICATION

Research (continued)

Duty Hour Reform and Surgical Patient Outcomes 2374

In an analysis of data from 204 641 patients undergoing general surgery at 23 teaching and 31 nonteaching hospitals 2 years before and 2 years after implementation of the Accreditation Council for Graduate Medical Education resident duty hour reform, Rajaram and colleagues found no association between implementation of the revised residency duty hour requirements and change in patient outcomes.

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Spending in Region of Residency; Subsequent Expenditures 2385

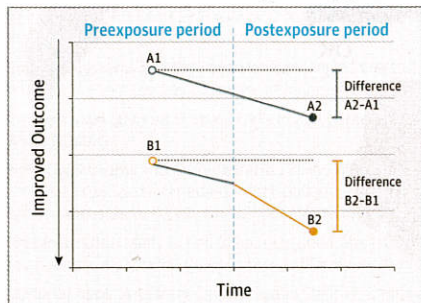
In an analysis of Medicare claims data for care provided by a random sample of 2581 family medicine and internal medicine physicians who completed residency training between 1992 and 2010, Chen and colleagues found that the Medicare spending pattern in the region of residency training was associated with expenditures for care provided to Medicare beneficiaries when the physicians were in practice.

ED Resource Use by Residents and Attending Physicians 2394

To evaluate a common assumption that graduate medical education is associated with increased resource use, Pitts and colleagues compared resources used by attending-supervised residents compared with attending physicians alone in a nationally representative sample of 29 182 emergency department (ED) visits. The authors report that compared with attending-only visits, supervised visits were associated with a greater likelihood of hospital admission and use of advanced imaging, and with longer ED stays.

Clinical Review & Education

Methods for Evaluating Changes in Health Care Policy 2401



Observational studies are a common method to evaluate change in outcomes following implementation of new policies or modifications in existing policies. In this JAMA Guide to Statistics and Methods article, Dimick and Ryan discuss application and interpretation of the difference-in-differences study design for evaluating changes in health care policy.

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Humanities

The Art of JAMA

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Editor's Audio Summary
Robert M. Golub, MD,
summarizes and comments
on this week's issue.

Author Interview



AUDIO Interview with
Bradley M. Gray, PhD, author
of "Association Between
Imposition of a Maintenance
of Certification Requirement
and Ambulatory Care-Sensitive
Hospitalizations and Health Care Costs"



VIDEO Interview with Mitesh
S. Patel, MD, MBA, MS,
author of "Association of
the 2011 ACGME Resident
Duty Hour Reforms With
Mortality and Readmissions Among
Hospitalized Medicare Patients"

Author Reading



AUDIO Abraham Verghese,
MD, reads his Viewpoint
"Clinical Education and the
Electronic Health Record:
The Flipped Patient."

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