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Comment

Using CME Time to Promote Scholarship

To the Editor:

There have been calls for the specialty of family medicine to increase the scholarly productivity of physician faculty members and resident physicians. The scholarship requirement of the Residency Review Committee in Family Medicine is an example that many programs struggle to find time and mentors to fulfill. A common problem is finding a way to provide the dedicated and protected faculty time that would allow for success in scholarship and research. At the Mayo Clinic Arizona Department of Family Medicine, we use a simple and novel approach that has allowed novice investigators to accomplish their scholarship goals.

Most faculty physicians are provided with a fixed supply of "trip

time" to use for continuing medical education (CME). We encourage our faculty to "stay at home" and work on a scholarly project. The American Academy of Family Physicians provides CME credit for participation in a number of types of scholarly work.¹ Participation in clinical research studies is defined broadly as case reports, case series, systematic reviews, and other descriptive and experimental studies and is eligible for up to 10 prescribed credit hours per year. Participation may include writing a grant to secure funding for a clinical research project, research work as an investigator or coinvestigator and authoring or coauthoring a manuscript. Presentation and publication of scholarly work is also eligible for CME credit.

We have allowed our physicians to use trip time to create opportunities for working on projects as varied as Family Physician Inquiry Network (FPIN) Clinical Inquiries, case reports with poster presentations with our residents, and clinical review articles. One could potentially justify 35 hours of dedicated time for a project if CME hours allowed for development, presentation, and publication were all utilized. Our department has realized significant savings as physicians work here on their project and do not incur expenses for conference registration, plane travel, meal expenses, or hotel accommodations.

Our actions to increase faculty and resident scholarship have been multiple and varied. They include FPIN membership, required resident projects, and a published senior class quality improvement project.² As a department, we had eight peer-reviewed publications in 2005, 11 in 2006, 15 in 2007, and we will have more than 20 in 2008. Over the last 3 years, six faculty members (about one third of the total) have published articles for the first time or have manuscripts in review.

Prior to this action, resident involvement in presentation and publication was rare. All current residents will have an extramural presentation, a peer-reviewed publication, or both before graduation.

Using designated CME time for scholarship has been a winning strategy for us, and we encourage other departments to consider this approach.

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