

Authors' Response: "It's a Win-Win: The Effect of Medical Students on Clinic Productivity"

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We thank Dr Anderson for his thoughtful comments regarding our paper, "It's a Win-Win: The Effect of Medical Students on Clinic Productivity"¹ and appreciate the opportunity to respond. The main concern expressed is the lack of details in our paper on medical student characteristics given the influence that varying levels of training, interest in specialty, and performance in prior clerkships might have on effective student participation in the clinic.²

Although we did not identify and survey the students directly taught by the five exemplary obstetrics and gynecology (Ob-Gyn) clinic preceptors in our study, we can comment on several characteristics of the student population involved. First, the productivity data presented in our paper are derived from an entire academic year of the Ob-Gyn core clerkship, which includes all clinical (third- and fourth-year) medical students at varying levels of their training. Differences among student experience on clinician productivity would therefore be averaged across the year. Notably, medical students on a subinternship who had already experienced the Ob-Gyn clerkship were not included.

Second, all medical students are required to have an ambulatory component during their Ob-Gyn core clerkship, and students are assigned randomly to Ob-Gyn clinic preceptors. Therefore, students who are especially interested in the Ob-Gyn specialty are not able to cherry pick which clinic attending they would prefer to work with. In the same fashion, clinic attendings cannot choose which student to precept (eg, an efficient, more knowledgeable, or experienced student).

Third, in response to Dr Anderson's concern about the effect of the number of patients seen by a student on clinic productivity, this was typically dictated by the Ob-Gyn attending and not the student. The ideal number of patients seen by a student in a clinic session could depend on a variety of factors, such as clinic location, visit type (eg, new patient, return patient, procedural visit), number of clinic rooms, and whether the clinic is running on time.³⁻⁵ In our study, we found that most clinic preceptors agreed that students should interview and write notes on at least one to three patients per clinic half-session.

In sum, we agree that both medical students and clinic preceptors play an important role in facilitating productivity. However, student characteristics should not affect the utility of the clinic workflows we developed using input from exemplary Ob-Gyn clinicians. The numbers of patients and tasks assigned to students in the proposed clinic workflows can be modified to accommodate more advanced learners or scaled to meet the needs of an emerging learner.

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