

National Graduate Survey for year(s): 2025

The ABFM has partnered with the Association of Family Medicine Residency Directors (AFMRD) to conduct a standardized National Graduate Survey of ABFM certified physicians three years after residency completion. This report contains the responses of your graduates with national comparisons. The ABFM and AFMRD hope you will use these data to evaluate your program and take steps to address any gaps. This survey will fulfill ACGME Program Requirements to incorporate graduate feedback and performance in your Annual Program Evaluation.

A word about methodology. Each year, the survey is open from January to December and a new cohort of graduates will be surveyed. Each year's cohort graduated 3 years prior; for example, the 2025 data are from 2022 residency graduates. Reports will be available in April each year to allow time for the ABFM to clean the data and create the reports. Additionally, each year an AFMRD advisory committee reviews survey performance and content to ensure relevance and currency. In keeping with ABFM's privacy policy and to ensure confidentiality, data are censored if fewer than three eligible graduates from a residency respond in a given year.

Methodology Notes

Practice Location

The actual primary practice address was collected, then geo-coded. Practice in a Health Professional Shortage Area (HPSA) as determined by the practice address. The county level Rural Urban Continuum Codes (RUCC) were collapsed into 4 categories to measure rural practice: 1-3 are Urban; 4-5 are Micropolitan; 6-7 are Large Rural; 8-9 are Small Rural. See the RUCC website for more information (<https://www.ers.usda.gov/data-products/rural-urban-continuum-codes/documentation/>).

Holding Certificates of Added Qualification:

We used ABFM administrative data to determine whether respondents held an ABFM sponsored Certificate of Added Qualification (CAQ).

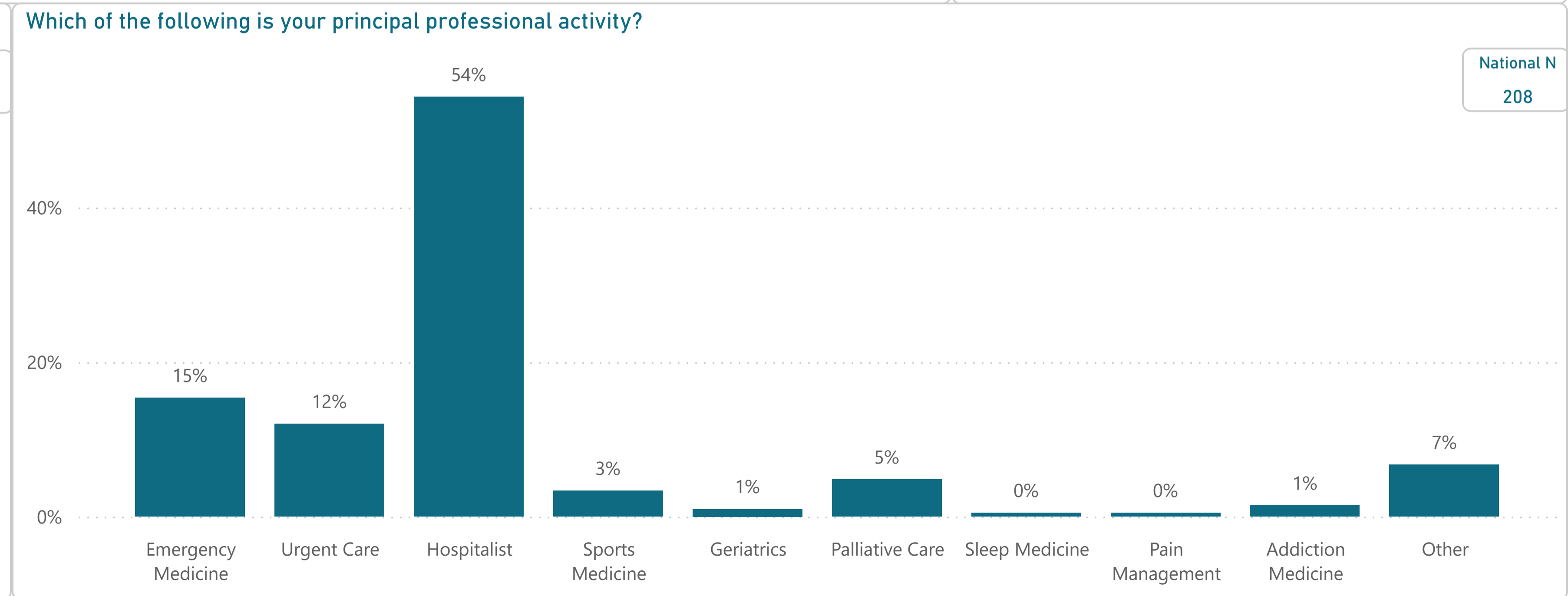
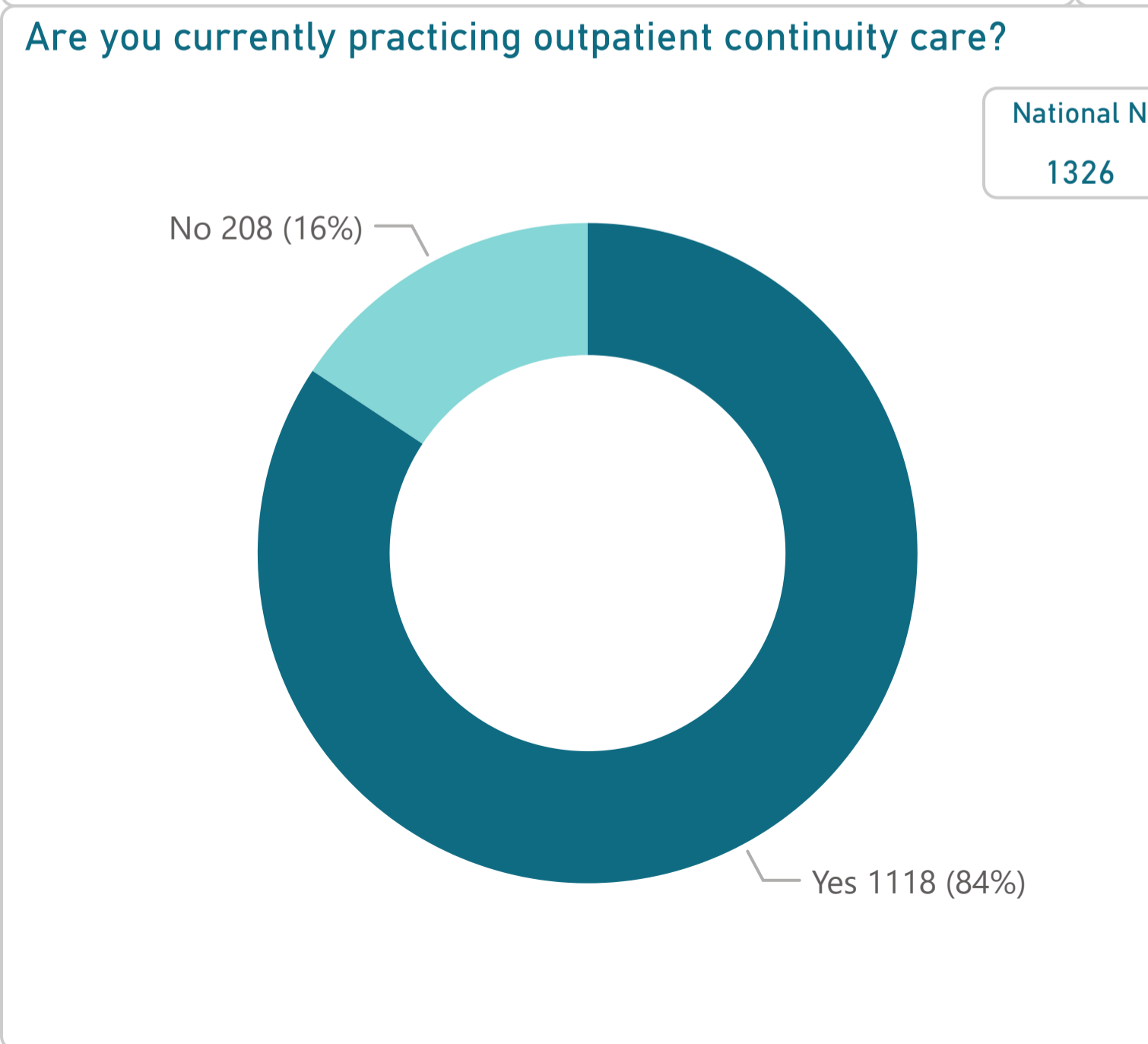
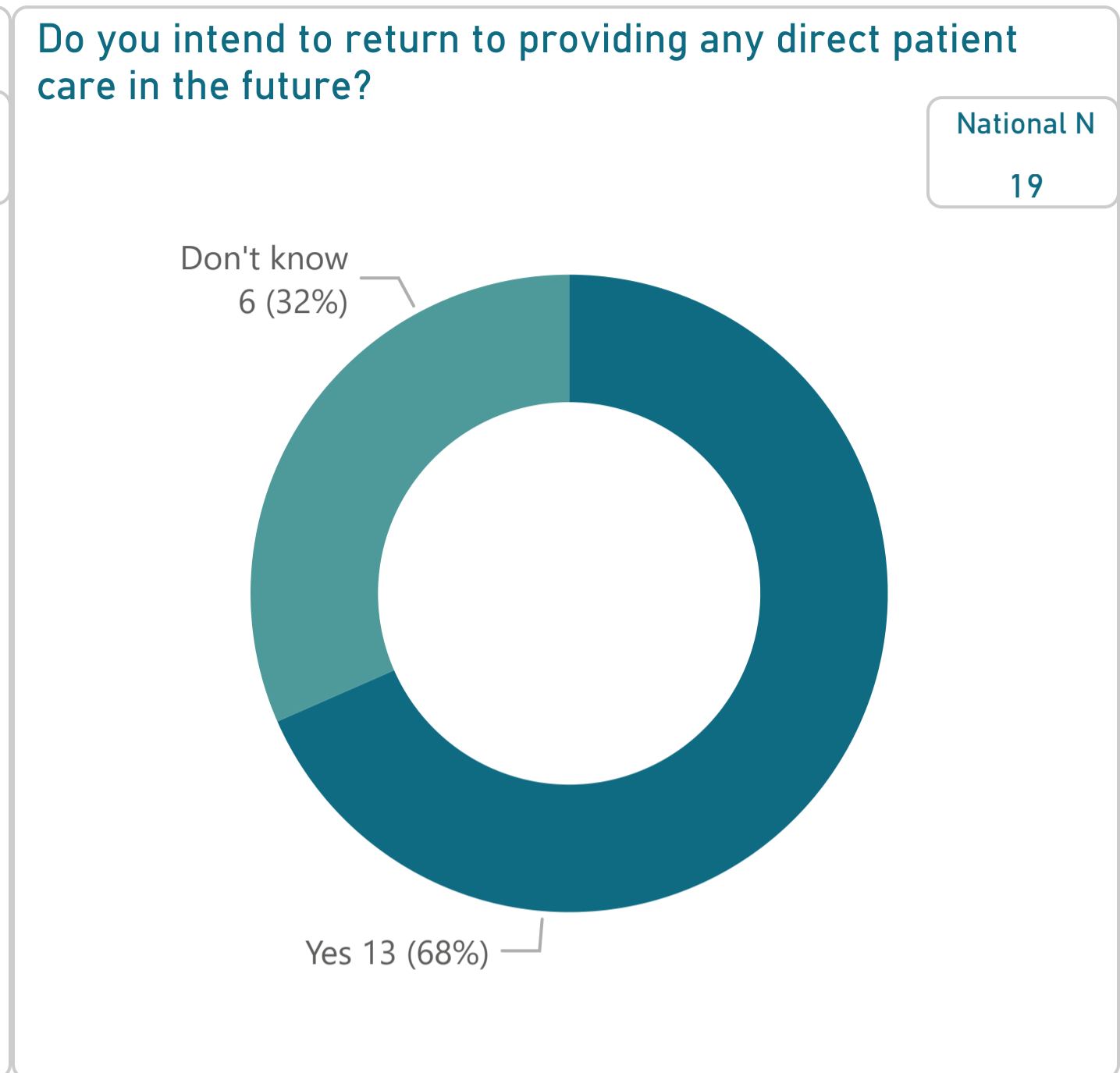
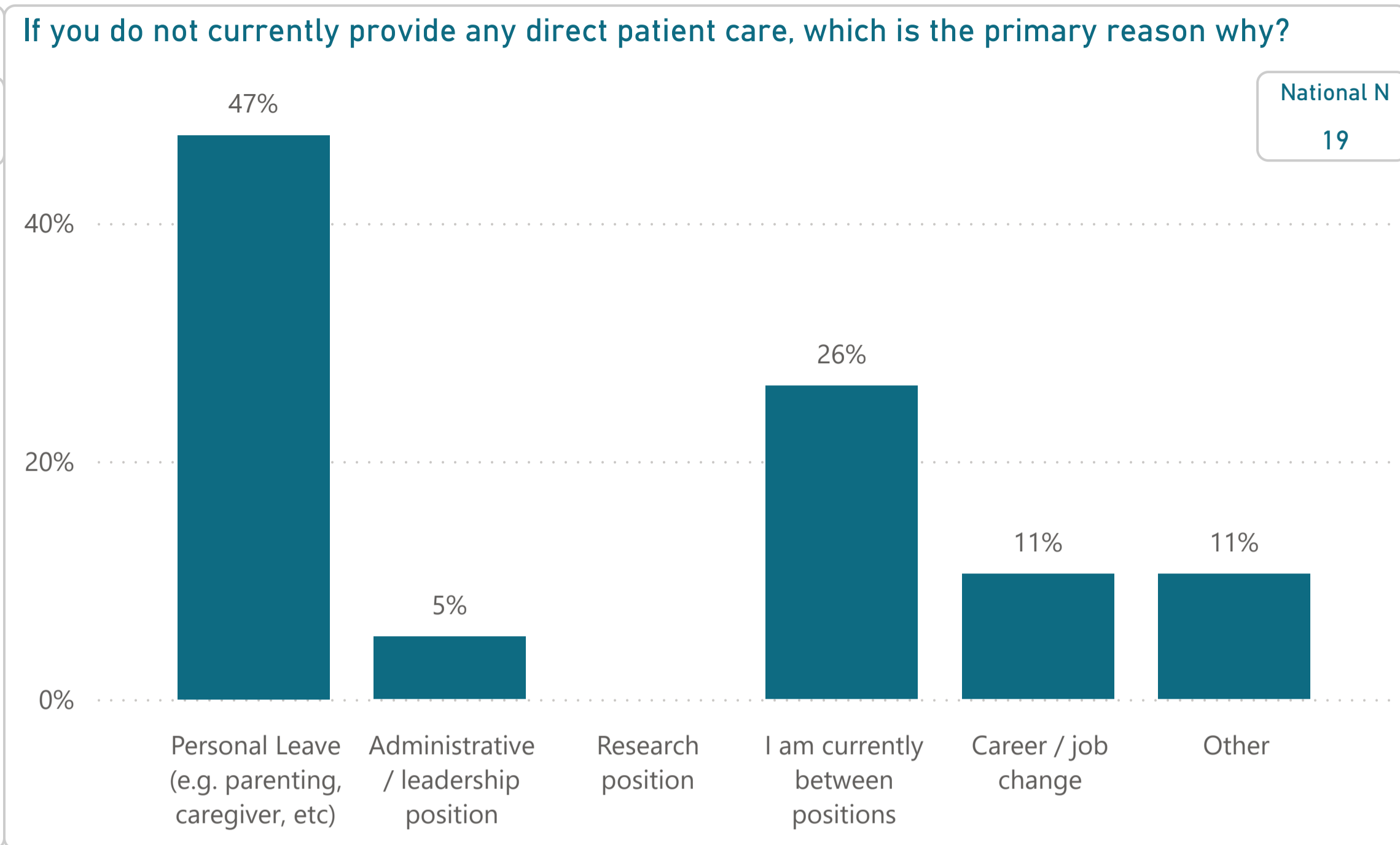
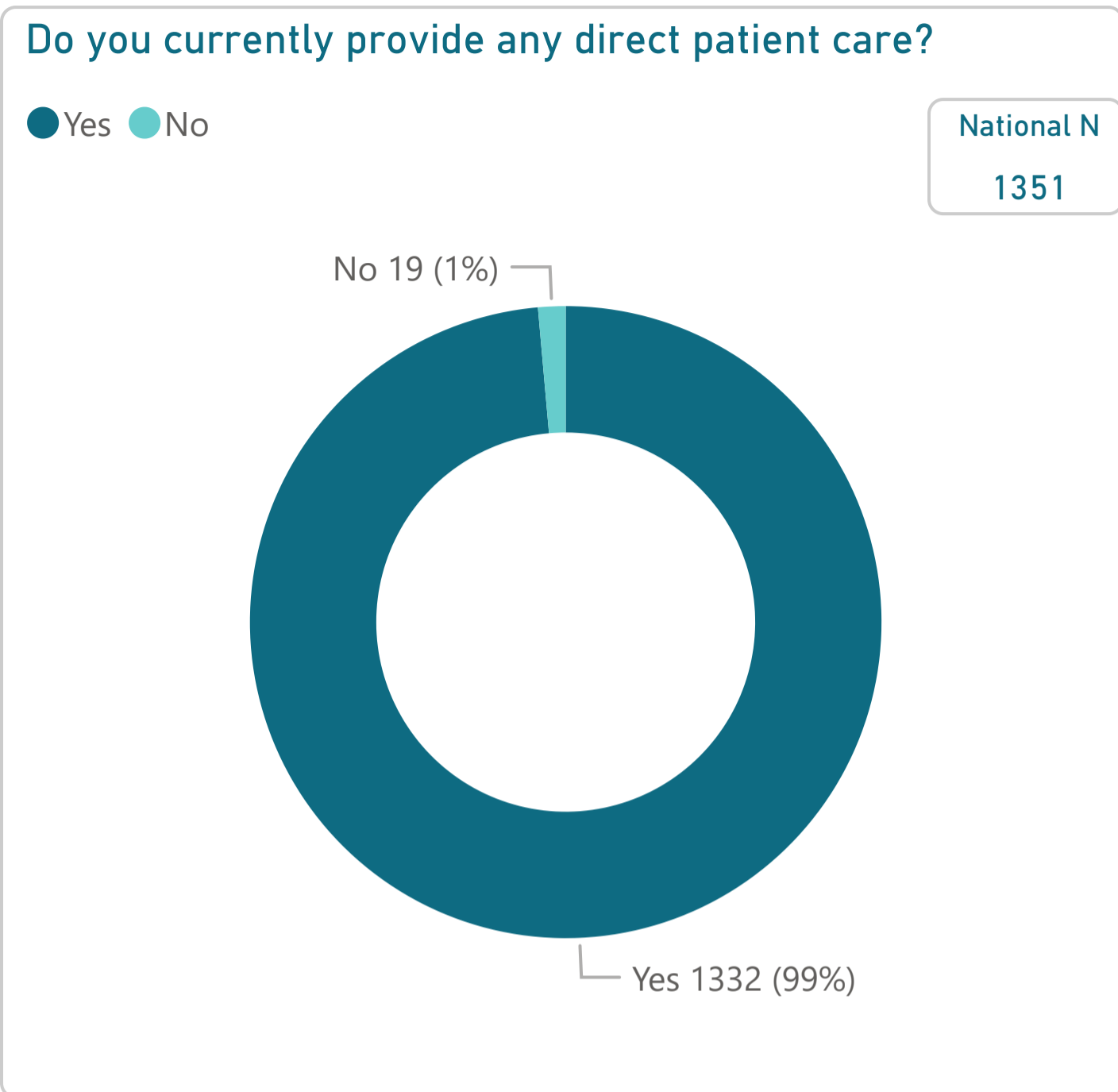
Income:

ABFM researchers created an algorithm to impute income for those who did not respond or gave non-sensical responses. The imputed numbers are reported.

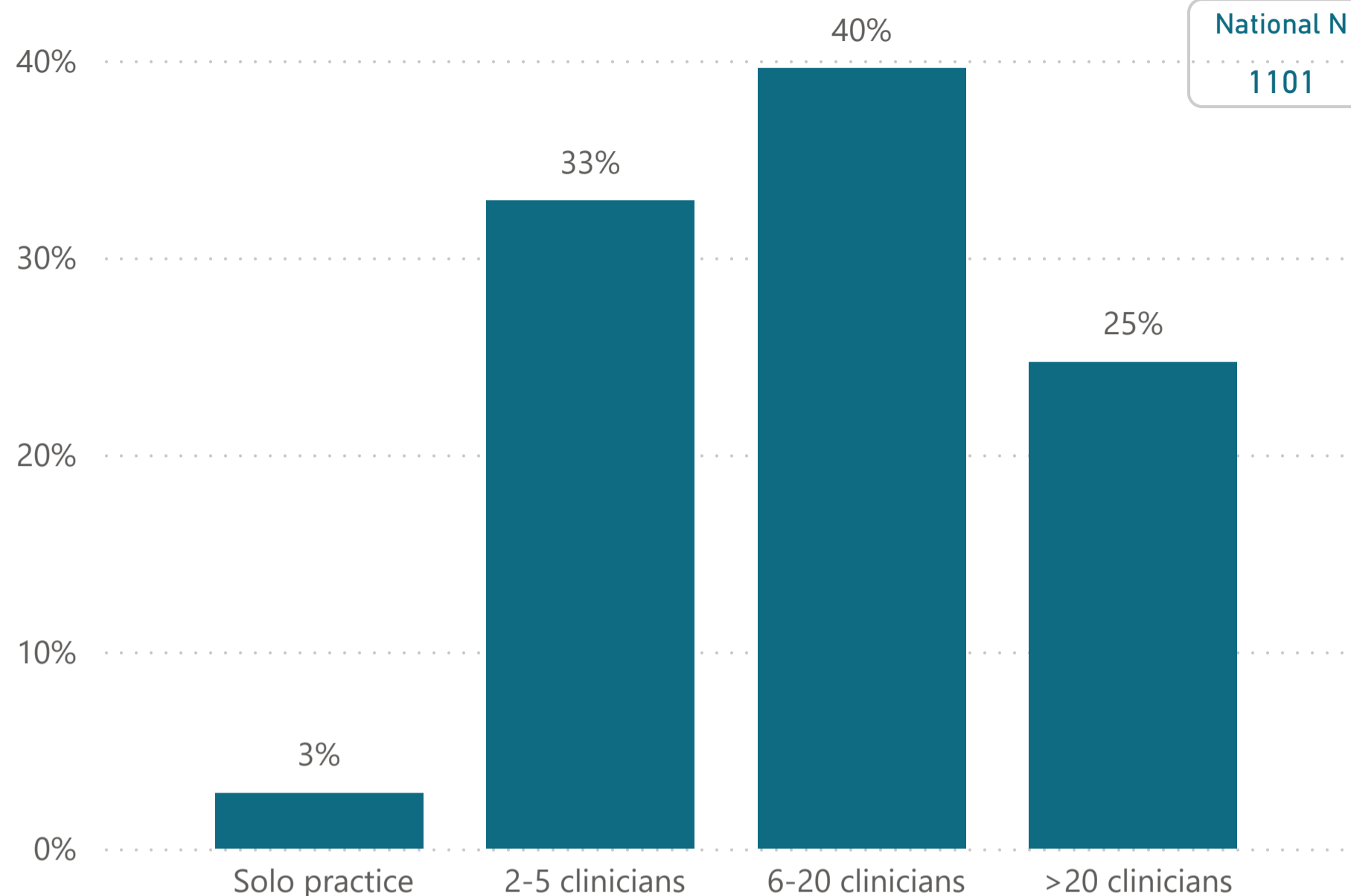


**American Board
of Family Medicine**

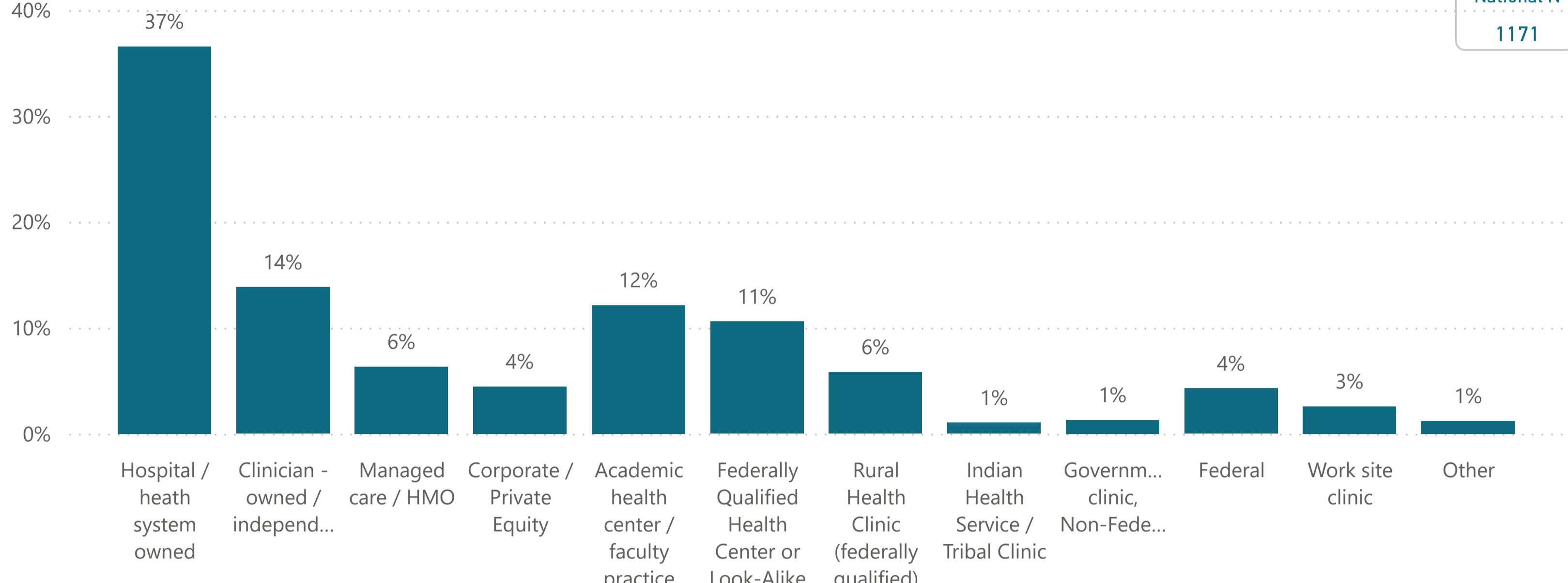




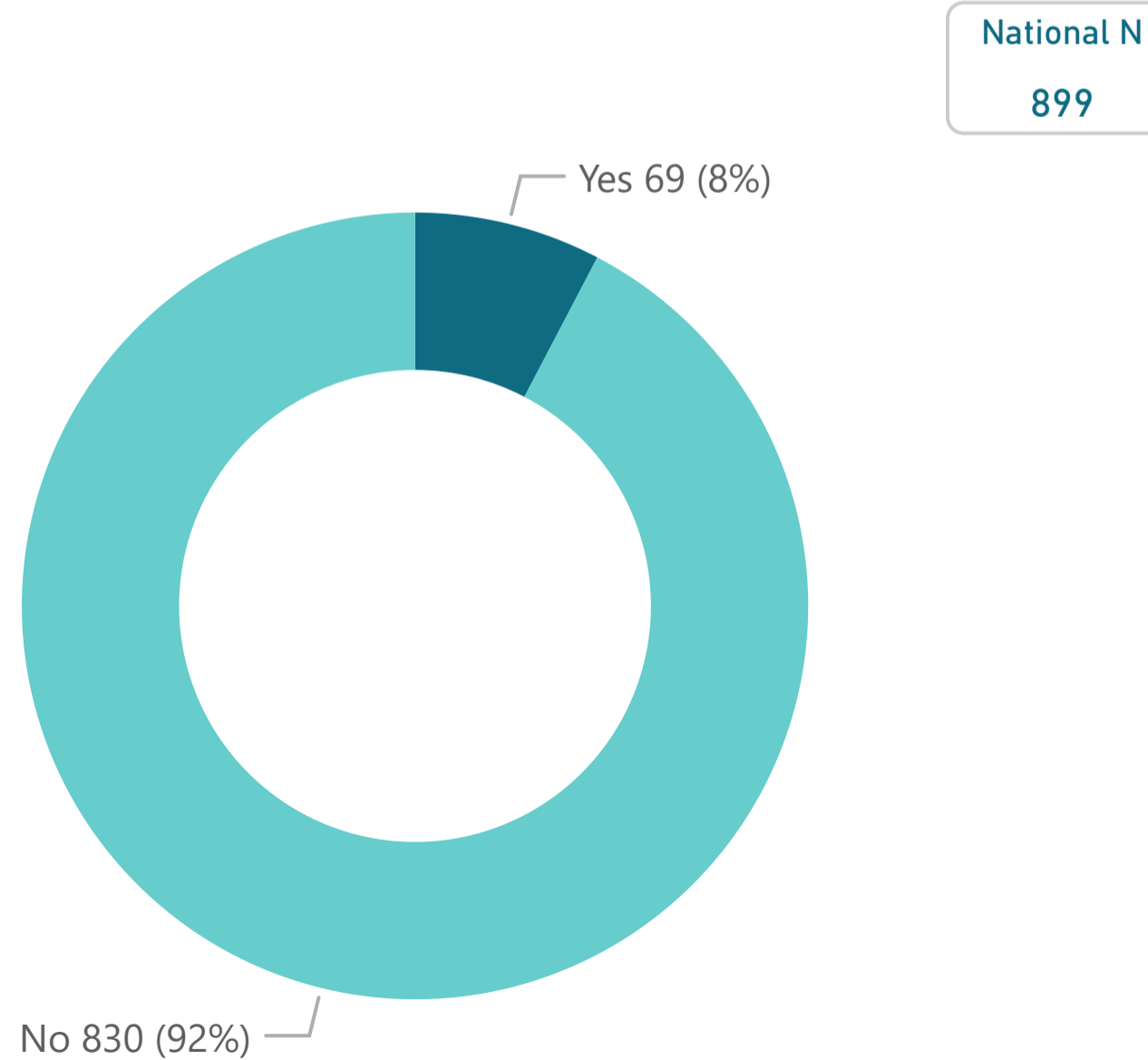
Which of the following describes your principal practice size?



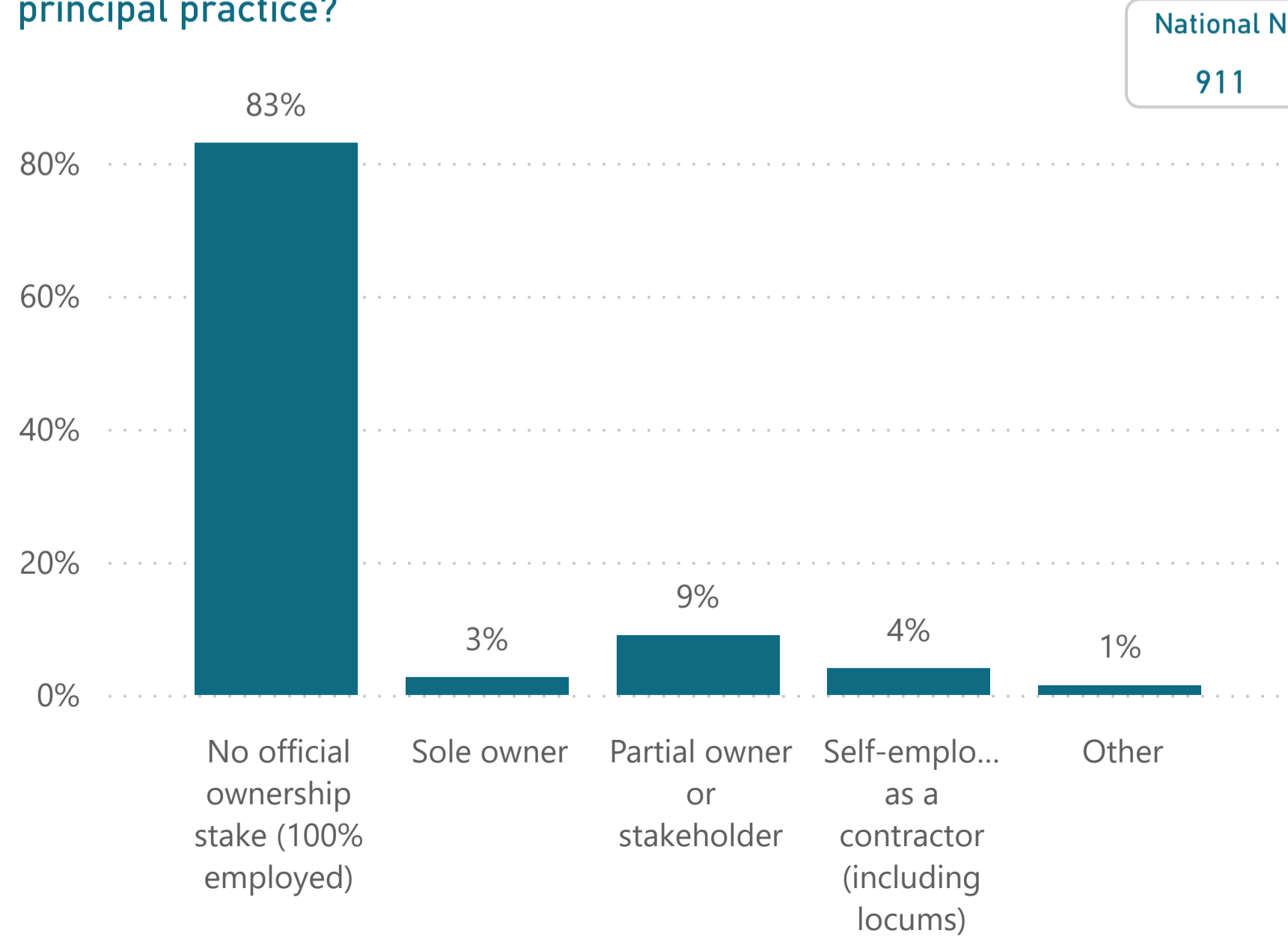
Which of the following describes your principal practice site?



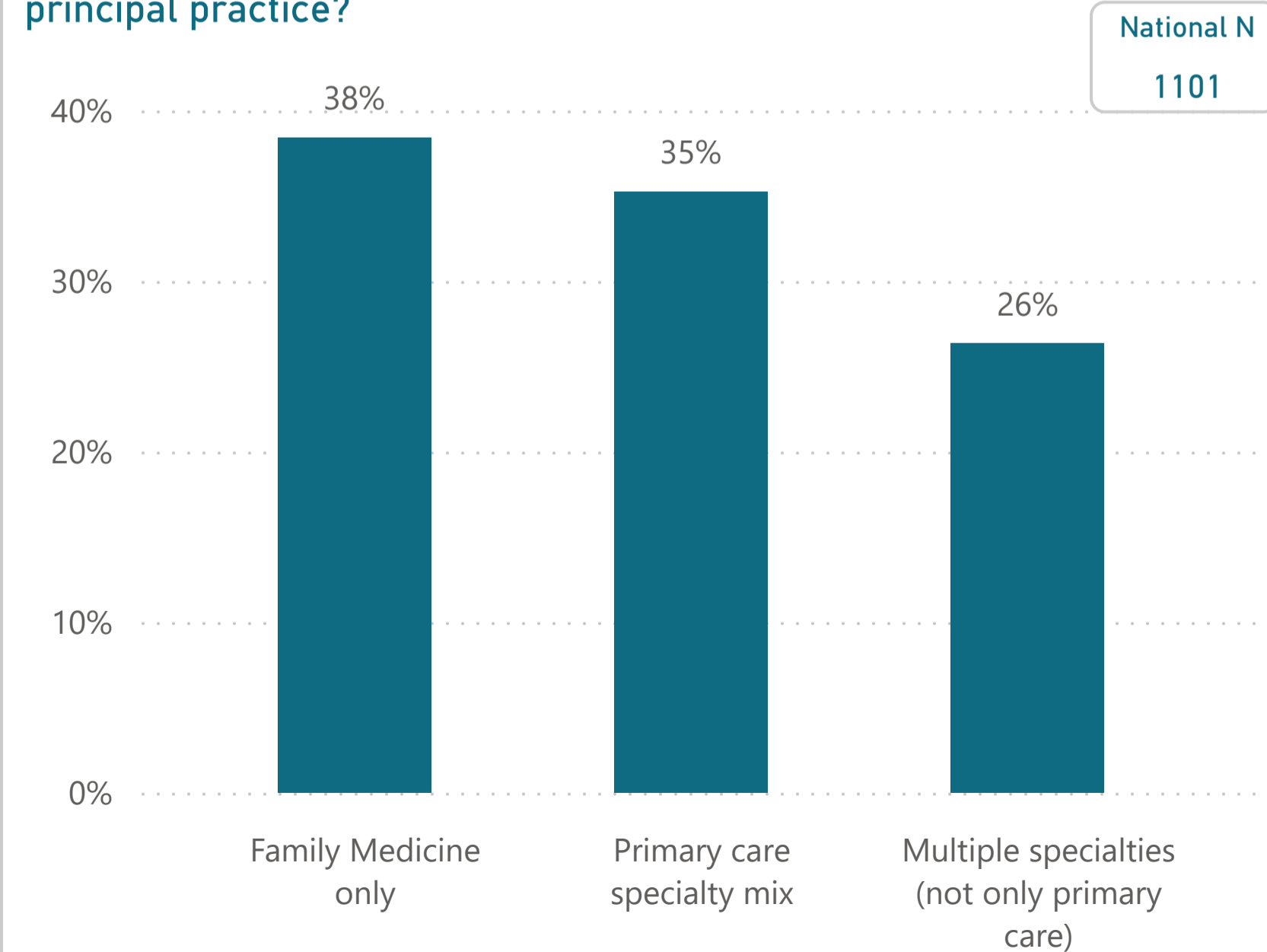
Do you currently practice in a Direct Primary Care (DPC) model of care?

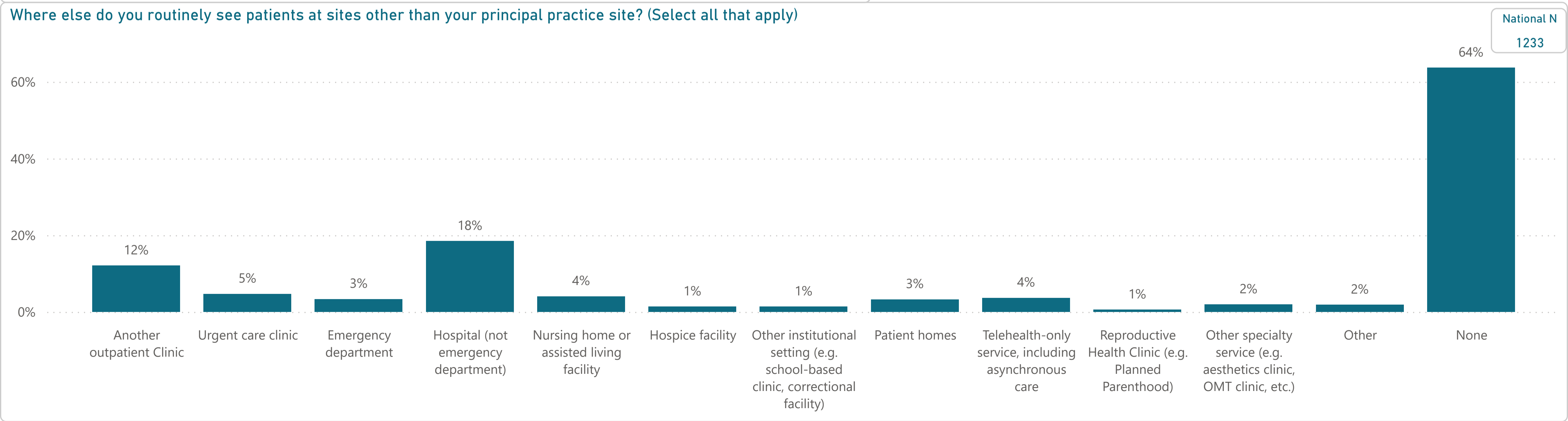
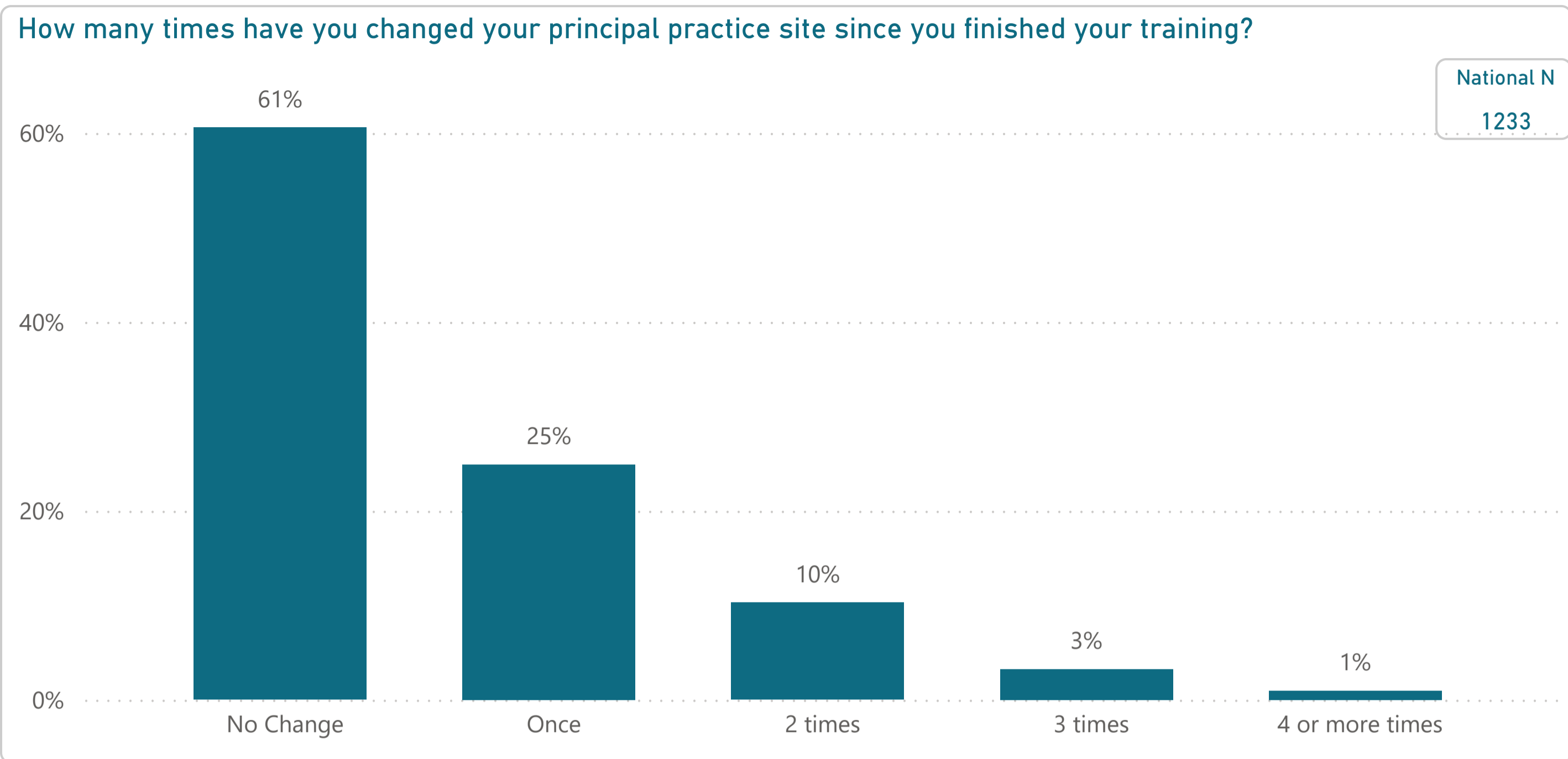


Which of the following best describes your role in the ownership of your principal practice?



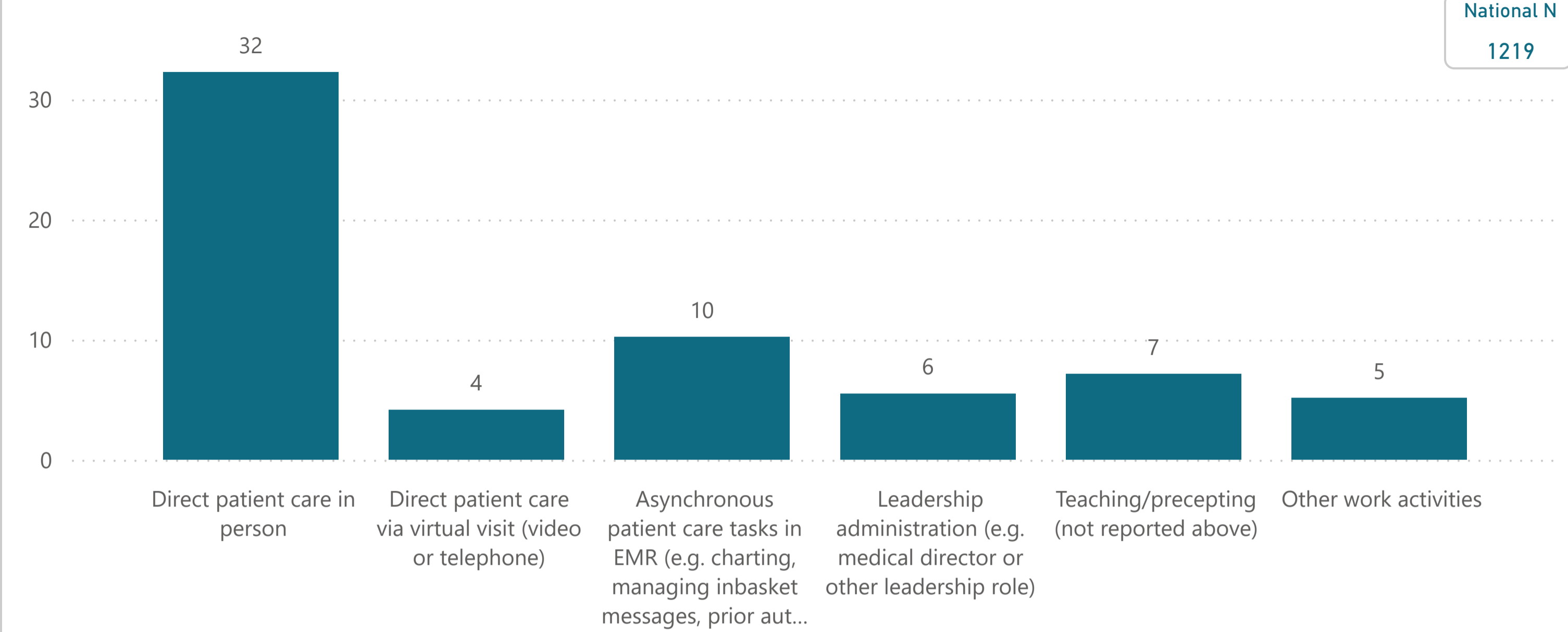
Which of the following describes the physician specialty mix of your principal practice?





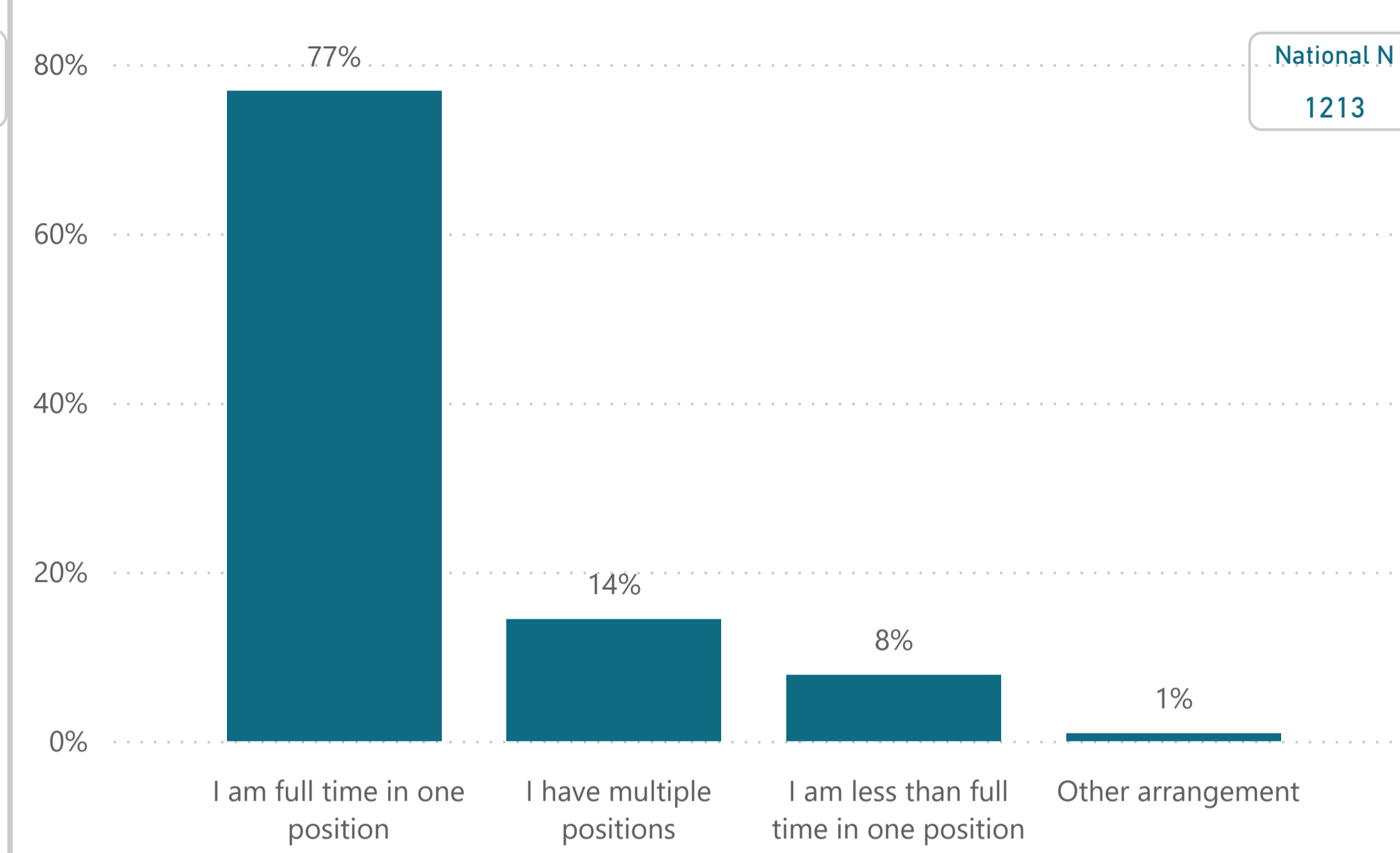
How many hours do you work in a typical week, across all of your practice sites? Your best estimate is fine; include all practice sites if you have more than one, but do not include on-call time out of the office or volunteer time.

National N
1219



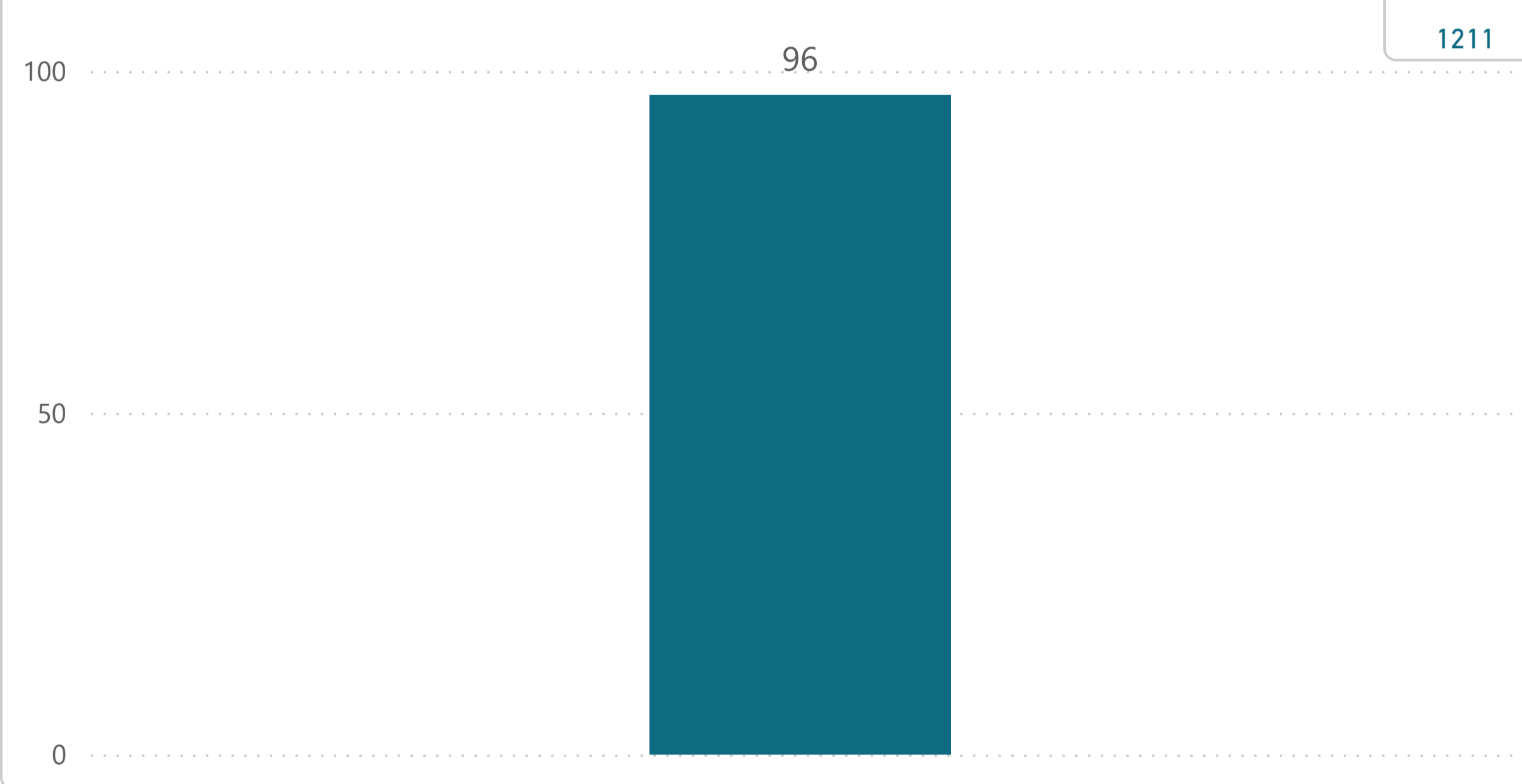
Which of the following best describes your job structure?

National N
1213



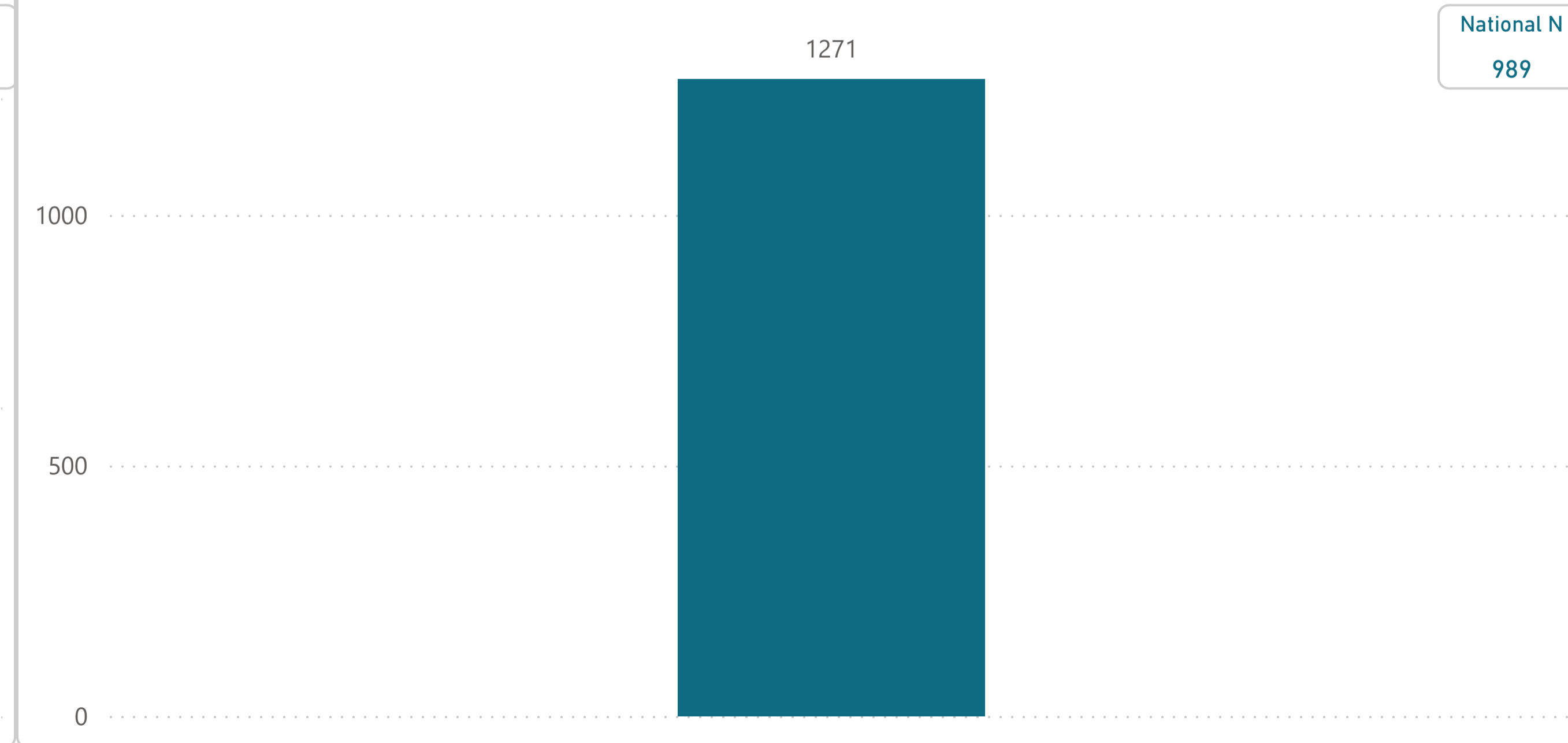
What is your current FTE (percent effort)? (Enter a whole number percent, e.g., enter "80" for 80%.) If you have more than one position, please give the total across all of them.

National N
1211



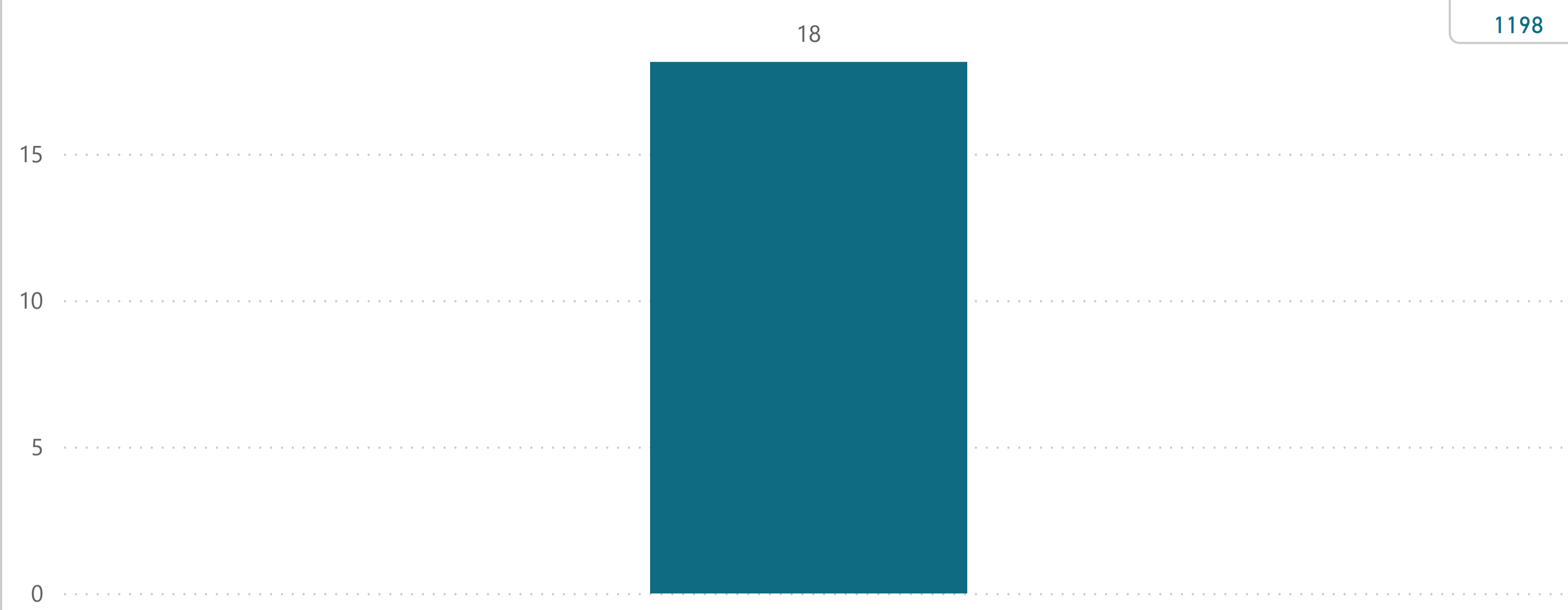
Approximately what is the size of your patient panel?

National N
989



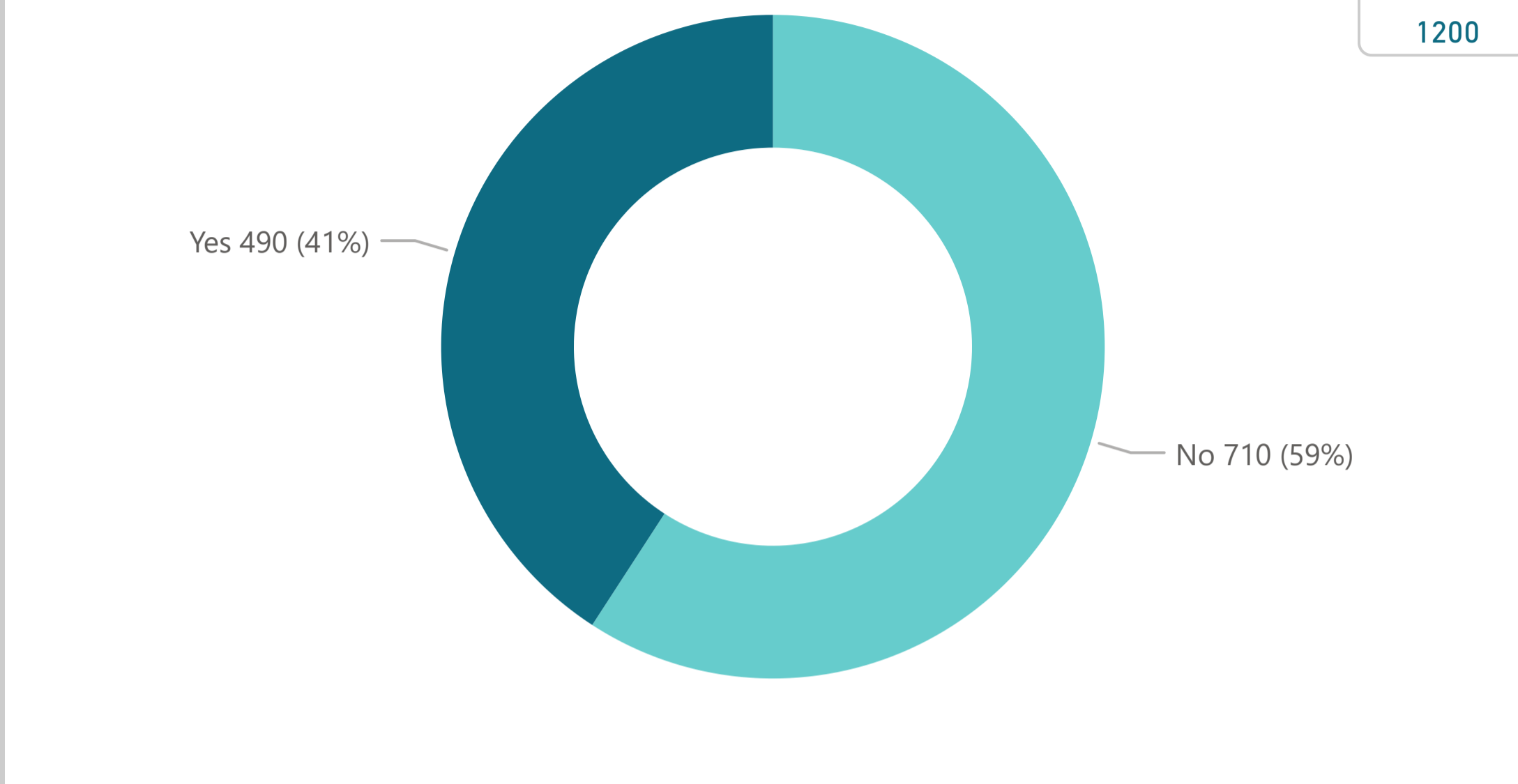
How many direct patient care encounters do you have in a typical full day? (If you only work half day increments, multiply by 2 to get a full day number. Direct patient care encounters is meant to exclude asynchronous patient care, like portal messaging.)

National N
1198



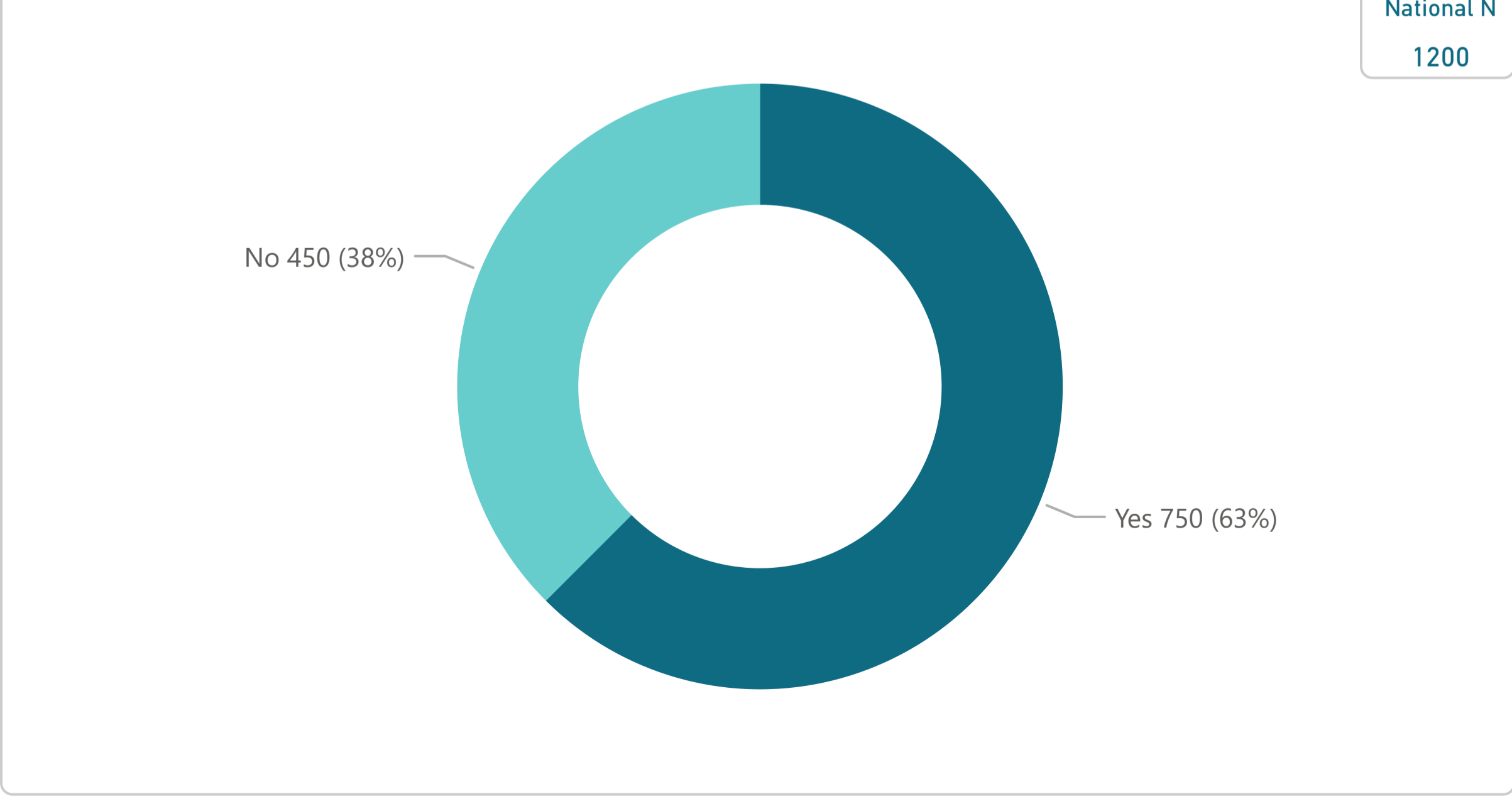
Do you see patients on weekends and/or evenings?

National N
1200



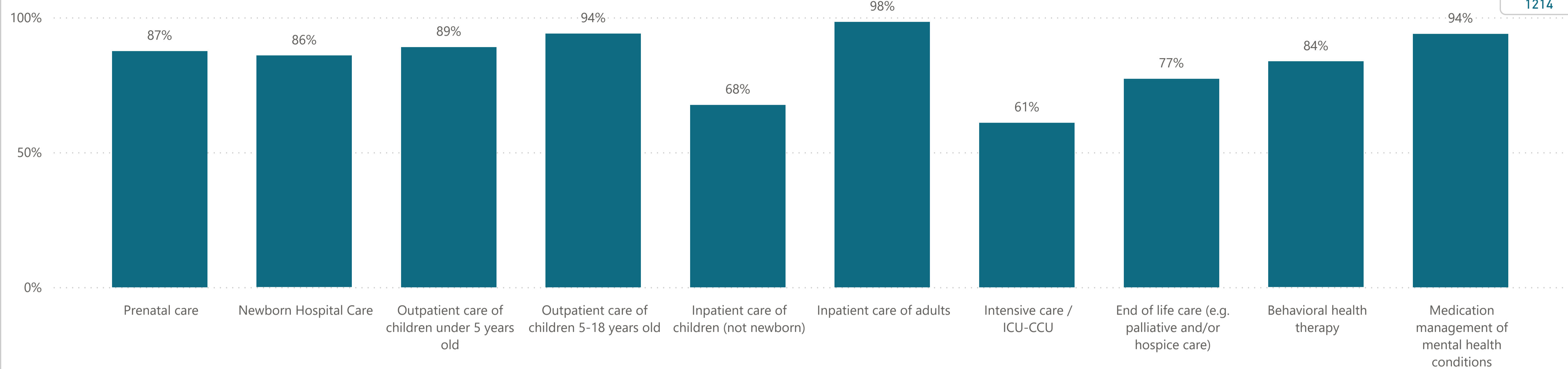
Do you take after-hours call for your principal practice?

National N
1200



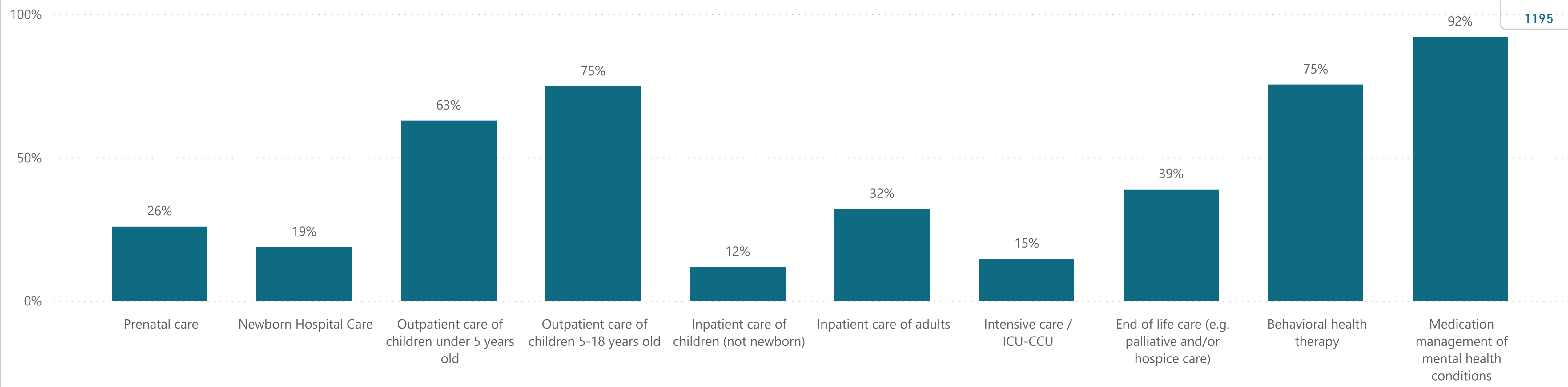
For each of the services listed below, please indicate whether your residency training prepared you or not

National N
1214



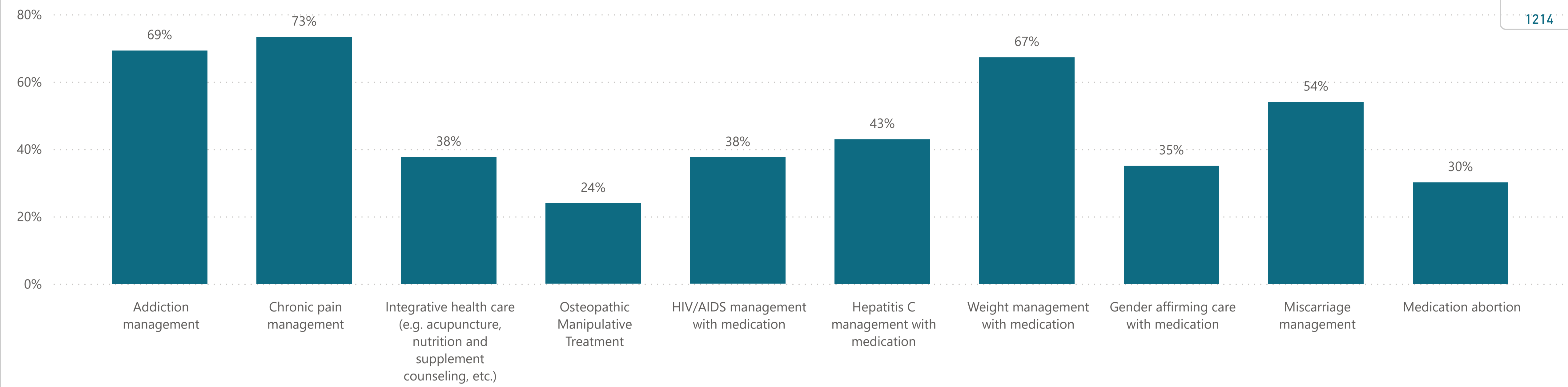
For each of the services listed below, please indicate whether you are currently practicing

National N
1195



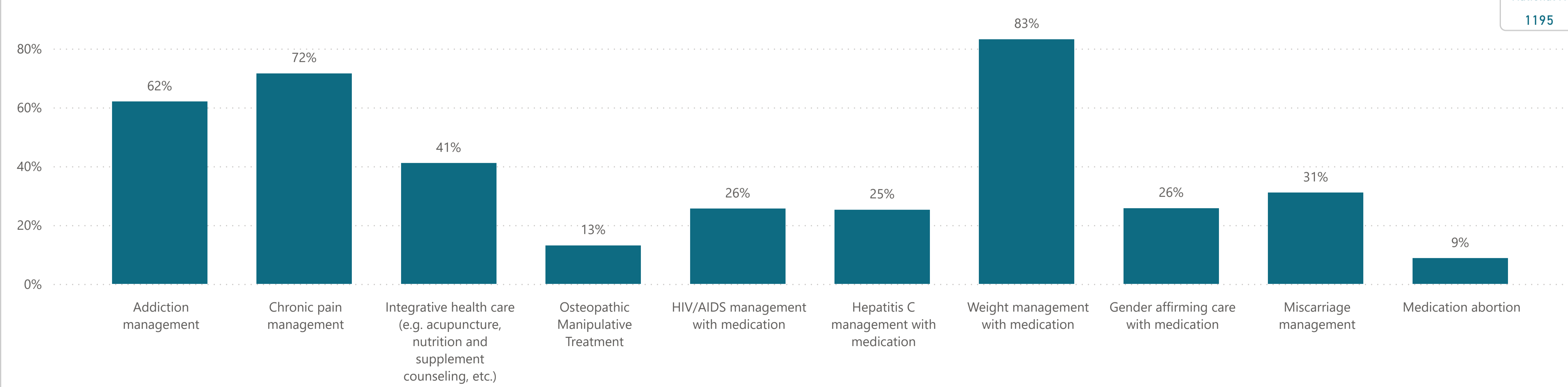
For each of the services listed below, please indicate whether your residency training prepared you or not

National N
1214



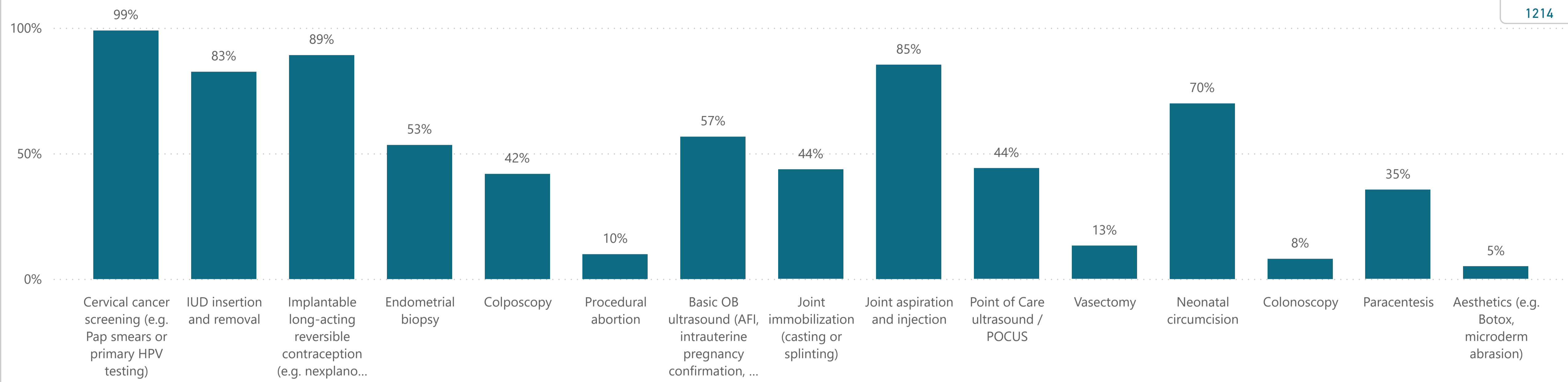
For each of the services listed below, please indicate whether you are currently practicing

National N
1195



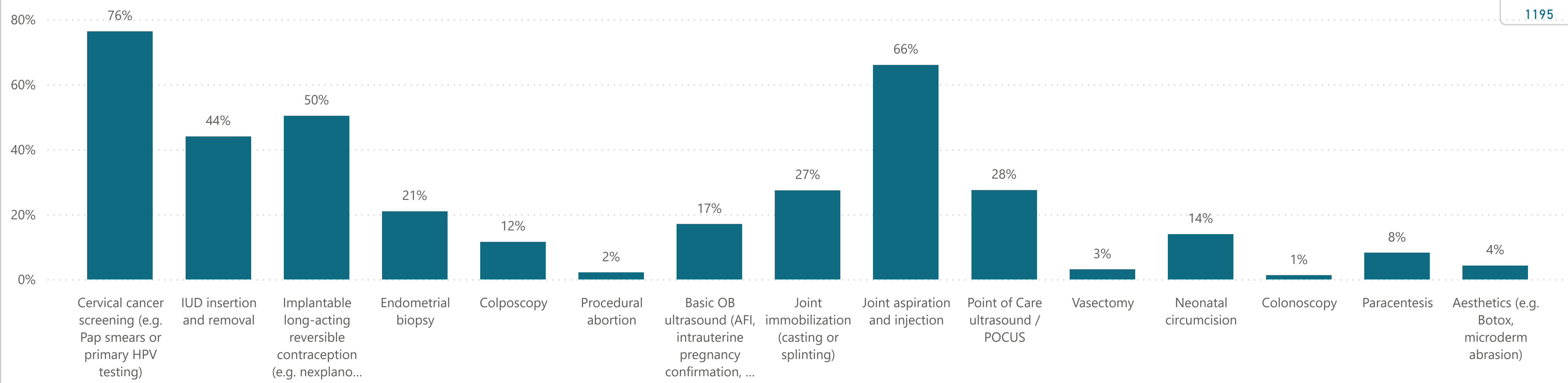
For each of the procedures listed below, please indicate whether your residency training prepared you or not

National N
1214

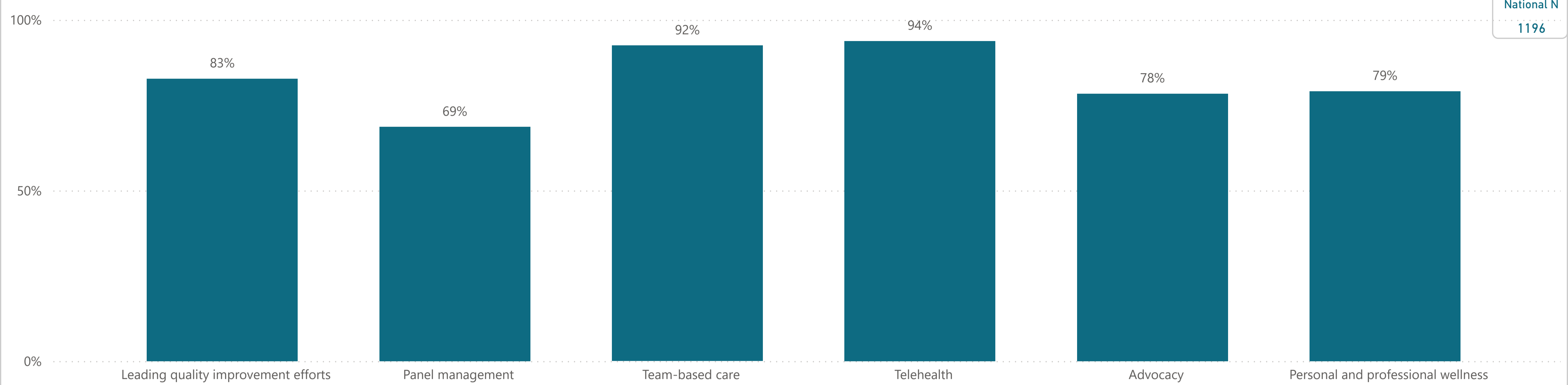


For each of the procedures listed below, please indicate whether you are currently practicing

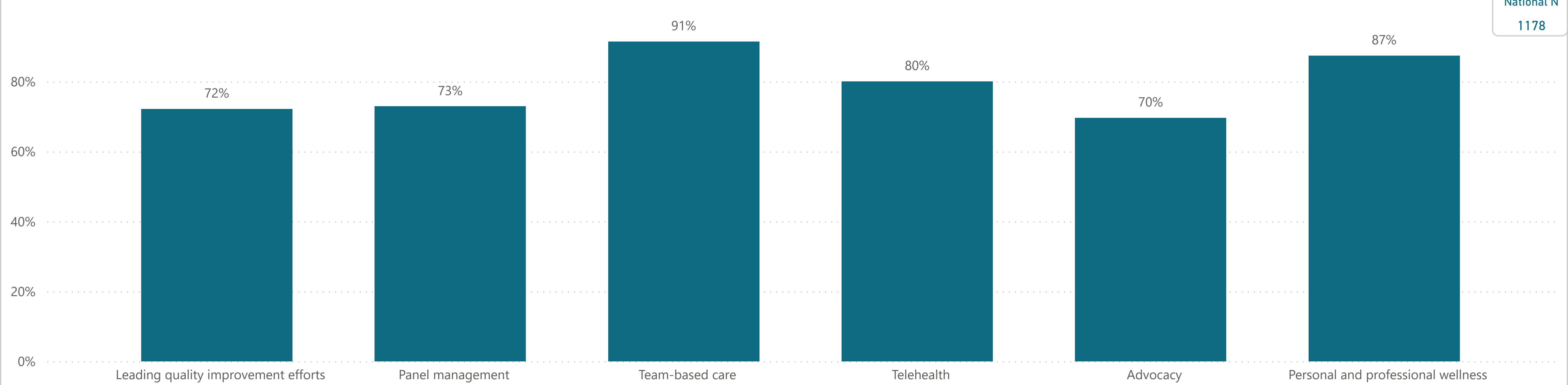
National N
1195



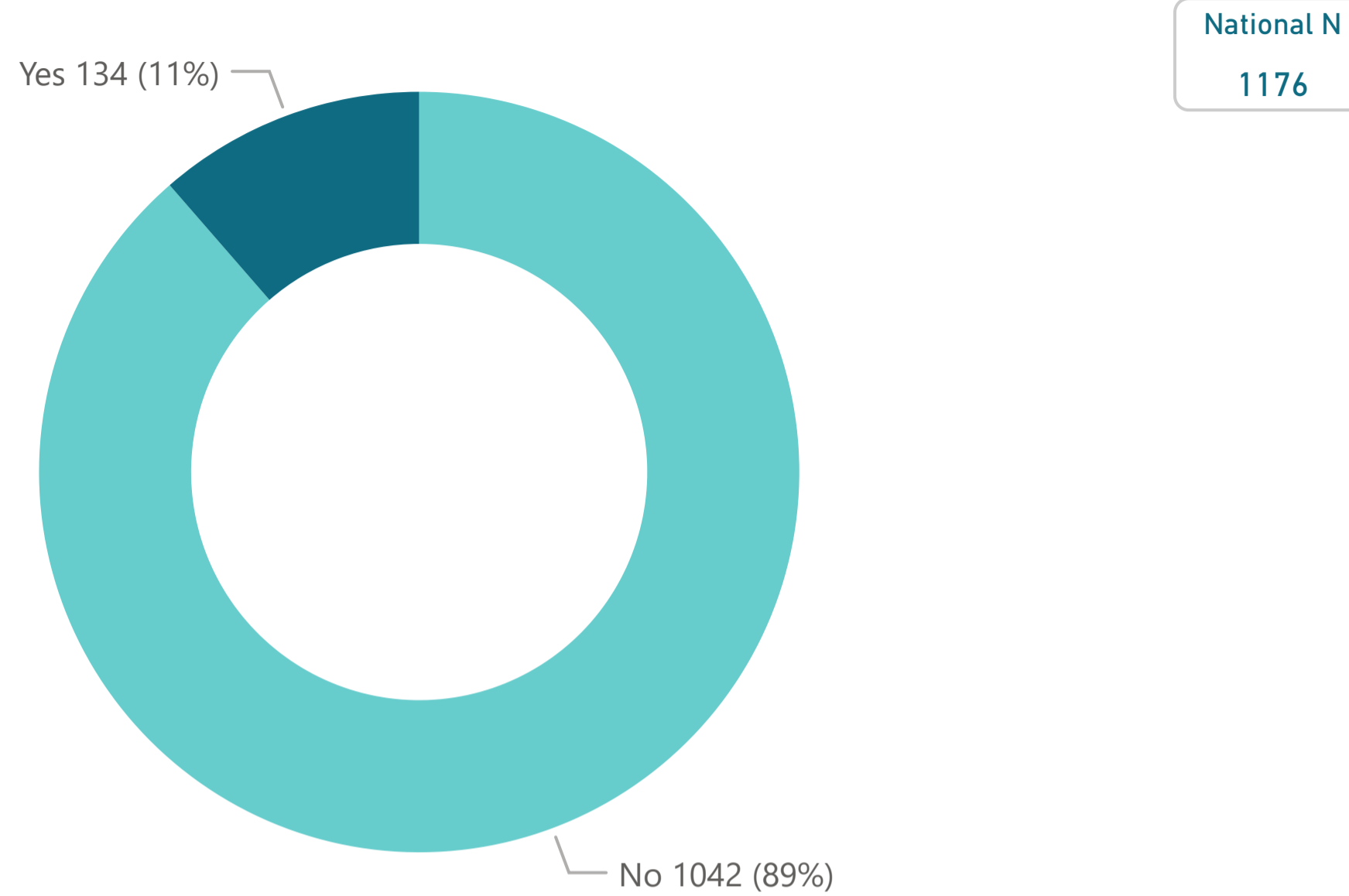
For the specific activities listed below, please indicate whether your residency training prepared you or not



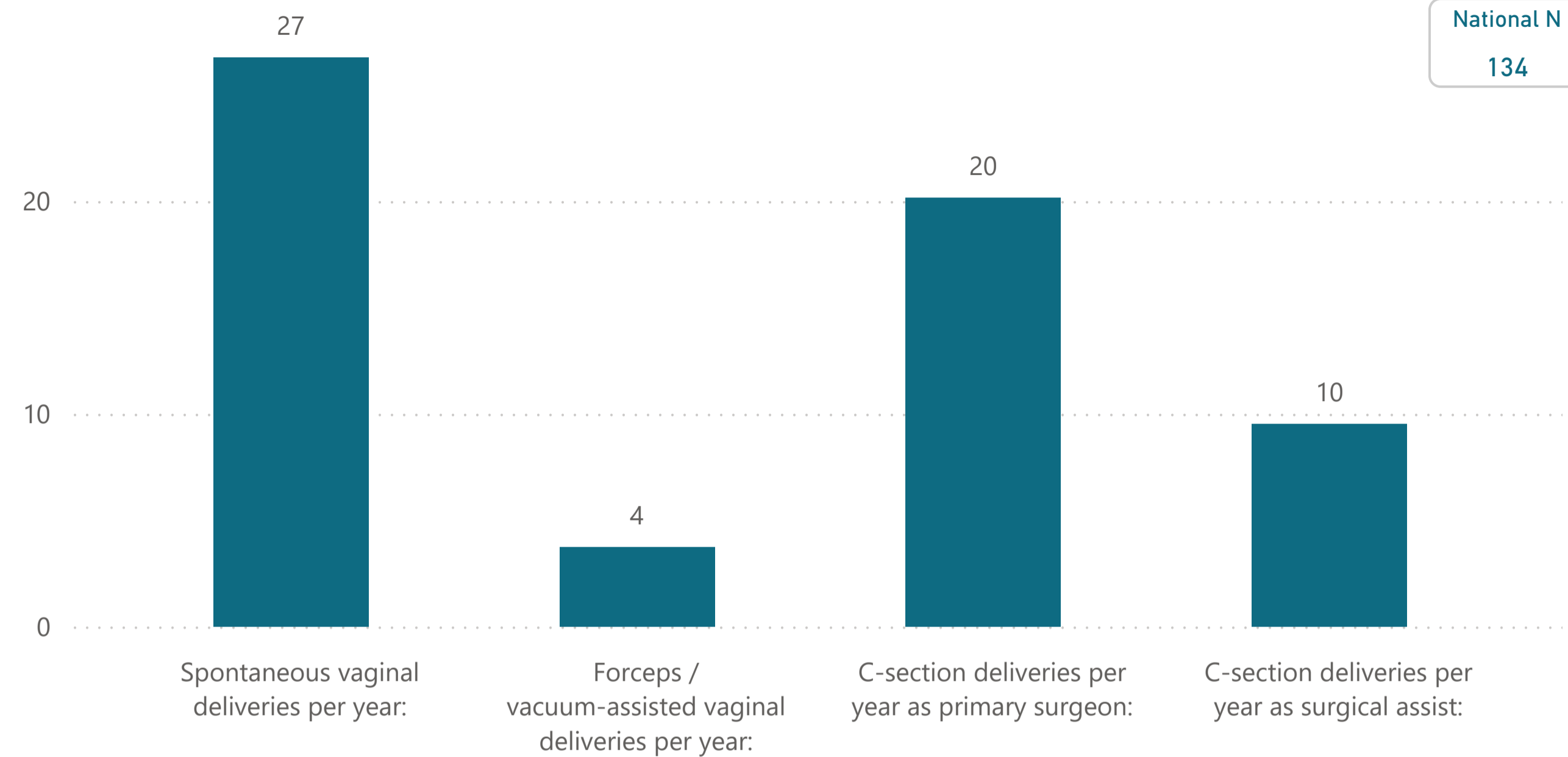
For specific activities listed below, please indicate whether you are currently practicing



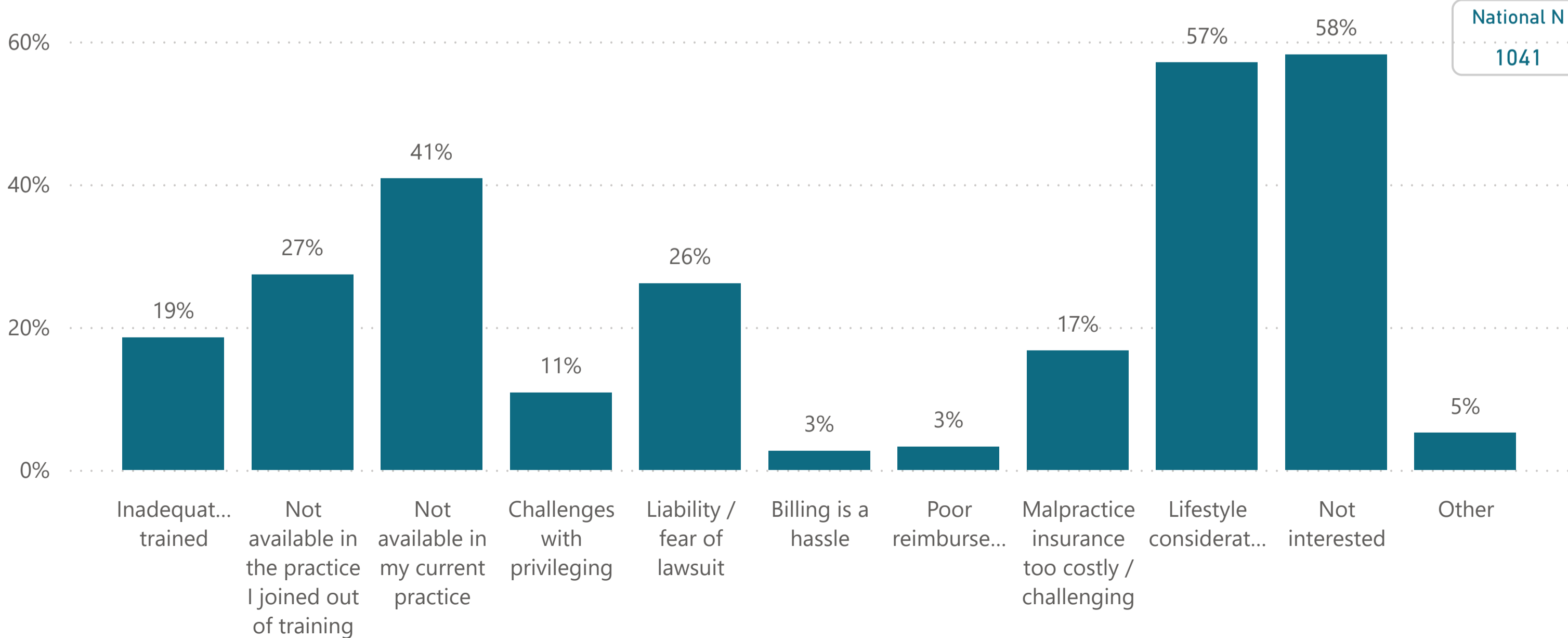
Are you currently delivering babies?



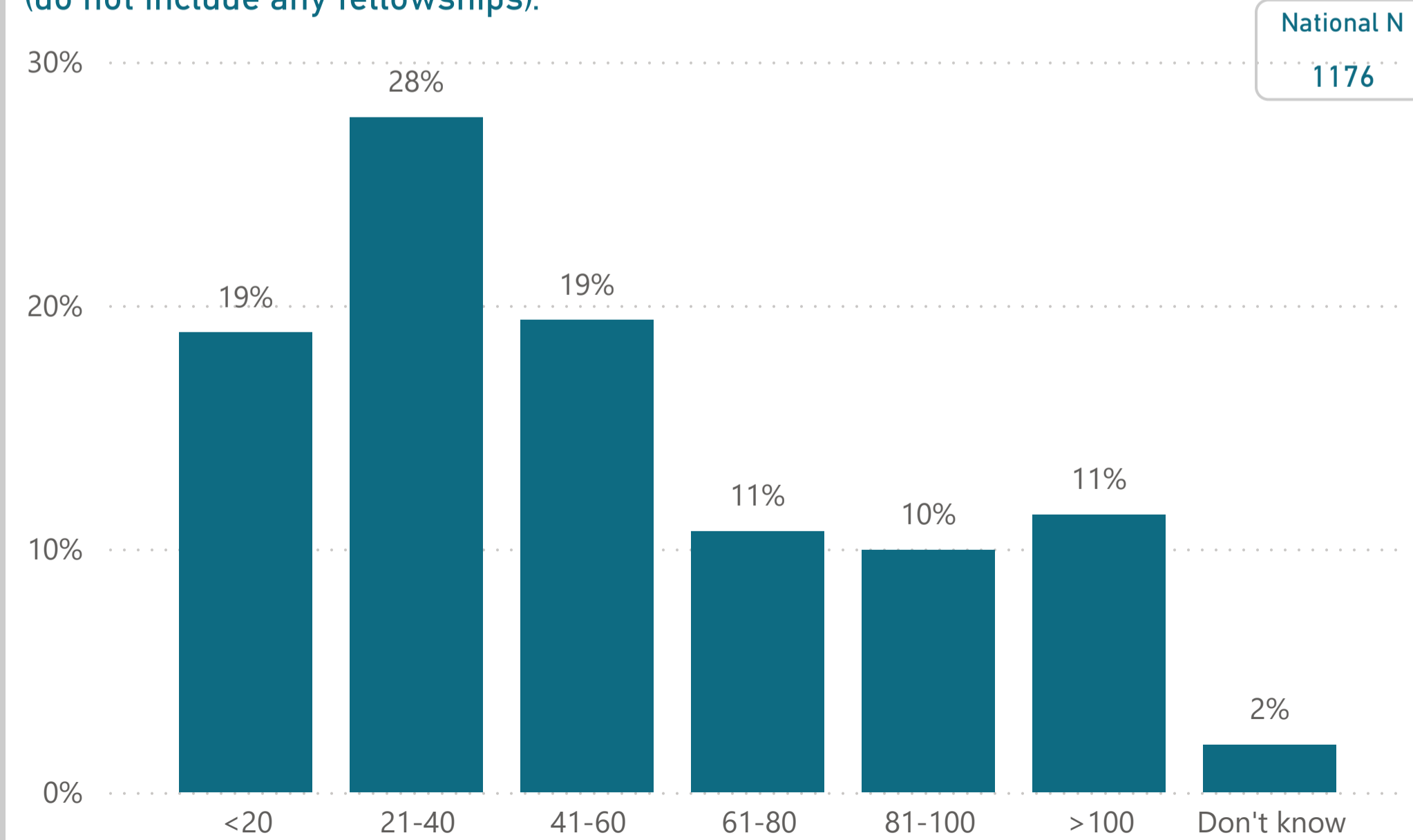
If yes, please estimate how many deliveries you perform in an average year for each of the following:



Why are you not currently delivering babies? (Select all that apply)

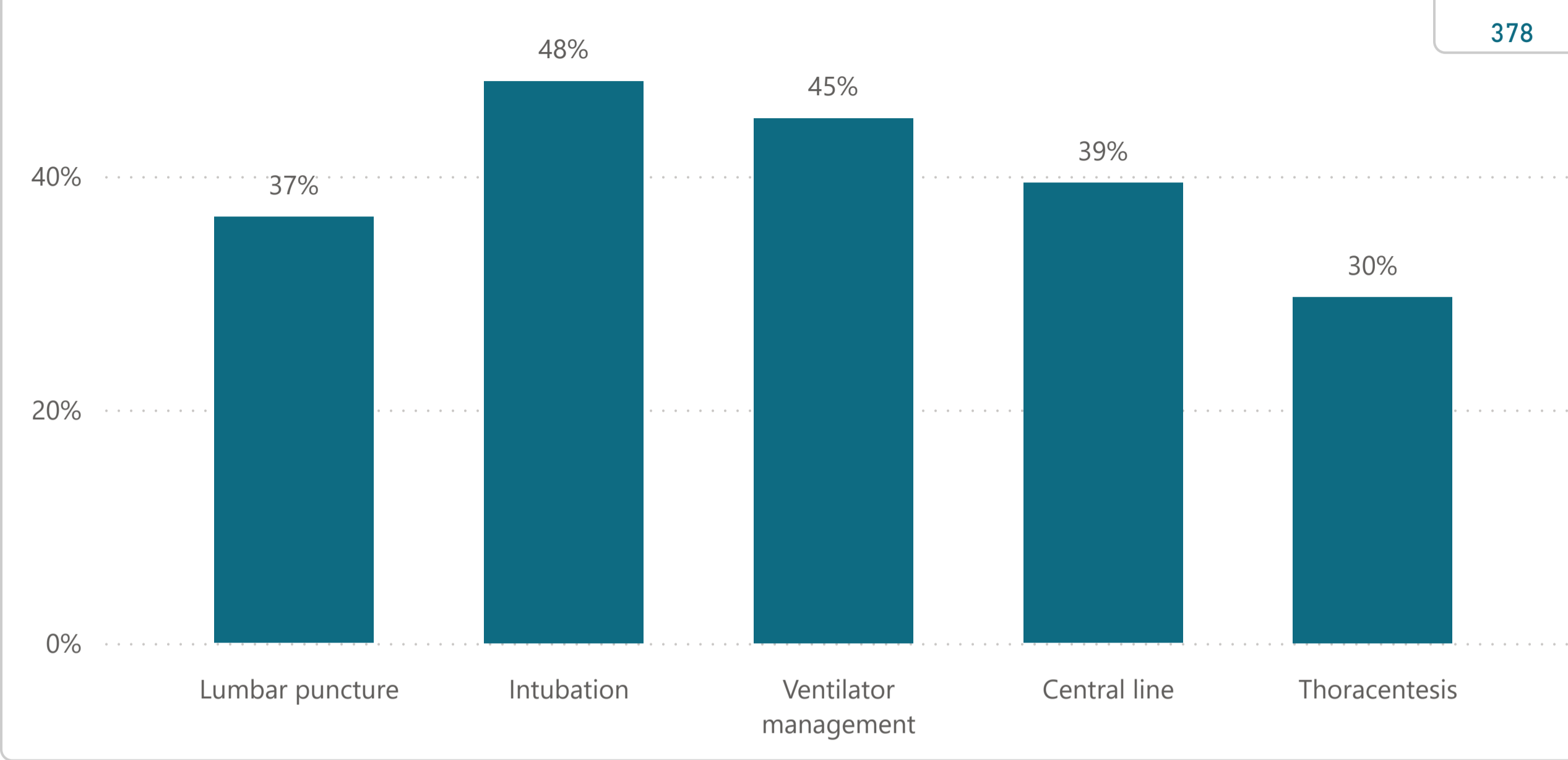


Please estimate how many deliveries you performed during your residency training (do not include any fellowships):



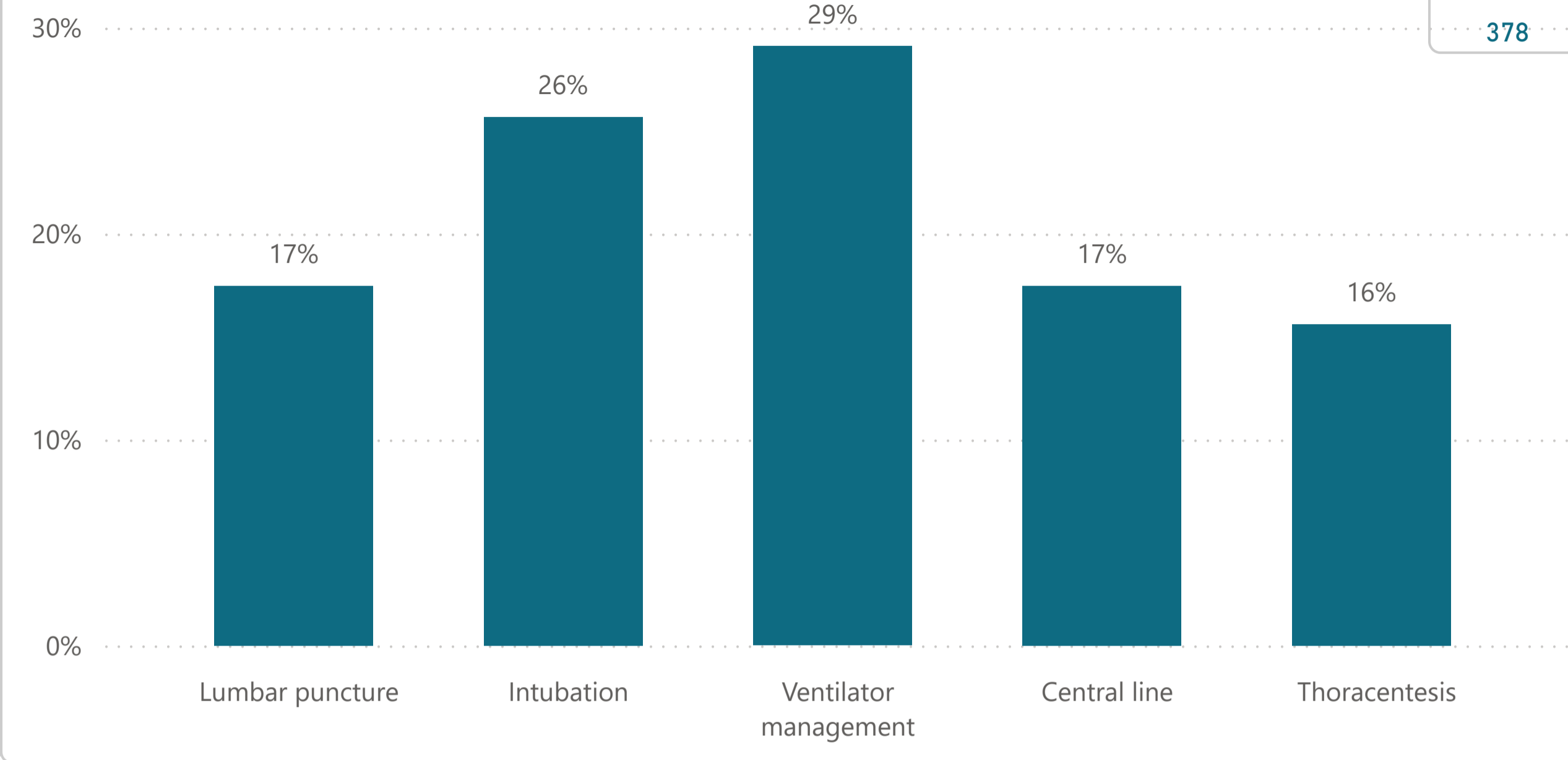
For the specific procedures listed below, please indicate whether your residency training prepared you or not

National N
378



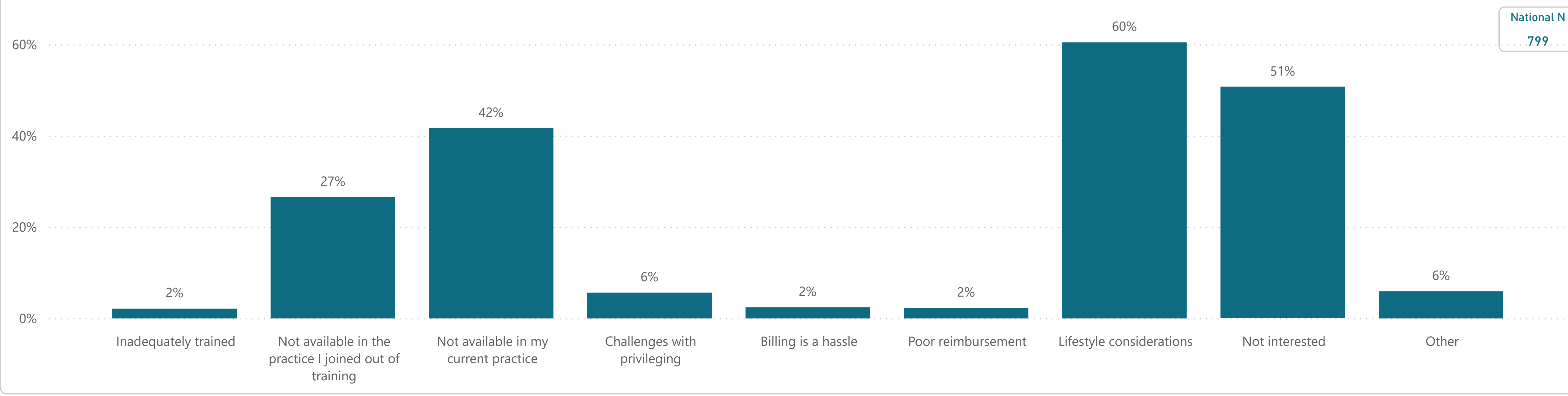
For the specific procedures listed below, please indicate whether you are currently practicing

National N
378



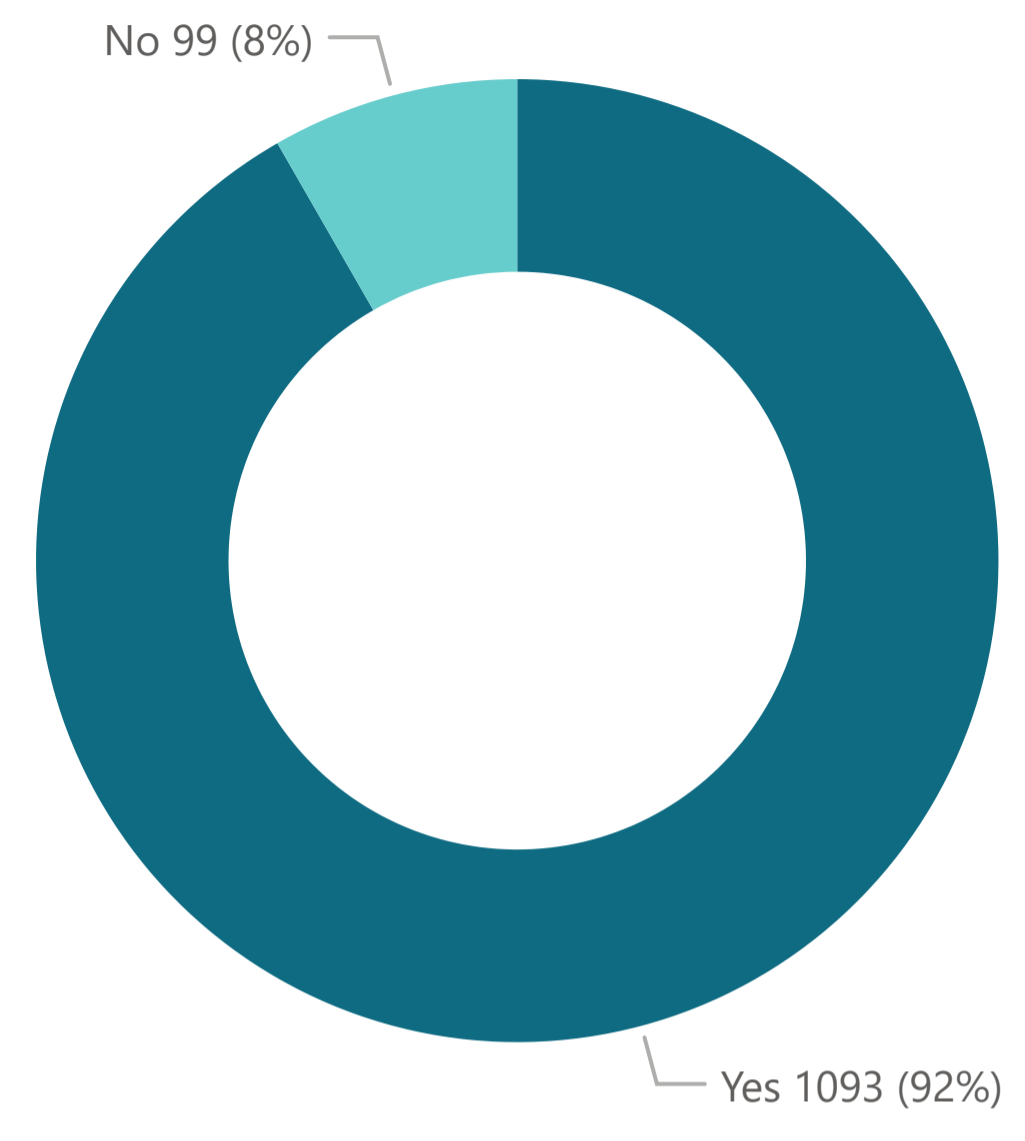
Why are you not providing inpatient care for your hospitalized adult patients? (Select all that apply)

National N
799



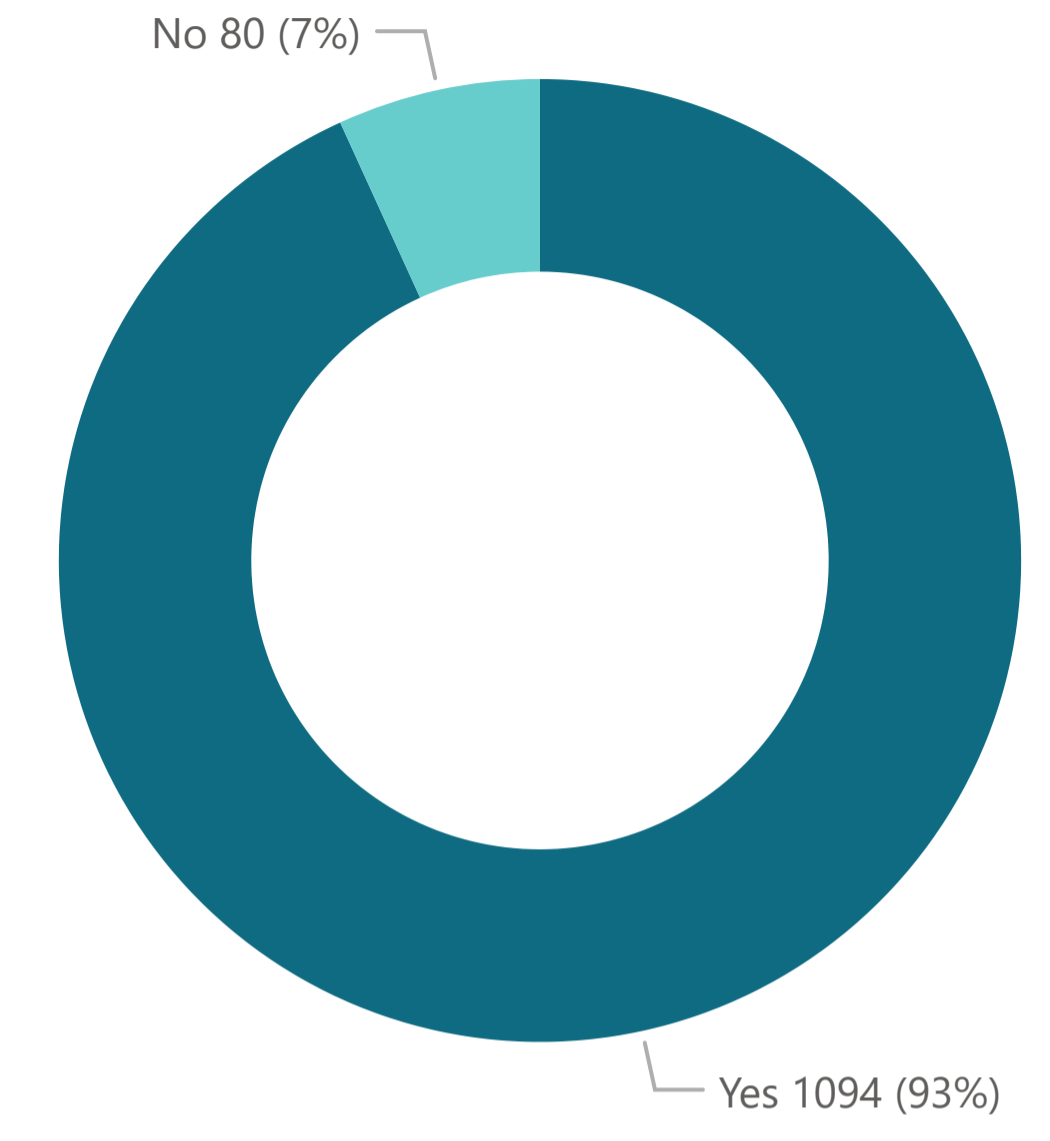
Did your training prepare you for the scope of practice you desired?

National N
1192



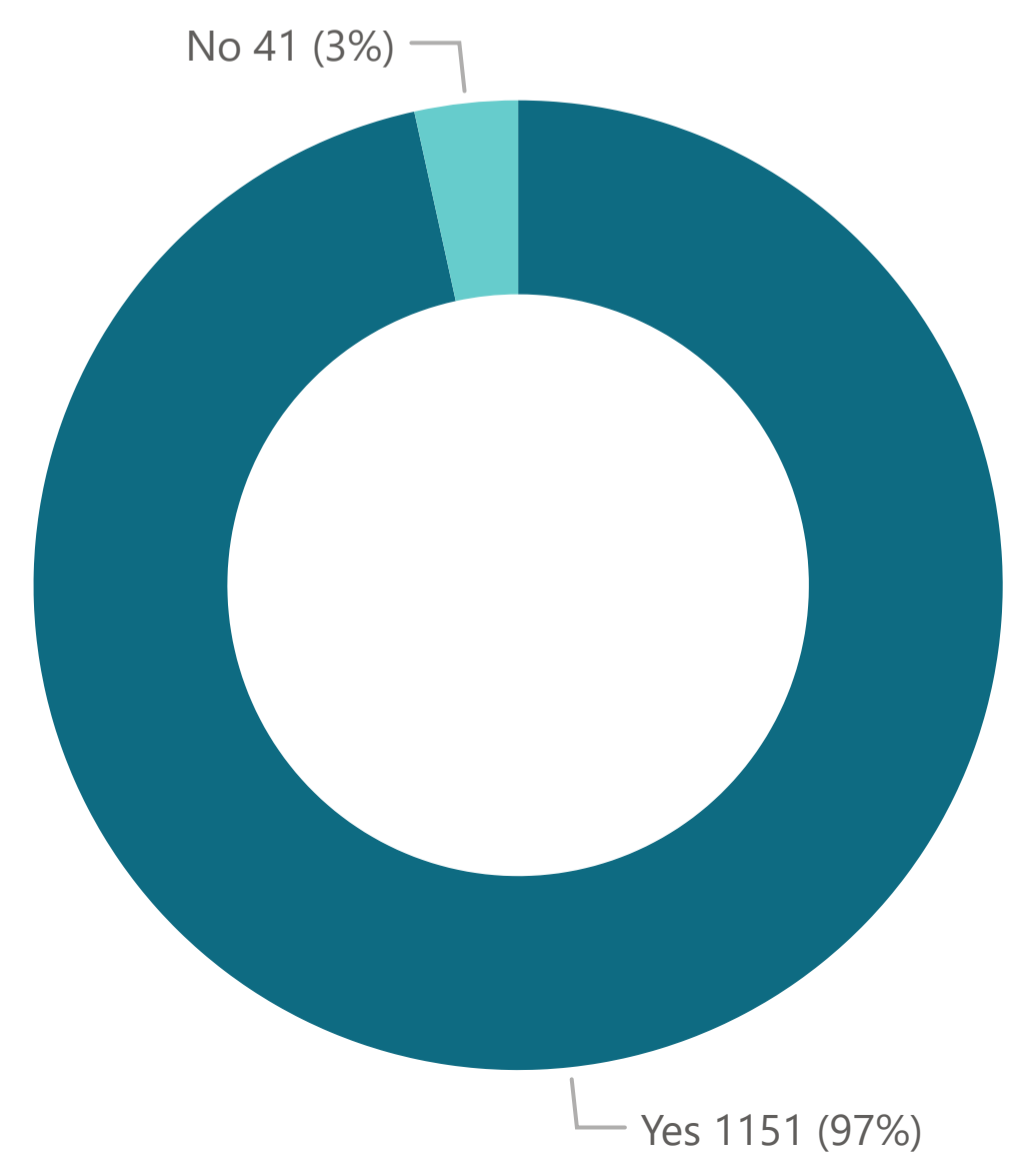
Did your training prepare you for the scope of practice you now have?

National N
1174

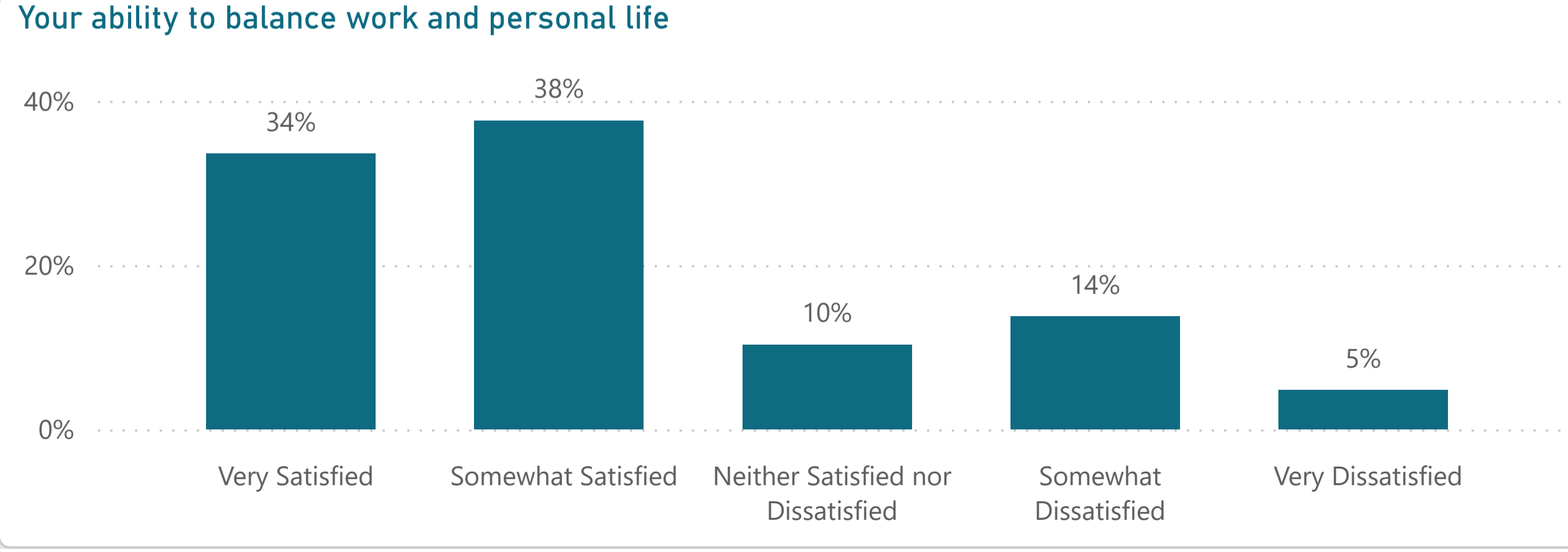
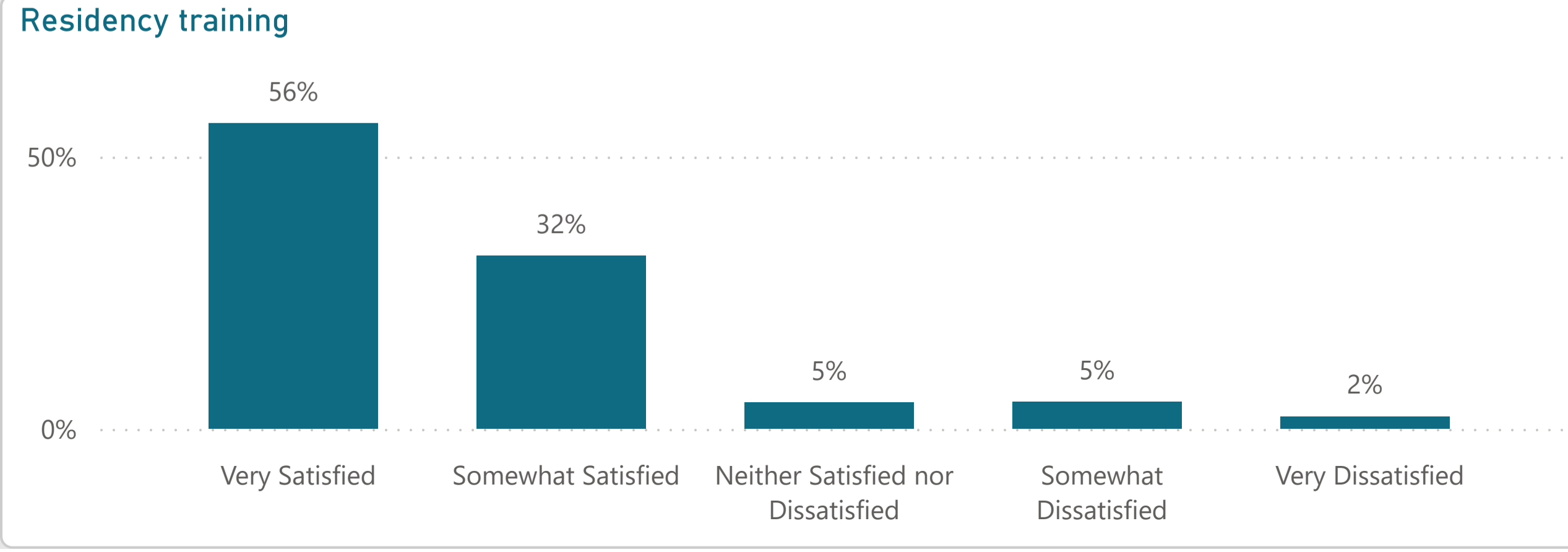
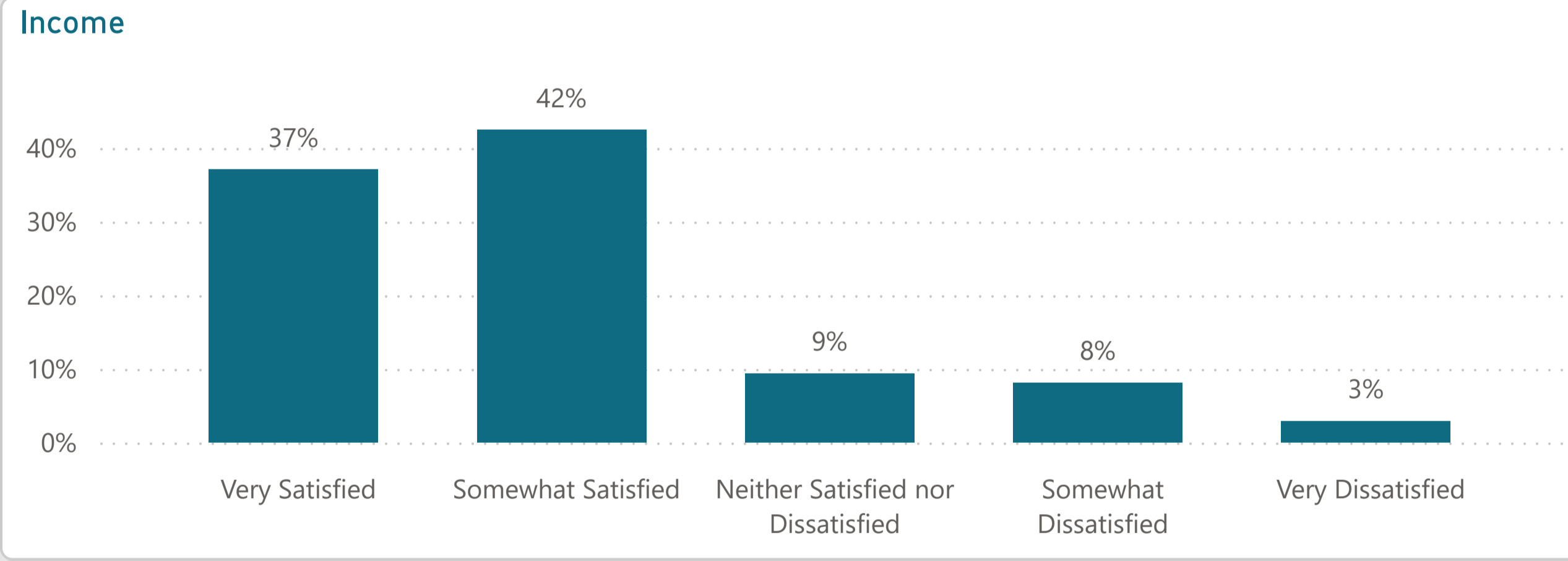
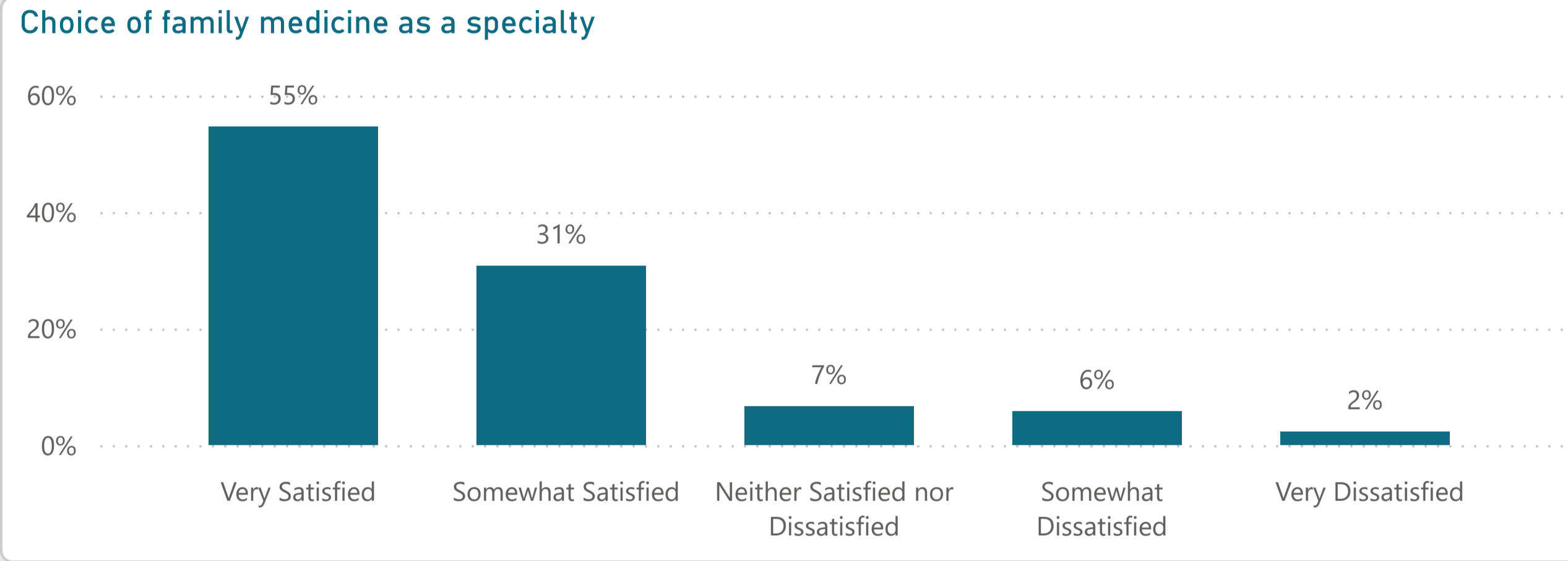
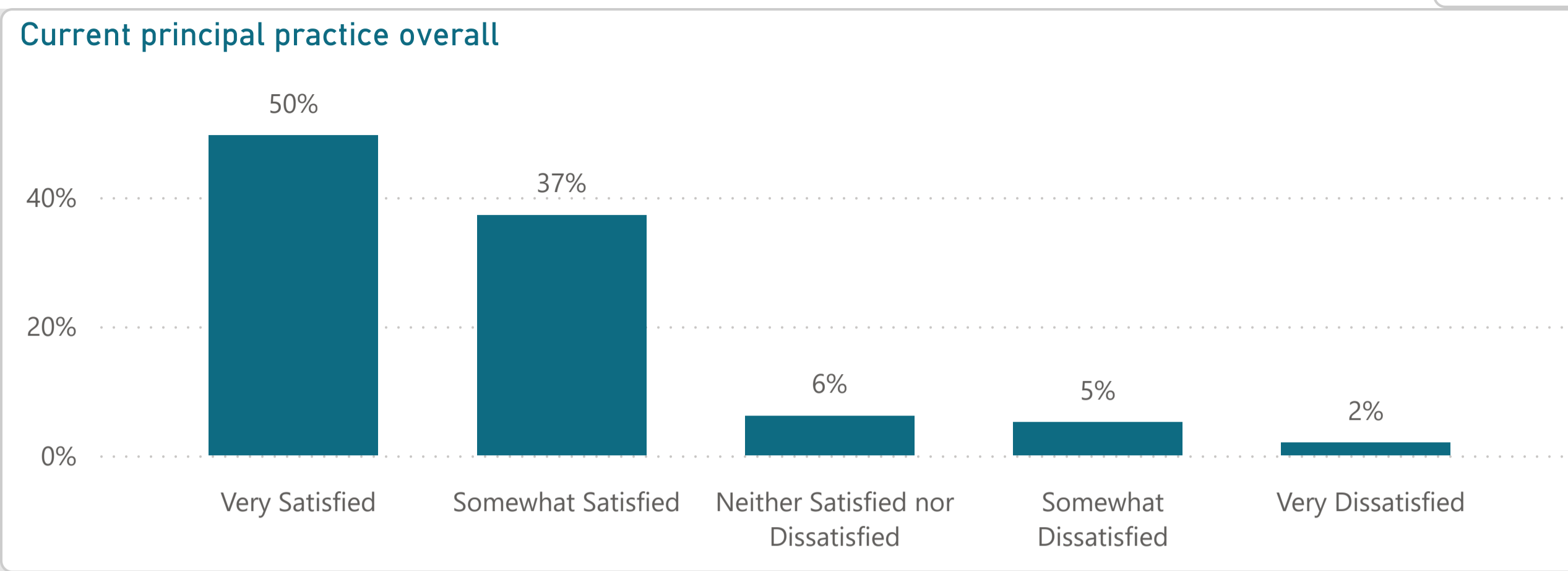
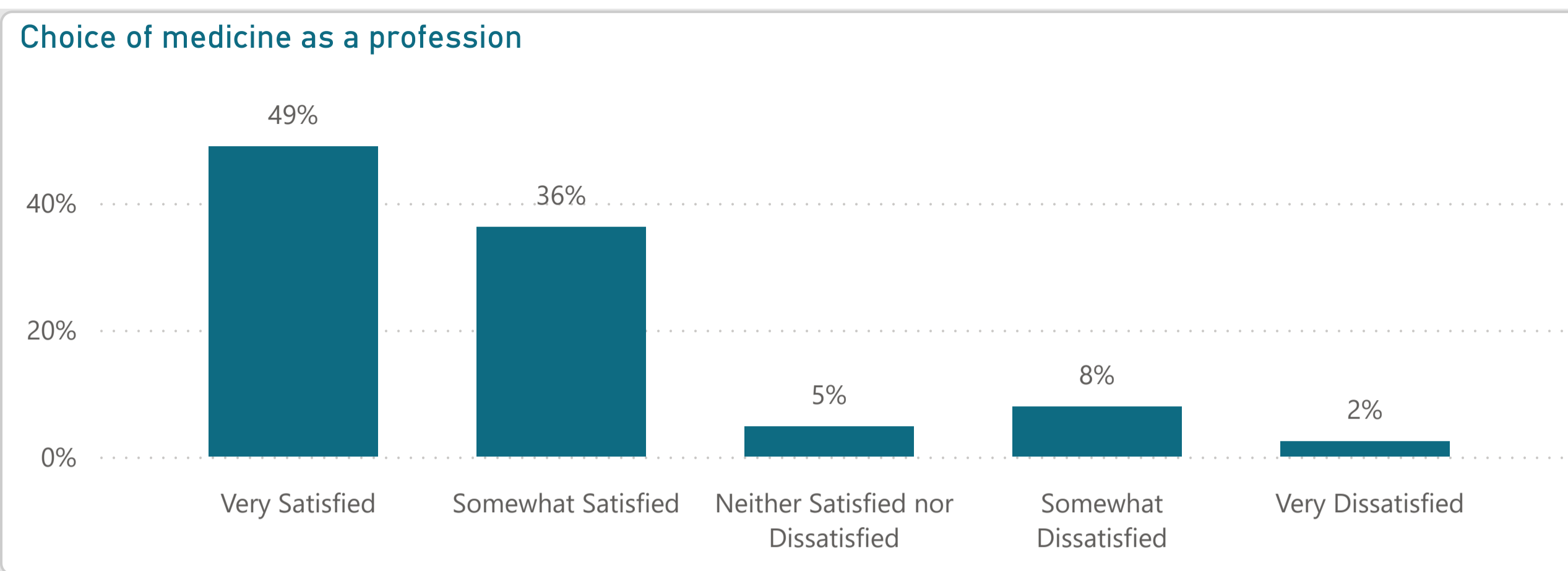


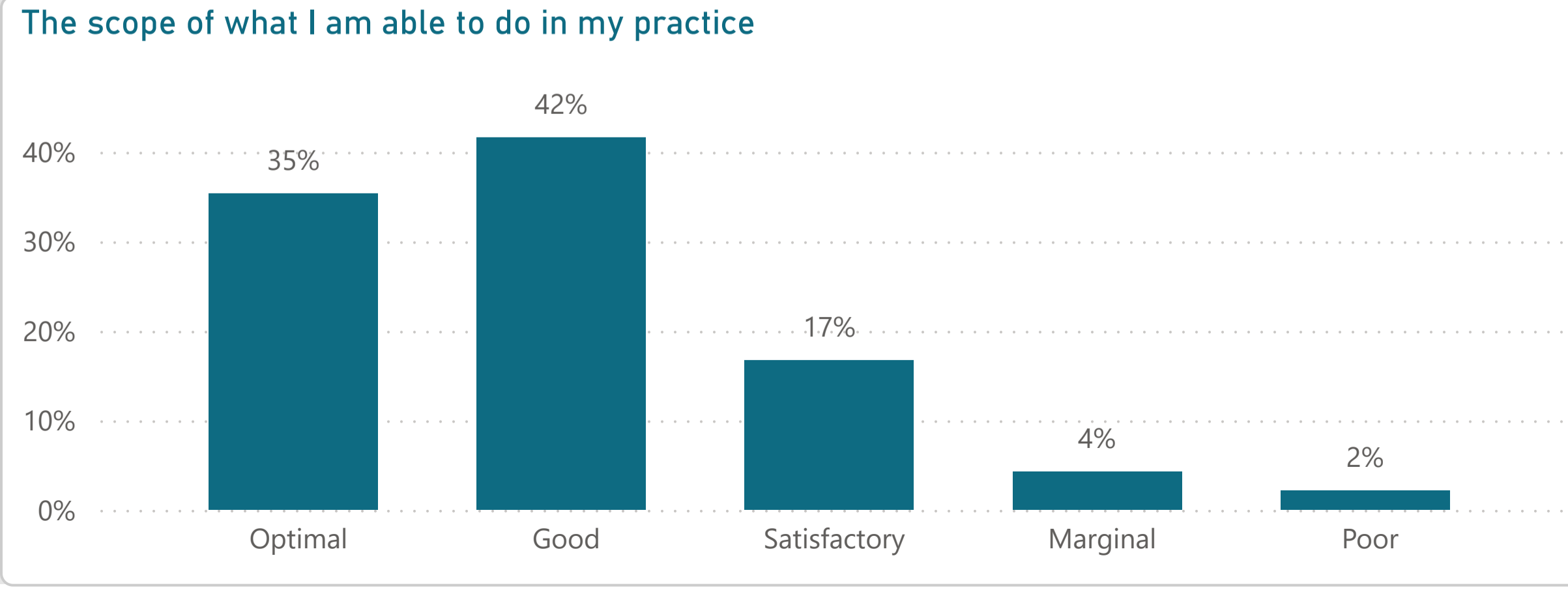
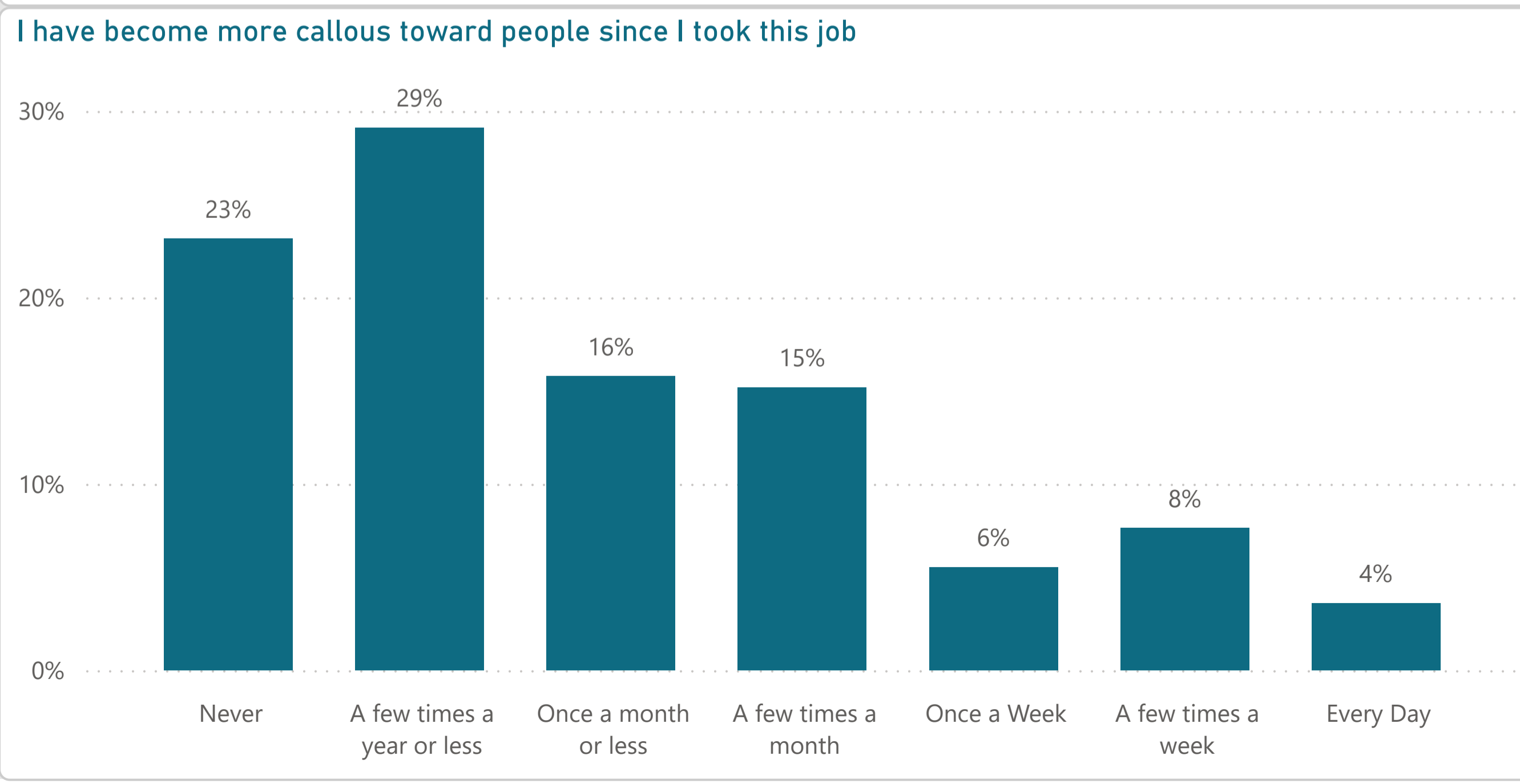
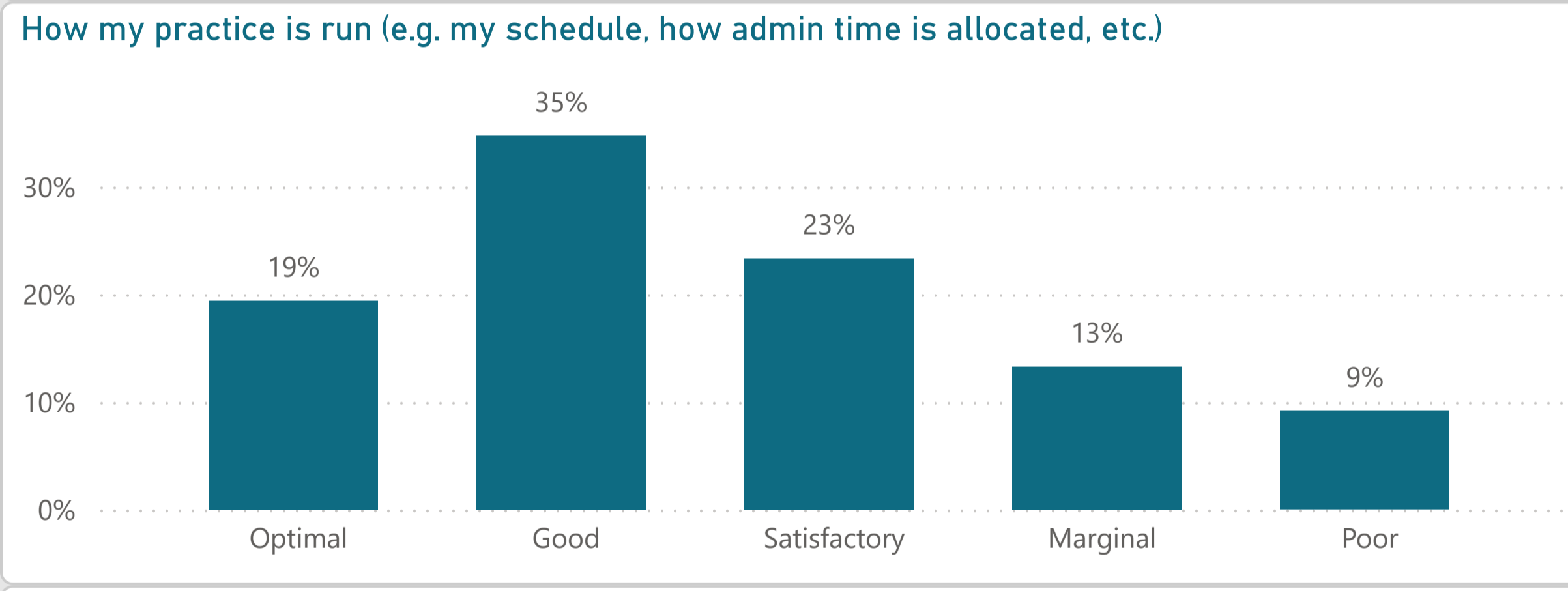
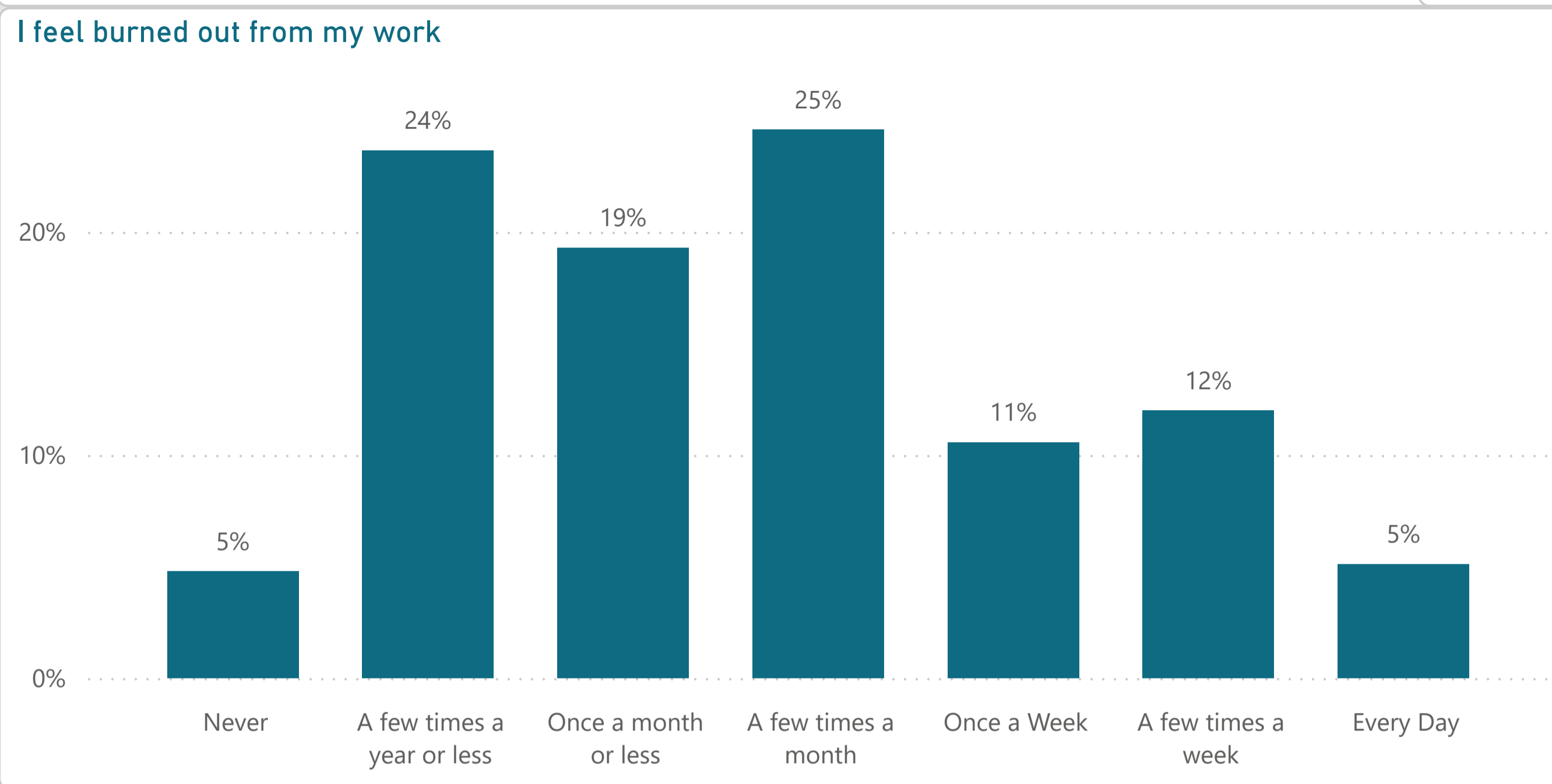
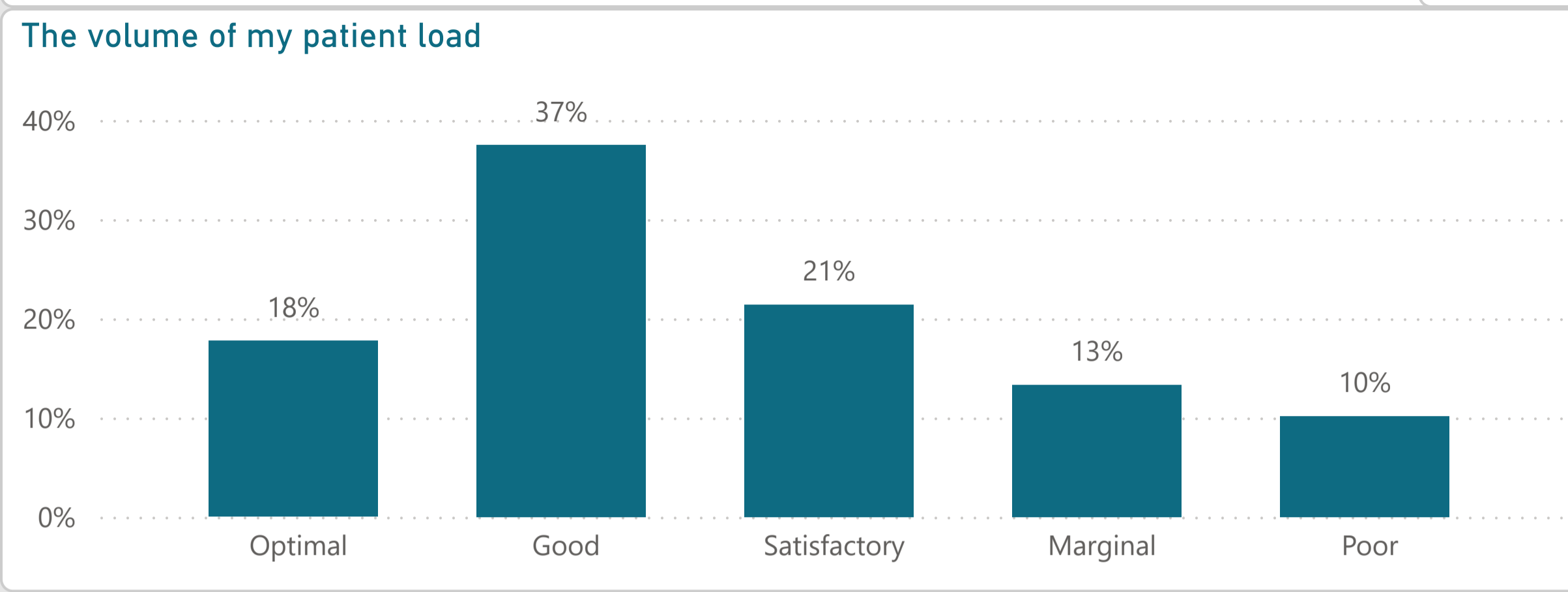
When you finished training, were you able to find a job with your desired scope of practice?

National N
1192



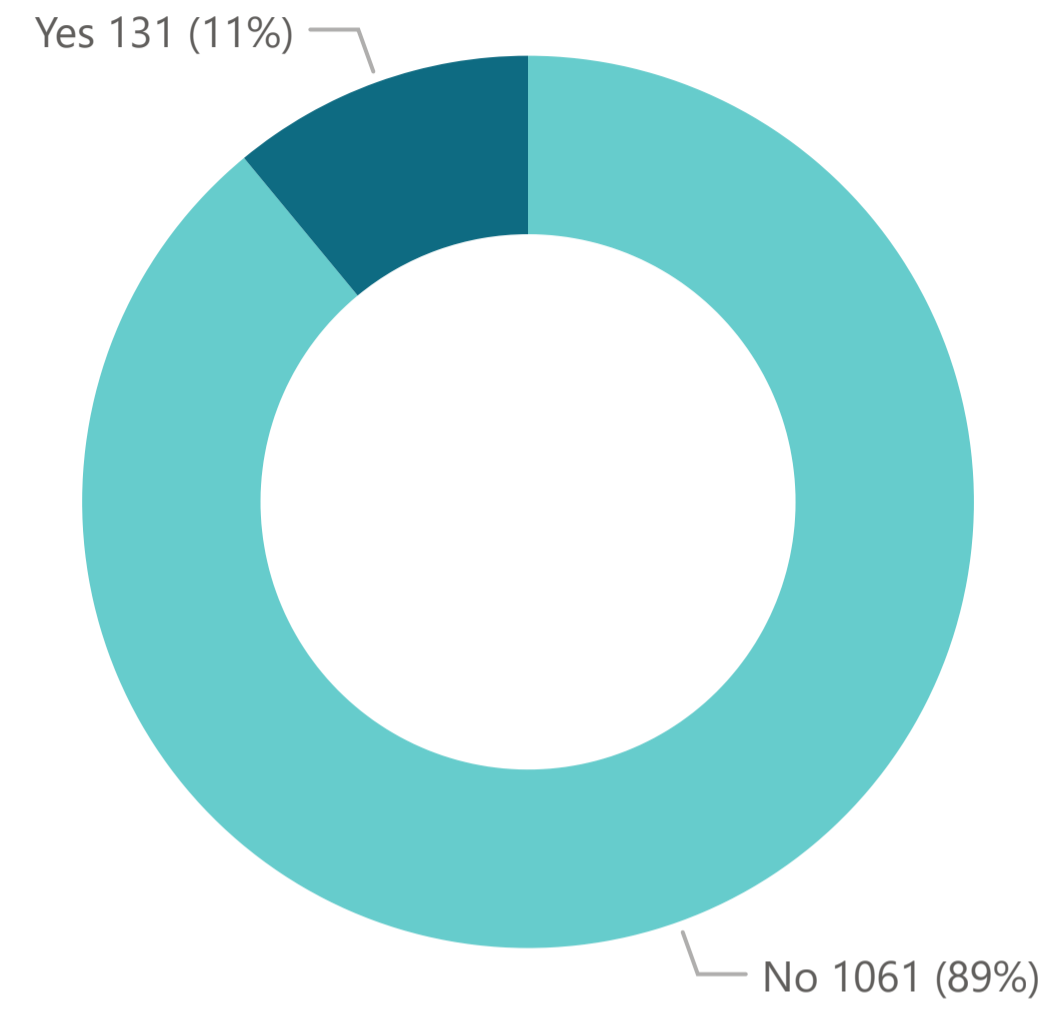
How satisfied are you with the following



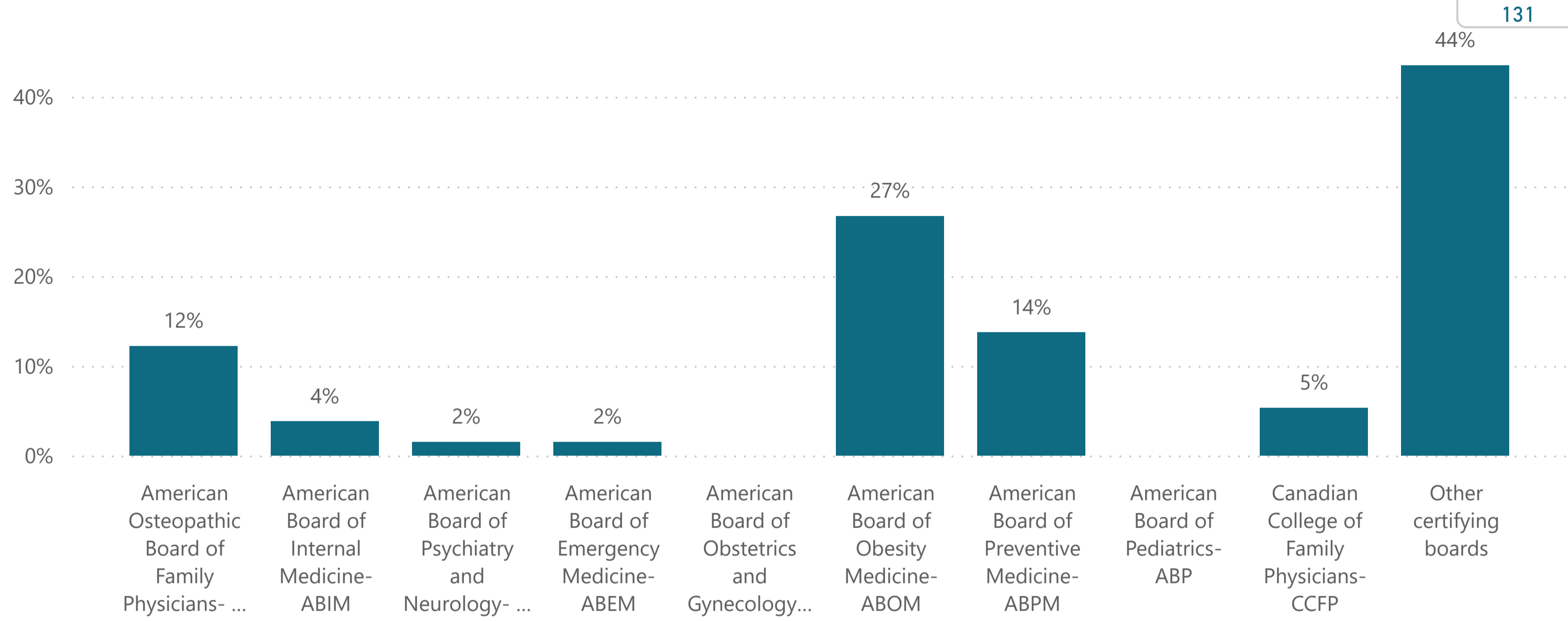


Are you certified by any other boards besides ABFM (not including Certificates of Added Qualifications/CAQs)?

National N
1192

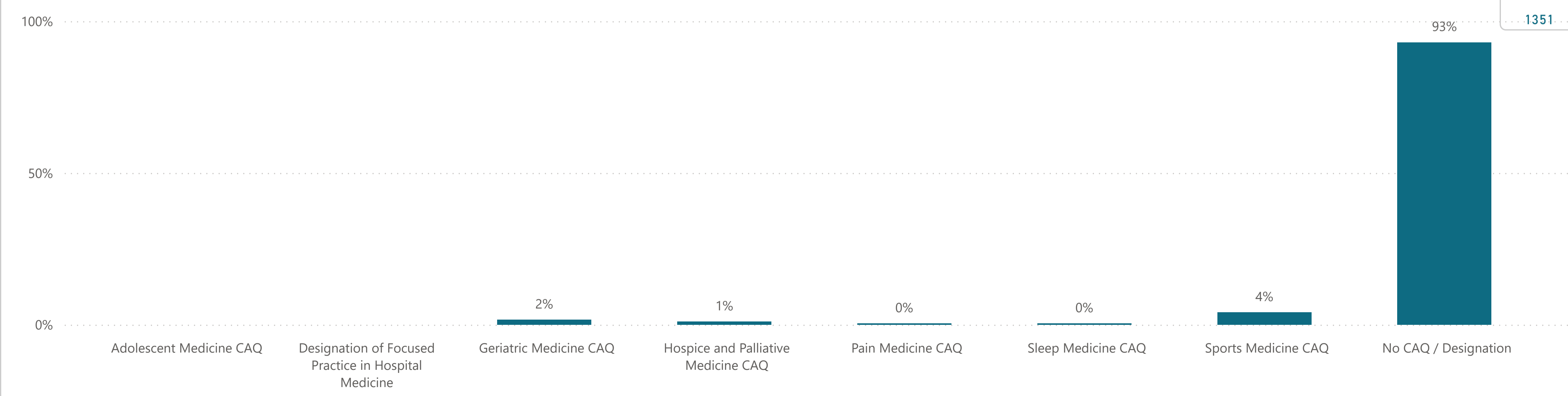


Which board(s)? (Select all that apply)



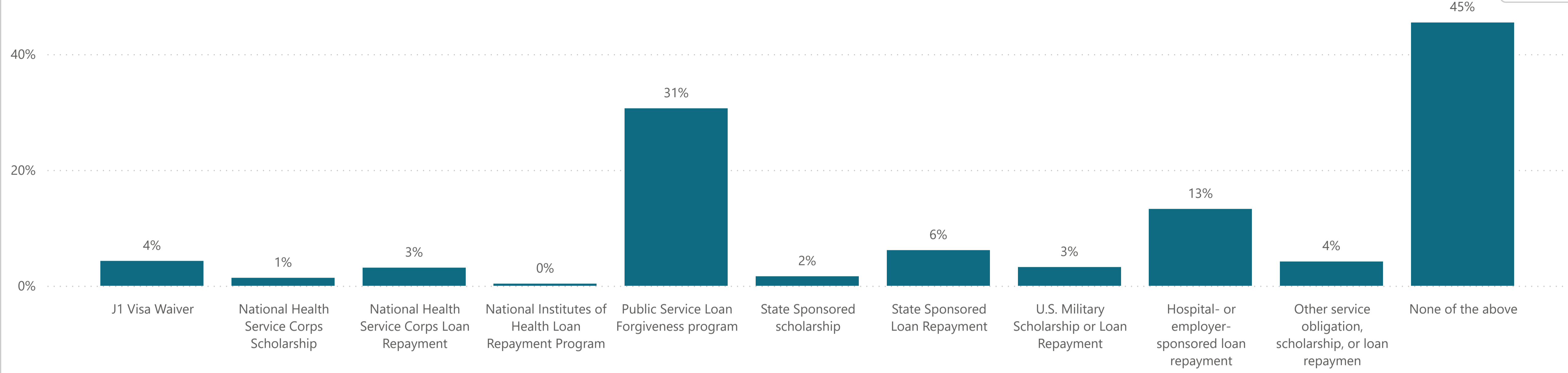
Number of Respondents with an ABFM sponsored Certificate of Added Qualification (CAQ)

National N
1351



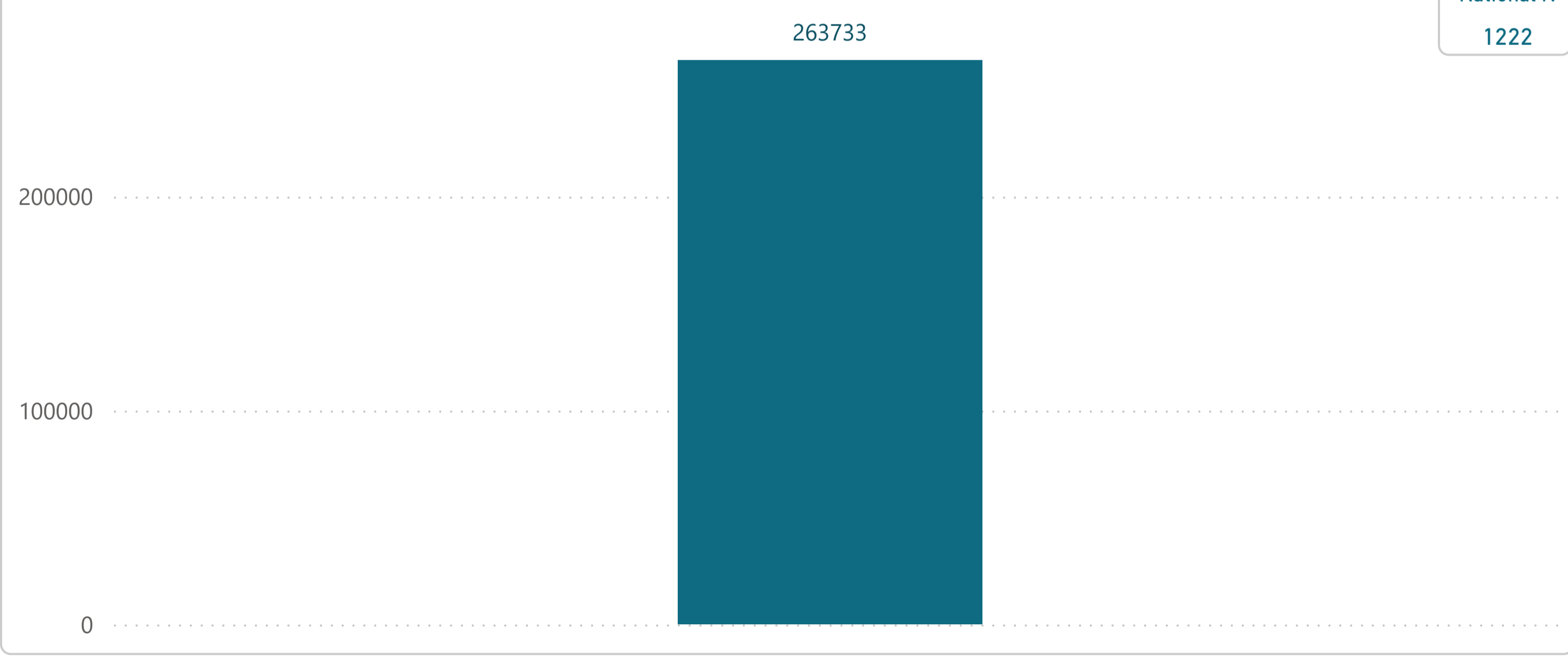
Which of the following have you participated in? (Select all that apply)

National N
1192

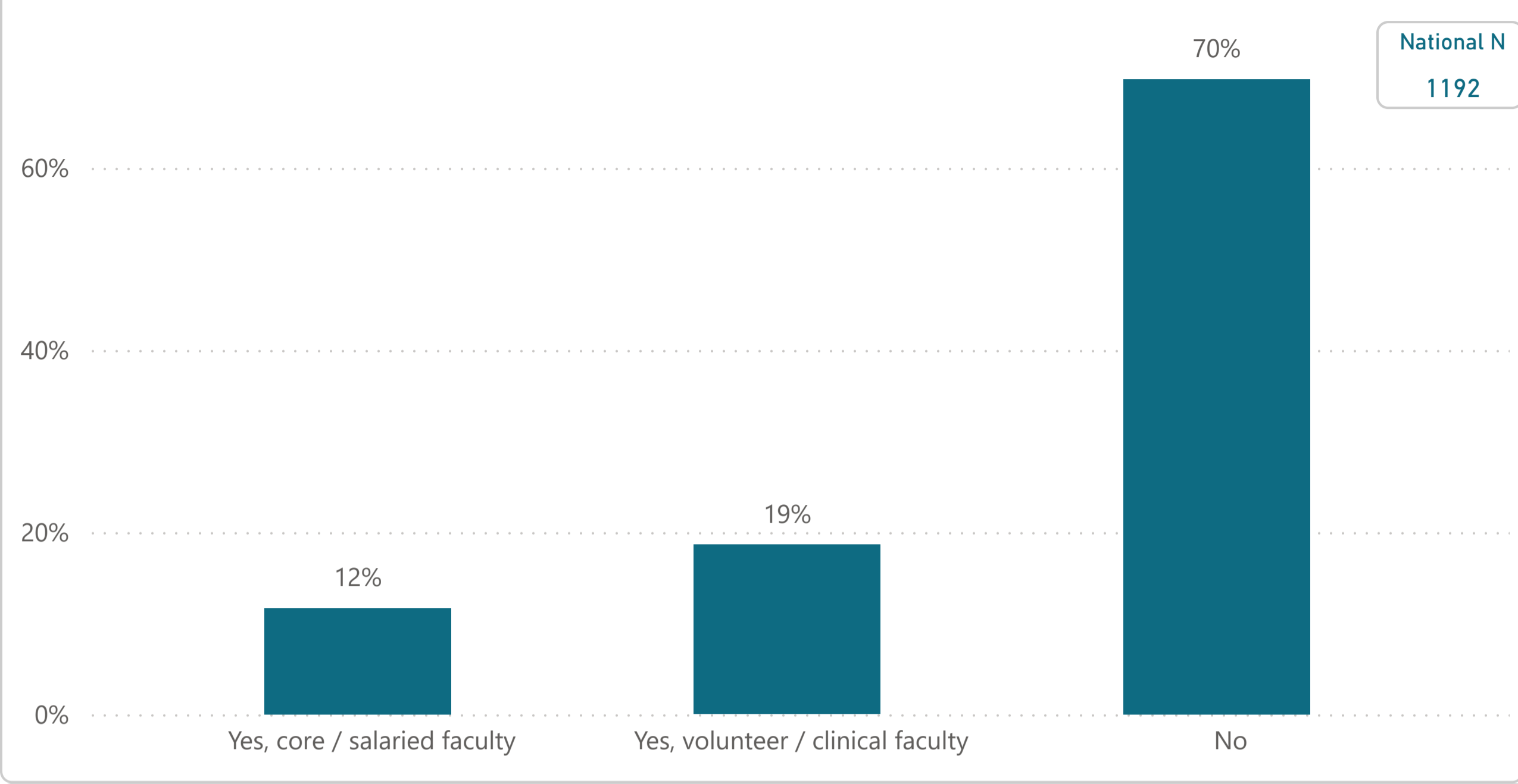


In the most recent tax year, what was your pretax clinical income, combined from all sources, including bonuses but excluding benefits (yours alone, not household)?

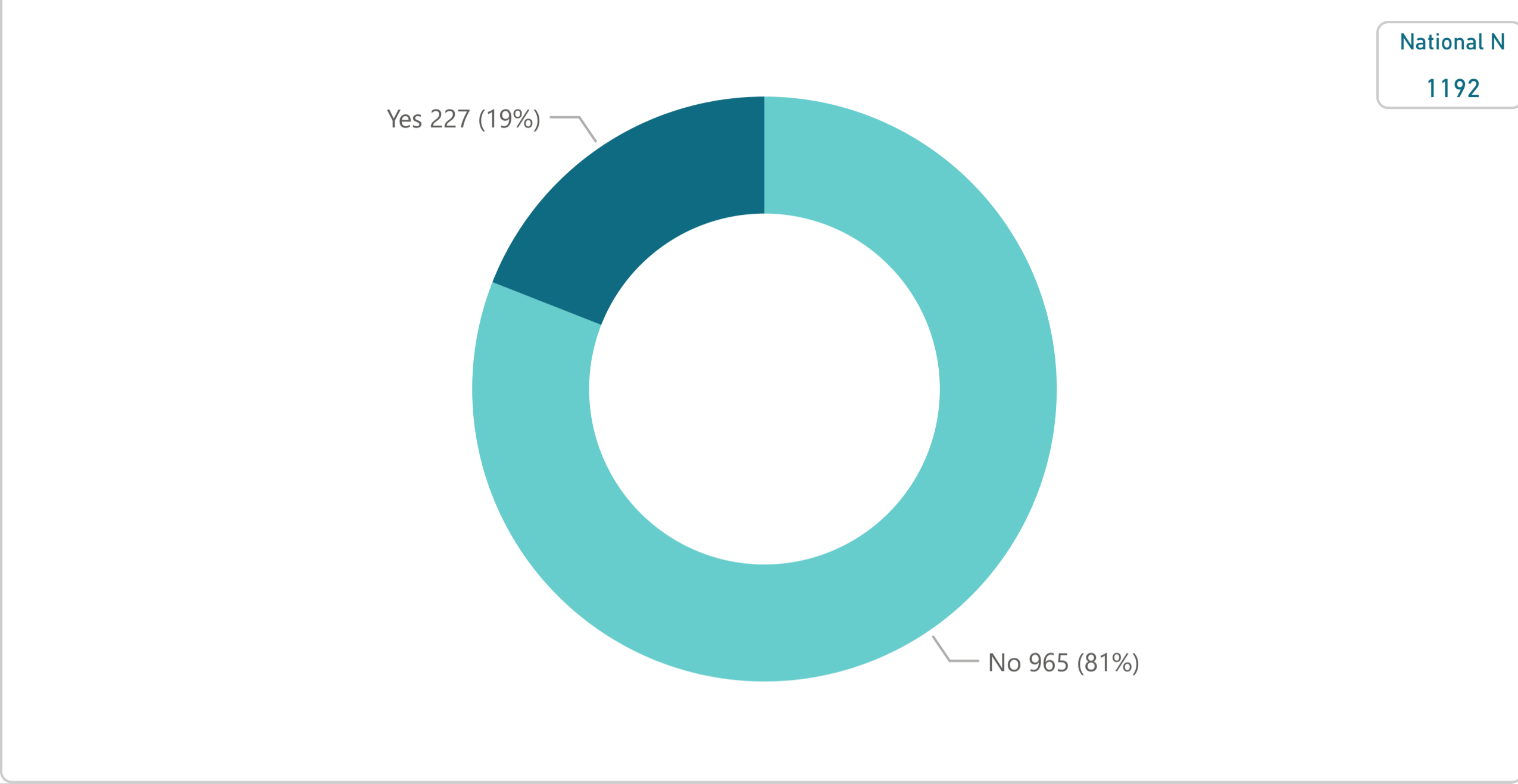
National N
1222



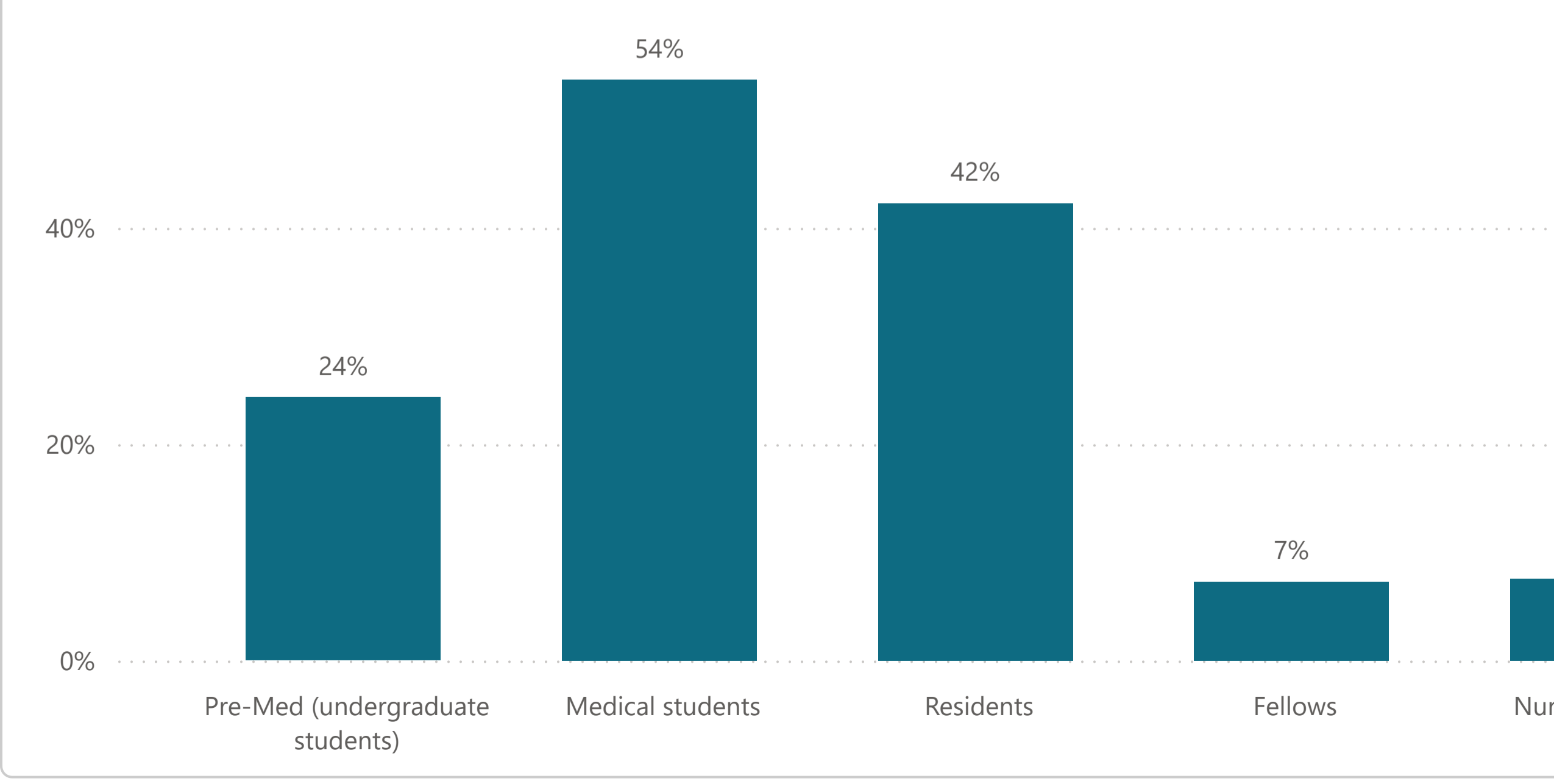
Are you a faculty member of a department of family medicine or a family medicine residency program?



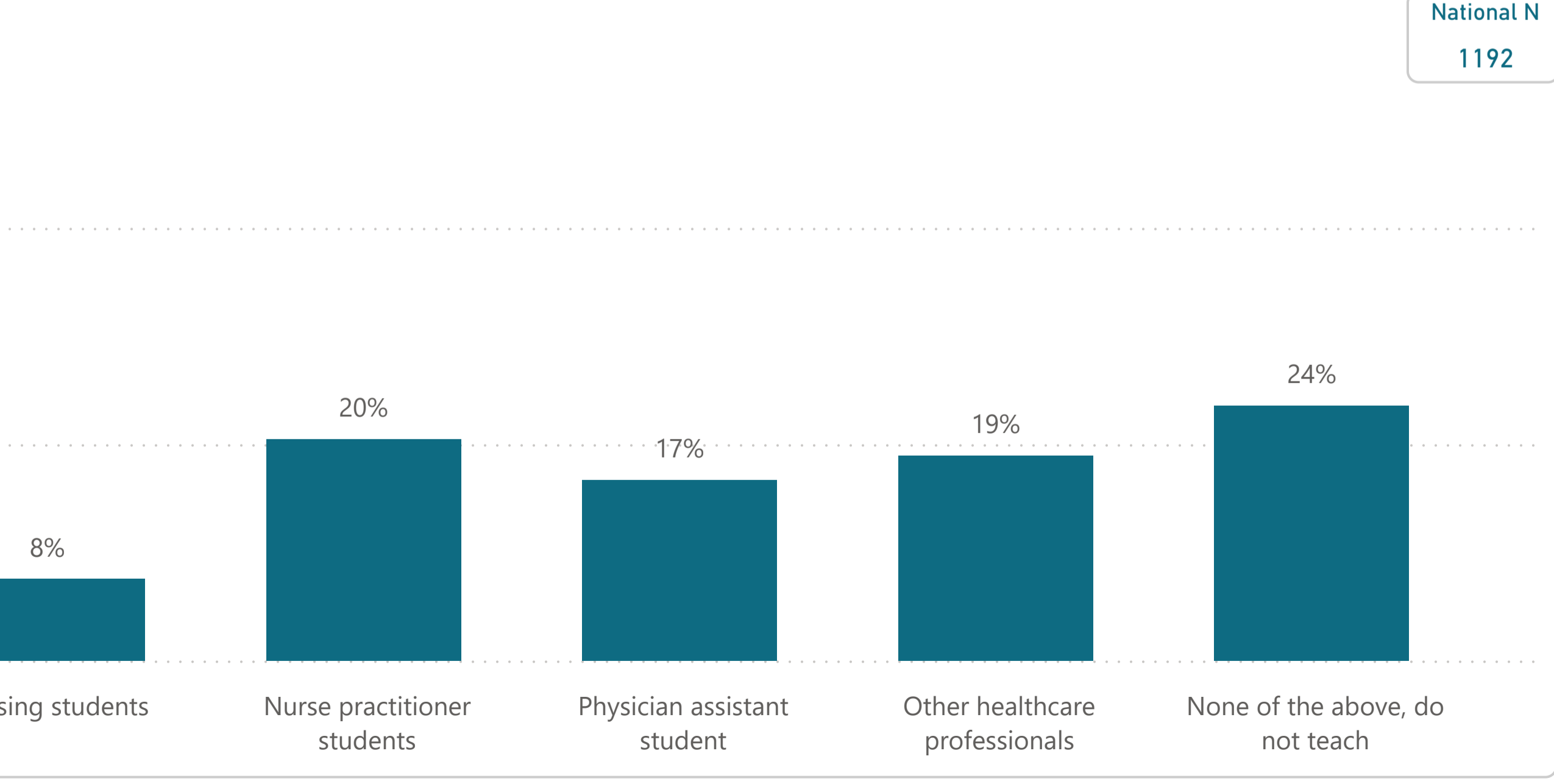
Do you participate in a practice-based research network or other research activities?



In the last year, have you taught any of the following? (Select all that apply)



In the last year, have you taught any of the following? (Select all that apply)



Practicing in same State as Residency

National N
1234



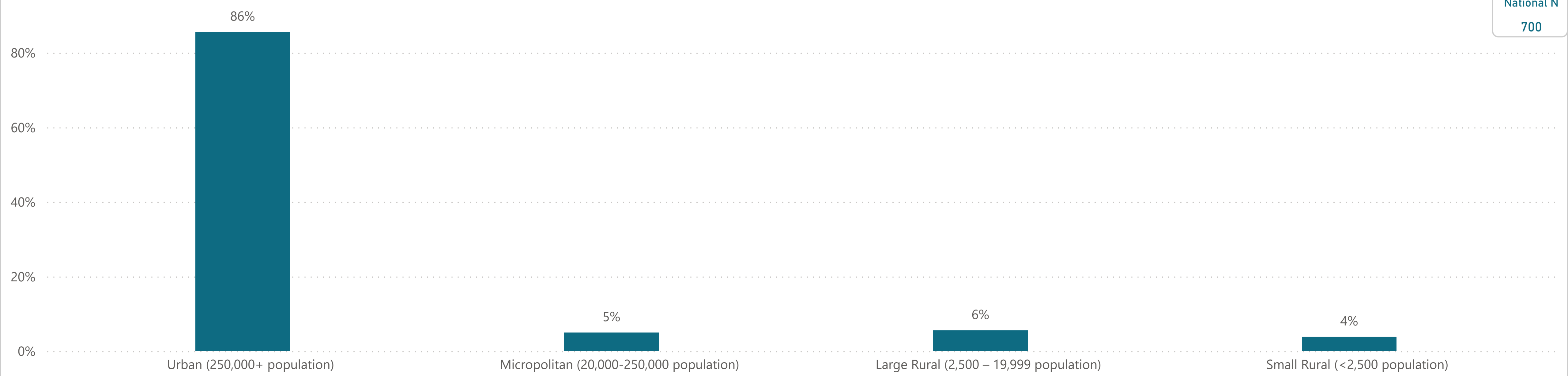
Practicing in a HPSA

National N
706



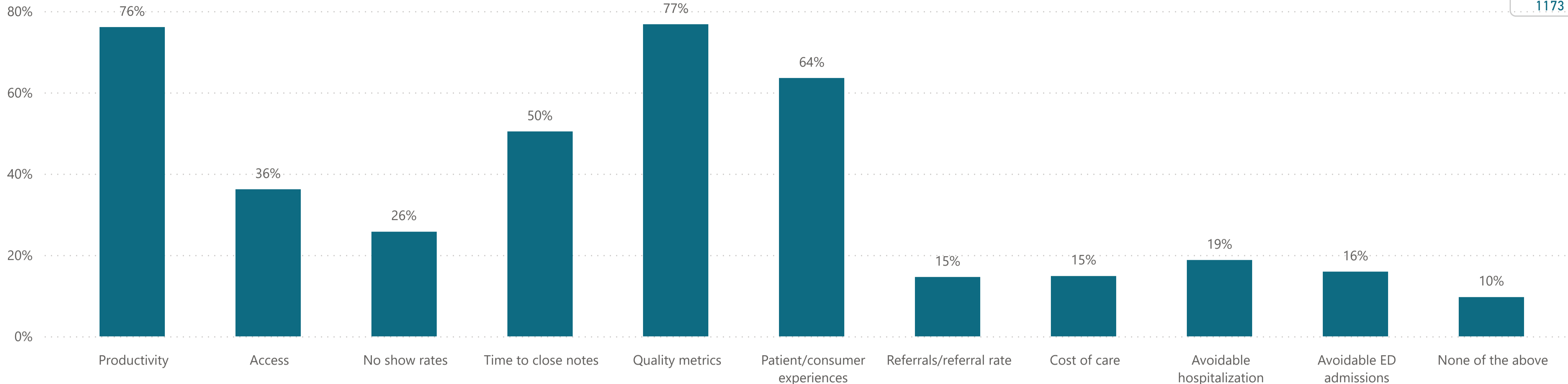
Principal Practice Population Size

National N
700



Which of the following clinical metrics are you evaluated for by your principal practice site? (Select all that apply)

National N
1173



Do any of the metrics in the previous question impact your compensation? (Select all that apply)

National N
1060

