



Physician Assistant Career Flexibility

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Introduction

PAs are educated and recertify as medical generalists. Inherent in this training model is the ability to move between specialties with limited additional training necessary. Data show that half of PAs report two or more specialties in their career.

Physicians rarely change specialty and evidence for this is mostly anecdotal. Nurse practitioners experience some flexibility such that NPs train for a general practice area (e.g., acute care). Specialty change within that general area is possible and may only involve on-the-job training. To change areas (e.g., general internal medicine to pediatrics) an NP must attend an NP program and be certified in the new area.

The current work aimed to understand the incidence of, and reasons for, PAs changing specialty. Furthermore, we examined whether PA students planned to make at least one change and when.

Methods and Materials

Sample

The 2018 AAPA Salary Survey was collected in February 2018 and open to all PAs in the United States, with personal and practice demographics collected. A total of 9,140 PAs responded to the survey. The overall margin of error was +/- 1.05%.

Analysis

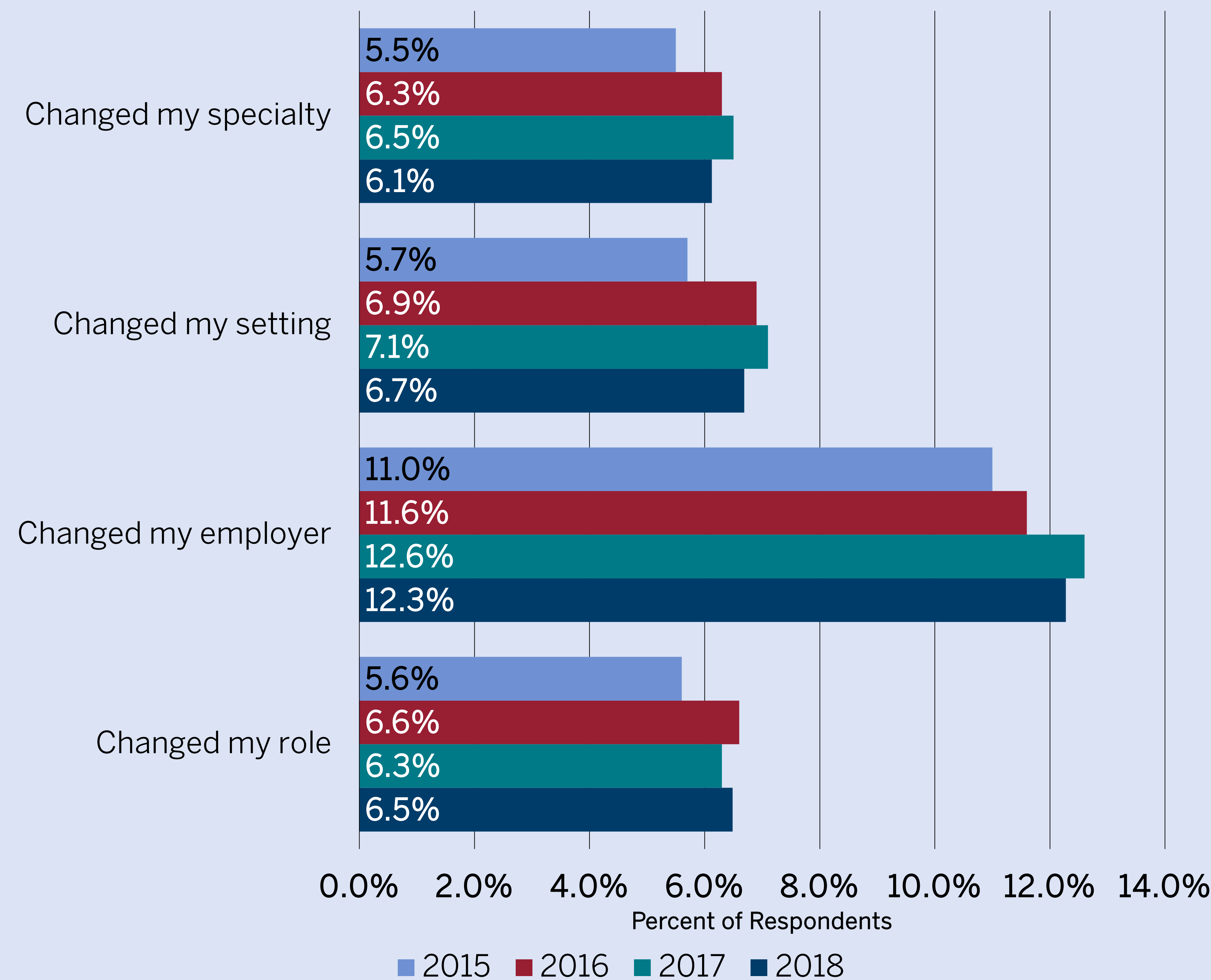
All analyses were run using SPSS 23.0. The analyses were primarily descriptive. Tests of significance, specifically Chi-square tests along with z-tests of column proportions, were run when appropriate to determine between-group differences.

Key Findings

Within 2017, 19% of the PAs surveys made a career change of some sort. Among these changes, 6.3% changed their role, 12.6% changed their employer, 7.1% changed their setting, and 6.5% changed their specialty.

While there is variation year over year, there has been relative stability between 2015 and 2018 in each of these areas of career change.

Career Changes Among PAs, 2015 – 2018



Results and Conclusions

In 2017, the U.S. had a shortage of over 7,000 primary care health professional shortage areas (HPSAs) affecting over 84 million people. It is estimated that 14,741 primary care providers were needed to remove the designations. AAMC suggests that by 2030, there will be a physician shortage of 14,800 to 49,300 within primary care and between 20,300 to 36,800 in surgery.

The current research demonstrates that PAs are making changes to their specialty for a variety of reasons, including a desire to switch clinical focus and better work/life balance. In addition, students expect that the specialty they begin their career in will not necessarily be the specialty they end remain in, indicating that flexibility within the profession is likely to continue in the future. PAs may be the best suited to mitigate physician shortages within the healthcare marketplace due to their generalist training that allows this flexibility.

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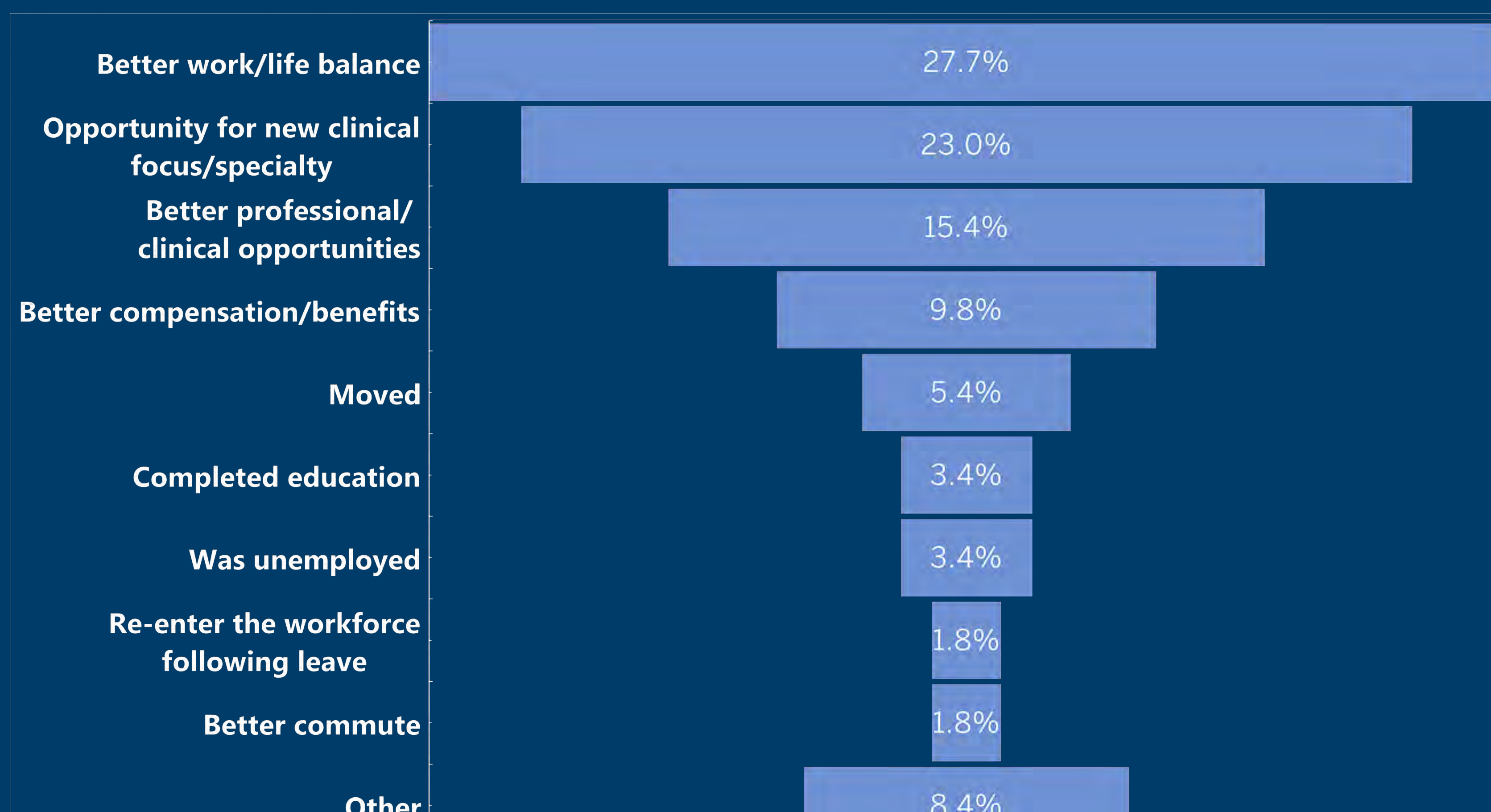
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Why Are They Changing their Specialty?



Who Is Changing Their Specialty?

Gender?

7.2% of Women v 5.2% of Men
 $\chi^2(1, N = 510) = 8.78, p = 0.003$

Location?

Metropolitan = Nonmetropolitan or Rural
 $\chi^2(1, N = 487) = 0.21, p = 0.647$

Tenure as a PA?

8.3% of PAs in Early Career^a v. 5.9% in Mid-Career^b v. 4.1% in Late Career^b
 $\chi^2(2, N = 511) = 30.11, p < 0.001$

Letters differing from each other are significantly different.

56% of students in 2017 said that they expected to change their specialty at least once in their career

When Do Student Expect to Make the First Specialty Change?

