

MEDCHI, THE MARYLAND STATE MEDICAL SOCIETY  
HOUSE OF DELEGATES

Resolution 02-23

INTRODUCED BY: Medical Student Section  
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SUBJECT: Unmatched United States Allopathic and Osteopathic Medical  
Students

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1 Whereas, the nursing shortage has been an immediate and pressing concern across the United  
2 States. Between 2020 and 2021, the total supply of registered nurses (RN) has decreased by  
3 more than 100,000 nationwide—marking itself as the largest drop observed in the past 4  
4 decades [1].The shortage leads to more errors, higher morbidity, and mortality rates with  
5 increased stress placed on hospitals and facilities across the country [2]. There have been  
6 several efforts to minimize the shortage, especially with the use of Physician Assistants. This  
7 group of midlevel providers aim to fill the gap and practice under the supervision of a  
8 physician in most states, however, their use has not been found to fix the shortage just yet;  
9 and

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11 Whereas, in 2022, there were 6.7% unmatched US MD and 8.2% unmatched US DO students  
12 [4]. These students are left with no other option but to wait another year and reapply—if they  
13 choose to do so. In the time between unmatched and matching these students are relegated to  
14 non-clinician roles, primarily research, volunteering or teaching, despite their advanced  
15 degree[5]. These students have spent at least four years training in both a non-clinical and  
16 clinical setting with the intention of practicing medicine at the highest standard. However,  
17 their newly developed skill sets are not being utilized; and

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19 Whereas, midlevel provider training is significantly shorter than that of a physician. Physician  
20 Assistants attend a designated physician assistant school after college for two to two-and-a-  
21 half years in duration [6]. Although there is slight variation by school, traditionally there is  
22 only one year of didactic training and the remainder focused on clinical training. For nurse  
23 practitioners, the training is longer with varying paths resulting in a degree in two to five  
24 years. However, the training to become a physician is much more involved. A physician will  
25 complete 4 years of medical school, 3-7 years of residency, and an optional fellowship that  
26 can range between 1-3 years before practicing. In medical school, students spend at least two  
27 years in hands-on clinical training and will graduate with a strong knowledge and grasp of  
28 clinical medicine; and

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30 Whereas, a lower patient provider ratio has been found to increase patient outcomes and  
31 satisfaction [7]. More individualized care has been shown to improve the patient experience at  
32 both the safety and satisfaction levels. It is necessary to address this and alleviate the  
33 accessibility and safety issues that arise when there are staffing issues; and

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Whereas, unmatched medical school graduates in the United States should be able to work in a physician assistant capacity, under the supervision of a licensed physician, across hospitals and care facilities in America, and

Whereas, this change would provide hospitals and care facilities with a highly trained and adept workforce. Medical students train for longer than Physician Assistants and should be able to care for patients in the same capacity, under the supervision of a physician. This would increase patient safety and outcomes by directly improving the patient provider ratio; and

Whereas, two states have either passed or proposed legislation to incorporate unmatched medical graduates into the health workforce. New York has expanded their licensure to include a limited two-year license for physicians who meet their regular license requirements but have not yet passed all exams or are not US citizens/permanent residents. These licenses allow medical graduates to practice under the supervision of a licensed physician in a hospital [8]. Texas has introduced a bill, HB2556, at the 2023 legislative session that allows physician graduates to practice medicine under a supervising physician [9].; and

Whereas, medical school graduates have been medically trained for four years—two years longer than the Physician Assistant counterparts. To address a growing national nursing shortage, these unmatched graduates should be allowed the opportunity to work in a Physician Assistant role; and

Whereas, unmatched medical school graduates in the United States should be allowed to practice in a Physician Assistant role under the supervision of a licensed physician in hospitals and care facilities; therefore, be it

Resolved, that MedChi encourages the AMA to study the effect and feasibility of expanding the role of medical school graduates to a Physician Assistant role. As the scope of this resolution extends beyond the state of Maryland, MedChi requests that the American Medical Association support this resolution; and be it further

Resolved, that MedChi encourages the AMA to study the feasibility and effect of expanding the role of unmatched medical school graduates to that of Physician Assistants.

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Referred to the Board of Trustees by the House of Delegates on April 30, 2023.

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