Continuing Medical Education for General Practitioners

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This first edition of Continuing Medical Education for General Practitioners contains a foreword, preface, list of nine contributors, list of boxes and figures, table of contents, three parts, 12 chapters, 30 boxes, three figures, references, and an index. The book is presented as a ix + 163 page A5 soft cover publication. Although some chapters have embedded some definitions of terms, there is no central glossary of terms in continuing medical education (CME), which could be considered for the next edition. The “key issues” of each chapter are clearly identified at the beginning of each chapter. Annotated Bibliographies are given for most chapters.

The main target audiences include general practitioners and general practitioner organizations involved with CME. It would also be useful for other clinicians and health practitioner groups. Clinicians and educators, especially those new to the area of CME, will find the book useful reading in helping to build their theoretical and practical knowledge of CME. No prior knowledge of CME or principles of medical education is necessarily assumed in the book.

The chapters relate sequentially to practical considerations in the development of CME programs from planning and organization, thought to implementation and evaluation. The concise nature of the book makes it easy to read, with each chapter being largely self-contained. Although there are a few “typos”, occasionally seen in early editions, it is fairly consistent in its presentation, with generous use of figures and boxes to highlight processes, checklists and issues, particularly in the implementation and evaluation parts of the book. Visual impact has been heightened by the incorporation of extensive illustrations, figures, and maps. Visual impact extends to the cover, which has been attractively presented with a full color window effect.

Continuing Medical Education for General Practitioners is divided into three parts. The first part deals with planning CME. It includes discussions on CME and Divisions (government-funded organizations of general practitioners in Australia), CME and consumers, overcoming barriers to CME, marketing a CME program, educational needs assessments, and planning educational sessions. The educational needs assessment section is particularly useful. The second part addresses implementing CME. It includes discussions on teaching and learning strategies, peer review, clinical audit, personal learning strategies, and clinical guidelines. There is an excellent section on clinical audit—benefits, practical steps, response rates, audit and feedback as educational strategies, and some discussion of the difference between audit and research. A brief mention of some of the ethical issues may also have been useful in this section. The whole discussion on clinical guidelines is useful to raise in the context of the rapidly expanding evidenced based medicine area and the discussion on “local ownership” of clinical guidelines is particularly relevant, leading to possible local adaptation. The third part addresses evaluating CME and the chapter discusses measuring the value of CME. The third part could have been expanded, both in theoretical and practical terms, as evaluation is quite an important part of CME. Some more detailed and practical suggestions concerning the nature of successful evaluation instruments or techniques could also be inserted here.

Continuing Medical Education for General Practitioners will appeal to a wide range of clinicians, educators and others involved with the organization, provision and evaluation of CME.
Students in the disciplines of medical and clinical education will also find the book a useful introduction to the area of CME. The book is easy to read and the practical examples help transform the theory of CME into possible real life scenarios. The cost is not prohibitive for health professionals or students and the book is invaluable when used by the clinician in liaising with experienced medical educators on CME development.