Preface

Procedures in Primary Care: Meeting the Comprehensive Needs of Our Patients Where They Are

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Primary care remains at the front lines in the delivery of patient care. In many of our communities across the United States, patients have limited access to specialty care. Population growth, the aging of the American population, in addition to increased access to care with the Affordable Care Act, have combined to drive the demand for procedural care and highlight the effects of physician shortages.¹ Primary care clinicians have risen to meet this unmet need by continuing to deliver comprehensive care within our communities. The scope of this care has continued to expand and includes a wide variety of office-based procedures across dermatologic, women’s health, musculoskeletal, ultrasound, and urgent care.² It has also been suggested that family medicine residency programs may need to adjust their training to address specific procedures (ie, the destruction of benign skin lesions, nail care, large joint injection, punch or shave skin biopsy, removal of impacted cerumen, wound debridement, Unna boot application, excision of skin lesion, paring of corn or callus, and insertion of urinary bladder catheter) to better meet the needs of the Medicare patient population.³

In this issue, we focus on the procedural care that is routinely provided in the ambulatory care setting, including dermatologic and orthopedic procedures. We review skin biopsy techniques, laceration repair, incision and drainage of abscesses, foreign body removal, cryotherapy, electrocautery, the treatment of keloids, nail and foot care, dermatoscopy, large-, intermediate-, and small-joint injections, tendon and myofascial injections, the management of fractures and sprains, and point-of-care ultrasound for musculoskeletal and other diagnostic applications.
With proper training, incorporating these procedures into your practice can be a fulfilling way to deliver comprehensive care for our patients where they are, in the primary care setting.

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REFERENCES