significant improvement with increasing number of postgraduate years, however, and year-two internal medicine residents actually scored lower on knowledge and management than either year-one or year-three residents. In spite of scores that apparently reflected inadequate knowledge and management ability, both family practice and internal medicine residents perceived that this was an important and meaningful topic.

There are four components necessary for the successful practice of preventive health care, including preconception care—attitudes, organization, appropriate knowledge and management skills. The residents in this study seem to have had the necessary attitudes, but their residency training does not appear to have adequately provided the other three components. It is encouraging that a subgroup of residents (eight in internal medicine and 14 in family practice) who had rotated through the high-risk prenatal clinic scored higher; this group was relatively small and heterogeneous, however, and included both residents who had rotated through the high-risk clinic for at least a full month and those who may have had only passing contact there. Further prospective study of this experience might clarify the effect of such rotation.

This article represents an initial attempt to assess primary care residents’ knowledge, attitudes and management decisions in caring for women of reproductive age in a large urban hospital. It is an exploratory study that needs independent replications from other institutions to validate the findings. The research also has certain limitations. The questionnaire was constructed solely for the purpose of this research; revision of this questionnaire may be warranted if it is to be used in other institutions. Also, the study was performed in two residency programs at the same hospital, and results may not be generalizable to other settings. Further, because of the relatively small sample sizes, the statistical power to detect the significance of the results found is limited (β: 0.37–0.80).

Infant mortality and poor pregnancy outcomes are among the leading health problems facing the United States today. The preconception and early pregnancy care skills of all relevant providers, including internists and family practitioners, should be adequate to prevent adverse pregnancy outcomes. Our research describes an attempt to evaluate whether primary care residency programs are succeeding in helping providers develop such skills. The results call for a revision of curricula and residency experiences in our hospital if residents are to be provided with the skills and knowledge necessary to meet existing recommendations.

We suspect that similar deficiencies could be discovered in other residency programs, since these topics are not widely discussed in the internal medicine and family practice literature. This topic is of great importance to primary care practitioners, their patients, and to society as a whole. Further research into the teaching of and delivery of preconception care is warranted.

References
13. DHHS, 1989 op. cit. (see reference 6).
18. DHHS, 1989 op. cit. (see reference 6).