**GUEST EDITORIAL** 

## Selecting medical students who will become general practitioners: is the aptitude test suitable?

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Director of Community Education, King's Undergraduate Medical Education in the Community Team (KUMEC), Department of Primary Care and Public Health Sciences, King's College London School of Medicine London SE1 3QD, UK anne.stephenson@kcl.ac.uk The seminal work of Barbara Starfield and colleagues,<sup>1</sup> amongst others, provided convincing evidence that a strong primary health care service results in 'better health outcomes at lower cost'. In the United Kingdom and New Zealand, with primary care the foundation of the health care system, there is, however, a difficulty in increasing the numbers of general practitioners from around the 30% of specialty training posts at present to the 50% level that we believe is required.<sup>2</sup>

So, how can we encourage a career in general practice at undergraduate level? Recent research by Lambert et al.<sup>2</sup> revealed that lifestyle factors were important for a positive choice and that the perception of the job content of general practice was the main reason for rejecting a career in general practice. Views of medical students in a 2013 British Medical Association survey supported these findings.3 Furthermore, a systematic review by Stagg et al.4 concluded that preceptorships as short as three weeks' duration positively influenced the career choices of medical students when they rated the preceptor as a high quality teacher. This suggests that during undergraduate training, there is a need to counter the negative view of the job content of general practice with the provision of good mentors and role models and sound career advice.

Can selection play a role in choosing medical students who have the qualities required for a career in general practice? From a 2012 research report identifying best practice in the selection of medical students,<sup>5</sup> the tools that showed most promise in terms of moderate to high validity, as well as acceptability in terms of widening access, were situational judgment tests, aptitude testing, personality tests and multiple mini-interviews, used conjointly with academic record. The findings from the study in this issue by Poole et al. are therefore disquieting, with the suggestion that the use of the Undergraduate Medicine and Health Sciences Admission Test (UMAT), an aptitude test, has the potential for the de-selection of potential medical students who at graduation have a strong interest in general practice and a comparable academic attainment to their peers. This was a single institution study with relatively small sample sizes. If further research in this area, including the investigation of other aptitude tests such as the UK Clinical Aptitude Test (UK-CAT), BioMedical Admissions Test (BMAT), and Graduate Australian Medical Schools Admissions Tests (GAMSATs) supports this finding, then we need to consider what it is about the test and/or the students and their subsequent undergraduate training that makes this so. We cannot afford to lose the very students that we need as primary care doctors before they even start their medical training.

## References

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