Reviewer’s report

Title: Supply, distribution and characteristics of International Medical Graduates in Family Medicine in the United States: a cross-sectional study

Version: 0 Date: 21 Aug 2018

Reviewer: Reviewer 2

Reviewer's report:

PEER REVIEWER COMMENTS: To view the full report from the academic peer reviewer, please see the attached file.

REVIEWER COMMENTS FROM REPORT: An important paper of descriptive statistics in relation to international medical graduates (IMGs) and the workforce of USA family physicians. Interesting findings such as more than one-third of IMGs attended medical school in the Caribbean and US-IMGs (US Citizens) make up 40.5% of the internationally-educated family medicine workforce.

REQUESTED REVISIONS:
This study seeks to fill that gap by describing, based on current data, the characteristics of IMGs in family medicine who provide patient care in the U.S.

I am looking at this from a UK perspective and family physicians, but in the UK, DO (osteopathic physician) are not specifically viewed as part of the family physician / GP (general practitioner) workforce, so should this be further discussed and the relevant figures produced for an international readership and so expanding on table 1 or providing some more background? In the UK there is a differentiation family physician (GP) and the primary care workforce and osteopathic physicians would be part of the primary care workforce but usually working privately and not in the public National Health Service (NHS) which in the UK is an important differentiation. At the end of the paper it is detailed that the prevalence of US-IMGs in family medicine leads to considerations for the quality of primary care and goes to say that there is a growing body of literature suggesting that the quality of care provided by USIMGs may be inferior to that of US-MGs and indeed other IMGs. This needs further elaboration and a further evidence base. In the UK, IMGs make up a large proportion of the family physician workforce and this is not the situation. Again this needs to be written for an international readership and perhaps information as to the IMGs that don't join the family physician workforce in the USA but go to other countries and if there are any issues in relation to quality. Also the comment of those who graduated from medical schools in the Caribbean and the stated "considerable variability in performance of graduates in medical schools located there". References 43 and 50-55 need a detailed critical appraisal to justify this which is providing information over and above the original descriptive statistics provided for the basis of this paper which are interesting in themselves. The title of the paper should also perhaps be revised bearing this in mind and using a word other than "contribution" eg percentage / numbers. Overall, this paper is interesting and important and if it can take into account the above points should perhaps be published and so if it addresses an
international audience as well as the US.

ADDITIONAL REQUESTS/SUGGESTIONS:
As detailed above

**Are the methods appropriate and well described?**
If not, please specify what is required in your comments to the authors.

No

**Does the work include the necessary controls?**
If not, please specify which controls are required in your comments to the authors.

No

**Are the conclusions drawn adequately supported by the data shown?**
If not, please explain in your comments to the authors.

No

**Are you able to assess any statistics in the manuscript or would you recommend an additional statistical review?**
If an additional statistical review is recommended, please specify what aspects require further assessment in your comments to the editors.

Not relevant to this manuscript

**Quality of written English**
Please indicate the quality of language in the manuscript:

Acceptable

**Declaration of competing interests**
Please complete a declaration of competing interests, considering the following questions:

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