STUDY OBJECTIVE
To describe how ‘generalism’ is operationalized and understood in Canada, the United Kingdom, the United States, and insufficient to meet societal needs in the UK, US and Canada.

Health systems have a critical need for clinicians with a generalist skill-base. Despite initiatives in medical education to increase the number of generalist-trained doctors, recruitment of generalists is insufficient to meet societal needs in the UK, US and Canada.

METHODS
Systematic mixed studies review (SMSR) using a data-based convergent design

1. Data are collected together.
2. All data that fulfill inclusion/exclusion criteria qualify to be analyzed through quantitative and qualitative strands.
3. Data from these two strands are explored separately, before being synthesized in the final analysis, where the findings of each contribute to a broader understanding of the core research question.

STUDY CHARACTERISTICS
Studies were overwhelmingly from the United States (62% of included studies). Quantitative studies made up the majority of study types (205), with 148 of these from the United States.

RELEVANCE OF THIS WORK
• Identifying similarities and differences between the meaning of ‘generalism’ and ‘generalist’ across disciplines and regions will help identify disjunctions between policy initiatives and clinical practice.
• These findings are particularly relevant for medical education and career selection, where the rhetoric for enhanced generalism is not supported by discourses of generalism in clinical practice, which forms the majority of clinical education.

REFERENCES
6. The Ottawa Hospital Research Institute, Ottawa South East Champlain (Ottawa South East and Champlain) and the Ottawa Hospital Research Institute. Ottawa South East and Champlain Health Region. Ottawa South East and Champlain Health Region Evaluation Framework. Ottawa South East and Champlain Health Region. Ottawa South East and Champlain Health Region Evaluation Framework.