

Profiles of general practice in Europe : an international study of variation in the tasks of general practitioners

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Propositions

(Attached to the thesis 'Profiles of General Practice in Europe; an international study of variation in the tasks of general practitioners', to be publicly defended by Wienke G.W. Boerma at Maastricht University on 17 September 2003.)

1. This study should be repeated. (*This thesis*)
2. The challenge for General Practice in central and eastern Europe is to expand the range and quality of curative services; in western Europe the challenge is to expand prevention. (*This thesis*)
3. Group general practices should consist of male and female GPs, not just because this offers more choice to patients, but also to compensate for gender differences in task profiles. (*This thesis*)
4. Restricted choice resulting from GP gatekeeping and patient list systems can be acceptable when introduced voluntarily in exchange for financial benefits for patients.
5. GP gatekeeping and a patient list system are not inseparable. If the former is not feasible, the latter is still useful in realizing the potential of general practice.
6. Statistical data cannot effectively refute feelings.
7. Working conditions are of minor importance in the occurrence of burn-out.
8. Those who assume that working women bear a double burden, should prove that the job-related burden of both sexes is equal.
9. Most people do not show their best side when behind the wheel of a car.
10. Ain goud pad krom löpt nait om.
(Proverb from Groningen, meaning that a good winding path is no detour.)