This report—describing the first national quality improvement collaborative focused on providing culturally affirming care for LGBT people—finds that making primary care practices more LGBT-friendly and inclusive can improve STD and HIV screening rates among this vulnerable population.

In the US among young men, 9/10 support health care providers asking about IPV, 1/5 report perpetrating or being a victim of IPV, but only 1/10 report being asked by a health care provider about IPV.

Primary care practices that participated in the Comprehensive Primary Care Plus initiative are diverse, but less likely to be small, independent, located in rural areas, and inexperienced with primary care transformation models—underscoring the need for additional engagement strategies and to extrapolate evaluation results carefully.

A novel social determinants of health tool has been developed and validated, and has the potential to improve population health assessment for cardiovascular diseases (CVD) mortality.

Technological and communication barriers and a lack of knowledge and facilitating tools are main causes for numerous inaccurately registered antibiotic allergies and are therefore targets for future improvement.

Using prescription and procedure data from Medicare, a machine learning model provides a near real-time method for identifying physicians practicing primary care.

Researchers at the Robert Graham Center developed a methodology to assess the gender ratio of authorship of peer-reviewed papers and applied these methods to their own center, finding that a gender gap in the ratio of female to male authorship exists.

In France, implementation of the requirement that zolpidem be prescribed using secured forms led to an important and immediate decrease in zolpidem use, which was partially compensated by a rise in zopiclone use.

The authors present a roadmap for necessary primary care practice transformations to care for patients and communities during a pandemic, using the current COVID-19 pandemic as an example.