Rapid changes in the US health care system may predispose to physician stress. This can impair patient interactions, diminish productivity, and lead to turnover in physician practices. A model with 'therapeutic implications' for prevention of stress would be beneficial. The US Physician Worklife Study is a stratified random survey of 5704 primary care and subspeciality physicians (2326 respondents, adjusted response rate 52 per cent). We assessed the contribution of the demand-control-support model to better understanding stress in these physicians. Potential predictors included gender, age, case mix, time pressure in patient visits, workload, practice type, specialty, work control, isolation, and support for balancing work and home. A 4-item stress scale was adapted from Cohen et al.; Cronbach's alpha in the current sample was 0.75. Linear regression.