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The responsibilities generally ascribed to a professional college are "teaching, research, and service—in a college of medicine, patient care." Our subject this evening considers two of these three functions, i.e., teaching and research, although I agree with Dean Kirby that teaching and research can hardly be separated.

Professional education must be made relevant to the career goal of students enrolled in the college. No longer can traditional, inflexible, and stereotyped curricula be justified for students who are preparing to go forth into a changing society.

Medicine has been severely criticized for not graduating enough physicians fast enough. Moreover, medical faculties have been blamed for not "producing physicians" who want to become "family, primary, or general physicians"—as if medical faculty could at the push of a button plan the career goals of its students. In a similar fashion, as alluded to by Dean Kirby, other professional schools are under criticism both for what they do and what they do not do.

It is evident then that the faculty of a professional college must be secure enough to constantly review what their college is doing educationally and how their efforts can be made more efficient and more applicable "to the times." Our own college of medicine has initiated a new curriculum after months of planning and discussion. The curriculum will accommodate increased student enrollment and at the same time cut the required months of study from four calendar years to three calendar years. In this curriculum the importance of using the outpatient environment for clinical learning experience is stressed. The increased attention to ambulatory care is realistic in considering the health care needs of our population today. Patient-oriented, vertical presentation of the content of the curriculum in chronological fashion from conception to death seems to be a logical departure in this curriculum. From the very beginning the student will be given insight into the physician as a scientist, medicine as a way of life, and the place of medicine in society. The most important accomplishment of the new curriculum is the abandonment of the rather rigid traditional separation of the "basic" or "preclinical" years from the clinical years. The new curriculum is based on the assumption that the basic scientist and clinician must combine talents to teach the normal life processes in health, the alterations in disease, and the appropriate approach to diagnosis and therapy. Even though we have just undertaken significant curriculum revi-
sion, our faculty must constantly review our instructional offerings to be certain that we do not become complacent, inflexible, and unresponsive to the needs of our students as the professional practices in this country change.

How large a role should research have in the academic programs of the professional school? Surely, most would agree that research is essential if a professional college is to achieve overall excellence in its academic programs. No one can deny that it is the function of universities to seek to add to existing knowledge, to help solve presently unsolved problems, and to assist communities in applying intellectual heritage to problems of current concern. Therefore, I do not believe that research needs to be justified in a university setting. However, university conducted research is under criticism and danger from at least four standpoints, and I would like to comment briefly on these.

(1) Faculty have been criticized for doing research at the expense of the "optimal faculty-student relationship." It has been charged that the research leads to disengagement between students and faculty, which infers that the only valuable faculty-student engagement is in the classroom. While no one could agree with the latter inference, it does impress upon us the need to be certain that our research in the professional college contributes to the educational goals of the college and that indeed it prospers with student participation.

(2) Extramural research support especially that from federal sources is dwindling. The ready availability of extramural research funds in the past has fostered a state of dependence on the part of certain professional colleges as well as their parent universities which is natural, but which now leads to a most perplexing situation. Over-emphasis on research and dependence on federal funds is currently damaging educational programs in those universities where planning for such an eventuality as diminished extramural support has not paralleled the increasing research budgets of the respective colleges.

(3) By the very nature of applied research in a college of medicine, it has been necessary in many instances to use human beings as subjects in research experiments. While the profession has adhered to the highest ethical standards, it is not surprising in this day and age that concern has been expressed about what represents "informed consent" of such a subject in clinical investigation. There is no question that the patient who is a subject in a clinical investigation has the right to know what the potential harm of the investigation is, what he may expect as a benefit, if any, from the investigation, and what alternative methods of therapy are available to him. There are even more serious moral and legal questions concerning what constitutes adequate "informed consent" in the case of a minor. Rigorous review of proposed clinical investigation by colleagues in a profes-
sional college as is routinely done assures that the highest ethical standards will continue to be followed and that the concern for the safety of the patient will remain of paramount importance. In our own College, each proposed investigation is reviewed at the departmental level, by the College of Medicine Research Committee, and finally by the Executive Committee.

(4) It has been charged that the researcher is not a good teacher. I would submit that this may occasionally be true but how many faculty members who do not do research may also be classed as poor teachers? In those cases in which the researcher has no interest in teaching or ability therein, he should be relegated to the research institute, industry, or university setting where it is clear that he has no teaching responsibility. On the contrary, with the proper mix of research and teaching, I firmly believe that indeed research is a "catalyst" to making a faculty member more dynamic and better in his teaching efforts. There are certain pitfalls that a researcher must avoid in order to be a good teacher. He must make certain that he leaves adequate time for preparation of the courses for which he is responsible. The researcher's narrow focus on his own area of interest may make it difficult for him to become adequately knowledgeable of broader areas. Occasionally, the researcher may unwittingly resent the intrusion of a long standing teaching commitment on a research experiment in which exciting developments suddenly appear. However, those outstanding academicians who combine teaching and research are aware of the above pitfalls and manage purposely to avoid them.