

HISTORY

COLLEGE OF MEDICINE

1959 - 1968

CHAPTER III

UNDERGRADUATE, GRADUATE, AND POSTGRADUATE PROGRAMS

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MEDICAL SCHOOL PROGRAM

HISTORY

I. Undergraduate Programs

The period from 1959 to 1968, was one which included major significant changes in the Undergraduate Curriculum at the College of Medicine. During this period, the teaching program moved from one in which all students were required to take the same courses and content to one which allowed for the student's individuality and particular interests. These changes were not made arbitrarily, but followed extensive discussions at faculty extramural seminars on medical education and subsequent further development within the college curriculum committee. The curricular modifications were consistent with the new philosophical approaches to medical education as the academic world moved from the shadow of the Flexner Report into a new era. Faculty consideration in the curriculum committee, and the seminars, centered about the student, be he medical undergraduate, professional post-graduate or practicing physician. Highlighted, were both his individuality and his unusually high quality. Faculty thought embraced the principle that the totality of medical education is not a series of isolated incidents, but rather it should be considered as a continuity of learning to which sound educational principles could be applied at any given point.

With these principles in mind, the Curriculum Committee proposed, and the faculty accepted, a curriculum leading to the M.D. degree in which generous elective time included, two months in the third year, and six months in the fourth year. A provision was made so that a student could elect one month in each year as a vacation if he so desired. In addition to this, numerous splinter courses previously given in the first two years were eliminated or combined into an integrated course in which all clinical departments participated. This course was entitled, "The Comprehensive Evaluation of the Patient." It was given in the second year and employed numerous education formats including the lecture, the seminar-conference, panel discussions, and the clinical experience with one faculty member and two students. In addition to physicians, resource people from fields like sociology, and theology and psychology were represented on the panels. The most heavy emphasis in the course was on the development of skills in physical diagnosis and on the physician-patient relationship. This course was given for the first time in 1964.

When this curricular revision took place, in the academic year 1964, the class then in its fourth year, was phased out under the old program. The move to the new program requires some unusual adjustments by certain departments, for example, the Department of Obstetrics and Gynecology had

to teach two classes in one year. Because of this increased load, the College relied more heavily on community hospital facilities. It was also necessary for the Department of Physiology to teach second year students as well as first year students, but not simultaneously as was the case of the Department of Obstetrics and Gynecology.

Under the new elective system, it was possible for a student to take up to four months of individual studies with a given faculty member and some availed themselves of this opportunity. Most of these electing individual studies, took a three month segment of investigative work. The majority of students elected clerkships in the clinical areas lasting one month each in the various specialities and sub-specialities. In the new program, some students took electives at other medical schools, both U.S. and foreign, and some had educational experiences in public health organizations in the emerging countries.

In this new curriculum, physiology was concentrated in the first year and medical microbiology in the second instead of being divided between the two years. A new two month required clerkship was established in psychiatry and in addition to this and his electives, the student had two months of required clerkships each of pediatrics and obstetrics-gynecology, and four months each of surgery and internal medicine.

A new first year course in Behavioral Science was begun in the fall of 1966. It included patient contact at the start of medical school. This occupied one morning a week of the student's time. He was introduced to clinical problems by means of patient demonstrations, received lectures in Behavioral Sciences and Human Development, and had a two hour preceptorship with four other students led by one of the clinical faculty.

As an additional result of the faculty Seminars in Medical Education, the admissions procedures of the College of Medicine were changed. The primary responsibility for the evaluation of applicants for places in the first year class was transferred to the College of Medicine from the University Office of Admissions. The Admissions Committee of the faculty was enlarged and interviewing procedures modified in order to get a better assessment of the personal qualities of each applicant.

There was a steady increase in the number of applicants to the College over the period from 1959 to 1968. There were 537 applicants at the beginning of this period and the class selected represented 44 colleges and universities. The corresponding figures for 1968 were 1053 and 53.

An additional major change in the College occurred in 1963, when the grading system was revised. In place of the conventional letter grading system with point hour ratios, a pass-fail system was installed. The student received only a Satisfactory (pass) mark or Unsatisfactory (fail) mark.

If he had been clearly outstanding in his performance, he was given Honors. Class rank as a stimulus to student performance was attenuated by this change in grading. This was the first college on the Ohio State University campus to adopt such a practice and though the move had been viewed with apprehension in some quarters, there appeared to be no decrease in student motivation or performance.

In 1963, the Liaison Committee on Medical Education of the American Medical Association and the Association of American Medical Colleges made an accreditation visit to the College of Medicine. The members of this team were:

John F. Sheehan, M.D., Representing
Council, Association of American
Medical Colleges

Kenneth E. Penrod, Ph. D., Representing
Council, American Medical Association

James A. Campbell, M.D., Representing Staff
American Medical Association

James R. Schofield, M.D., Assistant Secretary
Representing
Association of American Medical Colleges

The College was given a three year approval with the recommendation for reassessment at the end of that time. Therefore, in 1966, a Committee again visited the College of Medicine. These members were:

Kenneth E. Penrod, Ph.D., Representing
Association of American Medical Colleges

DeWitt Stetten, Jr., M.D., M.D., Representing
Association of American Medical Colleges

Wm. P. Longmire, Jr., M.D., Representing
Council on Medical Education
American Medical Association

John C. Nunemaker, M.D., Representing
American Medical Association

This accreditation team was very complimentary about the changes they had seen in the College of Medicine during the three year interval since the previous visit. In a letter to the President they signified that the School had full accreditation for the usual ten year period. Major items for future improvement included the Medical Library and Outpatient facilities.

In 1962, the College of Medicine held its first annual seminar on medical education. These seminars considered such topics as "Education of the Medical Student," "Continuing Medical Education," "Post M.D. Medical

Education," and "Student Evaluation." They were very well received by the faculty and many of the curricular changes which developed in the College of Medicine were a direct outgrowth of these seminars. It was the custom to invite national leaders in the various fields of medical education to make presentations at these meetings. They remained in residence at the meeting throughout its duration.

The names of visiting resource people who assisted at the seminars are shown in the section of the history devoted to the Division of Research and Services in Medical Education.

The format of these extramural seminars was something new at the college. These were held at a motel or a lodge of a State Park, one to two hours driving time from Columbus. Between 50-60 faculty members attended each one and visiting resource persons were present. At some seminars guests were invited from neighboring medical schools and attended the sessions which were held with the entire group of attendees addressed by one of the resource personnel. This was then followed by small group discussions. At each seminar, the final session was one devoted to framing resolutions and recommendations for the administration and standing committees of the faculty.

II. Graduate Studies Programs

There was a healthy growth of graduate studies in the College of Medicine from 1959 to 1968. There were five Ph.D's awarded to students from the College in 1957, and this number had increased to twelve in 1968. There had been a corresponding increase in Master's of Science degrees in the medical departments from nineteen to forty over the same period of time. In 1957, the School of Nursing awarded two Master's degrees and in 1968, twenty-seven such degrees. A significant development during this time was the dropping of the Master of Medical Science degree in the clinical departments and the adoption of a Master of Science Program in these areas. This followed action by a special committee of the College which reviewed the clinical graduate programs with help from consultants from the Graduate School and outside the University. The major change adopted was to require all candidates for Master's degrees in clinical areas to take at least twenty credit hours outside the department awarding the degree. When the new department of Anesthesiology was established in 1968, it too, offered a Master of Science Program.

In the same year, 1968, the University approved a proposal for a Master's level curriculum in Hospital and Health Care Administration. This degree was to be awarded in the College of Administrative Sciences as a Master's of Business Administration. A curricular program lasting two years was planned with one year in the field of Business Organization and one year within the Division of Hospital and Health Care Administration of the School of Allied Health Professions. In 1969, the Graduate Council and Faculty Council considered and approved a degree, Master's in Allied Health Professions which would be given within the School of Allied Medical Professions. This would be the first such program in the United States to give a degree in Allied Health Professions at the Graduate School level.

Departmental histories provide additional details regarding both the graduate and professional medical programs.

III. Postgraduate Program

The past decade has ushered in great change in the area of post M. D. education. The rapid proliferation of scientific knowledge, social and economic factors and governmental influences have left their indelible mark on medical education. The trend has been noticeably directed toward specialization with increasing demands on University Hospitals and their affiliates to provide the necessary educational opportunities.

The following facts clearly illustrate the rapid growth of residency

programs at The Ohio State University Hospitals. In 1954, only 42 resident positions were offered in 11 areas of specialization. This figure rose to 194 resident positions in specialty areas by 1958, and in 1968 we have 240 residents and 34 fellows pursuing education in 29 specialty areas. This remarkable growth has occurred despite the demands for young medical officers imposed by military action in Korea and Vietnam. The implementation of the Berry Plan, a national method of resident selection administered by the Association of American Medical Colleges, has been most helpful by providing a fair and orderly system for specialty training deferments.

In 1957, The Ohio State University Hospitals were approved by the Council on Medical Education for a Straight Internship in Medicine and also in Surgery to run concurrently with the pre-existing Rotating Internship. In 1962, the rotating program was abandoned. At the present time, the Ohio State University Hospital offers 20 Straight Medical, 10 Straight Surgery and Pediatric, and 4 Straight Pathology Internships.

In 1967, the Ohio Legislature enacted legislation permitting non-resident physicians to obtain temporary certification from the Ohio State Medical Board for the purpose of limited practice within the scope of graduate training programs. This legislation has greatly facilitated and enriched our post M.D. programs by the enrollment of students from a variety of medical school backgrounds. At the present time 56 different

American medical schools and 24 foreign medical schools are represented in our resident staff as well as 15 medical schools among our interns.

In 1964, Dean Meiling established the Post M.D. Curriculum Committee as a subcommittee of the College of Medicine Curriculum Committee to deal with the academic and administrative needs of interns and residents. The Post M.D. Curriculum Committee is made up of a representative from each department offering intern or resident educational programs, a member of the College Administration responsible for post M.D. programs and an ex-officio member of the Division of Medical Education, Development and Research in Medical Education. In 1967, the post of Assistant Dean for post M.D. education was established to deal with the expanding administrative needs of intern and resident education. This position is filled by Dr. Nicholas J. Teteris who also serves as Assistant Director of The Ohio State University Hospitals.

In 1966, the Report of the Citizens Commission on Graduate Medical Education commissioned by the American Medical Association and entitled The Graduate Education of Physicians was published.

This report has come to be known as the "Millis Report" after the chairman of the Commission, John S. Millis, Ph.D., President of Western Reserve University. The effect of this report on post M.D. education has been likened to the impact produced by the "Flexnor Report" on medical education published in 1910.

In response to the criticism of the Millis Report. The Post M.D. Curriculum Committee and Dr. Lloyd R. Evans, Assistant Dean for Medical Education, worked together to bring about the next progressive step. On September 11, 12 and 13, 1967, the faculty of the College of Medicine held its "6th Annual Seminar on Medical Education" at a retreat near the outskirts of Athens, Ohio. This entire seminar was devoted to "Post M.D. Education." Resource personnel for this seminar consisted of such nationally recognized authorities in the field as Dr. Robert H. Bruce, Dean of the Graduate School, University of Wyoming; Paul Nemis, Jr., M.D., Professor of Surgery, University of Pennsylvania; John C. Nunemaker, M.D., Associate Secretary, Council of Medical Education, American Medical Association; Eugene A. Stead, Jr., M.D., Professor and Chairman, Department of Medicine, Duke University Medical Center.

As a direct result of this seminar, many changes and innovations in post M.D. education were initiated. Experimentation with basic residency education was encouraged. The internship as a free standing year was challenged and several departments deleted the internship from their requirements for appointment to their residency programs. A Family Practice Teaching Clinic was established. Graduate degree programs in the clinical areas were strengthened. Senior House Staff were appointed to the hospital staff and were given faculty appointments as Instructor in recognition of their teaching contributions. A greater degree of curricular structuring was under-

taken by the clinical areas and these courses were made available to residents of other institutions in the surrounding area. The three stages of medical education -- the medical school, the internship and the residency were arranged as an articulated continuum. Attempts were made to define "core knowledge." Provisions were made for ongoing in-service student evaluations. Recommendations have been made to the Executive Committee of the College of Medicine for establishing the mechanism for institutional accreditation of education programs.

In keeping with the academic objectives of providing progressive medical education and exemplary patient care, all patients admitted to The Ohio State University Hospitals are "teaching patients." Residents are afforded supervision to stimulate habits of critical inquiry and balanced judgment and are encouraged to assume increasing responsibilities. House Staff desiring to learn new procedures or techniques have opportunities to perform them under experienced supervision. Numerous conferences, postmortems, seminars, clinical-pathological conferences, and ward rounds assist the interns and residents in the practice of medicine. The annual autopsy rate has averaged over 70 per cent during the past ten years.

In addition to these conferences, nationally and internationally recognized medical authorities are invited to serve as visiting professors. Opportunity is provided for the House Staff to meet and discuss medical problems with these distinguished guests. The individual departments arrange for their residents to attend scientific meetings and to present papers or exhibits. The

Assistant Dean for Post M. D. Education chairs a bimonthly breakfast meeting with senior residents and interns from all departments. The primary purpose of these meetings is communication. The House Staff are informed of proposed policy changes and their comments are solicited. At the same time the House Staff is given an opportunity to air problems that confront them in their day-to-day work. Many worthwhile policy revisions have resulted as a direct consequence of these meetings. The House Staff is afforded scholastic freedom to pursue educational opportunities within the entire University and are registered as professional students of the College of Medicine or as graduate students. The ultimate objective of all post M. D. educational programs is and shall continue to be, true to the motto of our College, 'ΑΠΙΟΤΕΒΕΙΒ 'ΙΑΤΡΙΥΝ'V -- Excellence in Medicine.