

PANEL II EDUCATION OF THE PHYSICIAN

UNDERGRADUATE

Reporter - GERALD SPARKES

CHAIRMAN:	Dr. Thomas C. King	Professor of Surgery and Associate Dean College of Medicine University of Utah Salt Lake City, Utah
PANELIST:	Dr. W. A. Cochrane	Dean, Faculty of Medicine University of Calgary Calgary, Alberta
	Dr. Ian Rusted	Dean, Faculty of Medicine Memorial University St. John's, Newfoundland
	Dr. C. B. Stewart	Dean, Faculty of Medicine Dalhousie University Halifax, N.S.
	Mr. Rod McInnis	Medicine IV - Dalhousie

Dr. Thomas King, the chairman, focused Panel II's attention on the selection of medical students and their premedical courses. Dean Cochrane said that the first decision was whether or not an individual should proceed from high school directly into medicine. He noted that in favour of immediate entrance with the explosion of medical knowledge. Against it is the need for a broader education before narrowing in on medicine. He then elaborated on his position on this at the University of Alberta. They would like to have flexibility in their pre-med program so that students would be able to apply for medicine as long as they had a certain amount of exposure to behavioral and biological sciences. He went on to what seemed to be a contradiction to the idea of flexibility by saying that he felt that the "basic sciences" should be included in that Arts and Science Faculty.

This comment eliminated further consideration of the present Pre-Med course, but it did lead to much discussion on the Pre-Clinical years. Much support and little criticism was elicited for the present program

of basic science teaching. With the progress of medical knowledge the basic sciences are becoming more important in the understanding of clinical problems. These basic sciences teachers should have an orientation toward clinical medicine.

One criticism of the pre-clinical program was the absence of motivation to learn subjects like physiology. This could be solved by exposing students to clinical problems which would have to be answered in terms of basic science material. This is a program which is presently evolving.

After spending most of the allotted time talking about basic science the discussion shifted to the teacher, what he is, and what he should be. Dean Stewart said that until recently there was no place in North America where one could learn anything about the science of how to educate people and the process of learning. He stated that the time has come for all educators including the medical ones to start considering the problem of how to educate. It was noted that the teacher can spend his time demonstrating his knowledge

and capabilities like a golf teacher showing a beginner how to hit a ball without letting him practice. The result is that the student becomes a good observer but a poor problem solver. This is not the desired result so it is necessary for teachers to continually analyze their own performances. Also "the teacher must function as a guide and planner of the educational environment, the quality of the teaching being measured by the kind of learning that results."

With regard to the "consumer of the product" (Dr. King's description of a student) it was suggested because of fear of student power educators are slowly becoming receptive to the opinions of students and are recognizing that they might have something to say. This realization came to the panelists approximately fifteen minutes before starting the groups' discussions when Mr. Rod MacInnis, a fourth year medical student was drafted as a panelist. Most curriculum committees within universities do not have students on them and it is about time that the value of their participation in deciding teaching policy was recognized.

As a conclusion to the discussion each of the panelists was given an opportunity to pass any comments relevant to the topic. Dr. King pointed out that "the teacher's job was as a diagnostician and not as a therapeutician". He could not go on dishing out information, but rather diagnose the student's present state, and work with that. Dean Stewart stated that "the whole system of education has been geared from public school

up to the dissemination of information, the teaching of skills, emphasis on what the teacher could give rather than what the student required." He felt that teachers have to do a better job of getting out of the student's way, and allow him to learn. This must start at the public school level. Dean Rusted noted that there had been no mention of the students contact with society and that "at some stage in the course of the student's education, he ought to be placed in the situation where he can observe and participate in interpersonal relationships in society". Mr. MacInnis stated that the major problem of the present medical education program is in the first two years. He felt that a new way of getting across basic science material involving active student participation is vitally necessary. Dr. Cochrane had two general comments to make; the benefits to be derived in terms of education in the future will rest to a large extent on the newer medical schools provided they are given sufficient legislation by organization to carry out non-traditional experimental approaches. The second in answer to the question of providing a better product for tomorrow in terms of the educational process, is that at least everybody is discussing and thinking about the educational program in the faculty and now it is hitting the student.

In summary it can be said that in an interesting and highly informative three hour period suggestion and criticisms were made on each of the following questions: when to educate; How to educate; Who should educate; and who should be educated.

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