Why We Need an Updated “Osler Report” and Not a “Flexner Report”

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Objectives

1. Outline the importance of the 1910 Flexner Report to medical education
2. Define the role of William Osler in medical education reform across the continuum
3. Describe future areas for research and implementation of newer faculty education development
Flexner Report 1910

- Fewer and better schools located in cities and large towns, affiliated with universities and teaching hospitals
- 148 schools should be reduced to 31 and the number of graduates reduced by half
- Require 2 years of collegiate preparation, then require 2 years of preclinical work
- Full-time teachers in laboratories and clinics
- Learn by doing
# Tiers of Medical Schools, 1910

<table>
<thead>
<tr>
<th>Examples</th>
<th>Number</th>
<th>Quality of Scientific Instruction</th>
<th>Quality of Clinical Instruction</th>
<th>University Affiliation</th>
<th>Research</th>
<th>Survived Post-1910</th>
<th>Educational or Commercial Enterprises</th>
</tr>
</thead>
<tbody>
<tr>
<td>Tier 1</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>Educational</td>
</tr>
<tr>
<td>Johns Hopkins</td>
<td>1</td>
<td>Excellent</td>
<td>Excellent</td>
<td>Yes</td>
<td>Yes</td>
<td>Yes</td>
<td>Educational</td>
</tr>
<tr>
<td>Tier 2</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>Educational</td>
</tr>
<tr>
<td>Columbia, Harvard, Michigan, Minnesota</td>
<td>10</td>
<td>Excellent</td>
<td>Good</td>
<td>Yes</td>
<td>Yes</td>
<td>Yes</td>
<td>Educational</td>
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<tr>
<td>Tier 3</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>Educational</td>
</tr>
<tr>
<td>Cincinnati, New York University, Washington University, Yale</td>
<td>20</td>
<td>Good</td>
<td>Acceptable</td>
<td>Yes</td>
<td>Some</td>
<td>Yes</td>
<td>Educational</td>
</tr>
<tr>
<td>Tier 4</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>Educational</td>
</tr>
<tr>
<td>Colorado, Drake, Nebraska, Tufts</td>
<td>30</td>
<td>Acceptable</td>
<td>Less Acceptable</td>
<td>Many</td>
<td>Little</td>
<td>Most</td>
<td>Educational</td>
</tr>
<tr>
<td>Tier 5</td>
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<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>Educational</td>
</tr>
<tr>
<td>College of Physicians and Surgeons (Baltimore), Georgetown, Southwestern, Washburn</td>
<td>30</td>
<td>Less Acceptable</td>
<td>Weak</td>
<td>Some</td>
<td>None</td>
<td>Some</td>
<td>Educational</td>
</tr>
<tr>
<td>Tier 6</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Atlantic Medical College, Bennett Medical College, National Medical University, Toledo Medical College</td>
<td>40</td>
<td>Unacceptable</td>
<td>Unacceptable</td>
<td>None</td>
<td>None</td>
<td>None</td>
<td>Commercial</td>
</tr>
</tbody>
</table>

University of Pittsburgh

- Entrance Requirement: 4 years HS
- Teaching staff: 103
- Resources: fees
- Laboratory facilities: “thorough house – cleaning”
- Clinical facilities: “abundance of clinical material”
What the Report Did Not Discuss

• Post-graduate training
• Continuing medical education of the practicing physician
• Medical Faculty Development
Abraham Flexner
(1866 – 1956)

“The American College” (1908)
“Bulletin Number 4” (1910)
“Prostitution in Europe” (1914)
“Universities: American, English, German” (1930)
Institute for Advanced Studies (1930)
“I, Remember” (1940)
William Osler (1849 – 1919)

- In 1889 he became the first professor of medicine at Johns Hopkins School of Medicine
- Expert in diagnosis of diseases of the heart, lungs, and blood
- Wrote the textbook *The Principles and Practice of Medicine* in 1892 (and frequently revised); it was considered authoritative for more than 30 years
## Brothers and Sisters

<table>
<thead>
<tr>
<th>Flexner Family</th>
<th>Osler Family</th>
</tr>
</thead>
<tbody>
<tr>
<td>Jacob – physician</td>
<td>Featherston – judge</td>
</tr>
<tr>
<td>Henry – hat business</td>
<td>Britton Bath – trial lawyer</td>
</tr>
<tr>
<td>Isadore – pharmacist</td>
<td>Edmund Boyd – financier</td>
</tr>
<tr>
<td>Simon – pathologist</td>
<td>Edward Lake – barrister</td>
</tr>
<tr>
<td>Bernard – corporate lawyer</td>
<td>Francis  twins</td>
</tr>
<tr>
<td>Abraham – educator</td>
<td>Charlotte</td>
</tr>
<tr>
<td>Washington – printing</td>
<td>William – physician</td>
</tr>
<tr>
<td>Gertrude – teacher</td>
<td>Emma – died at age 3</td>
</tr>
<tr>
<td>Mary – teacher</td>
<td></td>
</tr>
</tbody>
</table>
The Mothers

Ellen Pickton Osler in her 101st year

Esther Abraham Flexner
Common Friends of Abraham Flexner and William Osler

- Daniel Coit Gilman
- William James
- Lewellys Barker
- Harvey Cushing
- Franklin Mall
- William Welch
- Simon Flexner
- Frederick Gates
Daniel Coit Gilman and Johns Hopkins Hospital
William Osler’s Education Issues

• The Teacher – Student Relationship

• Access to medical information through libraries and professional societies

• Centrality of the physician – patient interaction
William Osler: Learn and Teach

• Skilled researchers can fail as teachers

• Next to faculty, most important asset is books

• Observe, record, tabulate, communicate

• Bedside teaching
“On the Need of a Radical Reform in Our Methods of Teaching Senior Students”

NY Academy of Science, December 4, 1902.
Osler’s Advice to Physicians on Medical Education and Practice Outlined in a Series of Essays or Lay Sermons
• Imperturbability refers to physical self-control and must be based on a wide knowledge of disease and of what needs to be done

• A physician “cannot hope…to escape from the cares and anxieties incident to professional life”
After Twenty-five Years – 1899

- Suggested eliminating examinations – competence should be certified by the teachers of laboratory and clinical classes

- Education is a lifelong process

- Success of the practitioner depends on personal qualities as well as medical knowledge
Evaluation

• Curriculum should be simplified
• Instruction and examination go hand in hand
• We must substitute for the quantitative estimate, the qualitative and judge students as much by manners as by matter
• When possible, evidence of original work should be substituted for examination
• The student needs more time for quiet study, fewer classes, fewer lectures, and, above all, he needs the incubus of examinations lifted from his soul
• Student should be “self – relying and reflecting being.”

The Master – Word in Medicine – 1903

- Students should balance the two parts of their education: the technical study of diseases and the inner education, to be truly good human beings
- Life-long process of education
- Physicians need attention to detail, desire for perfection, and willingness to be self-critical
The graduate…went out with little practical knowledge

…the Student begins with the patient, continues with the patients and ends his studies with the patient…

We expect too much of the student and we try to teach him too much.

We ask far too much of the resident physicians, whose number has not increased in proportion to the enormous increase in the amount of work thrust upon them…
The Importance of Graduate Study

- Post graduate instruction is needed in all classes among us
- Consultants are in constant need of post-graduate study as an antidote against premature senility
- To students who wish to have the best that the world offers, let me suggest that the lines of intellectual progress are veering strongly to the west, and I predict that in the twentieth century the young English physicians will find their keenest inspiration in the land of the setting sun.

From The Importance of Post Graduate Study. *The Lancet*, July 14, 1900.
A Way of Life – 1913

- Analogy of a ship closing off watertight compartments to keep afloat. Learn to control “day-tight” compartments
- Warns about poor diet, and excesses of tobacco, alcohol, or sex
- “The quiet life in day-tight compartment will help you to bear your own and others’ burdens with a light” heart, guided by the example of physicians of the past
William Osler and the Core Competencies

1) Patient care
   • The Hospital as a College
   • Teaching and Thinking

2) Medical Knowledge
   • The Student Life
   • On the Growth of Specialism
William Osler and the Core Competencies

3) Problem Based Learning
   • Teaching and Thinking
   • The Student Life

4) System Based Practice
   • Teacher and Student
   • The Hospital as a College
William Osler and the Core Competencies

5) Interpersonal Skills
   • Aequanimitas

6) Professionalism
   • After Twenty-Five Years
   • On the Educational Value of a Medical Society
A Letter to President Remsen
Johns Hopkins University

From William Osler

Not for Publication

This is a family letter, strictly confidential and not for publication. It is sent only to the President and the Trustees of the University, the President and Trustees of the Hospital, to Mr. Abraham Flexner, to Dr. Hurd, Dr. Winford and Dr. Norton of the Hospital, and to the Professors in the Medical School. Other copies are not to be had.
“To the President, Johns Hopkins University

Dear Remsen,

The subject of whole-time clinical teachers, on which I send you the promise note, is one of great importance, not only to Universities, but to the profession and to the public at large. It is a big question, with two sides. I have tried to see both, as I have lived both, and as much, perhaps as any one can appreciate both.”

A. Chesney, History of JHU, vol. 3
“In life, in work, in word, and in deed he is an exemplar to the young men about him, students and assistants. ‘Cabined, cribbed, confined’ within the four walls of a hospital practising the fugitive and cloistered virtues of a clinical monk, how shall he, forsooth, train men for a race the dust and heat of which he knows nothing and – this is a possibility! – care less? I cannot imagine anything more subversive to the highest ideal of a clinical school than to hand over young men who are to be our best practitioner to a group of teachers who are ex officio out of touch with the conditions under which these young men will live.”

A. Chesney, History of JHU, vol. 3
“These are some of the reasons why I am opposed to the plan as likely to spell ruin to the type of school I have always felt the Hospital should be and which we tried to make it – a place of refuge for the sick poor of the city – a place where the best that is known is taught to a group of the best students – a place where new thought is materialized in research – a school where men are encouraged to base the art upon the science of medicine – a fountain to which teachers in every subject would come for inspiration – a place with a hearty welcome to every practitioner who seeks help – a consulting centre for who the whole country in cases of obscurity.”
Views on Medical Education

Flexner vs. Osler

University-affiliated

Learn by doing

Teaching at the bedside in UME

UME

UME, GME, CME

↑ research

↑ research, ↑ humanism

+ Full-time clinical faculty

± Full-time clinical faculty
What Would Osler Say about Transforming Medical Education?

• **Training Venue(s)**
  
  Hospital ↔ Outpatient Clinic ↔ Community (Home)

  Bedside ↔ Computer (EHR)

• **UME/GME Continuum**

  Achievement vs. Time

• **Lifelong Learning (CME)**

  Information explosion (Content) vs. Personalized Learning (Process)

• **Physician – Patient Relationship**

  Personal Physician ↔ Team Management

  Paternalistic ↔ Coach

• **Gaps in Faculty Education Development**
1. How can the biology of learning inform us as medical educators?

2. How will new technology change medical education in 2020?

3. How do computational technologies and informatics change what physicians need to know and how they learn?

4. What are the common skill sets of teachers in every venue?
5. How does the “hidden curriculum” challenge our learning environment and faculty development?

6. How do we assume patient – centered care in all physician – patient interactions?

7. What are the barriers to effective teaching?

8. How do we keep practicing physicians up to date?
9. If we were to do intensive faculty development, what would it take?

10. How can faculty development research be reformed in light of emerging research in related fields?

- Sponsored by The Medallion Foundation and The Josiah Macy Foundation
- 50 invited educators from across the country
- “Gap analysis” discussion
Sir William Osler