

# The Canadian Medical Association Journal

Vol. II.

JANUARY, 1912

No. 1

## UNDERGRADUATE TRAINING AND REQUIREMENTS FOR LICENSE TO PRACTISE

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THIS is an enormous country, and when we add to its vastness the realization of its rapidly increasing population, embracing, as it does, people of the most diverse nationalities, we find ourselves face to face with problems which will tax all the wisdom that the country can summon to its aid. It is a problem not for the partizan, but for the patriot; and we therefore as patriots have our part to play in the great drama. No people have ever been endowed with a vaster heritage. By natural law it follows that our responsibilities are correspondingly great, because "to whom much is given of him also shall much be required" has its application to the nation as well as to the individual. Are we as Canadians going to be equal to these responsibilities? Although the task before us will tax our resources, moral as well as material, we look forward with confidence to the result. In the national development of the country each has his place and his part to play. As a guild we have our share in these large responsibilities. We are charged with the duty, on the one hand, of promoting the physical well-being of the nation, and, on the other, of seeing that the ill shall be well treated in order to restore them to health, and, when that is not possible, to improve their condition and ameliorate their suffering. If we, as a profession, are to bear our share in the development of this vast country, with such a rapidly growing population, our energies must be united. To that end there must be a unifi-

Extract from an address delivered before the Alberta Medical Association, August, 1911.

cation of the profession from the Atlantic to the Pacific. We must be one in effort as well as one in aim. If we are to attain the ideals which we should and no doubt will set before us, there must be complete understanding and fullest confidence between the profession in the West and that in the East. We will have to be animated by the same aspirations and guided by the same methods.

The first step to that end is the adoption of a common standard of qualification for admission to our ranks, as we have now a common standard of ethics for all after admission. Recent Dominion legislation is a step in the direction of attaining that end, but it is an examination standard, and I hope we may ere long go further than a common examination standard, as it is not reliable. Examinations, as ordinarily conducted, are quite inadequate as tests of knowledge and fitness for any position to which applicants may aspire. It is of frequent occurrence in examination everywhere that good men have failed and poor ones have passed with good standing. Various causes contribute to such results, the physical state of the applicant as well as of the examiner; the injudicious character of many examinations; lapse of memory and appreciation, which often occur to even the best man; the chance that brings to the weak man some of the few things he happens to know. There are few things more difficult than to find out exactly what any one knows. In consideration of these facts it is necessary to adopt some other than the examination standard.

The only efficient plan, as least so far as medicine is concerned, is to go behind the examinations and see that the education and practical training of the student are of such a character as to insure thorough preparation in each and every year of the undergraduate course. To do this should not be difficult in this young country, as we have only seven or eight institutions giving medical education, and these are all universities, or closely affiliated with them. If a province, better a group of provinces, or, best of all, Canada as a whole, drafted a schedule of requirements necessary for the education of applicants for license, the universities would, in their own interests as well as in those of higher education, make the necessary provision to meet them. Such a schedule should specify the length of each academic year of work apart from vacation, examinations, etc.; the necessary laboratory equipment; the amount of laboratory training; the minimum of hospital facilities, and the time necessary to be devoted to work in hospitals; the character of the training to be given therein; that a critical record of the student's work during the session be made day by day; that the instructors shall

be capable, and, if deemed wise, that at least a certain proportion of them shall devote their whole time to hospital and research work. If, under such conditions, the student's work and his knowledge of the subjects are certified to by each department as fulfilling all the requirements, your board should be able to accept them with confidence.

Hitherto a certificate of attendance is all that has been required. The attendance need not be more than fairly regular and may be quite perfunctory; in fact, such a requirement, by emphasizing the attendance and ignoring the work, is rather a premium on idleness, as the idler is equally entitled with the worker to be certified as having fulfilled the requirements. It would be quite a different matter if the applicant were required to present evidence that his knowledge and work were up to the required standard, as no self-respecting representative of a department would put his name to such a certificate unless the requirements were fully satisfied. Even his own good name and personal interests should prevent his doing so. To insure that the conditions are being carried out satisfactorily, an expert commission, knowing the needs of students and how best to meet them, should be appointed which should from time to time visit the various institutions at which students are being prepared for your license to be satisfied that the requirements are being fulfilled.

"Walking the hospital" has long ceased to be efficient as a means of becoming proficient in medicine. It is not sufficient to listen to even the most instructive clinics. The student must himself *do the work* in the wards and laboratories and learn the meaning of all the facts that he finds and their bearing on each other as well as on the patient under his observation, and how best he may meet the various indications. He has not only to find out all the facts before him, but to learn how to search them out. Few of us, in the plenitude of our wisdom, realize the enormous difficulties with which the student is brought face to face. To cope with these problems he should have the most painstaking guidance and the wisest counsel. In earlier times the student acquired his practical training during his apprenticeship to a physician or surgeon, an apprenticeship that all were required to serve, and an excellent training it was if he had the good fortune to fall under the guidance of a capable man. Unfortunately the system, which had much that was excellent and that cannot be replaced by any other, has become inadequate for the requirements of modern medicine, owing to the great increase of laboratory training which is required.

With the changing conditions, while we have made great advances in scientific knowledge, we have at the same time lost much of the personal side of our professional training.

There is a growing feeling that those who are engaged in active practice are not in a position to give the best instruction in medicine. This is not the place or occasion to discuss this important matter, but it may be said in passing, that there can be no room for doubt that the teaching of the student in the basic principles of medicine and his guidance in working out these principles in relation to patients in the hospital wards, should be done by well-trained men, who are capable instructors. I say *capable instructors*, because too little importance has been attached to the capacity to instruct on the part of those teaching clinical medicine and surgery. The teaching of clinical and laboratory methods should be done by capable instructors who are devoting their whole time to this and research work. This would ensure the work being carried on in proper sequence and with regularity, and with the certainty that the student does all the work, both of the laboratory and the ward, properly and with understanding. The present method of giving students their training wholly by practitioners must necessarily be more or less irregular and haphazard, and therefore inadequate to the attainment of the best results. So far at least as the training in clinical and laboratory methods and practice are concerned, the same principles should be applied to the teaching of medicine as obtains in the other departments of university work.

That the profession through their national authorities have a right to consider the efficiency of the instructors in the institutions sending graduates up for license to practise, cannot be gainsaid. They certainly have the right to demand that the facilities for instruction, both hospital and laboratory, shall be adequate to the needs for preparing undergraduates for their licenses, if so, why should they not also be permitted to draw attention to lack of efficiency, if such exist, in the staff who are to use these facilities?

To carry out such a scheme as is here outlined should not be a difficult matter in Canada with its small number of educational institutions. Why should not Alberta lead the way? Your neighbours, British Columbia and Saskatchewan, should be ready to join you. Alone you can inaugurate a reform in medical education in Canada and establish a standard of qualification such as will place the practitioners of this province on a higher plane than that to be found elsewhere. You would set an example which all the other provinces must follow. National registration would then

result as a natural consequence, and that, too, on the basis of the highest qualification. A commission might be appointed to study the whole question and, after consultation with the universities, draft the schedule of requirements to be complied with by applicants for license. The universities would no doubt readily comply with the requirements, making such changes in the curriculum as might be needed. The universities are sometimes charged with maintaining too low a standard of requirement for graduation. While there is some truth in these charges, yet it should not be forgotten that every improvement in the methods of medical education and advance in the requirements for education, at least in Ontario, have originated with the universities. No fear need, therefore, be entertained that obstacles will be placed in the way of proper advance by any properly equipped institution. Such a course as I have outlined would be less expensive in time and money than the present obsolete and ineffective one, and at the same time assure that none but the fully qualified would be registered.

It would also not only render it necessary for existing institutions to raise their standard of training to the plane which you adopted, but it would prevent any new ones being established with a lower standard. If a duly high standard of preparation be exacted, the number entering the ranks of the profession would not exceed the needs of our rapidly growing population. To convince any one that prompt action in this matter is necessary, we have only to study the problem it has become in the United States. In that country very creditable improvement has been made during the last few years, but the obstacles in the way of progress are so great that it will require many years of unremitting effort to raise medical education to a satisfactory standard. However, I see no reason why they, too, should not adopt some such plan as is here suggested of requiring all candidates to submit satisfactory evidence of a certain definite course of training before presenting themselves for license. Such a course of action is probably within the rights of each state, as it is here within those of each province. It is much easier to prevent evils than to cure them.

This matter is eminently suitable to be undertaken by the national association, which is to meet here next year; the occasion would seem opportune for it to take up this work. Let it bring its influence to bear on the Dominion Registration Board to require of all teaching institutions that ample facilities be provided in the way of hospitals and laboratories, that the staff be duly qualified, that the time devoted to the work by staff and students shall be

ample, and that no student be permitted to present himself for examination unless his record of work shows, not only that he has attended during his full course, but that he has done all his undergraduate work satisfactorily. If the work during the whole course has been properly done, and the record, certified by each department, shows that the applicant is qualified to present himself for examination, the result will seldom be doubtful. The good name of the university should be a sufficient guarantee that the work of the student is well done, and no head of a department would jeopardize his good name by certifying to a man's work unless it is satisfactory. The examination, if necessary at all, might well then be confined to matters having to do with the application of his knowledge to the practical work of his profession. In time, it is possible that after graduation a year's training as an interne in an approved hospital should be required before a license is granted. In that case the student's course would extend to six years, or, if he took a combined science and medical course, to eight years, a sufficient time to enable him to qualify as a safe, capable physician. Such a plan should also be the best means of developing his character as a man of honour as well as of high attainment in professional knowledge.

That the undergraduate should have due attention paid to the ethical side of his character needs no argument. Under existing conditions of defective preliminary education, and an overcrowded curriculum for the time allotted to it, it is well-nigh impossible to do anything in the way of ethical instruction and character building. Unfortunately the conditions incident to a young country are not conducive to the ethical and cultural side of education. Canada stands high in the estimation of the world for both the training of her undergraduates and the high ethical character of her physicians, but her development has reached such a degree that there should be much improvement in the training and culture of the profession. This can be done without inflicting hardship on any applicant for license. Such an advance on our part should give a stimulus to education in general and to university undergraduate work in particular.

These remarks have regard to the Canadian trained graduate only; what of those coming from Britain and foreign parts? If we are to raise our standard of qualification and culture, we must admit the highly qualified from all parts. If admission by examination is a failure as regards the Canadian graduate, it must be equally so with those from other countries. May we not apply to them the

same principle of requiring evidence of proper undergraduate training? The graduates of such universities as Oxford, Cambridge, and London, might well be accepted without any hesitancy. There will be no danger from an influx of such men, as few of them would wish to come. As to the graduates of other British institutions there might be some difficulty, as at some of them there are many students who spend years of idleness about their university, hoping in time to pass the ordeal and graduate by some means; but the difficulty would right itself in time, as it would soon become widely known that in this country no one would be received without satisfactory evidence of thorough training in each and every year of the undergraduate course. As in all young countries we stand in great need of more men of marked attainments and high culture. We are often, and with justice, charged with inbreeding, and therefore with narrowness. If we would attain the highest available status, our portals must be open to the well-trained and cultured from every country. In no way can we more effectively raise our standard of knowledge or add to our culture. There is no danger of overcrowding from such a class. In a short time the graduates of some of the universities of the United States and other countries should be admitted freely, as they will prove to be of distinct value in aiding us in raising our standard of qualification and in adding to our reputation as a profession. Canada has not as yet added much to the world's stock of scientific knowledge, and therefore needs all the men of high scientific training who may wish to come to her.

Through your Licensing Board you have in your own hands the power to place this province in an ideal condition in the interests of the public as well as of your own. At the same time, you would be acting for "the good of Canada" in a far higher sense than are the majority of interests for which that talisman is invoked. Your influence as a large and growing community would, if your demands were just and reasonable, be so felt by all the universities in this country that they would readily comply with the requirements. The other provinces, especially your neighbour on either side, would doubtless join with you or soon follow your example, and Dominion registration, on the basis of the highest standing, would become in a short time an accomplished fact.

NOTE: Since this address was given the Ontario Medical Council has decided to accept the University results in all subjects except Medicine, Surgery and Obstetrics; in these examinations are required. It has apparently done this without exacting any further conditions as to a student's work, length of course, or equipment and facilities provided by the University: it almost appears that they had decided to forego all responsibility.