

### III.

#### POST-GRADUATE DEGREES IN MEDICINE.<sup>1</sup>

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We cannot approach this subject with reasonable intelligence without recognizing that the present system of medical education in America is fundamentally wrong. Until we frankly admit this, there is scant hope that reforms of a gradual or evolutionary character will achieve more than a weak compromise. There has been a vast amount of attention given in recent years to raising the academic requirements. This has not actually, but relatively, received a somewhat exaggerated notice. As a matter of fact there is yet much to be desired in the extent of academic training which should be demanded of the student of modern medicine. But this is not now the immediate and crying evil of our educational system; there are certain others more urgent and important.

When Mr. Flexner made his report to the Carnegie Foundation it was heralded by many as somewhat radical and revolutionary; but there were thousands in the profession in this country, many of whom had been, or still were teachers, who recognized in this report the death knell of cheap and promiscuous attempts to furnish the people of America illiterate and undertrained doctors of medicine. It has long been apparent that both in academic and in so-called professional schools our country has gone mad. Any company of gentlemen having conceived the notion that some cult or denomination should be represented in a community by a professional or academic institution may proceed forthwith to found it. This is a free country. We have no proscription on this unbridled privilege save the price of a charter. What can we expect from such a system except the wretched state of professional education which obtains to a large extent in this country to-day and which has for a generation made us the target of ridicule from older and more settled nations.

It is obvious that before we can succeed in establishing effective post-graduate courses of medical study, we must entirely

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reconstruct our undergraduate schools of medicine. And the first efforts should be directed to reducing the number of them to one-tenth of the number we now have in the United States.

Mr. Flexner graciously concedes that the number might well be placed at thirty-one. Why not make it twelve or at most fourteen and, with the exception of the Gulf, the inter-mountain country and the Pacific coast, which for geographic reasons should have one school each, confine instruction in medicine to the metropolitan centers of the Atlantic coast and the middle west. There is really no reason why twelve well endowed medical departments of established universities in our large cities cannot adequately provide all the physicians needed in America. There are abundant reasons why such properly equipped medical schools, and only such, should be permitted to teach medicine in this country.

It is manifest that in reducing the number of colleges we shall have taken the first step toward securing adequate endowment, toward stimulating research work, toward paid clinical and laboratory instruction and toward founding departments for post-graduate study which shall prepare men for special practice.

It has always appeared singular that the degree of Doctor of Medicine should have been conferred upon the completion of such a limited curriculum. Were we to grant the Bachelor degree in the undergraduate course and reserve the Doctorate in Medicine for the completion of a course of post-graduate work leading up to the ultimate qualifications for the various specialties, it would be more consistent with the accredited value of these degrees. Besides, it would determine the precise status of the possessor of the Doctor degree in the community where he is to become established.

An attempt has been made from time to time to patch out the obviously deficient training of the ordinary medical course by attendance on some so-called "post-graduate school." This American institution for subsidiary teaching has no doubt found some excuse for its existence in the meager opportunities for special clinical study provided by many medical colleges. If it has fallen into disesteem among a strong element, it is due in large part to its detached and independent relationship with the units

of medical teaching. If we are to establish post-graduate courses which shall inspire confidence and approval they must be the direct and natural outgrowth of the undergraduate work and must lead eventually to a definite post-graduate degree. Because we have in the past chosen to ignore this very logical fact, our post-graduate schools have fallen into disfavor.

One of the most potent influences compelling special post-graduate study, is the demand made by the evolution of medical science for the segregation of work. However much we may have admired the versatility of the physician of an earlier generation, however much for material reasons a practitioner may still prefer to be considered competent to meet every demand of an indiscriminating public, the development of the highest efficiency can come only through an intelligent, consistent and strictly honest division of labor. If we may except the one primary factor of inadequacy of training, the American profession may be considered as suffering chiefly from an astonishingly generalized practice. If this evil were necessary it might be endured with some degree of patience. It is not only unnecessary but it is to-day the most retarding and deteriorating influence in the progress of medical science. When we behold the spectacle such as may be observed in many American cities, of from thirty to fifty per cent. of its practitioners undertaking the difficult and delicate responsibilities of major surgical operations with, in the majority of instances at best only a brief internship in some hospital or an occasional operation on a private patient to train them for these serious duties; when we see men assume the grave and oftentimes complicated duties of obstetric practice, with never a thought of a pelvic measurement and with perhaps a more or less constant attendance upon cases of sepsis or acute infectious disease, is it singular that disaster should follow in the wake of such presumption?

The people have a right to demand of us that we shall be fully qualified to deal with the difficult problems of general surgery before asking them to trust their lives to the grave hazard of a major operation. They have a right to demand that the training shall be special, extended and mature and certified as such by a duly delegated board of master surgeon examiners.

Is this asking too much of modern American medicine? England has secured such a safeguard to her people for generations and her surgeons have been proud and glad that their guild should be marked with such a high equalizing distinction. We must come to it here and soon if we are to save the good name of the American surgeon from the obloquy of the promiscuous "operator."

Students of medicine should be encouraged to determine early what special line of work they will devote their lives to. After the completion of the undergraduate course with two years general interne work in an accredited hospital, the student should take at least three years post-graduate work on the specialty of his choice. During this time he should be taught to determine his judgments on the principles which govern in medicine and surgery, just as keenly and conscientiously as he enters on his technical research and clinical observations. If possible after taking his post-graduate degree, which should be a Doctorate in his specialty, he should be required to spend one or two years at least as assistant to a master surgeon or other specialist, as the case may be, before he may be licensed to practise his specialty.

Such a preparation and post-graduate degree should entitle the candidate to practise his specialty without further examination from any board in any commonwealth in the Union. It would instantly establish officially his legal and professional status in any community. In surgery it would convey the same distinction and a higher degree of practical proficiency, as the F.R.C.S. does in England.

It ought not seem necessary to offer any extended argument in support of these ideals. The abuses which exist to-day are the logical outgrowth of the imperfect organization of our educational forces. We are suffering from scattered energies, which eventually must be focalized into a few richly equipped and endowed centers of medical education. Until this is accomplished it is worse than idle to formulate a scheme of instruction looking to post graduate degrees. But when it is accomplished, as soon it must be, we shall recognize, and the people will gladly accept the post-graduate degree in medicine as a distinguishing mark of qualified proficiency, a sufficient and just title to assume the responsibilities of a special line of practice.

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