

association of american medical colleges

AGENDA FOR ORGANIZATION OF STUDENT REPRESENTATIVES

ADMINISTRATIVE BOARD MEETING April **9**, 1986

AAMC Headquarters

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Suite 200/One Dupont Circle, N.W./Washington, D.C. 20036/(202) 828-0400

AGENDA

OSR ADMINISTRATIVE BOARD MEETING

April 8, 1986

Conference Room, AAMC Headquarters

I.	Call to Order	
II.	I. ACTION ITEMS	
	Α.	Approval of January Meeting Minutes
	В.	Nomination of Student Participant on LCME
	с.	Executive Council Agenda Action Items
·	•• ·	 Revision of the General Requirements Section of the Essentials of Accredited Residencies (Item F) Report of the Committee on Financing GME (Item G) Interpreting AAMC Policy in Treatment of Irregularities in Medical School Admissions (Item J) Changes in GME Training Requirements (Item K) Proposed Medicare Regulations on Payments for Medical Education (Item M)
III.	I. DISCUSSION ITEMS	
	Α.	Annual Meeting Program Decisions
	Β.	Sharing Articles of Interest
	с.	Executive Council Agenda Discussion Item on Marketing and Advertising: The Role of the AAMC
IV.	V. INFORMATION ITEMS	
• .	Α.	Legislative Update from David Baime
	В.	Project Coordinator Updates
		 Survey with Association of Teachers of Preventive Medicine on Preventive Medicine in Medical School Curricula Comparison of Problem-Based Curricula with Traditional Gedsundheit Institute Presentations
	С.	Regional Chairpersons' Reports on Spring Meetings
	D.	Report on OSR Budget from Robert Beran, Ph.D.
v.	01d	Business
VI.	New	Business
VII.	Adjo	ournment

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ADMINISTRATIVE BOARD MEETING

ASSOCIATION OF AMERICAN MEDICAL COLLEGES ORGANIZATION OF STUDENT REPRESENTATIVES MINUTES January 21 and 22, 1986 Washington, D.C.

Rick Peters, <u>Chairperson</u> Vicki Darrow, <u>Chairperson-Elect</u> Ricardo L. Sanchez, M.D., M.P.H.*, <u>Immediate-past</u> Chairperson

Regional Chairpersons:

AAMC Staff:

Robert Beran, Ph.D.* Janet Bickel Paul Elliot, Ph.D.* Joseph Keyes* Nancy Seline* Kat Turner* August Swanson, M.D.*

Guests:

Patch Adams, M.D.* Ted Rock*

*Present for part of the meeting.

I. OSR Proposal for Gesundheit Presentations at Medical Schools

Rick Peters called the meeting to order at 1:00 p.m. and asked Patch Adams to describe the proposal. Support would be sought. to underwrite the costs of sending Patch to medical schools for presentations that could last from 24 hours to 5 days; the trips could be regionally organized and funds administered through the AAMC in a way similar to AMSA's local project grants. The Board agreed that an OSR project along these lines would be very worthwhile given Patch's ability to inspire medical students and others about the joys of medicine. Joann Elmore suggested that since Patch Adams is giving AMSA's pre-convention keynote address this spring, all Consortium of Medical Student Group members could be invited, with the idea of exploring whether the proposal should be a Consortium project. Because of the desire to move quickly in the proposal development, the Board decided to keep it within the OSR/AAMC. Rick and Joann agreed to work on an outline, and Jim Stout, to take a lead in the writing, with the hope of having a proposal by the April Board meeting ready to pass through AAMC channels.

II. OSR Annual Meeting Review and Planning (October 24-27, 1986) New Orleans)

The OSR Board reviewed last year's program with an eye for problems. Mentioned were: lateness of curriculum vitae submissions, sessions beginning late because of students' not arriving on time, lack of optimal preparedness on the part of the Administrative Board

Joann Elmore Joanne Fruth Dan Schlager Jim Stout members for leading small group sessions. In addition to these areas, suggestions for improvements included: more consideration of scheduling meetings at night, more variety in the meeting, Board members' staffing a booth beginning at noon on Friday to help orient new OSP members, trying a Big Brother/Sister assignment for new members, scheduling an orientation session during Friday afternoon.

Rick Peters noted that the AAMC Minority Affairs Section had suggested that the overall Annual Meeting theme be "Minorities in Medicine" but this was rejected in favor of "Leadership". He stated the hope that OSR would adopt "Minorities in Medicine" as its theme, at least for one of its main programs. The following topics emerged from a general discussion of possible programs:

- A. Minorities in medicine Minorities' contributions to science (Ivan Van Sertima, Josef Ben Yohanna) Access to medical education
- B. Community service (Don Kennedy, Victor Sidel, Jack Geiger)
- C. Health promotion and prevention (Michael McGinness)
- D. Alternative health care providers
- E. Emerging health care delivery modes, e.g., HMOs, PPOs
- F. International health (because knowing about different systems educates people about the strengths and weaknesses of their own)
- G. Learning to understand institutional values (retaining one's humanism in the face of institutional politics)
- H. GPEP implementation
- I. Computers in medicine
- J. Impaired students (Andrew Weil)

Janet Bickel told the Board that the AAMC President's office was informing constituents of space restrictions in the New Orleans Hilton that will very likely limit the number of break-out rooms available to any one group (except on Friday). She noted that OSR's plans need to be finalized at its April 9 Board Meeting, and she also presented an outline for an Annual Meeting presentation on "Human Aspects of Innovative Teaching Approaches", just received from Drs. Medicine: of David Rosen (Rochester) and Alan Kliger (Yale). The Board decided that because of all the other topics under consideration, it could not make a definite commitment to accept this offer before its April meeting but that a small interactive workshop on this subject would probably Rick requested Board members to arrive in April with be very welcome. well-developed ideas for programs and asked OSR members (via these minutes) to contact Board members with suggestions (OSR Board roster attached to minutes).

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III. Nominees for Student Openings on Committees

The Board requested staff to send student affairs deans a copy of OSR committee openings so that they can help publicize them; deans can also be informed that the Board does not require academic information about applicants in their supporting letters. The OSR Board considered the high qualifications of aIT applicants for the openings and nominated students as follows:

<u>Group on Student Affairs Committee on Student Financial Assistance</u>: John Muller, St. Louis University

<u>Flexner Award Committee</u>: Kent Wellish, University of Arizona <u>Association of Teachers of Preventive Medicine Board of Directors</u>: Mark Blumenthal, Rutgers

<u>Women in Medicine Planning Committee</u>: Joanne Fruth, Medical College of Ohio (and for 1987, Kay McKay-Ringer, U. of Kansas -- if she is able to attend the 1986 Annual Meeting).

IV. <u>Report of the Steering Committee on the Evaluation of Medical</u> <u>Information Science in Medical Education</u>

Kat Turner, AAMC staff for this Committee, briefly introduced this Report, stating that in keeping with AAMC practice in other areas, the Report does not dictate to schools any structure or rules for integrating medical informatics into the curriculum. The Report, does, however, summarize the state-of-the-art in the areas of medical literature databases, computer-assisted medical decision-making, and computer-based medical education, and the Committee has received many requests for an educational document of this sort. Rick Peters stated that the Report provides a good up-date and illustrates how little energy medicine has put into computer uses compared, for example, to business and industry. Kat suggested that the introduction of computers in medical education will be a slow educational process; it is likely that the academic community will ask major foundations to adopt this as a top priority. The Board approved the Report for distribution (scheduled for early March) and requested that OSR members each receive two copies, so that OSR alternates can have one and/or OSR members can give one to the faculty member considered most likely to benefit from it.

V. Activities of the AMA/Medical Student Section (MSS) Computer Services Liaison Committee

Ted Rock, OSR member from Pittsburgh and member of this AMA/ MSS Committee, presented information on current projects of this Committee which was started last year to promote computer literacy among U.S. medical students:

- Establishment of an archival system of NBME Part I review materials which will be available on-line at no charge (except long-distance phone charge) to all members of the AMA/MSS (and thus by extension to all U.S. medical students). This information has been compiled by students at the University of Pittsburgh;
- 2) Improvement and maintenance of the Senior Elective Exchange Program Network (SEEPNET), a data base of information to be used by medical students seeking fourth

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year electives and residencies at institutions other than their own. Included are names and addresses of student, faculty, and administrative contacts, as well as hospitals where fourth year electives and/or residencies may be sought. Updated contacts to be entered into this data base may be sent to:

Stephen Treon, CSLC Chairperson M-218 Scaife Hall, University of Pittsburgh Pittsburgh, PA 15261 (W) (412) 624-2486 (H) (412) 687-3012; and

3) Efforts to convince GTE Telenet to offer line time without charge (off-peak hours) to medical students who wish to use the GTE/AMA Medical Information Network.

Ted Rock answered questions about these projects and requested OSR to encourage the Council of Deans to make microcomputer hardware and modems available to medical students; the costs of these are beyond most medical students but students can increasingly benefit from computer access. Rick Peters thanked him for his presentation and noted that OSR would continue to explore ways within the AAMC to increase students' access to computers.

VI. "Critical Issues in Medical Education"

Rick Peters summarized for the Board the evolution of this OSR position paper, and stated that he had incorporated comments received from the OSR Annual Meeting discussion groups and from individual OSR members. He asked for any additional comments from the Board, and several members offered suggestions. The Board approved the paper for distribution to the Administrative Boards of the AAMC Councils and to the OSR membership and thanked Rick for his dedicated work on it. The Board requested staff to select a color other than pink for OSR agendas and that the title page of the "Critical Issues" paper be printed in that color.

VII. Spring Issue of OSR Report

Vicki Darrow suggested that the "Critical Issues" paper, with appropriate editorial changes, be published as the next issue of <u>OSR</u> <u>Report</u> because it explicates many OSR goals about which most medical students know very little. The Board agreed that this was a good idea and also approved inclusion of a "Letters to the Editor" section, using correspondence generated by last Fall's issue "Medical Students and Nurses: Becoming Beter Allies". Vicki agreed to write a "con" letter if one is not received from constituents.

Rick Peters expressed the view that the paper and the Match by Jack Graettinger in the OSR agenda was not suitable for <u>OSR Report</u> but belonged in the <u>NRMP Directory</u>. He asked Board members to volunteer to write articles for the Fall issue, and the following agreed to produce cutlines by April: Robert Welch (changes in the medical-school applicant pool). Jim Stout (what do medical students need to know vis-a-vis malpractice) and Joann Elmore (public service and health promotion).

VIII. The meeting adjourned at 6:00 p.m.

IX. The meeting reconvened at 9:00 a.m. the following day, and the Board spent about an hour discussing its potential directions and goals, without staff present.

X. <u>Liaison Committee on Medical Education (LCME) Involvement</u> in the Accreditation of Foreign Medical Schools

Joe Keyes, Director, AAMC Department of Institutional Development, summarized the practical difficulties of LCME involvement in the accreditation of foreign medical schools. This issue is receiving increasing attention because of the large number of Americans attending medical school abroad and because of the Pepper Bill (H.R. 3485) which would require the Secretary of Health and Human Services to provide for a system of accreditation of courses of study in medicine offered by medical schools located outside the U.S.. He offered background on why accreditation is worthy in its own right and explained his view that the LCME has no responsibility to accredit institutions He also summarized the conflicting position in outside the U.S. In its discussion of this issue, the support of the Pepper bill. Board reconginized the many problems with LCME involvement but hoped that the AAMC could in some way be helpful in assuring the quality of foreign graduates who complete their clinical education and begin practice in the U.S.

XI. Coordinated Medical Student Loan Program (CO-MED)

Bob Beran, Director, Division of Student Programs described the progress achieved since September in flesning out this alternative loan program and the status of negotiations to enter into contracts with a national lending institution and the Higher Education Assistance Foundation (HEAF) will act as loan guarantor. He listed numerous advantages to students, including higher maximums and vertical consolidation of loans. Paul Elliot summarized reasons for confidence in HEAF and explained the increasing need for this new program given the likelihood of slashes in the GSL program resulting from Gramm-It was noted that because this loan program, which AAMC Rudman. hopes will be available for 1986-1987, will make financial aid officers' lives simpler, they will be able to turn their attention to creation Paul Elliott also discussed the of better debt management counseling. need for more imaginative uses of scholarship funds, e.g., to pay accruing interest, and for more work-study arrangements, which tend to be difficult and costly to institute.

XII. Malpractice Insurance Legislation

Nancy Seline from AAMC's Department of Teaching Hospitals gave an overview of pending legislation which would establish a federal incentive grant program for states that reform their laws governing malpractice insurance. Proposed are: a) limiting what lawyers can earn from malpractice settlements, b) requiring health care providers to have a risk management program c) requiring insurors to make available to licensing boards data on settlements and to establish risk management programs which must be attenued by professionals seeking malpractice insurance; and d) authorizing state agencies to enter into agreements with professional societies to review malpractice actions or complaints against health care professionals. She summarized critics' views of the legislation, emphasizing that this area has traditionally been under the jurisdiction of individual states, and asked for the OSR Board's comments on the appropriate role for the AAMC in advocating malpractice reform.

Members of the OSR Board cited a need for more data about the genesis of the malpractice problem and suggested that the worst offenders are probably out of the mainstream of academic medical The discussion next focused on what medical schools can do centers. to help prevent malpractice and the importance of not graduating incom-Medical education should place more emphasis on 1) petent students. developing an excellent patient/physician relationship, 2) writing good progress notes and proper documentation, 3) learning good habits of peer syview and self-policing and 4) creating jurisprudence courses which help studetns to focus on the patient/physician relationship but also to understand how malpractice has altered medical practice. The Board agreed that the AAMC should help its members to address the shortcomings in medical education which contribute to the malpractice problem and help to decrease medical students' and residents' paranoia regarding their vulverablity to malpractice suits so that defensive medicine does not replace a true clinical education.

XIII. Ad Hoc Committee on Graduate Medical Education

Gus Swanson, Director, AAMC Department of Academic Affairs, summarized past AAMC recommendations on steps to improve the transition from undergraduate to graduate medical education. He noted that these exhortations designed to make graduate education more coherent have The charge to this new committee is to examine why, had little effect. despite all the effort, the problems have proven so elusive. Нe reiterated the need for academic leadership that was a central recommendation of the General Professional Education of the Physician (GPEP) After additional discussion of inherent difficulties in im-Report. proving graduate education and the content of this committee's charge, the Board asked that the AAMC appoint to the committee both a fourthyear medical student and a resident nominated by the OSR Board. Gus Swanson said that probably only one OSR-nominee would be asked to serve.

Gus next requested the OSR to take steps to improve seniors' response to the AAMC Graduation Questionnaire. It was suggested that OSR members can write a note to seniors urging them to complete the survey but that more forceful means undertaken by the Office of Student Affirs are much more effective. Ricardo Sanchez asked that an envelop be provided so that students can mail their surveys directly to the AAMC because of some paranoia about submitting school evaluations to the dean's office before graduation. The OSR Board also discussed the need to improve the Universal Application Form for Graduate Medical Education and to request again the cooperation of the program directors in using it. Rick Peters said he would raise this issue at the GSA Steering Committee in February and would volunteer to formulate appropriate revisions.

XV. Assocation of Teachers of Preventive Medicine (ATPM) Proposal

Kim Dunn gave background on ATPM's request for OSR cooperation in obtaining information on prevention-related teaching activities in

The new plan is as follows: 1) OSR members in medical schools. would be surveyed and asked to identify those faculty members who are active at their schools in the area of disease prevention and health promotion and to describe on-going innovative projects in these ATPM will design an evaluation form to send to these faculty, areas; 2) the results of which will form a computerized data-base on preventive OSR Board members agreed with the medicine contacts and activities. idea of ATPM's using OSR to expand its network, but some members questioned ATPM's inability to collect the above noted contacts on Kim explained that, because of lack of communication across its own. departmental lines, it is likely that faculty at work on projects that could be considered preventive medicine might not be appearing Vicki Darrow recommended approval of this OSR on any ATPM list. activity because it is supportive of innovative teaching activities and would give OSR members good experience in investigating their The Board agreed and decided to schools' curricula and structure. ask Mark Blumenthal (nominated to ATPM Board of Directors) to develop the survey to go to OSR representatives; it should have boxes to check The return deadline should appear wherever possible and be typeset. in large letters; after the deadline, academic affairs deans at nonresponding schools will receive the survey. Joanne Fruth agreed to be the OSR contact for this project, and the other regional chairpersons noted that they would also highlight this project, and spring meetings to build enthusiasm for it. 'ine board asked him to obtain assurances from ATPM that OSR members would receive a copy of the resulting information.

XVI. <u>Evaluation and Comparison of Traditional and Problem-Based</u> Learning Medical Education Curricula

Kim Dunn provided background on this proposal idea and on on-going discussions with Brownie Anderson in AAMC's Division of Educational Measurement and Research. Board members suggested various schools to Kim for the comparison which would attempt to gather students' perceptions of their learning experiences. One of the goals is also to add momentum to the problem-based learning movement. The OSR Board approved the proposal idea, and all who could agreed to meet with Kim the next morning to continue discussions.

XVII. The meeting adjourned at 5:45 p.m. (a three-hour break occured during this meeting for an orientation session with the new Administrative Board members, of the Councils).

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NOMINATING STUDENT PARTICIPANT TO LCME

Each year the OSR Administrative Board is asked to nominate to the AAMC Chairman a list of three candidates for the position of student participant on the Liaison Committee on Medical Education. Via an announcement at the Annual Meeting (and distribution of an application form and notice about the opening), the OSR members are asked to alert interested students. Dr. James Schofield (LCME Secretary and Director, AAMC Division of Accreditation) sends a call for nominations to U.S. medical school deans. All but one application in the enclosed packet, which was collated by Dr. Schofield, was obtained via a dean's nomination.

The OSR Board's discussion of the applicants' qualifications will focus largely on Board members' observations of the seriousness with which candidates appear to be pursuing a career in academic medicine, e.g., leadership in curriculum development.

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1986 ANNUAL MEETING PROGRAM DECISIONS

Page three of the January Board Meeting minutes shows the topics which the Board began considering as program subjects. Following are the OSR program schedules from 1985 and 1984, for your reference, and a letter from Dr. Delese Wear, offering to provide a session on starting a clinical reading group in literature and medicine.

Space requests are due to Ms. Kat Turner by April 21; program information for the AAMC preliminary program, by June 1; and final program information, by August 1. Therefore, this is the OSR Board's last opportunity to discuss all but minor program decisions. The more specific your ideas for sessions and background on potential speakers, the more progress the Board can make in agreeing on a program.

1985 OSR Annual Meeting Schedule*

Washington Hilton Hotel

Friday, October 25

9:00 - noon Adams - Resource Room for OSR Members Visiting Congressmen

3:30 - 4:30 p.m. Regional Meetings

Dupont - Central

Edison - Northeast

Farragut - Southern

Chevy Chase - Western

4:30 - 5:30 p.m. Thoroughbred

Business Meeting

7:30 - 9:00 p.m. Thoroughbred

Student Leadership Workshop

9:00 - OSR Reception - Division of Student Programs Suite (in Paul Elliott's name)

Saturday, October 26

8:30 - 11:30 a.m. Jefferson West

Plenary Session

From Apathy to Panic and Beyond: Actions to Shape a Better Education

Introductions: John A. D. Cooper, M.D.

Moderator: Ricardo L. Sanchez, M.D., M.P.H.

Lessons from History

Kenneth Ludmerer, M.D.

Lessons from the Health Care Environment

Arnold Relman, M.D.

Concluding Remarks: Richard H. Moy, M.D.

1:30 - 3:00 p.m. Small Group Discussions

Adams - Patient Interviewing as a Preclinical Student

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Alan Kliger, M.D.

Harriet Wolfe, M.D.

David Cowan) Yale U.

Lee Goldstein) Medical

Robert Mallieson) Students

Eugenia Vining)

Karl Luber, OSR Member, U. of California, San Diego**

Grant - An Experiment in Promoting Teamwork between Medical Students

and Hospital Administrative and Nursing Personnel

Elizabeth Calderon, M.B.A., Associate Hospital Director, Herman Hospital* Patricia E. Caver

James A. Chappell, M.D.

Gary L. Pattee, Fourth Year Medical Student, U. of Texas, Houston*

Lin C. Weeks, R.N., M.S.N.

Pamelyn Close, M.D.**

Edison - Curricular Integration of Health Care Cost Awareness and Ethics

Peter E. Dans, M.D.

Michael J. Garland, D.SC. Rel.

Gail Geller

Vicki Darrow, OSR Member, U. of Washington**

Hamilton - Preventive Medicine

Joan Altekruse, M.D., Ph.D., Chair, Preventive Medicine and

Community Health, U. of S. Carolina School of Medicine*

Dan Blumenthal, M.D., Chair, Community Medicine and Family Practice,

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Morehouse School of Medicine*

JoAnn Elmore, OSR Member, Stanford U.*

Preston Reynolds, Third Year Medical Student, Duke U.*

Kimberly Dunn**

Independence - Legislative Affairs Workshop

David Baime

Paul R. Elliott, Ph.D.

Jeff Stoddard

John DeJong**

Jackson - Financing Graduate Medical Education

James Bentley, Ph.D.

Nancy Seline

Kirk Murphy, OSR Member, Hahnemann**

3:30 - 5:00 p.m. Repeat of same discussion sessions

Plus:

3:30 p.m. Bancroft - Computer-Based Medical Education

Jack Myers, M.D.

Ricardo Sanchez, M.D., M.P.H.**

7:30 - 8:30 p.m. <u>Georgetown East - Medicine for Fun Not Funds</u> Patch Adams, M.D.

8:30 - 10:30 p.m. Regional Receptions

Sunday, October 27

8:30 - 9:30 a.m. Jefferson West - Meet the Candidate Session

9:30 - 11:30 a.m. "OSR/AAMC Future Challenges" Discussion Sessions

State - OSR Organizational Issues

Georgetown East - Issues in Admissions and College Preparation

Lincoln East - Issues in Basic Science Education

Lincoln West - Issues in Clinical Education

- 1:30 4:00 p.m. Ballroom East Business Meeting
- 4:00 5:30 p.m. Regional Meetings

Farragut - Central

Grant - Northeast

Edison - Southern

Chevy Chase - Western

*Titles and Institutions are given only for persons not listed in the final program.

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**OSR Member/Session Coordinator

Monday, October 28

1:30 - 3:00 p.m. Conservatory - Workshop

Aid for the Impaired Medical Student: A Program That's Working at U. of Tennessee James Stout

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Hershel P. Wall, M.D.

3:15 - 5:00 p.m. Conservatory - Workshop

Literature and Medicine: The Patient as Art

John H. Stone, M.D.

ORGANIZATION OF STUDENT REPRESENTATIVES

Friday, October 26

Regional Meetings ERIE -- Western PRIVATE ROOM 3 -- Southern PRIVATE ROOM 4 -- Northeast MICHIGAN -- Central

4:30-5:30 pm

3:30-

4:30 pm

BELAIR Program: "Becoming an Effective Change Agent and OSR Member at Your School" Mary E. Smith, M.D.

7:30-9:00 pm BELAIR Program: "The Physician as Health Advocate: Responsibilities and Barriers" Moderator: Steve Hasley, M.D. Speakers: Quentin Young, M.D. Robert G. Petersdorf, M.D.

Saturday, October 27

8:30- PRIVATE ROOM 2 10:00 am Business Meeting

10:15-PRIVATE ROOM 211:30 amIssue Identification Session

1:30-Small Group Discussions of Issues3:15 pmPRIVATE ROOMS 3, 4, 10, MICHIGAN
SUPERIOR A, BEVERLY, ASTORIA

3:30-5:00 pm BEVERLY Program: "Working with Nurses and Other Health Professionals: Issues and Assumptions" Ruth Purtilo, P.T., Ph.D. Ann Lee Zercher, R.N. Ann C. Jobe

ASTORIA

Program: "Skills for Success in Medicine" John-Henry Pfifferling, Ph.D.

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Sunday, October 28

8:30-9:30 am PRIVATE ROOM 2 Candidate for OSR Office Session 10:00-11:30 am Discussion Groups: "Leadership and Change: Putting GPEP to Work at Your School"

PRIVATE ROOM 3 Baccalaureate Education/Acquiring Learning Skills James Erdmann, Ph.D. Richard Peters

ROOM 418 Clinical Education Xenia Tonesk, Ph.D. Ed Schwager, M.D.

ROOM 419 Faculty Involvement August Swanson, M.D. Ricardo Sanchez

CONTINENTAL

Business Meeting

1:00-4:00 pm

4:00-5:30 pm Regional Meetings PRIVATE ROOM 5 -- Western SUPERIOR A -- Southern 419 -- Northeast MICHIGAN -- Central

Monday, October 29

1:30-3:00 pm ROOM 414 Workshop: "National Resident Matching Programs: The Nuts and Bolts" Martin A. Popps, M.D. Pamelyn Close, M.D.

2:30-4:30 pm ROOM 415 Workshop: "Medicine as a Human Experience" David H. Rosen, M.D.

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Northeastern Ohio Universities COLLEGE OF MEDICINE

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31 January 1986

Janet Bickell Association of American Medical Colleges One Dupont Circle, N.W. Suite 200 Washington, DC 20036

Dear Janet:

Enclosed you will find the manuscript which describes our work at NEOUCOM with clinical reading groups in literature and medicine. After attending John Stone's session last year, I realized that many students are intrigued with the idea yet have little or no formal, required coursework in literature in their medical education. In fact, as you might recall, John answered several "how do you start a reading group" questions. Our experience has been highly successful, and may be of interest to students in As such, I would be pleased to present it or any other settings. part of it formally or informally, and would appreciate your comments regarding its potential for publication. I'm sure I don't have to tell you of the difficulty of finding a proper forum for this kind of scholarship in a clinical context.

I wanted to mention, also, what an extraordinary presentation David Rosen gave our medical students last weekend. He based it in large part on his book, <u>Medicine as a Human Experience</u>, yet designed the seminar to engage students <u>actively</u> in interviewing processes. I would highly recommend him for a student session at the annual meeting of the AAMC.

Thank you for your interest, and I look forward to hearing from you.

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Sincerely yours,

Nelese Wear

Delese Wear, Ph.D. Program Associate Human Values in Medicine



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SHARING ARTICLES OF INTEREST

At its January meeting, the Board decided to include one or two brief articles, suggested by one of its members, in its agenda as stimuli for discussion on areas of likely interest. Jim Stout suggested the Eli Ginzberg article and Janet Bickel included the K. Danner Clouser piece, following.

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