

Public release date: 3-Oct-2005

Contact: Cindy Fox Aisen

caisen@iupui.edu

317-274-7722

[Indiana University](#)

Examining how medicine is taught

Reading and changing the culture

INDIANAPOLIS – Rigorous course work, state of the art laboratories, relevant textbooks and demanding clinical rotations produce technically competent physicians. But surveys say that in addition to highly qualified care givers, we want doctors who are compassionate and know how to communicate well when caring for us and our loved ones, yet the environment in which medical students become physicians is often not conducive to producing these caring qualities.

Teams from eight medical schools across the United States and Canada met recently on the campus of the Indiana University School of Medicine for the nation's first conference focusing on assessing and improving the organizational environment and culture of academic medical centers. Their goal -- to learn more about the social environment, also known as the "hidden curriculum" of medical schools, and how it can be enhanced to produce both technically competent and compassionate physicians.

"Deans and other medical school leaders took advantage of this unique opportunity to use the Indiana University School of Medicine as a laboratory for exploration of the hidden curriculum, honing their capacity to see and hear with their own eyes and ears this critical aspect of physician education," said Thomas Inui, M.D. "They did not come to Indiana University because we are an ideal environment or exemplary environment but because we are at work on our own hidden curriculum and gave them a chance to immerse themselves in an organizational culture under transition." Dr. Inui is president and CEO of the Regenstrief Institute, Inc. and associate dean for health services research of the IU School of Medicine. He is one of a team of educators leading the on-going efforts to transform the way future physicians are taught at the IU School of Medicine.

Teams from Baylor, Dartmouth, Drexel, McMaster, Southern Illinois University, University of Missouri-Columbia, University of North Dakota, and University of

Washington medical schools shared their own experiences as they observed daily routines and faculty-student interactions at the IU School of Medicine. In addition to attending classes, joining faculty and students engaged in patient care and observing an admissions committee session, conference participants listened in as IU School of Medicine students, in a typical monthly session, read aloud narratives related to their perceptions of how professionalism is expressed in the social environment of the school.

"The issues that come up in these sessions are among the most complex and challenging ones we face as faculty physicians, and students can offer fresh perspectives on them," said Debra Litzelman, M.D. "If we push information and suggestions at students as if we were preaching, we are less likely to be successful than if we let the students talk about their own experiences. The questions and thoughts that arise in these discussions are insightful, and we find that the students are pulling information from the faculty. They ask, 'What do you think about this? What do others think about this?' It's a really different teaching dynamic. We are in a dialogue that centers on their experiences and their questions." Dr. Litzelman is associate dean for medical education and curricular affairs at the IU School of Medicine and a conference organizer.

Back home, on their respective campuses, meeting participants are beginning to test drive some of what they discussed as they examine their hidden curriculum. Some will be pursuing concepts they had before they gathered; others are exploring ideas garnered at the conference.

"Experimenting with some of these approaches is the way forward. We are not going to engage in long-term campaigns or rolling out big projects. We are, instead, going to try innovative approaches like the teaching from student stories. Little steps are more likely to succeed than big ones," said Dr. Inui.

"We know the public wants compassionate doctors, and the good news is that medical schools across the country and Canada are eager to make the changes needed to produce them. In this work we sense that we are joined with the public, because this is what the public wants of their doctors," he added.

###
