Physicianship: a framework for a renewed undergraduate medical curriculum

Presentation to the Resource Committee on Professionalism
AFMC annual meeting
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Donald Boudreau
Presenters today:

Donald Boudreau, MD
Richard Cruess, MD
Sylvia Cruess, MD
Tom Hutchinson, MD
Definition of ‘Physicianship’

“Healing, in the context of professionalism, is the physician’s primary obligation.”
A brief historical perspective of curricular change:
“Its critical method [scientific research] will dominate all teaching whatsoever; but undergraduate instruction will be explicitly throughout conscious of its professional end and aim. In no other way can all the sciences belonging to the medical curriculum be thoroughly kneaded. An active apperceptive relation must be established and maintained between laboratory and clinical experience. ... There is no cement like interest, no stimulus like the hint of a coming application.”

Abraham Flexner, 1910
“They [the fundamental sciences] furnish indeed, the essential instrumental basis of medical education. But the instrumental minimum can hardly serve as the permanent professional minimum. It is even instrumentally inadequate. The practitioner deals with facts of two categories.”
Over the past century, integration of these ‘two categories’ has been an overriding preoccupation.
The Physician as Healer and Professional
Episteme, Techne, Phronesis

- science vs. humanities
- basic vs. clinical
- art vs. science
- biomedical vs. biopsychosocial
- orthodox vs. alternative
- allopathic vs. complementary
- psychosomatic vs. physical
- nature vs. nurture
- universal vs. particular
- cure vs. heal
- evidence-based vs. narrative based
- Hippocratic vs. Asklepiian
- disease vs. illness
Illness vs. Disease

- biologic disorder

DISEASE

- psychologic disorder
- sociologic disorder

ILLNESS

Reading A, 1977
The Physician as Healer and Professional

*Episteme, Techne, Phronesis*

Patient-centred medicine

- Dialogue weaves back and forth with Mutual interpretation

Patient's Experience of Illness  
Doctor's Diagnosis of Illness

McWhinney IR, 2001
Curing vs. Healing

Milstein J, 2005
Physicianship: Goal & Objectives
Goals:

That the physicians graduating from this program uphold the values and demonstrate the behaviours and attitudes necessary to become professional healers; that they become competent in the clinical method, patient-centered in their approach and reflective in their practice.
Physicianship is seen as an ‘integrator’ i.e. serves to integrate the scientific and humanistic views of medicine into one coherent stereoscopic image.
A metaphor we have found to be useful:
People are really different!
Specific objectives:

Physicianship is currently ‘captured’ with a list of 64 objectives. These are organized by themes: professionalism; healer role; bioethics and health law; population medicine; palliative care medicine; clinical method.

Handout of objectives to be distributed. Available upon request from anne.briggs@mcgill.ca or donald.boudreau@mcgill.ca
Behavioural objectives:

Most of the behavioural objectives are considered to be important for both the healer and professional roles; some are more closely aligned with one or the other. We have created a Venn Diagram to illustrate this.
Clinical Observation
Attentive Listening & Communication Skills
Physical Examination
Clinical Thinking & Reasoning
Description & Narrative Competence
Self-reflection
Curriculum schema
### Basis of Medicine (BOM)

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Physician Apprenticeship

### Introduction to Clinical Medicine (ICM)

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P-2B
P-2A
Physician Apprenticeship

### Core Clerkships

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Physician Apprenticeship

### Senior Clerkships

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Physician Apprenticeship
## Examples of content in specific courses:

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<th>Course</th>
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<tbody>
<tr>
<td>P-1</td>
<td>fundamental concepts; observation; listening; ethics</td>
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<td>P-2A</td>
<td>communication skills</td>
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<tr>
<td>P-2B</td>
<td>physical examination; critical appraisal</td>
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<td>P-3</td>
<td>healing</td>
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<td>P-4</td>
<td>population medicine; social contract</td>
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<tr>
<td>P.A.</td>
<td>reflection; narrative</td>
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Key features of the Physicianship component:

- it is core curriculum i.e. mandatory participation
- it is longitudinal i.e. present over 4 years
- it is accompanied by activities intended to stimulate reflection - particularly on values and attitudes towards the profession and its mandate
- it enjoys broad support of major stakeholder groups
- it will be subject to on-going program evaluation
The Osler Fellows:

- they teach in the P.A. - is the ‘flagship course’
- they are all clinicians
- they have been selected with student input
- P.S. is dependent on important financial support from the Faculty (since the Fellows are salaried)
- it is accompanied by an innovative approach to faculty development called the Osler Fellowship
- three important teaching ‘tools’ are: the physicianship portfolio; the Simulation Centre; narrative competence
Next speakers:

Dr. R. Cruess and Dr. S Cruess will speak on the teaching of professionalism.

Dr. T. Hutchinson will speak on the Healer role and McGill’s approach to the teaching of the healer role.