

REQUIREMENTS FOR MEDICAL
LICENSURE*

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The amazing rapidity with which knowledge applicable to medical practice has been and continues to be accumulating makes the task of medical teacher and medical student alike most formidable. The marvellous triumphs of recent years have not only given a tremendous impetus to research but have let loose such a flood of benefactions as to establish research on a quite unprecedented scale. The effect of this on the medical curriculum of the future cannot be clearly foreseen, but we must expect results which will greatly modify present conceptions,

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and we cannot flatter ourselves that all the teaching of to-day will apply to the medical practice of even the next decade.

It is evident, then, that in the teaching of medicine there should always be thought of future developments. It may be fairly assumed that what we are fond of terming the "basic" subjects will remain basic, but this does not preclude modification of our ideas in respect of their relative importance and the manner in which they are to be presented. Obviously, the teacher must take note of every real advance and of everything that promises to be serviceable to the future practitioner. The medical curriculum can never be static, and if it is not to become as fearsome as that planned for Gargantua there must be constant winnowing of the material used by the teacher. Every year there must be new matter presented, more or less change of emphasis, more or less elision. The student at graduation must have a fair comprehension of the state of medicine as it is at the time. It is thus that the teacher must prepare the student for the practice of his profession.

But while the teacher is thus occupied, the student has to think of more than preparation for practice. There are the examinations to be passed before he can obtain his degree, and the examinations to be passed before he can obtain his license. Preparation for practice and preparation for examinations are not one and the same thing, and most teachers know students whose first concern is preparation for examinations. Nor is this a matter to cause great wonderment. The examination for the degree is generally regarded as the lesser of the two evils. In this the student meets men with whom he is familiar. For the license, however, he must present himself before examiners who are not all engaged in teaching, who will know him only as number such-and-such (perhaps thirteen), and some of whom are very likely to value answers which include the most modern views more conservatively than his teachers would. If he be of the timid sort, he will not acquit himself before such an examiner as he would before one with whom he is acquainted. Examinations, even under the most favourable circumstances, are sufficiently disconcerting, and one whose *tubera ischi* are already tender from much sitting may be pardoned his inability to anticipate the possibility of even a figurative kicking-out without wincing. Only those who are brought into very intimate contact with students can appreciate the dread in which examinations are held, the greatness of the relief experienced when they are completed successfully, or the bitterness of the disappointment caused by failure. The stress of such an ordeal should not be lightly regarded, and the wisdom of the practice of subjecting students to a post-graduate examination under conditions which are seldom if ever more exact-

ing, although usually more trying, than those of the University may well be questioned.

It is true that until within quite recent years the product of many medical schools on this continent was such that the public interest demanded an independent examination before a license to practice could safely be issued. This scarcely applies to Canadian schools, which have always maintained a reasonably high standard, but rather to certain inferior non-Canadian schools which attracted the less discriminating of our own youth. Until recently, moreover, a much larger proportion of our young Canadians chose to study without our borders than is the case to-day. At present we can educate in Canada all that are needed to make good the wastage in the ranks of the profession, and we can claim without hesitation that our Canadian medical schools rank well with those of any other nation. Except for graduates of other than Canadian schools there no longer exists the need for the duplication of examinations with all that that entails.

I am inclined to go farther and to contend that the present system is not only unnecessarily cumbersome and burdensome, but that it is really a hindrance to medical education. My feeling is that if the student were relieved of the dread of examinations by men who are not teachers, he would prepare less for examination and more for the actual practice of his profession, and that the teacher, relieved of the need of presenting possibly antiquated matter in order that the not-quite-up-to-date examiner may be satisfied, would be able to deal more thoroughly with really essential material. Perhaps, too, it would be easier for the schools to break away from the pernicious lock-step if they were not obliged to keep an eye to the requirements of provincial or other examining boards.

I trust that I will not be understood as implying that non-teachers are necessarily incompetent to examine. The point that I wish to make is, of course, that the man engaged in teaching is perforce compelled to be more keenly alert to the newer developments than one who has less insistent stimulus to watchfulness of what is going on in all parts of the medical field. The latter cannot reasonably be expected to be as fully *au fait* with the disclosures of the research laboratory and the research clinic as the former, and he must necessarily set questions which will be answered in a way which his own knowledge will permit him to value properly. However good and practical his questions may be, they may fail to bring forth very important information which the student has acquired.

Modern conditions give a clearer meaning to Sam Weller's characterization of medical students as "sawbones in barnacles." For them it is both the devil, as represented by a

type of examination which changes comparatively little, and the ever restless, ever changing, deep sea of the medical curriculum. If they choose to serve the devil, they will stand still in the sea—where standing favours incrustation with barnacles.

Now to my claim that the examiners who are best qualified to pass upon the fitness of men for practice are those who, through intimate contact with such men in class room, laboratory and clinic, have learned their aptitudes, their personalities, and their characters, I wish to add my contention that no medical school should be permitted to continue if it graduates men who are not reasonably well prepared to enter upon the practice of medicine. I contend that the State should exercise its control primarily upon the school and only secondarily upon the graduate. The school can discipline the undergraduate only; if discipline is required thereafter, the licensing body alone has jurisdiction. Moreover, there may be justification for a further test of candidates for licensure who come from foreign schools over which no Canadian state agency can have control. Consequently there is need for continuance of the several licensing bodies. But our Canadian schools can, and in my opinion should, be placed under such official supervision by the State as will ensure their proper conduct and eliminate the need for more than the regular university examinations.

In the United Kingdom such supervision is exercised by the General Medical Council, and graduates of schools which maintain a standard satisfactory to the Council are admitted to licensure without further examination. Why should a similar system not meet the needs of Canada? It is surely not impossible to secure such amendments to the federal and provincial Medical Acts as would permit the Medical Council of Canada to function along lines very similar to, although they could not be identical with, those of the General Medical Council.

If the Medical Council of Canada should arrange for suitable appraisal of the courses and examinations of the several universities of the Dominion, with the understanding that its certificate would be granted to graduates of schools which could be approved by the appraisers, surely such certificate should be acceptable to the provincial licensing boards. Such an arrangement would imply that the approval of the appraisers would be withheld from any school which did not maintain a sufficiently high standard, and would thus prove a strong stimulus to the very best effort on the part of every school.

Other arguments in favour of such an arrangement are not hard to discover. The cost of licensure would almost certainly be reduced—a matter of no small importance to many of the most deserving aspirants to a place in the medical world. Money thus saved would be available for the prosecution of graduate studies. As already suggested, it might aid us in getting rid of the lock-step into which we fell so readily and from which, I fancy, we all wish to escape. Whether we wish to admit it or not, I am inclined to believe that all our schools are, to a greater or less degree, held in leash by the licensing boards. Relief from such restrictions would allow both school and student greater latitude to develop strong points than is possible under existing conditions.

I have, for these reasons, and for others of perhaps less moment, to suggest that this Committee make representation to the Conference of Canadian Universities that each university should give consideration to the advisability of requesting the Medical Council of Canada to take the initiative in the endeavour to effect an arrangement which will remove the necessity of anything beyond university examinations in the case of graduates of Canadian medical schools.