

Leading Medical Education

Daniel C. Tosteson Medical Education Center Dinner

June 12, 1997

WE ARE ASSEMBLED, friends, colleagues, and family members all, to mark the conclusion of a historic Harvard deanship: Daniel C. Tosteson will leave his post in eighteen days, having held it – held it aloft – for 7,382 days, or approximately twenty years.

Longevity alone would make Dan Tosteson's deanship remarkable. His is a profession where many may seem to be called, but few are actually chosen, and even fewer survive, and far fewer yet can be said to thrive.

Yet our dean has thrived, and indeed triumphed, in a way that will not easily be rivaled, much less surpassed.

I have been asked to speak particularly about Dan as an educator – as someone powerfully committed to the education of students at all levels, of physicians, of patients, and of human institutions, such as this university.

It is the institutional dimension – a dimension that really embraces all the others – that I want to focus upon: partly because that is where Dan Tosteson has made one of his most visible, profound, and lasting contributions; and partly because

Leading Medical Education

almost all the odds are magnificently stacked against anyone who sets out to transform the curriculum, the pedagogy, the form and process, and consequently the content or substance of university learning. Now it is certainly true that professors of medicine – and medical school departments, organized as they are around intensive research – are known far and wide for their astonishing flexibility, malleability, and willingness to change at the snap of a decanal finger or two. Nonetheless, it is also the case that, until recently, scarcely any medical school has actually changed in a significant way its fundamental process of education.

Harvard has done so, and it has done so because of the vision, insight, relentlessness, persuasive power, and decisiveness of Daniel Tosteson. We should remember that, although academic, departmental, and other structures look like tiny boxes on an organizational chart, they are really made of concrete and steel, buttressed by adamantine marble. And the University as a whole – as well as the profession of medicine – often seems even more implacable than the departments. Caught between these twin forces, both exerting pressure from opposite directions, any dean is bound to feel at least some mild discomfort and constraint. It takes an ingenious person, skilled in prestidigitation, to turn so procrustean a predicament into something providentially creative.

Ogden Nash once wrote: “The turtle lives ’twixt plated decks / Which practically conceal its sex. / I think it clever of the turtle / In such a fix to be so fertile.”¹

Dan has been, between his plated decks, the soul of fertility itself, in the sphere of medical education. Let me mention the main reasons.

First, he recognized the rapid rate of change in scientific knowledge.

Second, he realized that full-scale mastery was beyond anyone, and that much of what one mastered would soon be obsolete in any event.

Third, he saw that the spirit of active learning, of inquiry and discovery, of learning how to learn – to frame the right questions,

The Professions, Communities, and Public Service

look for relevant evidence, frame hypotheses and test them, and arrive at conclusions based on less-than-full knowledge – that all of these were the constituents of real education. Of course, content was important, but content would change, and the habits and skill of active inquiry, research, and learning were needed for a lifetime. Next, he saw that the value of problem solving was critical: cases, small groups, tutorials, questions and answers, teamwork – not only in the classroom, but also in physicians' work.

All of this led, of course, to the creation of a powerful model in medical education – the New Pathway program that is now being emulated by many medical schools across the nation. The purpose of the new program is to help foster the kind of sensitivity in medical practice that Dan himself has described:

Each medical encounter is unique in a personal, social and biologic sense. Each patient and physician is an individual person reminded by the episode that brings them together that “brass, nor stone, nor earth, nor boundless sea, but sad mortality o’ersways their power.” Each patient lives in a specific social context. Each patient is the expression of a genome that has never existed before. All these aspects of uniqueness impose on both physician and patient the need to learn about the always new situation, to find the plan of action that is most likely to improve the health of that particular patient at that particular time. In this way of thinking, a doctor is a teacher helping the patient to learn about possibilities for living in a healthier way.²

Learning is the connective tissue everywhere, throughout the whole process – student, teacher, physician, patient: all seeking to understand, to solve dilemmas, and to keep inquiring for the sake of health and the ability to lead satisfying and productive lives.

In concluding, I would like to read a poem concerning the human spirit's unwillingness to accept limits in the quest to do the impossible – or nearly impossible. The poem has to do with taking the risk of planting a peach tree much farther north than peach trees should be planted, in the hope that it might with-

Leading Medical Education

stand all the forces marshaled against it, and bloom. It must hold out against the coldest, most formidable deep-winter weather – which is where the poem begins:

*We sit indoors and talk of the cold outside.
And every gust that gathers strength and heaves
Is a threat to the house. But the house has long been tried.
We think of the tree. If it never again has leaves,
We'll know, we say, that this was the night it died.
It is very far north, we admit, to have brought the peach.
What comes over a man, is it soul or mind –
That to no limits and bounds he can stay confined?
You would say his ambition was to extend the reach
Clear to the Arctic of every living kind.
Why is his nature forever so hard to teach
That though there is no fixed line between wrong and right,
There are roughly zones whose laws must be obeyed?
There is nothing much we can do for the tree tonight,
But we can't help feeling more than a little betrayed
That the northwest wind should rise to such a height
Just when the cold went down so many below.
The tree has no leaves and may never have them again.
We must wait till some months hence in the spring to know.
But if it is destined never again to grow,
It can blame this limitless trait in the hearts of men.³*

We can recognize Dan Tosteson here – sturdy against the elements, settling for nothing less than the best – pathways or peach trees, whatever the challenge, it will be met and overcome.

1 Ogden Nash, "The Turtle," in *The Selected Verse of Ogden Nash* (New York: Modern Library, 1946), 90.

2 Daniel C. Tosteson, "Learning in Medicine," *New England Journal of Medicine* 301 (1979): 690.

3 Robert Frost, "There Are Roughly Zones," in *The Poetry of Robert Frost* (New York: Henry Holt and Company, 1979), 305.