

EXTRACT FROM  
STATEMENT PREPARED IN APRIL 1966  
DEFINING  
PROGRAM TO ESTABLISH THE  
MOUNT SINAI SCHOOL OF MEDICINE

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## PREFACE

To those who have followed the progress of Mount Sinai Hospital over the years, its decision to establish the Mount Sinai School of Medicine will come as no surprise. The Hospital has long held that the best medical care can only be achieved in intimate cooperation with research and teaching. Mount Sinai has therefore assiduously applied itself to achieve distinction in these two areas. Its efforts have met with considerable success. Excepting those hospitals closely affiliated with large universities, Mount Sinai today receives the largest amount in Federal research grants in the nation through which some 200 projects are currently being financed. The Hospital has so expanded its teaching program that annually close to 300 residents, teaching fellows and interns are receiving necessary graduate education at Mount Siani.

Yet it is obvious that in the absence of a medical school at the Mount Sinai complex, the medical education program must remain only partly fulfilled. Moreover, the flow of the highest qualified medical leaders is increasingly toward affiliation with a medical center which includes a school of medicine as an integral part of the center. To these men and women, preference for academic rank and recognition, the stimulus of teaching medical students and other attractions of a first-rate medical school grow stronger each year. The establishment of a school of medicine is therefore an essential element in Mount Sinai's commitment of maximum service to the community.

No aspect of the School of Medicine has received more thoughtful consideration than the matter of the School's affiliation with a first-rate university. For several reasons, it seems wiser to seek a university affiliation at some later date. While awaiting the appropriate time for such

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an affiliation, the trustees of Mount Sinai have decided to proceed forthwith to establish a health sciences faculty at the Medical School to assure students immediate access to required university personnel.

In 1965, the Liaison Committee on Medical Education of the American Medical Association and the Association of American Medical Colleges qualified the school for Federal support by giving the U.S. Commissioner of Education "reasonable assurance" that it would be accredited. Actual accreditation cannot be given to any new medical school until the first class has completed its study. Early in 1966, the Medical School received provisional accreditation by the Association of American Medical Colleges.

In serving the community by the establishment of the School of Medicine, Mount Sinai will also serve the nation. There is a continuing and critical national shortage of physicians which cannot be eliminated without the establishment of additional medical schools. At full enrollment, the Mount Sinai School of Medicine will annually provide 5 per cent of the needed additional physicians in the nation and will increase medical school graduates in New York State by 10 per cent.

Mount Sinai, however, has set out to do much more than establish a school of medicine because much more than that is needed. The clear but disturbing evidence is that medical specialization threatens to so narrow the physician's outlook that he may lose sight of the patient as a human being, a family member and an individual citizen of the community. As more and more therapeutic and diagnostic techniques become available, the necessity to specialize will increase and as it does, the danger of depersonalization of medicine will grow.

To offset this damaging trend, the Mount Sinai School of Medicine proposes to develop men of medicine who are both specialists and deeply dedicated to the patient as a human being, not as "a group of biological reactions gone wrong." It is this human focus which has engendered so

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much excitement and enthusiasm for the project among the Mount Sinai Trustees, the Administration, the Medical Staff, and the distinguished National Panel of Educators who have served as advisors in the formulation of concepts and curriculum for the School. This human focus is the central theme of the presentation to which this message is a preface.

Provision of the necessary medical school building and the minimal endowment to maintain a medical school of first rank, represents the largest challenge ever to face the Mount Sinai constituency. We are convinced that the challenge will be met, for our program is exciting in concept, broad in scope, and of benefit to men everywhere. As such, it falls within the tradition of distinguished service which has raised Mount Sinai to the front ranks of health institutions throughout the world. The program to establish the Mount Sinai School of Medicine has been endorsed by the Federation of Jewish Philanthropies as part of its great "City of Life" building campaign.

It is our hope, therefore, that you, as one who values this tradition of service, will carefully study the plans which are outlined on the following pages, and then join the Trustees and other Mount Sinai friends in bringing them to fruition.

Gustave L. Levy  
President  
The Mount Sinai Hospital

Edgar M. Bronfman  
Chairman  
The Mount Sinai School  
of Medicine Fund

Milton Steinbach  
President  
Mount Sinai School  
of Medicine

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The words which follow cannot capture the enthusiasm generated by the new idea for the Mount Sinai School of Medicine.

Written words lack the spark of a human voice involved in a human problem, and so may seem lifeless in contrast to spoken words. But, maybe this very lifelessness can be used to illuminate the heart of a new concept in medical education.

Because it is precisely that spark of humanity, the deep reality of one human being involved with another human being, that today is threatened in modern medicine. And it is precisely this threat which gave rise to the concept of the Mount Sinai School of Medicine.

#### THE CONCEPT OF THE MOUNT SINAI MEDICAL SCHOOL

The concept of the Mount Sinai School of Medicine can be understood only as the specific answer to a specific need. What is the specific need? What is the answer to that need?

##### The need.

The need for more doctors is surely real enough.<sup>1</sup> But what concerns the leaders of Mount Sinai even more is the need, in the very near future, for a special kind of doctor; a need arising from two momentous trends in medicine:

- 1) the trend in medicine towards increasing specialization into organ systems, and even parts of organs; and
- 2) the firmer establishment of the social concept of medicine, which holds that health is the inherent right of every citizen—as expressed, for example, in the proliferation of private and government health insurance programs.

<sup>1</sup>The Jones Report tells us that we need about 3400 new graduates in medicine each year if by 1975 the proportion of doctors to population is going to be what it is today. About 1200 of these can be furnished by an expansion of the existing medical schools. It is estimated that 22 new medical schools will be needed to furnish the rest.

Both trends serve to make the relationship between physician and patient more remote, more mechanical.

The rush of new medical knowledge and instrumentation is forcing the physician into ever-narrowing fields of competency. The more he is forced to focus on a single organ, the more he tends to lose sight of the whole patient related to family and community.

The social change adds to this effect. The choice of a doctor is left more and more to the chance of geography, and to whoever happens to be on duty. The patient tends to become identified with numbers on forms and reports.

So, what happens to the doctor/patient relationship under the pressure of these trends? The patient tends to become a technological problem, and the doctor—a technician. There's a tendency to treat the patient as a group of biological reactions gone wrong. Yet nobody wants to be "the appendix in room 306."

Every doctor who has had the time to stop and think about this problem is concerned. And many members of the medical profession have been talking about it for quite some time. Some of the doctors and trustees at Mount Sinai are actually doing something about it.

The answer.

As more and more specific therapeutic and diagnostic techniques become available, the necessity to specialize will increase.

Some have been railing and ranting against specialists. But this is like trying to break up the looms in England in the late 18th century in order to hold back the oncoming capitalist-industrial wave. It won't work.

It won't work because specialists are necessary to assure patients of the best care. Hence we must continue to develop specialists but we

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must develop specialists dedicated to the patient as a human being, not as a group of organs.

Such will be the central purpose of the Mount Sinai School of Medicine. Its task will be twofold: To enlarge the student's grasp of the physical and the other sciences and thereby prepare him for the technology of specialization, and to develop his understanding of the patient as a human being involved in a living community.

What Mount Sinai leaders propose to do then, is to rearrange the current medical curriculum to allow for courses in the sciences (such as biomedical engineering, chemistry, physics, and mathematics), and for courses in the liberal arts, (such as psychology, social anthropology, and philosophy). Because there are some courses in the curriculum in medical schools today which probably more appropriately belong in the period of internship or residency, rescheduling of them will give the medical student more time—time which can be divided between the basic medical school curriculum and the humanities and social sciences.

Any existing medical school could probably alter its curriculum to provide for the technology of specialization. But the really radical departure of the Mount Sinai concept rests in its efforts to develop a special kind of physician who is at once a specialist and a humanist.

The Mount Sinai faculty leaders are fully aware that compassion cannot be taught. But, by never losing sight of the social sciences and the humanities, by making them an integral part of the curriculum throughout the student's medical training, these leaders hope to redirect the student's focus, and to restore the balance between scientific objectivity and human involvement.

More than this: the same doctors who have developed the Mount Sinai plan will be among the first teachers at the Medical School. Basic

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to their plan is a closer student/teacher relationship, because this relationship goes to the heart of the formulation of a student's attitude.

It is planned to begin with 50 students, and to expand until the graduating class numbers 100. And from the beginning, a part of the faculty will be in residence—will almost literally "live with the student."

### THE "CORE" AND "FREE" CURRICULUM

The division of the course of study into a "core" curriculum and a "free" curriculum provides the balance between the necessary rigidity of an M.D. education and the relative freedom of the training of a Ph.D.

#### The "Core" Curriculum.

The "core" curriculum will be uniform for all students. It will be an integrated program providing in the shortest possible time and by the best possible teaching techniques the basic knowledge which all physicians must have.

In addition to biomedical subjects, the core curriculum will contain instruction in physical sciences and human studies.

To help the student retain essential information, and to maintain intimate student/teacher relationships, emphasis will be placed on small group seminars and laboratory exercises, with mass lectures kept to a minimum.

#### The "Free" Curriculum.

Participation in the "free" curriculum will begin in the second year. The student will be assigned to a faculty member in the field of his choice to pursue his special interests in the social sciences or humanities. The "free" curriculum will be used to develop the student, to give him a chance to learn and develop his own capacities, and to serve him as a basis of evaluation in his choice of future endeavors.

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A part of the relation between student and faculty member will be tutorial. Not more than two students will be assigned to a faculty "tutor."

Flexibility will be the keynote of this program. In fact, the student will be free to suspend the "core" curriculum temporarily, for one or two years, during which time he might be eligible for research fellowships. (Such a course would entail a corresponding delay of graduation as an MD).

Further, no objection will be raised to permanent discontinuation of the "core" curriculum. The student would then be eligible for a Doctor of Medical Science or a Ph.D. degree and a career as a paramedical scientist.

#### THE BIOMEDICAL CENTER

To carry out the Mount Sinai concept, it is proposed to establish a biomedical center which, in addition to the School of Medicine, will include: The Mount Sinai Hospital, a Graduate School of Human Studies, a Graduate School of Biological Sciences, and an Institute for Environmental Medicine. The Hospital's present research program will be expanded and also incorporated into the activities of the biomedical center.

Elmhurst City Hospital, a 1,000 bed municipal institution, will be a key part of the Biomedical Center. Since 1963, under contract with the City of New York, Mount Sinai has operated that hospital where a qualified staff has been recruited to care for patients there.

Beth Israel, one of the nation's fine medical centers will have a close affiliation with the School of Medicine. The affiliation is being extended not as a matter of sufferance but rather as a right well earned by the high performance of Beth Israel.

#### MOUNT SINAI'S QUALIFICATIONS AS A SPONSOR

The excellent reputation of Mount Sinai today has evolved from more than a century of painstaking clinical observation and scientific studies.

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Mount Sinai's significant contributions to medicine are great and many. They include such pioneering innovations as: the discovery of local anesthesia by Dr. Carl Keller in 1884; the establishment, early in this century, of the first clinical laboratory in an American hospital; the discovery of the method of preserving citrated blood by Dr. Lewisohn, which made possible modern blood transfusions; the Rubin test for the diagnosis of causes of sterility by the inflation of the fallopian tubes; the discovery by Dr. Shwartzman of the Shwartzman phenomenon, which proved to be a key to the modern understanding of the reaction of tissues in disease; the first description of regional ileitis (Crohn's disease), giant follicular lymphoma (Brill's disease), thromboangiitis obliterans (Buerger's disease). The spectrum of its staff ranges from the full-time clinical specialist to the basic scientist. Most of the current members of the Mount Sinai staff are recognized as the leaders in their fields.

Among them are authors of standard texts in almost every major field in medicine; and men whose names are associated with well known disease complexes and with major discoveries. To list all these men and their achievements would require many pages.

Mount Sinai serves a very large patient population which mostly comes from all parts of New York City.

Then, too, Mount Sinai is already engaged in a vigorous teaching program, involving over 200 post-graduate students who are receiving advanced medical education at the Hospital.

But, from the point of view of establishing a particular kind of medical school, Mount Sinai is starting from scratch. It has no commitment to a pre-formed educational curriculum that could interfere with its goals.

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## HOW MOUNT SINAI MEDICAL CENTER WILL BE STRENGTHENED

The success of a hospital is measured primarily by its ability to serve the medical needs of the community.

And the quality of medical care that a hospital is able to provide rests on the skill and competence of its leaders.

Mount Sinai is a great hospital: The present leaders of the Hospital's attending staff are great men.

The quality of patient care is better today than ever before.

However, there is a growing tendency for medical leaders to affiliate with a medical center that includes a school of medicine.

This isn't hard to understand.

The best men in medicine are men of devotion to their profession. And when you have devoted your life's work to a given field, when you have achieved mastery over a subject, there is a natural inclination to want to pass that knowledge on to future generations. (The very word "doctor" is derived from the latin docere—to teach).

The addition of a school of medicine will provide the opportunity to teach. It will give leaders in medicine the academic rank and recognition they deserve. It will extend the opportunities and facilities for research. Hence, it will attract more great men whose efforts will contribute to the high level of patient care for which Mount Sinai is renowned. New York City men, women and children in the hundreds of thousands look to Mount Sinai for the best in medicine.

Then, too, the mere presence of students will serve to stimulate the entire staff. The teaching responsibility of the staff physician will lead him to a deeper understanding of his work.

And the increased research facilities will naturally lead to increased medical knowledge, and to continually better patient care. It will serve to strengthen the pioneering tradition of Mount Sinai in the field of medical research.

Further, the presence of the faculty of the Graduate School of Human Studies will represent a unique addition to a hospital staff and will serve to keep in focus the concept of the "whole patient."

And the program for comprehensive medical care (continual caring for a large group of families living in the vicinity of Mount Sinai) planned in conjunction with the school, will be of benefit to the community, the Medical School and the Hospital.

The establishment of a School of Medicine is, therefore, an essential element in Mount Sinai's continuing program to improve its patient services to the community.

#### WHAT WE HOPE TO ACHIEVE

This can best be expressed by presenting the following statement from the "Position Papers" formulated by Dr. Hans Popper, Dean for Academic Affairs and Professor of Pathology at the School of Medicine:

The determination to establish a medical school at the campus of The Mount Sinai Hospital is an extension of the dedication of the Board and Staff to the most intensive use of their energies and resources for the advancement of community health. Their belief is that the establishment of the school will increase their ability:

- 1) To reduce the national shortage of physicians by providing facilities in the New York Metropolitan area where there is a wealth of clinical material.
- 2) To develop the type of physician who would be expected to be most useful to society in the future.

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- 3) To further the scientific and intellectual development of the large house staff in the institution by exposure to facilities available in a university-oriented medical school.
  - 4) To develop paramedical scientists who, trained in the changing and more complex techniques of the life sciences, are to play an increasing role in patient care, teaching and research, and whose limitation in number all over the nation hampers medical development.
  - 5) To further develop the existing facilities at the hospital by its transformation into a biomedical center with the attending stimulation arising from the environment of a formal program of university education.

### CONCLUSION

What would impress you most, should you meet the men responsible for the Mount Sinai Concept, is their zeal—their genuine excitement over this program.

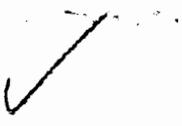
There is a reason for such enthusiasm.

The enthusiasm is there because in a vital sense this program comes to grips with one of the deep-rooted problems of our time—the growing mechanization and impersonalization of mankind.

Even the most confined imagination can sense the current thrust toward an impersonal world of machines and mechanics.

But the solutions are as exhilarating as the problems are grave.

We should make every effort for the sake of all of us, to support these men in their program to develop "not mere technicians, but members of the healing arts."



It is by the physician in his attempt to relieve human suffering that the fruits of science and the aspirations of the humanities are joined.

So there can be no more fitting person than the physician to initiate this movement.

And no better time than now.