

Pediatrics

VOLUME 8

SEPTEMBER 1951

NUMBER 3

AMERICAN ACADEMY OF PEDIATRICS, INC PROCEEDINGS AND REPORTS

THE PRESIDENT'S PAGE

THE report of the Committee on Medical Education will appear in full in the minutes of the Executive Board. Your earnest attention to this summary is desired. I shall refer to it only briefly here.

I wish to emphasize that here we have a committee with a problem and they have solved it well. The goal they sought was the continuation of the work begun by the Educators' Conferences under the sponsorship of the ICH Committee. Not only have they carried on these conferences, but they have enlarged and improved them.

As I have pointed out before, other committees have done equally well with their assignments, but the significance of the work of the Committee on Medical Education is that it was assigned one of the great projects of the ICH Committee. We have not let that committee down nor have we let ourselves down. The Committee on Medical Education has underscored the great object of our society "to establish and maintain the highest possible standard for pediatric education in medical schools and hospitals, pediatric practice and research."

This committee made two innovations. Prior to last year the United States and Canada were divided into 10 regions, so that there were 6 to 11 medical schools in each region. Last year it was divided into 8 regions and the Canadian schools met with the United States representatives. This year the Canadian medical school representatives met as Canadians and the conference was held in Toronto. This was done because they have problems individual to themselves and it turned out to be a wise move. They had a conference which they regarded as an epoch in Canadian pediatric teaching. Every Canadian medical school was presented.

The conferences, which were held at convenient times during the academic year, were well attended, especially by the educators themselves. One of the problems encountered previously and again this year was the small representation of state and district chairmen. These members, primarily practitioners, felt that this meeting would be a discussion of academic curricula only, in which they had no immediate interest. The discussion was not thus circumscribed at all. The agenda in each case included some discussion of curricula, but for the most part the topic was "How pediatric education can best meet the

needs of the general practitioner, the pediatrician, the public health worker, and the local community." That, these conferences emphasized, is the true scope of pediatric education. When the state chairmen realize this, they will come.

This committee has gone further than its predecessors in that it is arranging a panel discussion on pediatric education at the annual meeting in Toronto. There the same type of theme is to be given to the membership. Speakers on this panel will be a dean of a medical school, a professor of pediatrics, a practitioner of pediatrics, a practitioner of pediatric surgery, and a pediatric psychiatrist, and a member of the Board of Pediatrics. Opportunity will then be given every member in attendance to state his objections or assents to the way pediatrics is taught today. There will also be an exhibit which will graphically describe pediatric education not only for the medical student, but for the graduate and postgraduate student and the practitioner.

I hope this letter will accomplish two results. First, I hope you will be induced to read the full report of this committee which will be sent to each member. The summary will be subsequently published in *PEDIATRICS*. Second, I hope that it will serve to demonstrate that this year the Academy has not only integrated into its structure those valuable projects initiated by the Committee for the Improvement of Child Health, but it has enlarged and extended them. This is what we set out to do and it has been accomplished, not only by this committee, which is used as an illustration, but by many other committees on whose work I have commented throughout the year.

PAUL W. BEAVEN, M.D., *President*

THE PRESIDENT PAGE

PAUL W. BEAVEN

Pediatrics 1951;8;419

Updated Information & Services

including high resolution figures, can be found at:
<http://pediatrics.aappublications.org/content/8/3/419>

Permissions & Licensing

Information about reproducing this article in parts (figures, tables) or in its entirety can be found online at:
<http://www.aappublications.org/site/misc/Permissions.xhtml>

Reprints

Information about ordering reprints can be found online:
<http://www.aappublications.org/site/misc/reprints.xhtml>

American Academy of Pediatrics

DEDICATED TO THE HEALTH OF ALL CHILDREN™



PEDIATRICS®

OFFICIAL JOURNAL OF THE AMERICAN ACADEMY OF PEDIATRICS

THE PRESIDENT PAGE

PAUL W. BEAVEN

Pediatrics 1951;8;419

The online version of this article, along with updated information and services, is located on the World Wide Web at:

<http://pediatrics.aappublications.org/content/8/3/419>

Pediatrics is the official journal of the American Academy of Pediatrics. A monthly publication, it has been published continuously since 1948. Pediatrics is owned, published, and trademarked by the American Academy of Pediatrics, 141 Northwest Point Boulevard, Elk Grove Village, Illinois, 60007. Copyright © 1951 by the American Academy of Pediatrics. All rights reserved. Print ISSN: 1073-0397.

American Academy of Pediatrics

DEDICATED TO THE HEALTH OF ALL CHILDREN™

