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Confucius School of Medicine: the way to great learning

Cindy L K Lam

The way to great knowledge is to understand virtue ... the emperor as well as an ordinary man must first develop self discipline, said Confucius—and this applies to future doctors as well

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It was the last day of the semester before Christmas. I woke up in high spirits, ready for a full day of teaching, with a seminar in the morning and an outpatient consultation session in the afternoon.

As my car turned into the road leading to the Medical Faculty, a student talking on his mobile phone jumped out in front of my car. Luckily I braked without hitting him. I was sweating from the fright but he continued as if nothing had happened. I wondered how effective he would be in counselling his patients about avoiding risk taking behaviour.

I barely recovered from the shock and hurried to the seminar. I opened the door to a lecture theatre that was as noisy as the bird market in town and saw in front of me a bunch of kids chatting, laughing, shouting, eating, and running around. I had to shout to introduce our guest speaker, who then struggled to deliver her talk as students continued to chat, come in late, and go out to answer their telephones. The seminar ended and all the students rushed out before the speaker and I could get to the door. I explained that our medical school was very student centred.

I had three final year medical students in the consultation teaching session: one girl in sandals, one fellow who needed a haircut badly, and another in a dirty white coat. We saw an elderly woman with severe osteoarthritis of the knees. The students were very satisfied after they had excluded injury and cancer. Nobody bothered to ask how the patient felt and what she wanted from the doctor, nor could anyone explain to me the pathophysiology of this common condition. They concluded that it was a minor problem (because it would not kill) and told the old lady that her knees were not treatable. They couldn't understand why the patient nearly burst into tears.

My high spirits were gone by the time I got home. I was depressed by the thought of the kind of doctors our students might become. They did not seem to know what kindergarten children know—the road is dangerous and we need to watch the traffic; we need to be polite and not to talk when others are talking; we must not say things that hurt people. Robert Fulghum is right to say that the world would be a much better place if everyone would do what they learned in kindergarten.¹ How can we help our medical students apply what they learned there?

A dream curriculum

I had a dream that night. I became the dean of a new medical school that had all the resources in the world. I was presenting the planned medical curriculum to the faculty board.

“Our new medical school is called the Confucian University for Future Doctors. We name our University after a Chinese philosopher who lived 2500 years ago because the Chinese term for university originated

Confucian students ...

- Develop virtue and self discipline
- Practise being kind and respectful
- Learn to talk to people nicely and to listen as their first clinical skills
- Learn by memorisation and clinical experience
- Know everything about the top 10 illnesses in each discipline

from the name of his famous book, *Great Learning*.² The mission of our medical school is to educate future doctors rather than to teach medical students. Our curriculum is based on Confucius's educational theories that “the way to great learning is to know virtue; and self discipline is the foundation of all achievements.”² We will promote the traditional Chinese method of learning by memorisation and practice.³ Memory is a central cognitive process that transforms information



Confucius (551-497 BC). The quotation is translated in the introduction, above

into knowledge,⁴ and practice makes learning enjoyable.³ This will be facilitated by the modern educational approach of experiential learning. Real life experience provides meaning for information, stimulation for recall of information, and a context for practice. The content of the medical curriculum will be limited to the most common diseases seen in outpatient and inpatient health services, so that the students can have adequate opportunities for experience and practice within the limited time of the course. It is better to know everything about the most important things than to know only something about everything.

"On entrance into medical school, each student has to make a declaration, committing themselves to achieving the highest possible standard in the four characteristics of virtue defined by Confucius: kindness (to patients), honesty (no copying of homework), principles (be rational), and righteousness (be ethical), and to cultivating four aspects of self discipline: be polite (to everybody including the teachers), be safe (watch the traffic), be healthy (adequate sleep, regular exercise, a balanced diet, and no smoking), and be tidy (proper shoes, regular haircuts, and clean white coats).

"The first year aims at the development of virtue and self discipline as well as the acquisition of basic learning and clinical skills. Students will learn about virtue and self discipline by reciting the three Chinese classics by Confucius.^{2,3} This will also train their skills in memorisation. They will learn to empathise with patients by each being a patient for one week in the hospital. They then practise how to be kind and respectful to people by working as attendants in health or social services for two afternoons a week. The problems they encounter in their work will form the base for learning the skills of identifying problems, searching for information, and problem solving. The first clinical skills that they will learn are how to talk to people nicely and how to listen carefully. They will learn the skills and sensitivity of physical examinations through examining each other.

"The subsequent years will encompass learning through clinical experience, in which the students rotate to work as clinical assistants in various outpatient and inpatient medical disciplines. Students are expected to learn the top 10 illnesses that they encounter during their clinical work in each discipline very well. They need to know everything, including the aetiology, epidemiology, sociology, pathophysiology, psychology, symptoms, signs, investigation, and management of these conditions.

"All the lectures are virtual and available 24 hours a day on the Confucian University website, which is constantly updated by the teachers. The lecture on each core illness highlights the key messages and provides links to more detailed information and current research evidence.

"Students are assessed both formatively and summatively in each discipline. The formative assessment is based on observing the student's behaviour with respect to the four criteria of virtue and four criteria of self discipline. A student will receive a warning if he or she fails the formative assessment once, and will be dismissed if he or she fails again. The summative assessment will test students' knowledge and problem solving ability on the core diseases. The whole bank of assessment questions is available on the web so that students know what they are expected to learn and know. A student will not be allowed to proceed to the next discipline rotation until he or she has passed both the formative and summative assessments of the previous one.

"The average time expected for completion of the curriculum is five years, but students can graduate earlier if they can successfully complete the required learning and pass all the assessments. Students can continue in the curriculum for as long as they need to, but they will not be entitled to any financial subsidy after five years."

The faculty board of the Confucian University for Future Doctors approved the new medical curriculum unanimously and gave me a round of applause.

Back to reality

I was woken by the telephone. The faculty secretary was on the phone telling me that there would be an emergency faculty board meeting in an hour to discuss the reform of our medical curriculum for the year to come. I forgot my dream and went to hear what the dean had to say.

This article is solely the imaginings of the author. It does not represent any opinion of the Medical Faculty of the University of Hong Kong or its members. All characters are fictitious, any similarity is coincidental.

Competing interests: None declared.

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- 2 Legge J. The great learning. In: *Chinese classics*. Vol 1. Taiwan: SMC Publishing, 1994:355-81.
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- 4 Regehr G, Norman GR. Issues in cognitive psychology: implications for professional education. *Acad Med* 1996;71:988-1001.

A salutary lesson

Be kind to your patients

It was the week before Christmas. I was a singlehanded general practitioner with a list of 2800 and I was short of sleep, having been called out in the night. I looked at my appointments at the beginning of evening surgery—fully booked and with a few extras put in. Also, I was late starting. My first patient was a real heart sink. I groaned and invited her into the consulting room.

"Do sit down, Elsie. Now let me see—I saw you in January twice with backache. In February it was headache and constipation. The March winds did blow and caused you to feel queer all over. During April you had waterworks trouble and no appetite."

I warned to my task and chronicled the various ailments and

specimens brought to me throughout the year, finishing up with "and here we are in December. What have you come to see me about this time?" She produced a crumpled brown paper bag and placed it on the desk before me. "I have brought you your Christmas present, doctor, and I wish you Happy Christmas." I spent the next 10 minutes being kind to her and feeling much humbled. My surgery finished later than ever.

And the moral? Always be kind to your patients—especially at Christmas.

Alexander Fernandez *retired general practitioner, Lyme Regis, Dorset*