Course Overview: How the course Becoming a Master Physician Benefits Students

The process of choosing a career is agonizing for most. What if you knew there was a path you could follow that would help you achieve success in whatever career you choose in life. Success is becoming a master of whatever you choose to be. The path to mastery in your chosen field is therefore your path to success. Mastery is the subject matter of this course.

The course is founded on two fundamental beliefs. First, there are principles of mastery common to all disciplines. Second, mastery is within reach of nearly everyone. The intended purpose of this course is to introduce you to the common principles of mastery, and to encourage you to implement and follow them through the course of your life in whatever field you choose. This course features Medicine as the discipline to illustrate the principles and the journey toward mastery. A second purpose is to provide a survey of a medical career and how to become a master physician. A third purpose is to help you decide if a career as a physician is right for you. It is the course director’s desire to make this course the most practical and useful course that you take during your entire college experience. That’s a bold goal, but previous feedback from prior students indicates this is achievable. So welcome.

Course Structure

This course meets twice a week for 1.5 hours of lecture/discussion for a total of three hours in class/week. Class size is limited to 20 students. The course utilizes multiple approaches to learn the principles of mastery and how to become a master physician: lectures (requiring note taking), readings, discussion groups, writing personal reflections and an in-depth paper, oral presentations and essay examinations.

Lectures. The lectures introduce the concept and principles of mastery and provide a survey of the art of medicine. A model of the art of medicine is a conceptual framework that captures six fundamental elements of medical practice. Medicine cannot be described if one of these elements...
is missing, thus, they provide the foundation to learning mastery in medicine. Learning to practice medicine and advance toward mastery is similar to many other disciplines in that the path to mastery progresses through a series of stages. For medicine these stages include: pre-medical, medical student, residency/fellowship, proficient/expert (first 5-7 years in practice) and mastery. The student will learn the stages for becoming a master physician while also discussing and exploring the six fundamental elements of medicine—the physician, the patient, the physician-patient relationship, the medical ethic, the works of care, and the outcomes of care. In any discipline a person seeks to understand and master the relationships and interaction between the fundamental elements included in a conceptual model of that discipline. The lectures seek to illustrate the relationships for the practice of medicine.

Discussion Groups. The course utilizes discussion groups to reinforce and explore the principles of mastery. Students are expected to actively participate in the discussions both with questions and personal insights.

Weekly Reflection Paper. Nearly every week there is a reflection exercise each student must complete related to a principle of mastery. Each reflection paper is ~ 1-2 pages (up to 800 words) and is due one week after being assigned. 12 papers are planned and—the two lowest grades will be excluded from calculating the student's grade. All reflections must be completed and 5 points are subtracted if an assignment is not turned in.

Reflection Papers (worth 10 pts each) typically have a question prompt or exercise related to a lecture topic or theme. Students are expected to include answering the following questions:

1. Answering the specific prompt about the theme? (2 pts)
2. Choose a reading from Becoming A Master Physician relevant to the theme and discuss how the reflection relates/provides insight to the theme? (2 points)
3. How does the theme discussed relate to the concept of mastery? (2 points)
4. What were the personal insights gained or lessons learned? e.g., meaning making/emotional insight/evaluating personal assumptions, values, beliefs or biases (4 points)

Master Physician Paper. 13-15 pages (5,000 words). This assignment brings the principles of the course together into your singularis opus for mastery. The student selects a significant figure (a master physician) in medicine from any specialty from the current or a previous generation. This person’s life is studied in depth in order to bring into the focus the key principles of mastery.

How to choose a master physician?
1. What sort of physician? Choose a specialty field of potential interest and find out who were the main founders of figures who shaped the discipline.
2. Seek advice or suggestions from a current physician in that field. "Who is an interesting person in your field (a master, a founding physician) to study?"
3. Is there someone who is a candidate role model for you in your career?
4. Ask Dr. Diller about your possible candidate or ask about an idea/suggestion?
5. Is there a biography or set of primary resources available? Read the primary sources with a specific purpose in mind—review the next section to learn what you are trying to discover/learn about your master physician.

Format of the Master Physician Paper.
1. Introduction. Who was the person, what time period? What major contribution (legacy) did he or she make to medicine (creative or innovative masterwork)?
"Let me describe his/her career path and explain how they were able to make this contribution . . ."

II. The Body. Answer the following question in separate sections:

1. Motivations/Passions for a Medical Career. What were the motivating factors that led to the choice of a medical career with example(s). What was the person passionate about with regard to his/her chosen field?

2. Formative Experiences & Self-education. What were the formative experiences for this individual in the early stage of the individual’s career that helped shape his/her career. Without this experience it was very unlikely this individual would have accomplished what they did. What lessons did this person learn through these experiences (self-education) Give examples.

3. Mentors/Personal Reference Group. Who were this individual's mentor(s) or personal reference group? What did they do for this individual? How were they a mentor(s)

4. Strength of Character/Self Mastery. What strengths of character did this individual exhibit at various stages of his or her career that appeared to contribute to his or her success? What evidence for self-mastery?

III. Conclusion. What personal lessons did you learn from the study of this individual?

IV. Life Chronology Outline. (year, location, major life event)

Example
See the attached example of Dr. Daniel Drake


1. Footnotes are numbered sequentially in the text (superscript) with the citation at the bottom of the page.

2. Bibliography. Authors listed alphabetically by last name; along with the citation.

VI. Two primary source excerpts—using the author’s own words (up to 1000 words) that relates to a key theme regarding Mastery and/or the Art of Medicine—followed by a personal reflection/commentary of how this selection relates to mastery and/or the art of medicine. (Not included in the Paper word count)

Oral Presentation. This is an 8-10 minute presentation summarizing the main points of your paper. Follow the outline of the paper highlighting the key points. A rubric is presented in class and provides guidance for the presentation.

Patient Care Experiences. If it can be arranged students will be able to attend a patient care session with the course director or a designee. This is not required for the course, but is optional and dependent on the course director's schedule.

Examinations. Essay/Short answer tests of the material are given at the midterm and as a final in the end of semester. The tests are based on your new knowledge of the specific session learning objectives.

Overarching Course Goals

1. Define mastery and identify the principles common to many fields that facilitates the achievement of mastery.

2. Provide a survey of the six elements included in a model for the art and practice of medicine.
3. Use medicine as a discipline to illustrate the principles of mastery—i.e, those that lead to becoming a Master Physician.
4. Demonstrate the path for a successful career for every student.

**Course Resources (Required Texts)**

**Textbooks.** There is a single textbook: *Becoming a Master Physician*. It is a pre-publication copy, and there is no cost. Students must sign a waiver indicating they will not seek to publish or sell the book. Suggested resources may be suggested for students who wish to explore primary resources for their own benefit. Additional handouts will be included not found in the text.

**How This Course Fits with Your Other Courses**

This course touches on many topics from different fields of study—art, psychology, philosophy, ethics, sociology, health services, medical training, and prevention and wellness, to name a few. Being able to take good lecture notes is critical for success in this course. Reading and writing and oral communication skills are also essential for this course, and thus previous courses where these were learned and practiced will be applied and utilized in this course. The course burden is manageable and judged to be about right time for a three-hour course.

**Attendance Policy**

Attendance for lectures and discussion sessions are mandatory. If for some reason a student is unable to attend a lecture or discussion group due to personal illness or other reasons the student is required to inform the Course Director.

**Academic Integrity**

The University Rules, including the Student Code of Conduct, and other documented policies of the department, college, and university related to academic integrity will be enforced. Any violation of these regulations, including acts of plagiarism or cheating, will be dealt with on an individual basis according to the severity of the misconduct.

**Special Needs and Accommodations Policy**

If you have any special needs related to your participation in the course, including identified visual impairment, hearing impairment, physical impairment, communication disorder, and/or specific learning disability that may influence your performance in this course, you should meet with the instructor to arrange for reasonable provisions to ensure an equitable opportunity to meet all the requirements of this course. At the discretion of the instructor, some accommodations may require prior approval by Disability Services.
Assessments and Grading Policy

400 Points total Possible.

A = 4.000 ≥ 95%
A- = 3.667 ≥ 90%
B+ = 3.333 ≥ 85%
B = 3.000 ≥ 80%
B- = 2.667 ≥ 75%

<table>
<thead>
<tr>
<th>Points Range</th>
<th>%</th>
<th>Grade</th>
</tr>
</thead>
<tbody>
<tr>
<td>384-400</td>
<td>96-100%</td>
<td>A</td>
</tr>
<tr>
<td>368-383</td>
<td>92-95%</td>
<td>A-</td>
</tr>
<tr>
<td>352-367</td>
<td>88-91%</td>
<td>B+</td>
</tr>
<tr>
<td>336-351</td>
<td>84-87%</td>
<td>B</td>
</tr>
<tr>
<td>320-335</td>
<td>80-83%</td>
<td>B-</td>
</tr>
<tr>
<td>304-319</td>
<td>76-79%</td>
<td>C+</td>
</tr>
<tr>
<td>288-303</td>
<td>72-75%</td>
<td>C</td>
</tr>
<tr>
<td>272-287</td>
<td>68-71%</td>
<td>C-</td>
</tr>
<tr>
<td>260-271</td>
<td>65-68%</td>
<td>D+</td>
</tr>
<tr>
<td>249-259</td>
<td>63-64%</td>
<td>D</td>
</tr>
<tr>
<td>240-248</td>
<td>60-62%</td>
<td>D-</td>
</tr>
<tr>
<td>&lt;240</td>
<td>60</td>
<td>F</td>
</tr>
</tbody>
</table>

100 points. **Reflection Papers**: 12 papers required and the lowest two grades will be dropped. 10 points each with a maximum of 100 points.

100 points. **Long Paper** (13-15 pages + bibliography) with two edited excerpts with personal response.

120 points. **Examinations—Essay/Short answer from the lecture and readings.**
1. Mid-term  50 points
2. Final 70 points

40 points **Oral Presentation**

40 points **Class Engagement and Professionalism** for the semester (20 at mid-point/20 at final Evaluation; teacher and peer evaluation)

Professionalism is a competency that every physician is measured by at every stage of a medical career (medical school, residency/fellowship and private practice). When we speak of professionalism we are talking about the following character qualities and behaviors:
### Professionalism Behaviors

<table>
<thead>
<tr>
<th>Vices</th>
<th>Virtues</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Tardiness</strong> to required activities</td>
<td><strong>Promptness</strong> to required activities</td>
</tr>
<tr>
<td><em>Is Lazy</em></td>
<td><em>Is a hard worker</em></td>
</tr>
<tr>
<td>Does the minimum to get by</td>
<td>Committed to excellence</td>
</tr>
<tr>
<td>Irresponsible</td>
<td>Is responsible</td>
</tr>
<tr>
<td>Fails/slow to respond to communication</td>
<td>Responsive to communication</td>
</tr>
<tr>
<td>Contributes little to class dialogue</td>
<td>Contributes significantly to the class dialogue</td>
</tr>
<tr>
<td>Does not work well in teams</td>
<td>Great team player</td>
</tr>
<tr>
<td>Does not adhere to ethical principles</td>
<td>Adheres to ethical principles</td>
</tr>
<tr>
<td>Disrespectful of others</td>
<td>Respectful to others regardless of age, race, culture, gender</td>
</tr>
<tr>
<td>Not compassionate</td>
<td>Compassionate, empathic to others</td>
</tr>
<tr>
<td>Lacks trustworthiness</td>
<td>Is trustworthy</td>
</tr>
<tr>
<td>Poor attention to hygiene or normative</td>
<td>Appropriate hygiene and dress</td>
</tr>
<tr>
<td>standards of dress</td>
<td></td>
</tr>
<tr>
<td>Not accountable to others</td>
<td>Accountable to others</td>
</tr>
<tr>
<td>Self-centered</td>
<td>Altruistic</td>
</tr>
</tbody>
</table>

### Pass/Fail, Audit, and Withdrawal Policy

Becoming a Master Physician follows the policies and procedures outlined in the most current University of Cincinnati Student Handbook.

### Course calendar

See the attached curriculum for a detailed course outline showing the session dates, topics, learning objectives, pre-session preparation and specific assignments.
Daniel Drake Life Chronology
October 20th, 1785 – November 6th, 1852

Oct 20, 1785  Birth. Plainfield, New Jersey to Isaac Drake and Elizabeth Shotwell Drake.

1788  Age 3. Family moves to Mayslick, Kentucky near the Ohio River. Father farms the land and Drake sporadically attends school during the winters through age 15. Develops a deep appreciation for nature and the outdoors. Father decides on medicine as a career for Daniel and Isaac was a close friend of Dr. William Goforth who he met in Maysville.

1800  Age 15. Apprenticed to Dr. Goforth for 4 years who now lives in Cincinnati.

1804  Age 19. Becomes a full partner in the practice of medicine with Dr. Goforth

1805-1806  Age 20. Travels to Philadelphia to study medicine at the University of Pennsylvania; attends lectures, but does not stay for 2nd term for graduation. Lecturers included Drs Benjamin Rush, Caspar Wistar, Philip Physick and William Shippen.


1807  Age 22. Returns to Cincinnati to take over Dr. Goforth’s practice (Goforth had moved to Louisiana. Marries Harriet Sisson (Dec 20th), niece of Colonel Jared Mansfield (surveyor-general of the Northwest Territory).

1808  Age 23. Daughter Harriett is born.

1809  Age 24. Daughter Harriett dies, age 11 months

1810  Age 25. Publishes Notices of Cincinnati. Examination of Cincinnati’s Diseases in context of the environment.

1811  Age 24. Son Charles Daniel Drake born

1813  Age 26. Son John Mansfield Drake born

1815  Age 30. Publishes Natural and Statistical View, or Picture of Cincinnati and the Miami Country. Describes the fertile resources of the region to help promote future settlement and development of Cincinnati and the surrounding region. Returns to University of Pennsylvania to complete his medical degree.

1816  Age 31. Feb 5th Son John dies age 2 ½ yrs; Completes Medical Degree May 16th, 1816 from the University of Pennsylvania by special investiture by the Board of Trustees as Drake had missed the final exams. His section on Medicine in Picture of Cincinnati fulfills his List of Accomplishments-Civic Engagements
- First Medical student in Cincinnati
- Member of First Debating Society
- Assisted in establishing first circulating library in Cincinnati
- Founded the School of Literature and the Arts (organization for scientific and literary improvement)
- Founded and first secretary of the Cincinnati Lancaster Seminary
- Elected Cincinnati Councilman
- Assisted in organization of first Cincinnati Medical Society
- Investor and founder of Cincinnati Manufacturing Company; business run by his brother and father
- Major role in organizing the Western Museum Society
- Major role in organizing the Cincinnati Society for the Promotion of Agriculture, Manufactures and Domestic Economy
- Founding member of Episcopal Christ Church of Cincinnati (1817)
- Vice President of Cincinnati Humane Society
- Director of the Cincinnati Branch of the Bank of the United States
- Founds the Medical College of Ohio; the beginning of the University of Cincinnati (1819)
- Founds the Cincinnati Commercial Hospital and Lunatic Asylum (1820)
- establishes Cincinnati Eye Infirmary, first MD West of Allegheny to devote attention to eye disorders.
- Founds the Department of Medicine in the Cincinnati College, a rival to the Medical College of Ohio (1835, closes in 1839)

1817 Age 32. Accepts the Chair of Materia Medica in the medical department of Transylvania University in Lexington, Ky. He lasts one term due to conflicts with teaching colleagues. **Daughter Elizabeth Mansfield Drake is born.**

1818 Age 33. Elected to the American Philosophical Society and the American Antiquarian Society. Returns to Cincinnati.

1819 Age 34. Secures approval by the Ohio General Assembly for charters for a Medical College of Ohio and for a Cincinnati College empowered to grant degrees (Beginning of the University of Cincinnati). **Birth of daughter, Harriet Echo Drake.**

1820 Age 35. Medical College of Ohio opens in fall; Drake is both president and professor of Institutes and Practice of Medicine. Secures state charter for the Commercial Hospital and Lunatic Asylum.

1822 Age 37. Drake’s colleagues vote to remove him as president and professor as a result of disagreements over direct of medical education. Plan for his treatise on the diseases of the Western country. First identified in 1822. In the third number of Godman’s western quarterly reporter.

1823 Age 38. Assumes Professorship of Medicine at Transylvania University. Eventually becomes Dean of Faculty.

1825 Age 40. **Wife Harriett Sisson Drake dies Sept 30th age 37yrs (18 yrs of marriage) in Cincinnati before fall term at Transylvania University. Drake becomes a single parent with children ages 14, 8, & 6.** Cincinnati College closes after 6 years. Medical College of Ohio continues.

1827 Age 42. Returns to Cincinnati joins with Dr. Guy W. Wright to establish and edit *The Western Medical and Physical Journal.* Establishes the Cincinnati Eye Infirmary with special attention to eye care needs of the poor. He again publicly announces book project March 1827.

1828 Age 43. Starts a new medical journal as sole editor and publisher, *The Western Journal of the Medical and Physical Sciences* the Dogwood bloom as emblem and motto—*E sylvis, aeque atque ad sylvas, nuncius* (Out of the forest, as well to the forest, the messenger). Published continuously every month through June 1838; resumed in 1839 in Louisville as *The Western Journal of Medicine and Surgery* and he served as editor through 1849. Suffers severe burns to his hands while attempting to save, unsuccessfully, his sister-in-law whose bed caught on fire; hands are permanently scarred.

1830. Age 45. Accepts Professorship at Jefferson Medical College in Philadelphia; Lectures one year—(2 volumes of lectures for this year at National Library of Medicine)

1831. Age 46. Returns to Cincinnati, initially seeks to form a new medical school with Miami University, but initially is blocked by Medical College of Ohio faculty and he is asked to re-join the faculty at the Medical College of Ohio which he does for one year.

1832. Age 47. Resigns from Medical College of Ohio. Cholera epidemic. **Drake loses his father (Oct 14th) and grandson to Cholera.** Publishes *A Practical Treatise on the History, Prevention and Treatment of the Epidemic Cholera* and *Practical Essays on Medical Education and the Medical Profession in the United States,* the latter landmark volume on how to improve the training of physicians.

1833 Age 48. Drake initiates private literary parties at regular intervals where local celebrities were invited. These parties were apparently instituted for the benefit of his children Charles, Elizabeth & Harriett. These continue until his daughters marry in 1839.

1835. Age 50. Cincinnati College is re-started with William McGuffey as president and a medical department is created with Drake as Dean. The Medical Department of Cincinnati College openly competes with the Medical College of Ohio with first graduating class in 1836 and lasts for 4 years. It closes due to lack of funds and a hospital for teaching. Drake experiences repeated attacks by his competitors from the Medical College of Ohio.
1836. Age 51. Once again 1836 Drake announces his plans for medical history of the West. At that time he realizes that “to travel as the only mode on which reliance can be placed [to gather data]. By visiting the principal localities on the great platform between the legs in the Gulf of Mexico, several important acquisitions can be made, either by direct personal observation, or by intercourse with gentlemen resident in different places.” Drake travels to Indiana, Illinois, Missouri, Alabama, Tennessee, Kentucky and back to Ohio May through the summer. Following this trip, now too busy with his clinical work and teaching in the Cincinnati College to continue actively gathering information for his book.

1839. Age 54. Many faculty resign from the Medical Department of Cincinnati College due to closure of The Cincinnati Commercial hospital to the medical faculty. The Medical Department of Cincinnati College has graduated 388 physicians in 4 years. Drake relocates to Louisville after accepting a position as Professor of Clinical Medicine and Pathological Anatomy at the Louisville Medical Institute September 1839. November 9th delivers introductory lecture.

Drake continues to maintain his official residence in Cincinnati. During the academic sessions of the Institute, he occupies an apartment in a college building at eighth and Chestnut streets. During the winters in Louisville, he went at least once a month on weekends by both of his daughters who lived in Cincinnati.

Both daughters are married. Elizabeth marries Alexander McGuffey, a lawyer and brother of the originator of the famous McGuffey readers. Younger daughter Harriet Echo marries James Campbell, a business-man and meat-packer.

1840 Age 55. Drake is baptized in April at St. Paul’s Church Episcopal Church in Louisville.

1842. Age 57. Continues with research on his major work. Summer of 1842 when he surveys the Great Lakes and the bordering states.

1843. Age 58. After the winter session in 1842-1843 Drake travels to New Orleans in March. During this trip he also travels to Pensacola Florida where he tours the naval base. Visits the University in Tuscaloosa Alabama.

1844. Age 59. Spring of 1844 he starts southward again and travels to Mobile, Alabama and then returns to New Orleans. He continues traveling and visits Missouri, Illinois and the upper reaches of the Mississippi River through October 1844. This summer journey travels 6200 miles.

1845. Age 60. The vacation periods of 1845 and 1846 were spent in Cincinnati actively engaged in writing his book. He was described as being methodical in all that he did, worked at a large table, which was covered with open books, journals from every section of the country, and embryonic manuscripts in every stage of development, from scraps of field notes, up to the perfected copy for the hands of the publisher.

1847. Age 62. Summer of 1847 again seeking information in the field and on this trip he travels West Virginia, Pennsylvania, western New York and onto Quebec, Montreal and Toronto in Canada. He returns to Louisville in November 1847. December 1847 wrote a series of letters to his children describing his boys boyhood in Kentucky later published in 1870 PIONEER LIFE IN KENTUCKY. A SERIES OF Reminiscential Letters TO HIS CHILDREN.

1848. Attends 2nd AMA convention in Baltimore.

1849 Age 64. March he resigns his professorship in Louisville due to nearing age of retirement, seeking more time for writing, returns to Medical College of Ohio after his nemesis there, Moorhead permanently returned to Ireland, to be closer to both daughters and grandchildren, and because his magnum opus was to be printed in Cincinnati. Printing completed in April 1850.
He resumes his professorship at the medical College of Ohio in Cincinnati. In November 1849 gives an opening session discourse on medical education. Attends 3rd AMA convention in Boston.

**1850.** Age 65. Drake resigned after that session and returned to the University of Louisville and taught for the next two years 1850-51 and 1851-52 sessions. Drake publishes *Principal Diseases of the Interior Valley of North America volume 1.*

AMA meeting for 1850 was held in Cincinnati with the expectation that a member of the local committee would be the next president of the AMA. Drake declined the nomination and in his place Dr. Ruben Mussey was then elected as the president of the association. At the convention Drake was lauded for his book on the *Diseases of Mississippi Valley* and was reported that he actually wept during this ovation.

In the summer of 1850 he spent in Cincinnati was busily engaged in writing second volume of his diseases of the Mississippi Valley. Drake becomes very interested in the slavery issue.

**1851** Age 66. January writes a letter to the Ohio State convention on slavery. In April *Letters to John Warren on Slavery* were published.

Drake attends the AMA meeting in Charleston, SC.

Late in 1851 Drake fathers the Cincinnati Medical Library Association giving more than 100 volumes as a nucleus of the collection.

**1852.** Age 67. Drake opens the Library's reading rooms with two addresses. The first on January 9th entitled, "Early physicians, scenery and society in Cincinnati." The second discourse January 10, 1852 on "The origin and influence of medical periodical literature and the benefits of public medical libraries."

Early 1952 Drake had resigned his professorship in the medical department of University Louisville, to accept the position at the medical College of Ohio in Cincinnati.

Drake attends AMA convention in Richmond, Virginia.

Fall of 1852 Drake returns once again to Cincinnati to lecture. On the evening of October 26, 1852 Drake suffers severe, protracted chills. In spite of this he was at the hospital and in the lecture hall the next morning. On the evening of October 27 another chill and the next day he was too weak to leave home. In addition to his coughing, a pain in the right lower chest, an irregular heart and he had almost constant intense frontal headache. He bled himself to produce fainting and then other physicians discovered inflammation in the right ling and they proceeded to take a half a pint of fluid (blood/empyema) from the painful area of the chest.

Sunday, October 31, 1852 talking was very difficult, and he signed his will though he was extremely weak. Monday, November 1, 1852 he was much weaker and he expressed the desire to live to finish his book. By the next day November 2 he had lost that will to finish and he expressed that death would be most welcome. He died at 6PM on Friday **November 5th, 1852.** The funeral was on the Wednesday November 10 Wednesday in Cincinnati at Christ Church. He was then buried by his wife in Spring Grove cemetery in Cincinnati.


---

**Daniel Drake Medical School Affiliations and Years**

William Goforth, MD  Apprenticeship  ages 15-19  Student Cincinnati, Ohio 1800-1804 (4 yrs)
University of Pennsylvania  Student 1805-1806, 1815-1816 (2 yrs)
Transylvania University  1817-1818, 1823-1827 (5 yr)
Medical College of Ohio  1819-1822, 1831-1832, 1849-1850, 1852 (½ yr) (5 ½ yrs)
Jefferson Medical College  1830-1831 (1 yr)
Medical Department of Cincinnati College (1835-1839) (4 yrs)
Louisville Medical Institute  1839-1849, 1850-1852 (12 yrs)

*From 1817 to 1852 he was involved in medical education, except for the years 1832-1835: a total of 33 years as an educator. He was a student for 6 years. He practice medicine for 1804-05, then 1806-1815 to 1816-1852, a total of 46 years.*
<table>
<thead>
<tr>
<th>WEEK</th>
<th>Lecture/ Location</th>
<th>Date</th>
<th>Topic / Learning Objectives</th>
<th>Student Pre-session Preparation</th>
<th>Student Session Assignments</th>
</tr>
</thead>
</table>
|      | L1                | T Jan 10, 2017 4-5:30PM | Introduction: Course Overview  
Course Logistics: method; sessions; assignments; grading  
Readings; reflections; discussions; writings  
1. Define Mastery.  
2. List the three stages of mastery and describe the characteristics of each stage.  
3. Explain how studying the lives of Masters is valuable for understanding how mastery is achieved in a given discipline. | Course Syllabus                  | Begin Thinking about a Master Physician for your Paper. |
|      | L2                | TH Jan 12, 2017 4-5:30PM | The Nature of Medicine: Medicine as an Art Based on Science  
4. List the six criteria that define an art and discuss how medicine meets those criteria. | Becoming a Master Physician  
Section 1 | Reflection Paper (1): Learning from Masters. "Discuss the potential insights/benefits about Mastery or becoming a master physician that can be gained by studying the lives of great physicians from current or past generations. Cite an example from the text or the class." |
|      | L3                | T Jan 17, 2017 4-5:30PM | The Nature of Medicine: A Conceptual Model for the Art of Medicine/Map of Medicine  
5. Draw a map of the territory of medicine showing the 6 elements needed to define medicine as an art.  
6. Define the art of medicine.  
7. List the six elements in the art of medicine model, describe or draw the specific symbol, and match the tag-line for each symbol. Explain what the tag lines mean? | Finish Section 1                  | Explore possible individuals for your paper. |
|      | L4                | TH Jan 19, 2017 4-5:30PM | The Physician In Five Stages: Five Stages to Mastery  
8. List the stages on the way to becoming a Master Physician and provide a minimum of 4 milestones or characteristics that occur in each stage.  
Discussion Mentors. Think of Mentors you may have or have had in the past as you answer these:  
9. Describe the functional role(s) of mentors?  
10. Can identify how to identify potential mentors and describe how to effectively engage a potential/prospective individual who can mentor you? | Becoming a Master Physician  
Section 2 | Reflection Paper (2): Questions Exercise. Using the definition of the art of medicine and your capacity for curiosity generate a list of 5 questions for each element or 20 questions for one theme—questions you would like to learn by studying that element—patient, physician, physician-patient relationship, medical ethic, works of care (how physicians provide care), outcomes of care. |
| Week 3 | L5 | T Jan 24, 2017 4:30-6PM | The Physician Stage 1: Premedical Stage  
What is to be learned that will be helpful in Mastery?  
What is the purpose of this stage?  
11. Describe the specific milestones associated with the 1st stage, the premedical years.  
12. Can identify the methods used to learn in the 1st stage.  
13. Describe the domains of emotional intelligence and explain how emotional intelligence relates to becoming a master physician? | Becoming a Master Physician  
Section 2 | Narrow down choices of an individual for your paper and begin to compile a list of possible source materials. |
|--------|----|----------------------|-----------------------------------------------------------------------------------|---------------------------------|-----------------------------------------------------------------|
| L6     | TH Jan 26, 2017 4:30-6PM | The Physician Stage 2: Medical School  
What is to be learned that will be helpful in Mastery?  
14. Describe the specific milestones associated with the 2nd stage, Medical school.  
15. Can identify the methods used to learn in the 2nd stage.  
The Medical School Curriculum: Explicit and Hidden Discussion  
Measuring Your Emotional Intelligence  
Can emotional intelligence be improved?  
If so, how? | Becoming a Master Physician  
Section 2 | Reflection Paper (3): Why do you want to become a doctor? Or your chosen field? Albert Schweitzer and Ann Hearn encountered resistance to this career choice from their family and friends. If encountered describe any obstacles along the way and how you have had to overcome them. |
| L7     | T Jan 31, 2017 4:30-6PM | The Physician Stage 2: Medical School and The Fundamentals of Doctoring  
Nearly every discipline has set of fundamentals that must be practiced with feedback such that they become habit.  
16. List the 10 fundamentals of doctoring and describe/define each step. Explain why these 10 steps are the fundamentals of doctoring?  

The Physician Stage 3: Residency and Fellowship  
-Medicine has grown in the number of specialties. A look back and coming forward. What are the specialties? The big divide: Medicine/Surgery  
17. Describe the specific milestones associated with the 3rd stage, Residency and Fellowship. 18. Can identify the methods used to learn in the 3rd stage. | Introduction to the Clinical Method: The Fundamentals of Doctoring.  
Reflection (4) Fundamentals of Doctoring.  
The fundamentals of doctoring include 10 steps and it takes “deliberate practice” for 10,000hrs to achieve mastery. How can an undergraduate student begin to practice the 10 steps? | Becoming a Master Physician  
Section 2 |
| L8     | TH Feb 2, 2017 4:30-6PM | NO CLASS  
Practicing the Fundamentals Exercise | SELF-STUDY | DECIDE ON MASTER PHYSICIAN FOR YOUR PAPER |
| L9     | T Feb 7, 2017 4-5:30PM | Discussion 3. What factors are considered when selecting a medical specialty? What is most important? | Becoming a Master Physician  
Section 2 | Turn in the name of the Master Physician you have chosen for your paper and provide primary source. |
### The Physician Stage 4: The First Years in Practice
- **Getting to 10,000 Hours**

#### Methods
19. Describe the specific milestones associated with the 4th stage, the first years in practice.
20. Can identify the methods used to learn in the 4th stage.
21. Choose the correct stage in becoming a Master physician when the person reaches 10,000 hours of practicing the fundamentals of doctoring.
22. Describe what it mean to "debrief" clinical encounters? Describe the process? Explain how this relates to the 10th step of the fundamentals of doctoring, the “patient-based monitoring step”? At what stage of becoming a master physician is this process most important and why?

### The Physician Stage 5: Master Physician
23. Describe the specific milestones associated with the 5th stage, Master Physician.
24. Can identify the methods used to learn in the 1st stage.

<table>
<thead>
<tr>
<th>L10</th>
<th>TH Feb 9, 2017 4-5:30PM</th>
<th>The Physician Stage 5: Master Physician</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td>23. Describe the specific milestones associated with the 5th stage, Master Physician.</td>
</tr>
<tr>
<td></td>
<td></td>
<td>24. Can identify the methods used to learn in the 1st stage.</td>
</tr>
<tr>
<td></td>
<td></td>
<td><strong>Wrap up of Stages of Becoming a Physician</strong> Illustrates—stages exist; for every discipline what are the stages?</td>
</tr>
<tr>
<td></td>
<td></td>
<td><strong>Discussion 4.</strong> Life Lessons from <em>A Way of Life</em> by Sir William Osler</td>
</tr>
<tr>
<td></td>
<td></td>
<td>What new lesson(s) about time management could you apply from Sir William Osler's <em>A Way of Life</em> and how will this/these help you?</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Becoming a Master Physician</th>
</tr>
</thead>
<tbody>
<tr>
<td>Section 2</td>
</tr>
</tbody>
</table>

**Read before class:** *A Way of Life* by Sir William Osler

**Reflection (5): Self-Education.** The first five years of practice is often called the physician’s probationary period. A critical method for ongoing development in this stage is self-education.

**Choose either A or B for your reflection topic**

A. Describe the various ways physicians in this stage educate themselves and how these ways are different from formal education such as medical school or residency.

B. Why is self-education after the formal education necessary to acquire mastery?

### Master Physicians: Osler & Peabody
25. For Sir William Osler discuss the formative experiences, approach to self-education, and the mentors that contributed to his becoming a Master Physician. He was best known (legacy) for what scholarly effort?
<table>
<thead>
<tr>
<th>Week</th>
<th>L12</th>
<th>Date</th>
<th>Time</th>
<th>Title</th>
<th>Reflections</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td>TH Feb 16, 2017</td>
<td>4-5:30PM</td>
<td>The Patient as Person: Human in Five Dimensions (Placemat) Doctors are students of Man. What is man? What is a human being?</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td>26. List the 5 dimensions of a human being and describe how systematically using the “lens” helps a physician in constructing and understanding a patient’s life story?</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td>Becoming a Master Physician Section 3</td>
<td></td>
</tr>
<tr>
<td></td>
<td>L13</td>
<td>T Feb 21, 2017</td>
<td>4-5:30PM</td>
<td>The Patient as Person: Chronological and Physical &amp; Psychological Dimensions</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td>27. Can define the chronological dimension (seasons of life) of a person.  28. Can define the physical dimension of a person  29 Can define the psychological dimension of a person</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td>Discussion Hour 5. Why is it important for a physician to be familiar with all the dimensions of a human being?</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td>30. Explain how the knowledge of each dimension used in the care of the patient? Illustrate by offering one example of how specific information in each dimension is used in the care of the patient.</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td>Becoming a Master Physician Section 3</td>
<td>Reflection (6) Dimensions of a Human Being. Patients are human beings. Some view the doctor’s task as making the diagnosis and so the primary focus is on what is physically wrong with the patient. Human beings are more than a body and can be parsed into different dimensions: physical, psychological, spiritual, social and even chronological. Discuss how this knowledge of the other dimensions of a human being is relevant in the care of the patient? Or if you disagree, argue why not. Should the practice of medicine focus primarily on the physical and leave the other dimensions to the appropriate “experts?”</td>
</tr>
<tr>
<td></td>
<td></td>
<td>TH Feb 23, 2017</td>
<td>PD1 4-6PM</td>
<td>ADFM Meeting Dr. Diller Away Chaired by Dr. Bain Butcher PANEL DISCUSSION (Selected UC COM Master Physicians)</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td>1. Why did you want to become a doctor?  2. How did you decide on specialty choice?  3. How did you decide on a career path in academia or in the community?  4. When did you get comfortable in practice?  5. What social responsibility does a physician have to the community? How has that worked out for you?</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td>Reflection (7). Panel Insights. What helpful or surprising</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Week 8</td>
<td>L14</td>
<td>T Feb 28, 2017</td>
<td>4-5:30PM</td>
<td>The Patient as Person: Spiritual and Social Dimensions &amp; the Person as Patient Role 31. Can define the social dimension of a person  32. Can define the spiritual dimension of a person</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td>Becoming a Master Physician Section 3</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td>TH Mar 2, 2017 4:30-6PM</td>
<td>MID-TERM EXAM</td>
</tr>
<tr>
<td>Week 9</td>
<td>L15</td>
<td>T Mar 7, 2017 4-5:30PM</td>
<td>The Physician-Patient Relationship: Structure and Function</td>
<td></td>
<td></td>
</tr>
<tr>
<td>--------</td>
<td>-----</td>
<td>------------------------</td>
<td>----------------------------------------------------------</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>33. List up to 5 basic human needs met by social relationships.</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>34. List the 5 levels of knowing and connecting with another human being—define each level.</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>35. Explain the functional purpose of the physician-patient relationship? Explain the “medium” of the relationship?</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>36. Outline the assets that build up as physician-patient relationships mature and explain why these are considered assets of value in physician-patient relationships?</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**Becoming a Master Physician**
**Section 4**

<table>
<thead>
<tr>
<th>L16</th>
<th>TH Mar 9, 2017 4-5:30PM</th>
<th>The Physician-Patient Relationship: The Metaphor of the Bridge</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td>37. Compare and contrast the features of functional and dysfunctional physician-patient relationships.</td>
</tr>
<tr>
<td></td>
<td></td>
<td>38. Describe the normative behavior expected of physicians and patients when they engage in clinical encounters.</td>
</tr>
<tr>
<td></td>
<td></td>
<td>39. Describe the 5 types of exchanges and bids that are made in physician-patient relationships. Explain why is it important to manage all of these in physician-patient relationships?</td>
</tr>
<tr>
<td></td>
<td></td>
<td>40. Contrast the difference between patient-centered and doctor-centered communication. Describe what makes them different?</td>
</tr>
<tr>
<td></td>
<td></td>
<td>41. Define patient continuity? Describe the different types of continuity that occur in medicine? Explain how continuity change/influences what physicians do in the care of the patient? Provide an example.</td>
</tr>
<tr>
<td></td>
<td></td>
<td>42. Describe with a table the 4 types of physician-patient relationships based on continuity and style of communication? Give an example of each style that occurs in the practice of medicine and the situation it typically occurs.</td>
</tr>
</tbody>
</table>

**Discussion**

6. How does a physician create effective relationships with patients?

**Becoming a Master Physician**
**Section 4**

**Reflection (8) Physician-Patient Relationships.** How are relationships with a medical student different from that of a patient’s physician? What can a medical student do to establish a therapeutic relationship with a patient?

---

**Week Off**

- Mar 13-19, 2017
- SPRINGBREAK
- WORK ON YOUR PAPER
| Week 10 | **L17** | T Mar 21, 2017
4-5:30PM | The Medical Ethic: Oaths, Duties and Principles
43. Describe how is medicine a moral enterprise? What makes it so?
44. Summarize the five features of physician-patient relationships that makes medicine a moral enterprise according to Pellegrino?
45. List and define the six core principles of medical ethics.
46. Compare and contrast how the medical ethic is different from the business ethic?
47. Identify the ethical principles included in the Oath of Hippocrates, the oath of Maimonides? | **Becoming a Master Physician Section 5** | **Complete an outline for your paper** |
| **L18** | TH Mar 23, 2017
4-5:30PM | The Medical Ethic: The Virtuous Physician Virtues. What are they?
A Physician’s Character
48. Decide if character matters in becoming a master in a chosen field? Choose those virtues that will facilitate the acquisition of Mastery? Define a virtue? Explain the process of how an individual become virtuous?
49. List 5 character traits that would be of value to a physician and explain why they are of value in the practice of medicine?
50. Define professionalism as it relates to medicine? **Discussion 7.**
   a. How does a physician resolve ethical dilemmas in practice?
   b. Does physician character matter? Why or Why not? | **Becoming a Master Physician Section 5** | **Reflection (9) Medical Ethic. How is the profession of medicine protected or preserved by physicians adhering to high ethical standards and managing the principles of the medical ethic? What would happen to the practice of medicine if these high standards and principles were not followed consistently?** |
| Week 11 | **L19** | T Mar 28, 2017
4-5:30PM | The Medical Ethic: Tensions, Dilemmas and Clinical Wisdom
Ethical Dilemmas: Common
One method for resolving ethical dilemmas
Ethical Cases
51. When resolving an ethical dilemma:
   1. Set up the problem statement (Modified Brody Statement)
   2. List the four additional considerations that factor into resolving ethical dilemmas that arise in medical practice.
52. Examine why ethical dilemmas occur?
53. In the following ethical dilemma: ________ List the ethical principles that are involved and in tension? | **Becoming a Master Physician Section 6** |  |
| L20 | TH Mar 30, 2017 4:30-6PM | Works of Care: Defined and Introduction to the Works of Care Palette
What is care? What are the ways doctors care for patients?

How to categorize works of care
54. Define caring? Discuss what makes care meaningful to the patient?
55. List and define the four levels of caring according to Callahan?
56. List 5 types of works of care and provide two examples of each type.

Discussion: How patients and doctors select what works of care?
57. Discuss why one physician selects certain problems to treat while another physician treating the same patient will select other problems to treat? |
| L21 | T April 4, 2017 4:30-6PM | Works of Care: Selecting Works of Care to Create Care
58. Discuss the potential positive benefit arises when a physician uses creativity to treat a patient? Explain when is it appropriate to use creativity in the care of a patient?
59. Explain why listening is such a critical component of doctoring? Explain why listening is the most common complaint of physicians by patients—that is, "My physician does not listen to me."
60. Explain what it means to heal someone? Summarize what can physicians do to promote healing in a patient?
61. Discuss the meaning of the painting, "The Doctor" painted by Sir Luke Fildes? Explain what it communicates about doctoring? |
| L22 | TH April 6, 2017 4:30-6PM | Discussion Hour 8. How does a physician create care unique for a patient? | Becoming a Master Physician
Section 6
Reflection 10. Caring. Sometimes there are situations where medicines or surgery have little impact on the course of a disease (e.g., viral illness, or end of life) or a patient may choose not to use conventional medicine and some physicians find this situation challenging and uncomfortable. Why do you think this is so for some physicians? What are the "other ways to care" for a patient? Ok to cite example from text.
| WEEK 13 | L23 | T April 11, 2017 4-5:30PM | Outcomes of Care: The Physician’s Masterpiece & A Taxonomy of Outcomes  
62. List 5 different types of health outcomes and give an example of each?  
63. Describe the value of measuring specific health outcomes?  
64. List the specific outcomes of care that matter to: patients? Physicians? Health service researchers? Hospital administrators? Health policy planners? Employers? | **Becoming a Master Physician**  
Section 6 |
|---|---|---|---|---|
| | L24 & L25 | TH April 13, 2017 4:50PM | Paper Due  
Outcomes of Care: How Good Outcomes are Created  
65. List and describe the determinants of specific health outcomes?  
66. Define value? List the specific terms in the value equation.  
67. Explain why outcomes of care vary? List and describe the sources of variation common to health outcomes?  
68. Answer the question, “Can variation in health care be reduced? If so, how?” Describe a process (series of steps) to reduce health care variation and improve the quality of care.  
69. List those behaviors consistently done by a physician in patient encounters that are more likely to lead to good health outcomes?  
**Discussion Hour**  
9. What are the determinants of the outcomes of care? | **Becoming a Master Physician**  
Section 6  
Reflection (12) Getting to Good Outcomes. You are a physician and considering job offers in two different health systems. Both systems have the same goal: achieve high quality care that is publically reported. One system focuses on getting rid of “bad apples” (underperforming physicians) while the other system focuses on improving the system where the physicians work. Which place would you want to work and why? |
| WEEK 14 | OP-1 | T April 18, 2017 4-6PM | Master Physician Oral Presentations | Each student gives a 8-10 minute oral presentation |
| | | TH April 20, 2017 4-5PM | The Road to Become a Master Physician Reprised: A Dozen Principles  
70. Define mastery? Build a convincing argument that Mastery a process open to the majority of people.  
71. List and define the 12 principles that lead to mastery? | **Becoming a Master Physician**  
Section 1 Reprised |
| WEEK 15 | TH April 27, 2017 2:15 - 4:15 p.m. | END OF COURSE EXAM WEEK EXAM!! | |