Studying in the library, examining pathological specimens in the Museum, or studying bacteria through a microscope, medical students are reputedly the hardest workers of any collegians.

A Medical School That Ranks with the Best

MEDICAL education has come a long way in Oklahoma since the year 1900 when the Board of Regents of the University of Oklahoma set aside $300 as the first budget for the "Department of Anatomy and Premedical (Preclinical) Courses." The regents also provided the princely sum of $1,000 as salary for the versatile Dr. L. N. Upjohn who was to serve as head of the premedical department and director of physical education.

Last year, according to the Journal of the American Medical Association, the University of Oklahoma Medical School was one of eleven among sixty-seven approved medical colleges which in 1936 had no graduate fail in examination for license in any of the many states in which its graduates applied.

Oklahoma's medical school has long ranked high in this respect. In 1936 its record was perfect along with the medical schools of Yale, Southern California, Iowa, Louisiana, Wayne, Duke, Ohio State, Oregon, Vanderbilt and Wisconsin.

Only three of these top ranking schools had more graduates in 1936 than Oklahoma, and only four had graduates apply for licenses in more states. No state adjoining Oklahoma rated perfect in state board examinations in 1936 as did Oklahoma.

Oklahoma's remarkable record is all the more surprising in view of the fact that the Medical School's appropriations in recent years have been far less than the amounts requested by the Board of Regents, while several of the other schools in the top ranking group, particularly Yale and Duke, have great endowment funds contributing to their support.

The present trend in medical education recognizes the importance of educating students so that they will be well grounded in general medicine, general surgery, obstetrics, and pediatrics, and therefore merit license to practice medicine in any part of the country, explains Gen. Robert U. Patterson, dean of the Medical School.

"As far as specialties are concerned, the training is designed to give students the basic information necessary to give them an understanding of each specialty, to recognize their own limitations concerning them, and to form the groundwork for future study if they desire to take up one of the medical specialties later in their careers," Dr. Patterson said. "Medical educators are united in recommending that no medical man shall enter upon the practice of a specialty until he has had some years of general experience to provide the proper background for practice of any specialty."

"There is a marked tendency to increase the requirements for admission to medical schools. For example, in 1928 only two medical schools required a bachelor's degree as a prerequisite. Today there are ten with such requirements in the United States. At the present time, twenty-four medical schools require two years of college work as a prerequisite for admission, two require two and one-half years, forty require three years of premedical work, and ten require a degree.

"Experience indicates that students who have a good, broad, general, cultural education such as is acquired when taking a college course leading to a degree, as a rule make the most successful medical students."

Although no announcement has been made concerning it, University administrative officials are known to have considered raising the entrance requirements of the Medical School to a college degree.

The raising of standards in medical schools over the country has not as yet affected materially the number of students who apply to study medicine each year, Dr. Patterson said.

"Some localities in the country have difficulty in attracting physicians to practice in smaller towns. However, lowering the standard of requirements is not the way to meet that situation, as those who live in small towns are just as much entitled to have well trained, competent medical men available for them as those in the city."

"To encourage poorly educated students to study medicine simply results in a waste of state and private funds, and the time of the students concerned, and delays their start in life in some vocation or business for which they are better suited."

Numerous improvements in the physical appearance of the Medical School, the University Hospital and the Crippled Children's Hospital have been made since Dr. Patterson became dean of the school two years ago.

The medical school building was recently painted inside and out, adequate parking spaces have been provided for the faculty and employees on the north and east sides of the building, and the grounds surrounding the building have taken on a well-kept appearance.
In the hospital, a system of checking linen has been devised which has effected a great economy to the state. The purchase of emergency drugs has been reduced about ninety per cent, effecting a real economy. Other improvements in the methods of obtaining, storing, issue, and care of equipment, supplies, and other state property has been inaugurated in the last two years both in the medical school and in the two hospitals.

The drilling of oil wells on the land adjacent to the Medical School and the hospitals was a source of annoyance for some months, and led to some damage of property and inconvenience in the operation of the institutions.

"It would seem only fair that the monies accruing from the leasing of land and royalties from the production of oil should be placed in a separate fund and made available for the expansion of the medical school and its hospitals," Dr. Patterson said.

"So far, no action looking to this end has been taken, although several bills to effect it were introduced in the last session of the Legislature."

Dr. Patterson outlines the principal needs of the school as follows:

1. Additions to both hospitals and the medical school in order to increase the teaching facilities and at the same time enable the state to care for the hospital needs of a larger number of its underprivileged citizens.

2. Increased appropriations for the payment of a few full-time men to head several of the larger clinical departments.

3. Increased appropriations to permit the permanent staff of the medical school (those teaching preclinical years) to be placed on a twelve-months pay basis so that a six weeks summer school can be held each year.

Owing to the fact that both of the hospitals, the University Hospital and the Crippled Children's Hospital, are overcrowded and have a long waiting list, and some departments of the school are cramped in their quarters, a complete building program was presented to the Board of Regents and received their approval in 1936.

This program, to be carried out as rapidly as funds are obtained from the Legislature, includes an additional medical building, an additional wing on the University Hospital, an additional wing on the Crippled Children's Hospital, a separate isolation building for infectious diseases, a new nurses' home, and other less important additions such as a student union building, recreational facilities for students, internes and nurses.

The outpatient department of the University Hospital has been expanded materially and the examination and treatment of patients hereafter will be carried out with greater efficiency and comfort.

Dean R. U. Patterson

The changes made in the building will add two classrooms; one for a section, and one for a whole class for the use of instructors in giving clinical lectures or bedside instructions to students.

Several new courses have been introduced in the school and an effort has been made to place the department of hygiene and public health on a good basis.

Through funds appropriated by the last Legislature, eight professors and instructors have been added to the staff of the first two years of medicine. Two or three were added in 1936, so that the permanent staff for teaching the freshman and sophomore classes is now adequate for all purposes for a student body of the present size, Dr. Patterson believes.

The legislature also provided salary to pay a full-time orthopedic surgeon for the Crippled Children's Hospital, and the incumbent to act also as professor of orthopedic surgery. This important step will increase the usefulness of the hospital in treating children suffering from deformities.

The present faculty of the medical school is composed of 165 physicians and teachers. However, with only three exceptions, no member of the attending or visiting staff of the University Hospital and the Crippled Children's Hospital receives any pay for the care and treatment they give to patients in these institutions.

The amount of money they receive for teaching purposes is almost negligible, amounting to an average of about $90 a year for all of the time they give to teaching students.

The part of the faculty that is full-time and which instructs the first two years (the preclinical years) are on a different basis. They constitute only about one-fifth of the teaching staff, and deal only with the instruction of freshman and sophomore students in the school.

Some of the men who are still on the faculty, or were until recently, and have rendered long and faithful service to the University and who are largely responsible for the maintenance and growth of the medical school and its standing in the medical world today are listed by Dr. Patterson as follows: Drs. R. M. Howard, E. S. Ferguson, George A. LaMotte, Lea A. Riley, E. S. Lain, William M. Taylor, Arthur W. White, David W. Griffin, Wann Langson, J. T. Martin, John F. Kuhn, W. W. Wells, and the late Drs. Samuel R. Cunningham, Arthur B. Chase and H. Coulter Todd.

Graduates of the O. U. medical school have scattered all over the world. There are more than four hundred practicing in Oklahoma, but other alumni of the school may be found in thirty-six other states and in such far away places as the Philippines, Korea, Panama, China, Haiti, Nigeria and Liberia.

Many have distinguished themselves in their profession. About fifteen graduates are commissioned officers in the medical corps, U. S. army.

Dr. Charles L. Brown has been on the faculty of Harvard medical school, was assistant professor of medicine of the University of Michigan, and is now professor of medicine at Temple University medical school, one of the oldest and best medical schools in America.

In 1900 when the first "Department of Anatomy and Premedical Course" budget was set up, the special quarters for medical education consisted of about one-half of a wooden structure 25 by 75 feet in size. Other classes were taught in the quarters of other departments.

In 1902 the Board of Regents reported to the governor that "The expansion of the work of the department (Medical School) depends on the finishing of the physiological and anatomical laboratories in the Science Building. A whole floor, 60 by 120 feet, is given to the work of this department. These laboratories will be equipped and in readiness for the work of the latter part of the year."

However, the whole floor was not given over to the medical school for many years. The anatomy department did not get out of the wooden building until 1924 when the Medical Building (now the Pharmacy Building) was completed, although the anatomy department did acquire the whole of the wooden building.

By 1907, the School of Medicine embraced the departments of anatomy (including dissection, osteology, histology and neurology), chemistry, forensic medicine, pathology (including bacteriology and (Please turn to page 29)
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parasitology), and physiology. Dr. Roy P. Stoops was acting dean. The only full time professor was E. Marsh Williams, head of the department of pathology.

In 1908, several men who were to play an important part in the development of the school joined the staff. Dr. C. S. Bobo was elected dean. Dr. L. A. Turley was made professor of pathology, with the additional duty of organizing the bacteriological laboratory for the State Board of Health, also acting as state bacteriologist. John Dice McLaren was made head of the department of physiology and Edwin DeBart, head of the department of chemistry who taught chemistry in the medical school was appointed state chemist.

The medical school was first inspected in 1909 by Abraham Flexner. On his report the school was given an “A” rating, which has been maintained ever since.

The last two years of medical training, the clinical years, were established at Oklahoma City in 1910 when the medical school of Epworth University was taken over by the University. The first and second years were transferred to Oklahoma City in 1928, and the entire work of the School of Medicine is now done in Oklahoma City.

The medical school’s own library was founded in 1911 by segregating from the general library the medical books and thirty magazines. Today the library contains approximately 15,000 books and bound journals. The subscription list includes approximately two hundred journals and continuations.

In 1917 the Legislature set aside lands for a medical school campus in Oklahoma City, and appropriated money with which to build a hospital owned by the state, to be operated and controlled by the medical school. It was constructed to provide clinical material for teaching purposes for the medical school, and at the same time enable the state to provide good medical treatment and hospital care for some of its less privileged citizens.

Ten years later the Legislature appropriated money for the construction of a Medical Building and Crippled Children’s Hospital on the medical school campus at Thirteenth and Phillips Streets. The preclinical departments and library were moved from Norman, and the administrative offices and the part of the library in the City General Hospital were all moved to the new medical building which was completed in 1928.

The school had a long and successful period of development under the administration of Dr. LeRoy Long who was dean from 1915 to 1931. Dr. Lewis J. Moorman was dean from 1931 to June, 1935, and continued the record of high scholastic standing and accomplishments.