

DH20000525 E1

Medical-School Group Proposes Huge Online Library for Students

BY KATHERINE S. MANGAN

MEDICAL STUDENTS drowning in a sea of information would get relief under a proposal to create a massive online digital library offering everything from lecture notes to virtual heartbeats.

The proposed system, which generated heated discussion at the annual meeting of the Association of American Medical Colleges here last month, would allow medical schools across the country to pool information and make it available to medical students, undergraduates in premedical programs, students in other health-related fields, faculty members, and practicing physicians.

"This would help students navigate through the exploding volume of information, which is totally overwhelming them," said Mary Y. Lee, dean for educational affairs at Tufts University School of Medicine. "It would also help them make much more effective use of their time."

Tufts has a database for its own medical school, where 3,000 faculty members are distributed throughout Maine, Massachusetts, and Rhode Island. The national database proposed by the A.A.M.C. could include information on core competencies in medicine, lecture notes and syllabi, and multimedia presentations.

Officials of medical schools at 10 universities around the country, including Tufts, met in September to begin studying whether such a plan was feasible. They decided the plan could work as long as they had plenty of support from other medical schools.

Medical-school officials and faculty members who crowded into a conference room here to learn about the proposal were intrigued by the idea, although some expressed reservations.

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Sammy A. Deeb, an assistant professor of surgery at Texas Tech University Health Sciences Center, said that the more students rely on computers, the less they'll interact with professors. "I'm concerned that students will feel like they don't need to attend lectures," he added.

"As a surgeon, I've noticed a difference in the way residents interact with patients. Their bedside manner is not what it used to be," he continued. "Those skills are learned from interacting with people, not with computers."

That was also a concern of some Tufts medical professors, Dr. Lee said. But she insisted that the time students spend with professors has been more productive, not less, since Tufts created its database.

"Students have told us that if it's more efficient to read the information at home, they'll do that. The time they spend with faculty ends up being more effective. They're

problem-solving and engaging in a higher level of learning."

That is also the case at Wake Forest University, where medical students are required to have laptop computers and much of the instruction is computer-based, said Jack W. Strandhoy, a professor of pharmacology.

"By having lecture materials available on the computer, stu-

dents come better prepared, and have more sophisticated questions," he said. "Having such a large library of resources leads to richer, more interesting discussions."

Other professors worried that a uniform database might be the first step toward dictating a common curriculum for medical schools.

The proposed system would let

students take notes in personal folders as they read through information on their computers. If they didn't understand a portion of a lecture, they would be able to click on hot links to get detailed explanations. They could also click on buttons to hear simulated heartbeats or use a virtual microscope to examine a patient's "lungs."

Supporters said that the system

would encourage faculty members to collaborate with colleagues around the country, and offer a creative outlet for them to try new teaching approaches. By pooling their resources, faculty members could make better use of their own time, they argued.

Some of the biggest unanswered questions about the proposal are: How much would such a system cost? And who would pay for it? The proposal's backers say they'll tackle those issues once they determine whether a demand for the system exists. ■