DISCUSSION

Dr. Forgacs (Woolwich) found that in his area the C.P.C. was the most successful form of meeting; care was taken in choosing the modermor. This was also a way of bringing in clinicians at other hospitals.

Mr. M. R. Williams said that at Canterbury, veterinary and dental surgeons took part in some meetings which were therefore interprofessional and very successful.

Professor Hewer (Bristol) had found that these meetings in the University Department could only be held at 5.15 which was not a good time for general practitioners, in spite of this there was a few who came fairly regularly. His hospital also held a meeting at 8.15 p.m. on one day a month to review the cause of death of everyone dying in the previous month. An interdepartmental committee selected four cases for special discussion. Registrars and Senior House Officers were present but general practitioners were not invited. He considered that clinical pathological conferences were most valuable and believed it should be possible for them to be held even in small hospitals.

Professor Smart (Newcastle) said that in their new integrated curriculum there were two years of interdepartmental teaching. It was very important to have active participation and questioning by all members of the audience, whatever their ages.

Dr. Lennox in reply to a question, thought that the effort needed for publication was too great to be worthwhile, but obviously some people read these discussions with enjoyment.

MEDICAL EDUCATIONAL ADVISORY SERVICE

N. C. Manley-Cooper
Smith, Kline and French Laboratories Ltd.

As a normal rule my Company feel it preferable to provide some specific "Service" of benefit in this field rather than to allocate sums of money which tend to be dissipated over a wide area. In the past Smith Kline and French have provided such services as closed circuit colour television, inter-continental link programmes, specialised medical films, tape recordings, videotaping facilities etc. A very considerable expertise in all forms of instructional technique and audiovisual equipment and its use has therefore been acquired and the benefit of this experience might be of significant value to individual schools and medical centres.

Much more use could be made of modern techniques of instruction which tend to communicate the content of lectures to far wider audiences, thus saving considerable effort on the part of eminent lecturers and tending to alleviate the constant problem of shortage of good teachers. One of the basic problems is some sort of course in instructional techniques which are of great value in teaching the teachers in the various modern techniques of instruction such as group discussions, case history presentations, and syndicated learning, many of which would appear to be eminently suitable for Medical Centres and which would tend to bring out the practical experience of individual teachers rather than their theoretical knowledge. Considerable benefit could be achieved by all concerned by the organisation of such courses perhaps on a regional basis.

I am grateful to the Chairman and Dr. Ellis for all the support that Smith, Kline and French have received in sponsoring the Conference both from the Medical School and from ASME.

ADDENDUM: In view of the many enquiries received since the Postgraduate Clinical Tutors Meeting held in Birmingham in November Smith Kline and French Laboratories Limited are pleased to announce that they are setting up a Medical Educational Advisory Service which it is hoped will cover many aspects of educational problems confronting those concerned in the organisation of programmes for Postgraduate Medical Centres. For further details please write to Mr. N. C. Manley-Cooper, Head of Medical Educational Services, Smith Kline and French Laboratories Limited, Welwyn Garden City, Hertfordshire.
Proceedings of the conference on the postgraduate medical centre. Medical education advisory service.

N. C. Manley-Cooper

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