trainers, low fidelity models, still have a valuable part to play in medical education. They remain cost effective, adaptable and accessible training tools in the era of increasing complexity.^{1–5} Simulation provides a safe space to develop both technical and non-technical aspects.^{3–4} Low fidelity simulation can be used to underpin the learning objectives of trainees through effective feedback in real time, access to repetitive practice and remain a feasible training tool for trainers and trainees alike.^{2–4} High fidelity simulation should not be excluded completely however appears to be best suited to defined roles in more complex moulage.^{1–4}

Take home message Technology has the ability to improve and evolve medical education. With the potential for increased feedback, self and peer assessment along with pragmatic assessment, simulation has firmly entrenched itself in medical education. Care should be taken however not to disregard lower fidelity models as they still provide proven effective learning, enable the teaching of non-technical skills and facilitate knowledge delivery.

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10 OSLER AS A ROLE MODEL FOR TODAY

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If Sir William Osler were alive and practicing as one of our contemporary colleagues, would he be viewed as a role model by medical trainees and other physicians? Recently published literature has sought to define clinical excellence; this characterization of physician performance establishes a context upon which role models in medicine can be appraised. Building on this framework, we present rich anecdotes and quotes from Sir William Osler himself, his colleagues, and his students to consider whether Osler would have been regarded as a role model for clinical excellence today.

This manuscript illustrates convincingly that William Osler indeed personified clinical excellence and would have been appreciated as a consummate role model if he were alive and on a medical school's faculty today. However, a century has passed since his death, and he is not sufficiently visible today to serve as a role model to modern medical trainees and physicians. Moreover, we speculate that Osler himself would not want to be a role model for today's trainees, as he emphasized that medicine is best learned from teachers at the bedside – a place where he cannot be. Reanimating Osler through rich stories and inspiring quotes, and translating his example of clinical excellence into modern clinical practice, can remind us all to carry Oslerian virtues with us in our professional work.