Dear Editor

Medical education innovation is a field of active investigation.¹,² Whether it is problem-based learning, lectures, discussion groups, systems-based blocks, integrated courses, video-captured, pass-fail, or iPad-requiring, every medical school approaches preclinical education differently. Which combination of these methods is most effective?

To answer this, I propose that medical schools ought to be required to publish their average United States Medical Licensing Examination (USMLE) Step 1 scores annually. In doing so, the most effective education methods will emerge.

Individual school’s curricular changes can function as pilot studies. For example, if one year, a medical school implements a curriculum innovation and its students perform on average 10 points higher on the USMLE Step 1, then the innovation should earn greater consideration. Or, if another medical school consistently scores below medical schools with similar student bodies, then the curricular differences should be examined.

Publishing medical schools’ USMLE Step 1 scores, will increase transparency and make each school more accountable for the quality of its education. Deans of medical education around the country will be able to collaborate and implement the most effective strategies at their own schools. The “multi-institutional curricular effort”³ will progressively raise the standards of medical education, translating into better educated future physicians.

References


