

The Founding of the Mayo School of Graduate Medical Education

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Abstract

The Mayo Foundation for Medical Education and Research (hereafter the Mayo Foundation), the precursor to the Mayo School of Graduate Medical Education, was incorporated in 1915. The Mayo Foundation, which was affiliated with the University of Minnesota Graduate School, aimed to establish a higher standard for training medical specialists. Together, the University of Minnesota and the Mayo Foundation pioneered a graduate medical education program that allowed residents to earn master's and PhD degrees in clinical medicine and surgery. Unlike elsewhere in the United States, the residency training program was not pyramidal. (In a pyramidal residency program, each training year, some residents are systematically eliminated to reduce the number of more senior trainees.) All those who started the Mayo Foundation residency program had an opportunity to finish depending on their own merits. Louis B. Wilson, the first director of the Mayo Foundation, became a major figure in graduate medical education in the 1920s and 1930s. Although the granting of graduate degrees in medicine and surgery stopped over time, Mayo Clinic ultimately became the largest site of graduate medical education in the world.

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This article describes the creation of the Mayo Foundation for Medical Education and Research (hereafter the Mayo Foundation), the forerunner of the Mayo School of Graduate Medical Education (MSGME). The Mayo Foundation was incorporated in 1915 (Figure 1).¹⁻³ The original endowment of \$1.5 million came from the personal funds of brothers William J. Mayo, MD (1861-1939), and Charles H. Mayo, MD (1865-1939).¹ Their father, William Worrall Mayo, MD, started a medical practice in Rochester, MN, in 1864. After graduating from medical school, the 2 brothers returned to work with their father. The Mayo brothers established a thriving surgical practice that eventually became known as Mayo Clinic. The Mayo Foundation was the graduate education link between Mayo Clinic and the University of Minnesota.⁴ Mayo Clinic pathologist Louis B. Wilson (Figure 2), who became a major figure in American graduate medical education, stated plainly that the purposes of the foundation were “indicated in its title.”² If the words “Medical Education of *Specialists*” had been in the title, Wilson’s statement would have been more accurate. The Mayo Foundation’s main purpose was to establish a higher standard for training medical specialists.⁵

The Mayo Clinic residency program was not the first in America. Most authors rightfully emphasize the Johns Hopkins Hospital (founded 1889) as the site of origin of the American medical residency, when *residency* is defined as several years of supervised, progressive, specialized training after graduation from medical school and completion of an internship.⁶⁻⁹ Internist William Osler and surgeon William Halsted established the residency training program at Johns Hopkins on the lines of the system they had observed in Germany.¹⁰ Osler’s first resident, Henry Lafleur, began his Hopkins training in 1889. The residency program implemented at Hopkins differed from traditional apprenticeships, attending extramural private medical schools that provided hands-on clinical experience, serving as a house pupil or intern for 1 or 2 years, and European medical study.^{8,11} These 4 educational avenues were pursued by a small percentage of American medical students or medical graduates in the 1800s to supplement their degree-granting medical school training, whereas residency programs increased markedly in number and importance during the decades after 1920.^{6,8}

Christopher Graham was appointed the first intern at St Mary’s Hospital, Rochester,

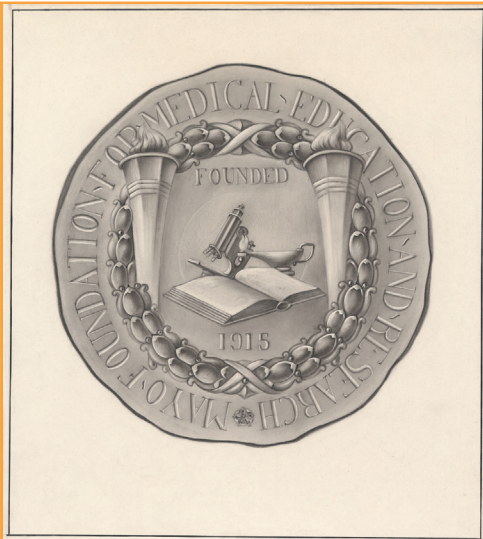


FIGURE 1. Logo of the Mayo Foundation for Medical Education and Research. By permission of the Mayo Historical Unit, Mayo Clinic, Rochester, MN.

GRADUATE MEDICAL EDUCATION AT MAYO CLINIC BEFORE 1915

The first trainees at St Mary's Hospital worked directly with William J. Mayo and Charles H. Mayo, and some stayed on afterward to assist other physicians in diagnosis.¹ In 1905, a system was started to improve graduate medical education in Rochester.¹ Medical graduates worked in the laboratories as assistants for 1 to 2 years, and subsequently became hospital interns or assistants in medicine or surgery.¹ Over the next several years, the training system matured. A 3-year training curriculum was instituted in 1912.¹⁴ Trainees completed 1 year of pathology, 1 year of clinical diagnosis, and finally 1 or more years of either surgery or internal medicine.¹ A graduate education committee appointed by William J. Mayo decided to call these trainees "fellows," the term used for graduate students in Oxford, United Kingdom.^{12,15} Thus, the term *fellow* used at Mayo Clinic equated to the modern-day "resident," and "resident" will be used in this article for clarity. Thirty-six residents were following this plan in 1912.¹ Mayo physician Emil Beckman explained in 1914:

in 1894, and Melvin Millet worked as a "resident physician" at the hospital from 1898 to 1901, before becoming an attending physician.^{1,12} The first regularly scheduled, yearly *interns* (Robert Farrish and Jacob Prinzing) began training in 1901.^{12,13} By 1901, the pyramidal *residency* at Johns Hopkins was 12 years into development, highlighting its pioneering role in American medicine. (In a pyramidal residency program, each training year, some residents are systematically eliminated to reduce the number of more senior trainees.) The Mayo residency program was innovative in that it was not pyramidal; that is, all those who started the Mayo Foundation residency program had an opportunity to finish depending on their own merits. Furthermore, the Mayo Foundation residency program emphasized the attainment of graduate (ie, master's and doctor of philosophy [PhD]) degrees in clinical medicine and surgery. Contributions of Mayo Clinic, and those of Louis B. Wilson, to the development of American residency training programs have been overlooked by most historians.⁶⁻⁸ Rosemary Stevens is a rare exception.⁴ For example, Kenneth Ludmerer describes a few aspects of Mayo's residency program, but does not mention the influence of Louis B. Wilson on American graduate medical education.⁹



FIGURE 2. Dr Louis B. Wilson. By permission of the Mayo Historical Unit, Mayo Clinic, Rochester, MN.

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