Undergraduate Teaching

With regard to undergraduate teaching the British Council's recommendations were:

(1) No student shall be admitted to the final examination, qualifying to practise medicine unless he has attended an ophthalmic clinic for not less than six hours a week during a period of three months, and has attended a course of systematic instruction in ophthalmology.

(2) No student shall be considered to have passed the qualifying examination unless he has shown a sound knowledge of practical ophthalmology in an examination conducted by ophthalmic surgeons.

The Committee appointed by the American Ophthalmological Society to investigate this subject suggest: That for the present 60 hours may be taken as the proper allotment for the teaching of ophthalmology in the undergraduate course; of which four to eight hours might be devoted to didactic and 52 to 56 to clinical instruction.

Three supplementary reports by Drs. G. Derby, Arnold Knapp, and G. M. Byers give the summing up of answers received from a number of graduates, who had been in practice for several years, as to the value they attached to the instruction they received in ophthalmology in their undergraduate days.

The questions sent out were as follow:

(1) Of what value has the undergraduate instruction in ophthalmology been to you in your line of work?
(2) If it has been of value, which part of the instruction could with benefit be enlarged upon?
(3) If it has not been of value, do you feel that it should be omitted from the undergraduate studies?

The conclusions drawn from the answers received by Dr. Derby, which were substantially the same as those arrived at by Drs. Knapp and Byers, are as follow:

"That the course in ophthalmology is of real use to the student and should not be omitted.

"That the great part of the time should be devoted to practical work in ophthalmoscopy and in studying the commoner diseases and injuries of the eye.

"Sections should not exceed six men. We have had experience with sections of six and twelve and believe that the smaller number is far superior."

Unfortunately, the General Medical Council in this country, to whom the Council of British Ophthalmologists sent their report, did not see their way to adopt it in its entirety, but recommended:

"That every student should be required to attend a course of
practical instruction in ophthalmology of not less than ten weeks' duration, and that no student should be admitted to the final examination unless he presents a certificate to the effect that he has attended such a course regularly, and that his work in connection therewith has reached a satisfactory standard."

Great Britain, therefore, still lags behind the Irish and large majority of American and other foreign universities in the teaching of ophthalmology to undergraduates, for at them it forms one of the subjects of the qualifying examinations and the examiners are invariably ophthalmic surgeons. Experience has shown that without such regularly applied tests by licensing bodies there can be no guarantee that a uniform standard of knowledge of ophthalmology has been acquired by students coming from different schools. The General Medical Council would not dream of accepting a certificate from a student's teacher that he had attended instruction regularly, and that his work had reached a satisfactory standard, as evidence that he had sufficient knowledge of medicine, surgery or midwifery to entitle him to a diploma to practise. Why then, if a knowledge of ophthalmology is admitted to be essential, should a different method be adopted for testing it to that which is employed in other subjects?

Graduate Teaching

The report on the graduate teaching of ophthalmology in the Transactions of the American Ophthalmological Society is signed by Drs. E. Jackson, F. H. Verhoef and T. B. Holloway. Some of the passages in it are so much in accordance with the experience of those who have devoted special attention to the subject in this country that it is well to quote them at length.

Thus dealing with the lack of adequate preparation of many of those who take up ophthalmology as a special branch of practice the report says:

"The average undergraduate student has been expected to learn a great deal about the fundamental branches, anatomy, physiology, and pathology, that did not seem to have any practical connection with his subsequent studies in practice. And, having spent his time acquiring so much that seemed useless, he has assumed that he has been taught all that could be useful. The young doctor of medicine, advised not to think of a speciality until long after he has put the study of anatomy behind him—he hopes for ever—assumes that he was taught, along with the relations of the structures in Scarpa's triangle, all the anatomy of the eye that he will ever need to know.

"He believes that, having been puzzled by the layers of the retina, when he had no interest in the purposes they serve, he learned as much of the histology as he can ever find useful. He was not conscious of any significance that might attach to the behaviour of visual purple, and the suggestions that might come from it as to the influence of