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Guest editorial

Osteopathic medical education in 2001

The medical education enterprise continues to represent osteopathic medicine's future. The structure of this enterprise is designed to produce the highest quality, best-prepared, osteopathic practitioner of the future. The organization of osteopathic education is unique in that it relies on contributions from all segments of the profession in a distributive model of delivery. The recent reorganization of graduate medical education into osteopathic postdoctoral training institutions (OPTIs) represents the first—albeit major—professional step toward an evolving osteopathic educational continuum that begins before matriculation in undergraduate medical education and extends through continuing medical education.

As osteopathic medical education meets the multiple challenges related to a changing environment, it is more important than ever that we take the opportunity to review our achievements throughout the educational continuum. This annual education issue of the *Journal of the American Osteopathic Association* showcases *where we are* in our educational endeavors and *where we are going* through the presentation of current innovations, new initiatives, and examples of best practices. The data reflected in the reports represent the current status of our efforts and forms the basis from which we can identify new opportunities while evaluating current strategies through the lens of outcomes.

So much focus and activity is occurring in education that this year's focus on osteopathic medical education is being presented in two parts. The first segment, in this month's issue, identifies *where we are*. The December 2001 issue of the *Journal of the American Osteopathic Association* will provide some interesting and provocative examples of *where we are going*, with a focus on technology.

It is postulated by many experts that we are only seeing the tip of the iceberg in an anticipated massive and rapid technology evolution. Technology is expected to change the way healthcare is delivered, impact the doctor-patient relationship, link more effectively our distributive style of training medical professionals, promote the concept of an educational continuum, enhance problem-solving at the bedside, and change forever the "expert" role of the physician in a world where medical expertise is at the fingertips of all patients. The osteopathic educational enterprise is being challenged to integrate technology at a rate that requires (1) a dependable infusion of resources (people and dollars), and (2) a cultural change in the very fabric of our profession. The last segment, which will appear in next month's issue, presents several examples of academic initiatives addressing the integration of technology.

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