

Shifting Dullness

April, 1993



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- Harmless April Fool's Parody (p.5)

Clinical Elective Survey Results

Shifting Dullness would like to thank all the MS IVs (soon to be interns) who took the time to respond to our annual Fourth Year Electives survey. Your thoughtful comments are greatly appreciated by the MS IIIs (soon to be MS IVs), who of late have been seen emerging from their labs and milling around the Registrar's office. This year saw the highest number of responses to the survey (twenty one) in recent memory. The breakdown of respondents into their choice of specialty is as follows: Medicine - 10; General Surgery - 4; Pediatrics - 3; Otolaryngology - 2; Emergency Medicine - 1; and Orthopedics - 1. Thanks once again.

Question One: What rotations did you find particularly helpful?

Both Sub-I's and ICU's, long considered necessary prerequisites for residency programs, were highly rated in this survey. Of interest is the fact that several Surgery bound MS IVs recommended doing a Medicine Sub-I, while several Medicine bound MS IVs highly recommended the SICU rotation. The breakdown for these rotations: Med Sub-I - 11; Surgery Sub-I - 6; MICU - 5; SICU - 4; CCU - 3; Peds Sub-I - 2; and PICU - 2. Other highly ranked rotations, largely regardless of choice of specialty, were: ID Consults - 10; Cardiology Consults - 7; and Dermatology Consults - 7. Other rotations receiving more than one vote were: Radiology - 4; Orthopedics - 3; Nephrology - 2; ER Medicine - 2; and Anaesthesiology - 2.

Specific quotes included:

- "ER - great learning whatever you're going into"
- "SICU - best teaching 4th year...outstanding"
- "Surg Sub-I - Dr. Bollinger is a great attending"
- "Surg Sub-I - Dr. Iglehart is excellent to work with"
- "Surg Sub-I - with Pappas or Meyers"
- "Medicine Sub-I - for everyone"
- "Medicine Sub-I - hard and not fun, but worth it in the long run"
- "Med ER - a great final rotation, hours are good...see and learn a lot"
- "CCU - a fantastic but rarely publicized elective"

Question Two: What rotations were weak or overrated?

Although it got four votes in the "helpful rotation" category, Basic Radiology drew in 15 votes and plenty of venomous comments in this category. Two other courses which drew praise in the previous category were also mentioned as poor rotations: Anaesthesia got three votes here, and Cardiology Consults got two. No other rotations received more than one vote. Specific quotes included:

- "Radiology - truly a waste of time"
- "Radiology - very weak teaching, students have no role and are largely ignored"

"Radiology - the most worthless month in my four years of medical school"

"Radiology - unbelievably bad"

"Radiology - I heard (it) was weak but I thought I needed it anyway. I was wrong - it was that poor"

"Radiology - I learned more than if I had taken the month off, but not by much"

Question Three: Have you any advice on scheduling early rotations with respect to the application process?

A fairly diverse response was noted to this question. Seven respondents recommended doing rotation specific courses (ie Sub-I's, ICUs, and other electives) early (six "in the summer," one "by the fall") so that "you can get solid, current recommendations." Two people suggested, for those students still unsure of what field to enter, to "use your earliest courses to help select your specialty." One person noted that "you shouldn't be afraid to do high demand courses early in fourth year."

Question Four: Is there a best time to take a month off for applications? Interviews?

Another diverse set of responses. The clearest consensus (13 responses) was that taking November or January off effectively resulted in a seven week vacation (due to December break) which was plenty of time to interview. Two people stated that this much time was not really necessary: "a month off is not necessary to see up to ten places without difficulty." People recommended July-August as the time to do applications. No one recommended taking these months off, although four specifically mentioned that doing consult services during this time left plenty of room to fill out applications. Two people stated, however, that applications were not time consuming and could "be done on any rotation."

Question Five: What is your specialty choice? What rotations would you recommend for your specialty?

Only specialties with more than one respondent are included, and only courses which received more than one vote are tabulated here.

- Medicine (10): Sub-I - 7; ID Consults - 7;
- Cardiology Consults - 6; Units (MICU, CCU, or SICU) - 6; Dermatology Consults - 3;
- Nephrology - 2; Radiology - 2; and
- Ophthalmology - 2.
- General Surgery (4): Sub-I - 4; SICU - 3.
- Pediatrics (3): Sub-I - 3; PICU - 2.

(see Survey, p.4)

MSIV News

Lyndon Jordan

1. Linda Chambers has mailed a memorandum regarding Graduation Weekend attendance. Please complete this form and return it to her as soon as possible.
2. Twenty fourth annual AOA Original Studies Research Symposium is scheduled for Tuesday, April 27. See Mike Scard or George Verghese for further details.
3. Parents Weekend is planned for May 8-9, so make plans now.
4. If you have not already done so, return the order form for academic apparel to the Office of the University Marshal. You may call them at 660-1555 if you have questions. The apparel will be issued May 3-15 at the Bryan Center Store.
5. **Graduation festivities:** If you would like to get involved with planning the graduation banquet, picnic, slide show, etc., let me know. The banquet is scheduled for Thursday, May 13; the picnic is planned for Saturday at 1 p.m. following the Baccalaureate Service (P-Z); graduation exercises will be held Sunday May 16.
6. Congratulations for a successful Match! A sincere thanks for the help and the support of the Dean's Office. The reception was much appreciated.
7. The Office of Student Health is offering a tuberculin skin test to all graduating students. If you are interested in receiving the PPD skin test, report to the Student Infirmary, Duke South, Purple Zone, Room 4136 any time between April 5-7. Call 684-3367 for details.
8. Invitations for Graduation Exercises will be available from April 12-16 in the Duke University Store in the Bryan Center. Each degree candidate is entitled to eight engraved invitations. Additional invitations may be purchased at the store for 50 cents each.
9. The Spring 1993 Tennis Tournament is scheduled for Saturday, April 24. Watch for details.
10. Flex Review: call me if you are interested in the Kaplan group rate at 493-7877 before 9 p.m.



Cultural Calendar

EXHIBITIONS

Courtyard — Duke Hospital North: Clyde Jones' CRITTERS.
Eye Center — "Spring Theme" Art display and sale by eye center employees and volunteers.

Mars Display Cases — North South Corridor, Duke Hospital North:

Mar.29 - Apr.12: Occupational Therapy month Display.
Apr.2 - May 3: Rustic Scenes in Goache by Larry Salyers.
Apr.12 - Apr.19: National Lab Week Display.
Apr.19 - Apr.26: Secretaries' Week Display.

Morris Building — First Floor:

Apr.12 - May: National Tumor Registrar Week.
Duke South Main Lobby:

Mar. 27 - Apr.23: Mostly Woodcarved Fish by Bob Stanick & Doug Evans.

Apr. 24 - May 9: Volunteer Appreciation Week.
Duke University Museum of Art:

Mar.26 - May 30: Soho at Duke IV: In Search of Self.
Apr.4: Art for the ARC of Durham, Durham Hilton, 3-5 P.M. — Tickets & Info.: 493-8141 (Association of Retarded Citizens).

N.C. Botanical Garden:

Until Apr.28: The Amazon Rainforest: Deforestation and Living Standards by Kella V. Sydenstricker.

LITERARY LUNCHTIMES

Osler Literary Roundtable meets Fridays at noon in the Dean's Conference Room (M133 Green Zone)

Apr.4: "A Short Story" by Charles Baxter.

Apr.9: Open Reading.

Apr.16: Visiting Poet from East Carolina, Mary Jo Mahoney, R.N.

Apr.23: "Affinities" by John Hersey.

Apr.30: Visiting Poet, Frances O'Roark.

PERFORMANCES

Apr.2: "War Requiem" by Benjamin Britten, Duke Chapel at 8 P.M.

Apr.3: "War Requiem" by Benjamin Britten, Duke Chapel at 3 P.M.

Apr.4: The Delphic String Trio, N.C. Museum of Art, 3 P.M. Call 833-1935.

Apr.6: "Canto IX" by Concert Band, Stewart Theater, 8

Shifting Dullness



**Do you have an
"odor problem?"**

Try KORO-TIME
natural chlorophyll tablets
safely and effectively
control most body odors

Take one or two tablets as needed to control body and mouth odors. Especially after eating such foods as onions, garlic, strong cheeses, etc. Feel more comfortable in presence of others — let natural chlorophyll in KORO-TIME tablets work for you.

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As another group of MS IVs stands poised to ride off into the sunset, *Shifting Dullness* is beginning to search for a new crop of writers, editors, and artists. Anyone wanting to write a regular column (or even a sporadic column) is encouraged to inquire; we are specifically looking for someone to pick up the monthly "News Capsules" section. People interested in editing/layout are welcome - no experience is necessary. We are always looking for new art, photography, and cartoons. Time commitment is up to you. This is a good chance for up and coming MS IIIs to become involved. Fame, fortune, and thousands of adoring fans await. Call Greg Lucas at 684-1779 or Fred Rimmele at 286-2645.

Survey (from page 2)

Otolaryngology (2); Sub-I - 2; otolaryngology clerkship - 2.

Question Six: What are your thoughts on away rotations?

There were many varied thoughts here. Four respondents felt away rotations were absolutely necessary for a highly competitive field or if "there is some place you really want to go." One future otolaryngologist claimed it was "crucial for matching me into my #1 choice." Two people warned, however, that it shouldn't be done just as an "audition" for a residency slot at a particular medical center, because "percentage-wise, they usually don't work out." Four felt it was optional but potentially useful, while two wistfully commented "I wish I had."

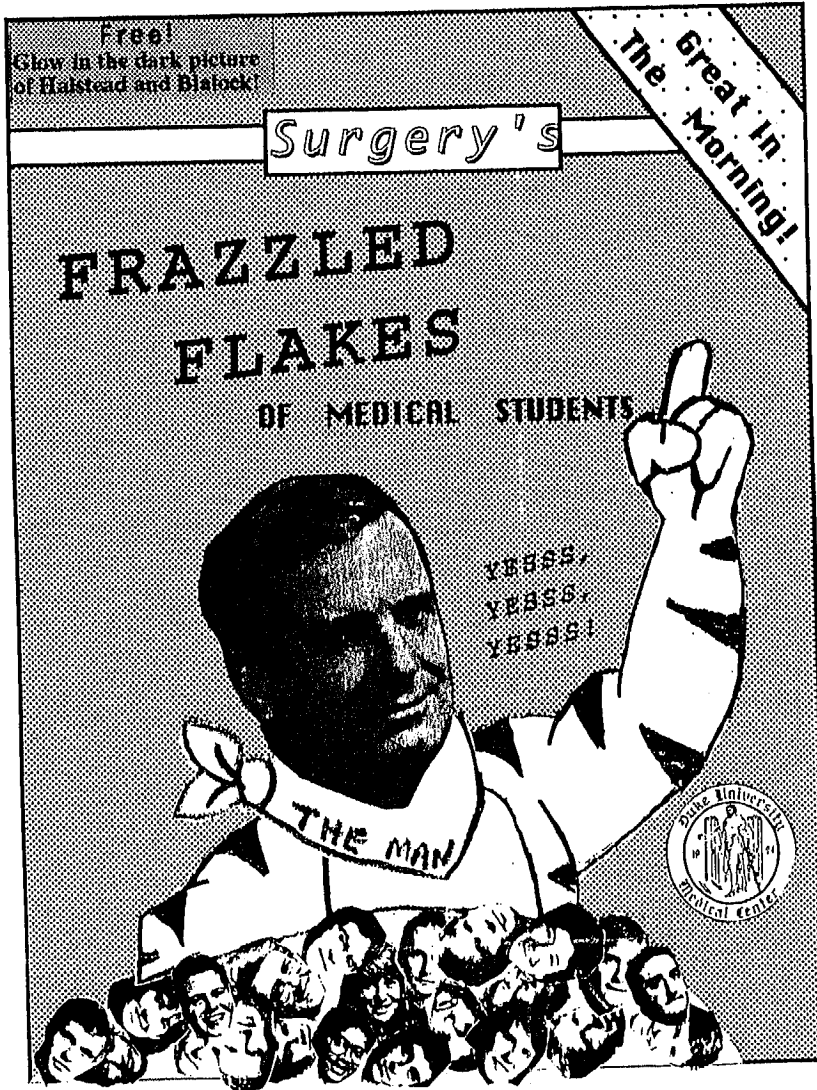
Question Seven: Any other comments?

- "Enjoy the fourth year, which is not that stressful"
- "There is a vast difference between 2nd and 4th years...people are more interested in teaching you than making you sweat out an answer. Also, you have much more time to read."
- "Don't waste time applying to a school whose location already rules it out"
- "Don't ever rank a school, no matter how low, if you don't want to go there"
- "Don't be complacent - drop rotations, switch, take vacations"
- "Don't kill yourself - take 'easy' and 'hard' courses"
- "Be aggressive in rotations or you won't be allowed to do things"
- "Diversify your knowledge base while you still can"
- "Go to Hell, Carroll!"

Shifty Bottom Feeding Dullards

... The Official Parody of Shifting Dullness. Accept no substitute

April Fools, 1993



Second gunman terrorizes Medical Center

The Duke University School of Medicine endured a tense afternoon last Thursday as an armed gunman ran through South Hospital, taking a hostage and firing shots at police from a second story window. Although the perpetrator was initially thought to have escaped from police custody en route to an arraignment hearing, it was quickly discovered that the gunman was indeed a first year medical student, much to the relief of local law enforcement officials.

"We was pretty worried that this here was another Ricky Coffin incident," said Duke Security Officer Billy Verdin as he wiped Danish crumbs from his mouth. "Woulda been purty darn embarrassing, that's what it woulda been. Shore was relieved t' hear it was just only just another crazed medical student."

The student, identified as Harold Thropworth IV, had been under "some pretty intense pressure lately," said registrar Emil Petrusa, "since he failed every exam since the beginning of the academic year. And with the virology test coming up, well, I guess he just snapped."

Brandishing a pistol, Thropworth ran around CTL shrieking "I had all I can stand, and I can't stand no more" until he encountered Robert Hill, James B. Duke Professor of Biochemistry. Thereupon, the deranged student took Hill hostage, demanding "better teaching, more pertinent subject material, and fairer exams."

"When I heard how unreasonable his demands were," a shaken Hill stated later, nervously clutching copies of his famous lecture, The 237 Known Hemoglobinopathies, "I was sure I was going to get snuffed."

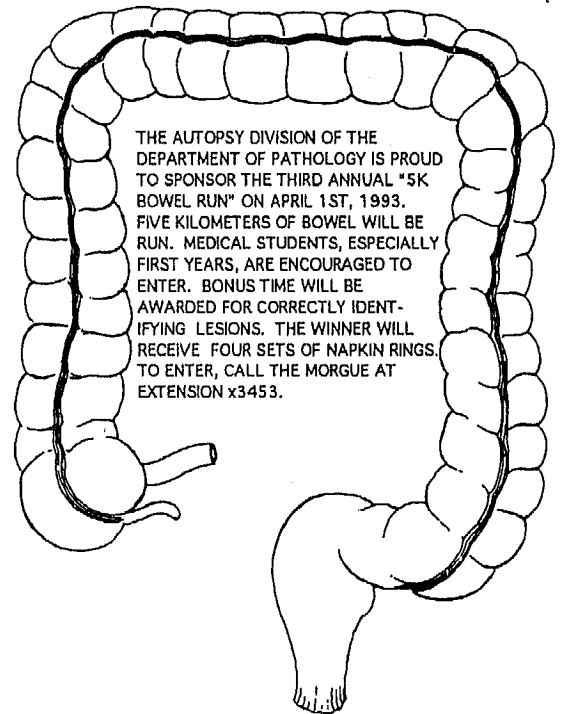
Dean Dan Blazer reacted quickly to the crisis. "My first overwhelming impulse was to sit down and write a letter to all medical students emphasizing how inappropriate this sort of behavior was, and how it would not be tolerated at our institution. However, I realized how little time we had. So I called the SWAT team."

The situation was rocky at first. Said anatomy professor Matt Cartmill, "I knew things were going bad when young Thropworth pointed his gun at Hill's left lower quadrant and threatened 'to put a bullet through his heart'." Negotiations proceeded slowly, said Officer Verdin. "Ah still think we shoulda jest shot the bast...er, the gunman."

After four hours of negotiations in which DUMC officials refused to implement improvements to the curriculum, negotiators decided to send in the big guns. Dr. Harold Strauss was brought in and commenced giving his renowned Digitalis Made Ridiculously Complex lecture.

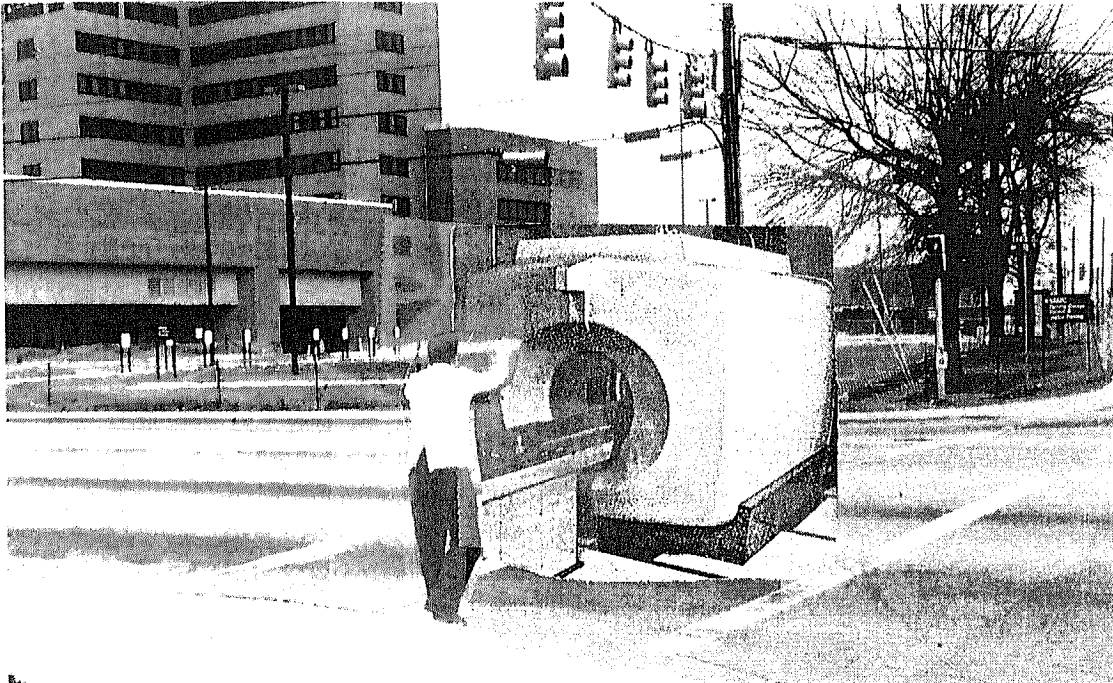
Five minutes into the talk, the situation defused as Thropworth fell almost immediately into a deep delta wave sleep. When asked what the most terrible part of the ordeal was, Hill responded, "Those last five minutes were hell. I almost jumped out the window."

After evaluating the situation, the Deans' Office decided to punish Thropworth by making him repeat first year over again. "It's not much of a punishment, really," said Blazer. "He was going to have to repeat all his courses anyway. If we really were to get tough with him, we'd make him do his third year before his second year."



Shifting Dullness puts out one (1) parody a year on April Fool's Day. This insert is the real McCoy. It shall henceforth and forever be known as Shifty Bottom Feeding Dullards to commemorate the Great DUMC Literary Uproar of '93. The Shifting Dullness staff, even in the annual parody, does not attempt to be offensive to any one particular group of people, with the possible exception of faculty and administrators, because they deserve it. Only recycled paper was used for the printing. Please note that no small animals were folded, spindled, or mutilated in making this issue. As always, letters to the editor, letters of dismissal, and petitions from the first year class should be addressed to Shifting Dullness, Box 2865, DUMC.

MSII charged with abducting MRI machine



A Photograph taken from security cameras outside Duke North showing the suspect allegedly removing a MRI machine from Duke property.

A second year medical student was arrested last week for allegedly commandeering an MRI from Duke Medical Center for use at the Durham V.A. The student, William Pilfer, is being held on \$5 million bond. According to the Judge who arrived at this high sum, the bond was set according to the profits that were lost in the eight hours the imaging machine was out of service.

"The kid had balls, I'll say that for him," said Officer Wallace Dunkin', who apprehended the suspect last Thursday afternoon. "I was just waiting at the light on Erwin road when this kid comes pushing this big machine across the street. I didn't know what the thing was, but it looked expensive. The kid had on a white coat, so I figured everything must be on the up and up," Dunkin' added.

The officer said he became suspicious when he noticed that metallic objects seemed to be flying up and sticking to the machine. "The thing that really raised my antennae was when a couple of graduate students on

bicycles were pulled into the machine," Dunkin' recalled. Although the graduate students did not speak English, they appeared to be uninjured after the incident.

According to a press release from the student's lawyer, Mel Wolfshelm, Pilfer had only been "borrowing" the MRI for a few days and intended to bring it back. Additionally, Pilfer had left a case of V.A. styrofoam slippers over at Duke as collateral for the MRI.

Shifty Bottom Feeding Dullards was able to talk with Pilfer in his Durham holding cell. "I only did it to please my medicine attending who kept wondering what all those lumps were in one of our patient's abdomen," he sadly recalled. "This sure has been a hassle, but if I get an 'H', I guess it'll be worth it."

"I don't see what the big deal is," said Dan Glazed, dean of the Medical School. "It's just another case of an issue blown out of proportion. I mean Duke is up to its armpits in MRIs ... If that cop hadn't caught him, we probably never would have missed the thing," Glazed added.

Giant phages escape from lab and turn on creator

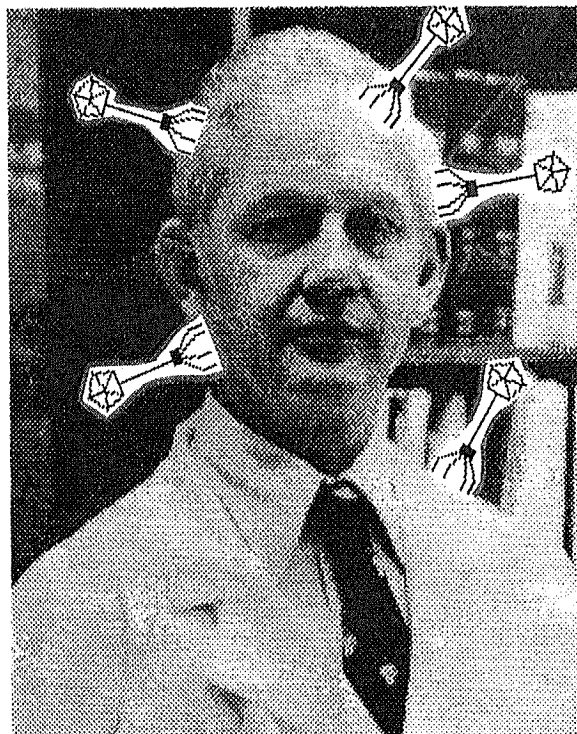
In a bizarre occurrence last Thursday, Microbiology Emeritus Chairman Wolfgang Joklik was attacked by what appeared to be a swarm of abnormally large T-4 phage viruses. The viruses, which are normally "pretty teeny, and not quite as interesting as fungi" according to Associate Professor Thomas Mitchell, were each "about the size of a badminton shuttlecock."

Microbiology professor Jeffrey Dawson added, "We all knew Wolfgang was spending a lot of time late in lab (no doubt meddling with the very laws of nature) and that he was working hard on an unknown (sinister and potentially highly dangerous) project. But these viruses (which are a hideous parody of life) took us completely by surprise. I suppose that his (nefarious) experiment (dabbling with life itself) went awry (and brought God's wrath down upon him)."

Joklik, bristling with hundreds of voracious viruses, walked stiffly from his South Hospital lab and commented to a co-worker, "Ouch. This stings me greatly." The venerable Chairman was immediately placed on the PRT shuttle and arrived at North Hospital three hours later, due to four mechanical breakdowns.

Joklik's primary caregiver, Dr. Ralph Corey, said, "He can expect a full recovery. The phages came off with only a modicum of discomfort in a routine shave biopsy procedure, which required only seven units of PRBC's. Thank goodness we got to him before the phages injected their genetic material into him, or he could have lysed like a big ol' E. Coli." Corey said Joklik would be released after some "routine tests, including a MUGA, a cortisol stress test, a transbronchial lung biopsy, and the return of apoprotein-B, ceruloplasmin, and vanillylmandelic acid levels." Corey then proceeded to pimp this reporter for forty-five minutes before concluding, "You need to sleep less and do more reading on your call nights."

The Microbiology Department is still unsure of what to do with the harvested phages. "On the one hand, we could study these remarkable viruses so that we can get a better understanding of their genetics, their protein structure, indeed, their very processes of life," said



Scientist pays for an experiment gone bad

(Actual untouches photo)

microbiology professor Robert Wheat. "On the other hand, we could bronze them and turn them into some pretty funky lamps."

MSIIs on Surgery rotation sought for study

The department of psychology is currently conducting a study to determine the relationship between external stress and anal sphincter tone. Participants will be asked to wear a special tension gage (sphintermomanometer) for a period of 24 hours. The device is discreet, painless and will not interfere with bowel function. Call the psychology department for more info.

Letters to the Editor

To the Editors:

Look, it was only a lousy ABG needle, for God's sake. I just wanted to make my patient as comfortable as possible, and to protect myself as best I could from a needle stick. Is that a crime? Can't you commute my sentence or something? Please?

Serving ten to twenty,
Prisoner NC45832-31

To the Editors:

My young boy used to be a happy, singing carefree child before he went to Duke Medical School. Now he's a bundle of cynicism, bitterness, and angst. I didn't even know what angst was until I looked in the dictionary and saw his picture by the word. Now he's writing a monthly column, "The Septic Skeptic." Such whining! He never complained like this before. Couldn't you find some way to shut him up?

Pleadingly,
Fred's Mom

To the Editors:

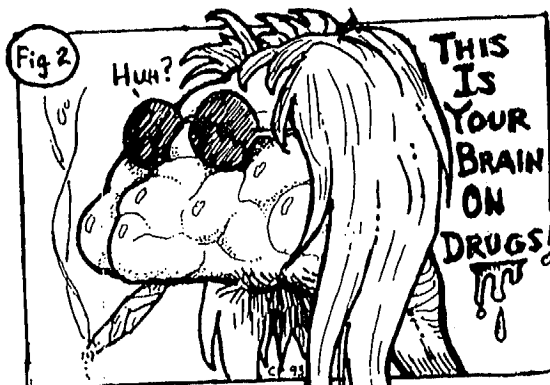
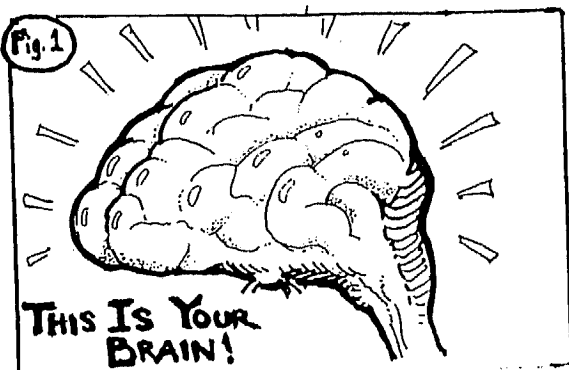
It is unfortunate that gunners exist here at the Duke University School of Medicine. This is an institution which supposedly admits people based not only upon their intellectual strength, but on other qualities as well, namely their dedication to patient care, their ability to interact with others, and their personal integrity. In the quest for excellence in medical education, it is paramount to also develop these other abilities, rather than to shallowly sacrifice them for grades. While we acknowledge the rights of any individual to pursue gunnerdom, it reflects badly upon our institution as a whole when a group as large as the second year class so feverishly pursues the "H." C'mon, folks, lighten up already.

Somewhat embarrassed,
273 members of the first, third, and fourth years.

To the Editors:

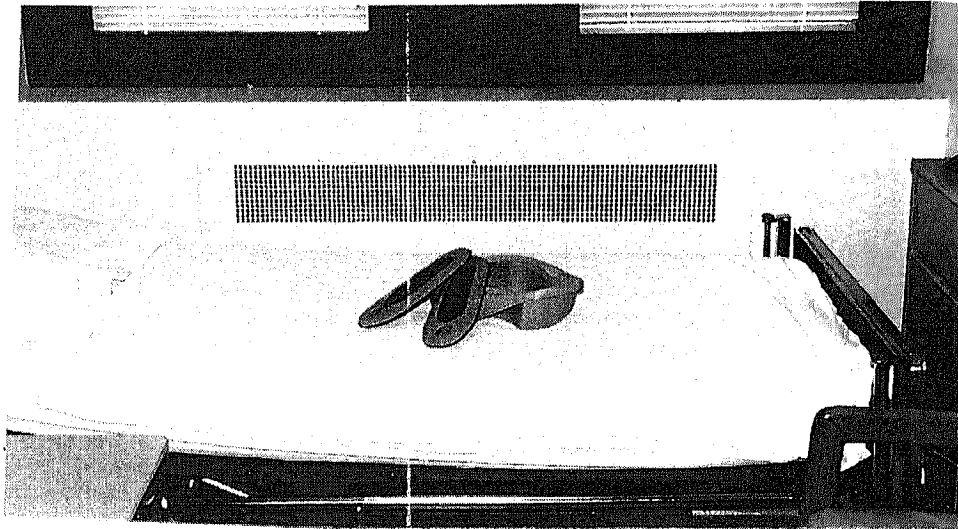
After covering the printing costs for *Shifting Dullness* for three years, this is how you repay us? This letter is to inform you that your career as Duke Medical student is over. Please complete your fourth year at another medical institution.

Unamusedly,
The Dean's Office



Chris Piller

Club V.A. Vacations -- The antidote for civilization



The "Orange Room" . . . Our most frequently requested suite

At Club V.A. we don't just treat you well, we pamper you. As our guest, you're entitled to everything from a refreshing morning enema to an after dinner Haldol tablet, when things start to get a little confusing.

As you relax in your plush bed, the mere touch of a button mobilizes an attentive and caring nursing staff dedicated to your comfort. Watch with pride as bright-eyed young medical students try their hand at ABGs and lumbar punctures.

After just a brief stay at Club V.A., you'll have a new lease on life . . . your old job and nagging family will never look so good.



Duke Medical School blasted in new *U.S. News* rankings

The Duke Medical School suffered a devastating blow last week when it plummeted in the *U.S. News and World Report* poll of graduate schools. The medical school, which had been listed as high as 3rd just one year ago, is currently ranked 83rd.

The new ranking removes Duke from the elite company of Harvard, Johns Hopkins and Yale and places it in between the Jacksonville Osteopathic Institute and the University of Pennsylvania's dentistry program.

Daniel Glanturkey, associate dean of medical education, was surprised and angered at Duke's new ranking. "It's absolutely preposterous," he said. "Sure we tripped up against California, but there is no justification, except sour-grapes, for ranking us any worse than 32nd."

Associate Dean Lois Lane took the news in stride. "Duke is still a top place. Whether it's ranked 3rd or 83rd just isn't that significant. After all we're still in the top 100 and the gardens are beautiful here."

Dean Leaky Buckettt foresees future difficulty in the match. "You can down-play this all you want, but in the long run it's going to cause some pain," Buckettt said. The dean went on to offer free counselling services to all of the mediocre students who had been planning to match in ophthalmology or orthopaedics. "These students will likely have to lower their sights to something in the primary care field without Duke's name to carry them," Buckettt said.

Response of the classes to the news was also diverse. Representatives from the first year class called the ranking a "blatant example of sexism and racism," and they are currently drafting a letter and planning a conference. Meanwhile, several MSIs blamed the precipitous drop on the poor work ethic and laziness of the other classes. No MSI could be reached for comment by 11 a.m. the day this article was written.

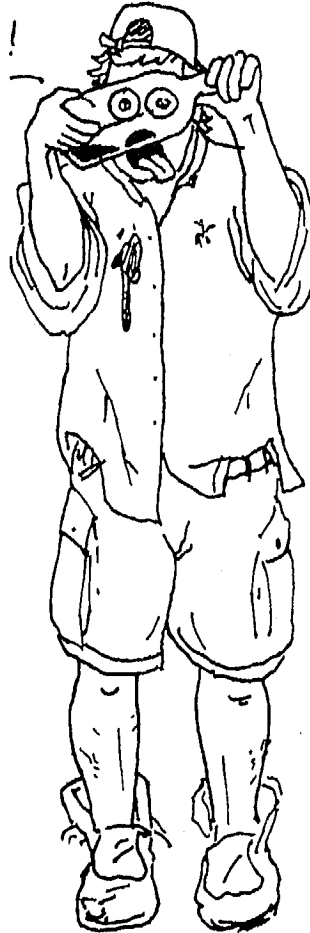
"I have never put much credence in these rankings," said Ralph Spiderman, chancellor for the medical center. "I continue to stand behind my faculty one-hundred percent" he added.

Shifty Bottom Feeding Dullards contacted Dr. Harold Spin who is in charge of the medical school rankings for *U.S. News* and inquired as to how it could be possible for a school to drop so far in the rankings in a single year. Spin explained that there had evidently been some confusion over previous rankings. "When you were ranked 3rd last year, that wasn't for the whole country, that was just for North Carolina," he said.

Shifty Bottom Feeding Dullards

MY THIRD YEAR RESEARCH PROJECT

AW...DUDES!
YA GOTTA TRY THIS!



Chris Piller

Septic Skeptic

Fred Rimmele

Microbiology. The very word is enough, at the most, to send any Duke medical student hurtling into a near fatal episode of DIC. At the very least, it is quite capable of curdling dairy products. Just listen to it: mi-cro-bi-ol-o-gy. Whisper it quietly to yourself, but only in a well lit room. Scary, isn't it? Slightly evil sounding, with overtones of everlasting damnation and horror. Mi-cro-bi-ol-o-gy. *Eeeough.*

My memories of that course are tainted with an almost visceral displeasure, much like a gourmand several hours after eating three dozen sour oysters (if *Vibrio* was the first word that rocketed through your head at this juncture, you've clearly been whupped. Put this issue down and go for a nice long walk along the Eno). Although my surliness was in full bloom long before the microbiology phase of my medical education, it was this course which not only sank the final nail into my coffin, but furthermore epoxy-bonded it shut. How ugly was micro? Folks, this course fell from the top of an Ugly Tree and hit all the branches on the way down. Big uggo. And by early February, I had contracted mononucleosis (if the mental image of "EBV" just danced through your cerebral hemispheres, go join your other pals along the Eno), which only reinforced this 'winter of my discontent.' Golf ball size nodes were aching away along my occipital chain, atypical lymphocytes were swarming through my bloodstream, and I, needless to say, was wallowing in microbiology angst. During a pathology lab, as I stared down at a chemically rubberized twenty year old hunk of bowel riddled with Crohn's disease, a lab partner concluded that I was indeed a septic skeptic. The name has stuck ever since.

Okay, you say, so you had a bad micro experience. You weren't the only one.

You see, that's exactly my point. Even though I never failed a test in micro, I can say that it was the nadir of my medical education. And lots - nay, HORDES - of other medical students at Duke have for aeons endured what is essentially a pretty crappy pedagogical experience. Lecturers trying to cram so much information into one hour that they make projectile vomiters look serene. Piles of absolutely clinically irrelevant data that

simply must be presented to lend a shred of validity to the fact that the lecturer has spent thirteen years of her life studying Protein Q of the δ subunit of the outer capsule of the Cincinnati strain of Hamster Encephalitis Virus, of which there are only three cases of human infection in the world literature. Exams which were absurd in their breadth and merciless in their grading, to the point where it seemed even Genghis Kahn must have spared more people from ruin. And one of the worst lectures of all time, given by the Chairman himself, in which he does nothing more than recite by memory all the viruses he can name ("then there's Ebola virus... Dengue Fever virus... Bunyavirus...").

My point is that lots of students were, are, and will be unhappy with micro. And how can anyone not be miffed when the department, overlooking its own failures, vanities, and obstinacies, sees fit to regularly fail 5 to 15% of the brightest medical students in the country on any given test? It's not like this hasn't been pointed out to the Micro Department before. Scads of medical students get anxious, depressed, or just plain pissed off about the course every year. Heck, one of my classmates got so fed up with it that he complained to the Most Wondrous and Radiant Guru of them all, Ralph Snyderman, who, I can only assume, followed the Micro Department's policy and proceeded to ignore his complaints.

The reason I bring this up is that other departments have restructured their style and content to maximize learning and decrease stress, without sacrificing a quality education. Pharmacology and neurobiology did this quite successfully, and gross anatomy, given the grossly (sorry) inadequate period of time it has to teach us about parts 'n' stuff, does an excellent job as well. Even clinical courses (Surgery being the at the forefront) are constantly trying to respond to the student's needs and educational demands.

All but micro, which is as immovable and unyielding as a fecolith impacted in the dark recesses of a sigmoid diverticulum. Will it ever change? I can't say. Will this article have any effect on it? Probably not, although one can always hope.

