The 1910 Flexner Report resulted in dramatic changes in North American medical school education that persist to the present day. It is evident that Abraham Flexner did not emphasize recommendations regarding medical ethics and humanities because he assumed they would be studied in premedical university education. (Also, contemporary ethics and humanities medical education were still 6 decades away.) For very good reasons, the report mainly focused on the formation of the physician-scientist. Scientific study and thinking were not sufficient to make a capable physician; however, as Flexner well understood, the physician must have “insight and sympathy on a varied and enlarging cultural experience . . . scientific progress has greatly modified his ethical responsibility.” The physician should be “culturally experienced,” and possess humanistic skills to serve the social good.

A “broader more liberal arts education” provided the basis for these skills. In the report, the college-based development of reflective, abstract thinking was cited as necessary before the secondary stage of medical education. In his other writings, Flexner insisted that liberal arts education should be tailored toward each student’s future profession of choice and include both science and humanities to prepare a physician to fully develop the necessary skills.

Part of this developmental process within college would entail wide-ranging immersion into areas such as “music, art, poetry” and be accompanied by the development of “character, strength of intellect, and breadth of culture.” Flexner’s later writings lamented the absence of the humanities in medical education and called for both “humanity and empiricism.” Flexner did not see these concepts as opposed or mutually exclusive: “[the] art of noble behavior is thus not inconsistent with the practice of scientific method.”

Prerequisites to medical education have been primarily in the sciences. While enhancing premedical study of the humanities could be indeed helpful, college level humanities education is not clinically oriented. Teaching medical humanities with a clinical focus addresses the need for humanities education with clinical relevance and applicability, integrated into preclinical and clinical medical education, to better produce a “culturally experienced,” humane physician.

If we extrapolate from Flexner’s vision, it is evident that medical education as it currently exists is incomplete. George Engel’s useful “biopsychosocial model” of illness portrays the complex interaction of biology with the “psycho” and “social” components. Medical humanities education better enables the physician to provide this humane yet scientific care. An updated version of Flexner’s vision calls for preparation of medical students in scientific reasoning and the humanities to be synergistic, integrating all relevant components.

While medical ethics and humanities education has gained a foothold in many medical schools in the last 40 years, these efforts have become uneven, often neither well integrated nor comprehensive. On this centennial anniversary of his report, we should bring Flexner’s vision of medical education to fruition with the comprehensive development of humanistic reasoning (using medical ethics and humanities education) integrated with scientific reasoning to produce professional physicians.
With an acknowledged debt to Flexner’s vision of integrating humanities with science in medical education, we propose using 4 teaching domains coupled with the re-introduction of a past method.\textsuperscript{9-13} Education in humanities should teach ethical argument and analysis, reflective narrative, observational skills in the fine arts, and history of the art of medicine. One method for cultivating humanistic skills via role modeling attitudes, behaviors, and interpersonal skills is to reintroduce the apprenticeship throughout one’s medical education. The authors are currently co-investigators of a multiyear project entitled Project to Rebalance and Integrate Medical Education (PRIME; funded by the Patrick and Edna Romanell Fund for Bioethics Pedagogy). This project comprises 2 workshops to convene educators and scholars regarding past and potential future humanities teaching methods that will be followed by a national symposium in bioethics and medical humanities education. PRIME will produce a comprehensive medical humanities curriculum designed to integrate the Flexner Report’s original vision of the physician-scientist with Flexner’s complementary vision of the humane, ethical, and humanities-trained physician.

References