

Statement on a new Faculty Title: Clinical Professorship

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Clinical Professors should be career-oriented, academic clinicians who seek the University environment to practice their specialty at the highest level, and pass along that knowledge through teaching at all levels of the professional curriculum, by contributing to the scientific literature, speaking nationally and internationally, collaborating with basic researchers, and serving as role models for the next generation of veterinarians. Our scholarship is based on application, integration, communication, and validation. We may pursue the scholarship of discovery though we are not as focused on that goal as are basic research scientists. I maintain that these are scholarly efforts that deserve the title of ‘professor’.

One might question why a clinically oriented veterinarian would choose the academic environment over the private sector. There is the perception, and perhaps reality, that private veterinary practice is more lucrative, less demanding, more organized, less stressful, compared with a University position. For me, that is not really the argument. The decision on where to spend one’s career is often more philosophical. Our motivation is the strongest commitment to passing along historic truths and current knowledge to the next generation of veterinarians. We are professional, professorial teachers. We are committed to using proven and

new teaching methods (lecture, lab, auto-tutorial, small group discussion, clinical rounds, reading assignments, special projects, senior seminar, etc.) to educate incoming students, usually naive to the profession, so that they become competent, professional veterinarians ready for a career of learning and doing veterinary medicine in its many iterations.

Our daily satisfaction is to teach yet another student how to do surgery, treat a patient, and be compassionate to clients, read a radiograph, or interpret laboratory results. To provide a role model so students learn to act professionally in stressful situations. To demonstrate how to lead a group, be an entrepreneur, or continue an education. Our satisfaction comes from seeing raw recruits to our profession start out clueless and progress to nearly capable and, sometimes, become remarkably proficient clinicians in only four years. To visit with these people at reunion times or at other events years hence and know that you made a difference in their lives is uniquely satisfying. To be introduced to parents at graduation day as “this is my Radiology teacher (or professor)” and with an occasional gracious platitude, is completely rewarding.

The ability to teach might be natural and can be improved by training. It is the goal of clinical professors to continually update teaching style, technique, or format so that information is accurately and clearly passed to the next generation. Having a clinical background and active participation in Hospital services provides

not only the stage for teaching but also lends relevance to our words. We would not consider separating the two. Our motivation in academics is to teach, but it goes beyond that axiom by trying to understand how students grasp the material. Our academic teaching world is more than lecture notes and PowerPoint presentations. We try to understand how students learn; how to best present information; take chances with a different approach, helping a student who does not grasp a concept the first time. We need to be involved with the science of learning and understand the motivations of how students learn to be the best at delivering a quality education. Surely, this is a professorial role in the Department.

What else keeps us here? We profess to be excellent in a clinical specialty. So, we must continue to learn more about our own fields and to advance the knowledge in that field. We may do this by reporting examples of diseases, by analyzing or developing diagnostic tests, and reporting the correlation between modalities, by collaborations with basic research colleagues thus moving new ideas into the clinical realm. For perhaps selfish reasons, we work here because someone else pays the large expenses to maintain a Hospital with a superior staff and excellent equipment, often exceeding that which would be available in most private practices. I admit that we still lack some technology; we are not at the top in everything. You should strive for that peak. Nevertheless, no one can argue that we do not have wonderful facilities with perfectly functional equipment and a

caseload of challenging, if not at times frustrating or heartbreaking illnesses. It is the combination of practicing veterinary medicine and teaching at a leading academic, referral hospital, using the best equipment to treat difficult cases and the interactions with other dedicated professionals that makes this a rewarding environment.

How does this position differ from a tenure-track position at Cornell? The tenure-track at Cornell focuses on the scholarship of discovery, hypothesis testing and independent and collaborative experimentation with reporting those discoveries in peer-reviewed national and international journals. Competitive grants fund these projects and by their nature require substantial if not full time commitment. The tenure-track has some 'entry requirements'. In some but not all situations a professional degree (DVM/VMD or MD) is necessary as well as an advanced academic degree (MS and/or Ph.D.). The latter may lend credibility to the researcher with granting agencies. This gives the beginning Assistant Professor on the tenure-track some credibility that s/he has had advanced training in research techniques. Without these, mounting a funded program for research is more difficult for individuals. Further, these people need to be associated with an established laboratory that lends additional credibility to their work.

Clinical professors can and should do research. The scholarship of discovery is not solely the realm of tenure track professors. However, our

programs are more likely to consist of retrospective and/or prospective clinical trials, treatment innovations, novel surgical approaches, and validation of tests on clinical specimens or medical images. We can report correlation between modalities, case reports of unusual disease presentations, and collaborate with basic research scientists. Our research programs are less likely to have nationally competitive funding but can attract money from pharmaceutical companies, breed associations, or other industry sources. Our success as academic clinicians can be assessed by the quality of these projects and the papers produced from the data. I do not assume that clinical professors only teach and work in the teaching Hospital; they should be reporting in the veterinary literature the results of their efforts in the clinical environment.

Success in the academic world depends on great thinking, hard work, long hours, probably some luck, and, of course, continued largess from government or private sources. In my opinion, while tenure-track professors (in Clinical Sciences) are also required to teach and provide clinical service, it is their research productivity that receives more attention. Clinical professors would focus more on teaching and clinical service still contribute to research projects on their own or as a collaborator. Such a position deserves the recognition that the title “Clinical Professor” provides.