



Penn Medicine



Medical Education Reform: Transforming HPE with Health Care & Policy

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Medical School Reform

PROBLEM 1:

Average debt of medical students is \$216,659.

PROBLEM 2:

Medical schools reject 60% of applicants, and yet we have a primary care shortage.

PROBLEM 3:

Medical students and doctors feel inadequately trained on wellness



REFORM 1:

Shorten medical school to 3 years



REFORM 2:

Targeted financial aid for students pursuing primary care



REFORM 3:

Wellness in medical education



Make Medical School 3 Years

Shortening medical school by a year has clear benefits...

1. Reduces costs by 25% and adds a year of physician earnings.
2. Reduces poor health outcomes: mental health disorders, burnout, and infertility issues.
3. Reduces the physician shortage: more accelerated students plan to care for underserved populations and practice family medicine.



Make Medical School 3 Years

... with no adverse outcomes.

- Duke and UCLA already have a “3-year program” with an intermittent research year. No decrease in quality.
- NYU Grossman found **no changes in outcomes** across 7 years.
- The attrition rates of 3-year and 4-year medical students is the same



Gaps in Medical School Curriculum

Diet, exercise, and sleep play critical roles in the prevention, management, and treatment of chronic health conditions, yet:

- In a 2020-2021 survey of medical students, **92.1% of respondents stated that they had not received any formal training on physical activity** throughout their medical education.
- In 2014, **71% of medical schools failed to provide the recommended 25 hours of required nutrition education.**



Physicians Feel Underprepared

Do Internists, Pediatricians, and Psychiatrists Feel Competent in Obesity Care?

Using a Needs Assessment to Drive Curriculum Design

[Melanie Jay](#)^{1,3,✉}, [Colleen Gillespie](#)¹, [Tavinder Ark](#)¹, [Regina Richter](#)¹, [Michelle McMacken](#)¹, [Sondra Zabar](#)¹,
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- **48%** Internists, pediatricians, and psychiatrists at NYU Grossman reported inadequate ability to counsel patients about common obesity treatment options.
- **Almost 60%** could not adequately use motivational interviewing for behavior change.



Medicine's Limits

Medical education reform will not solve everything alone: patient motivation, resources, and structural reform are required for **large-scale population health.**

Examples include:

- Ending corn, soybean and wheat subsidies
- Subsidizing fruits and vegetables
- More phone free zones
- More outdoor exercise spaces

However, these are not mutually exclusive. We should work to build *both* better doctors and better systems.



APPENDIX



Exercise in Medical Schools

In a 2020-2021 survey of medical students, 92.1% of respondents stated that they had not received any formal training on physical activity throughout their medical education.

- Among the 7.9% of students across all 4 years who did report formal training, 70% stated that this formal training amounted to 1-3 hours in total.
- 84.7% agreed that formal training on counseling patients about incorporating physical activity into their daily routine should also be included as a graduation requirement.

