







CAMPUSES UNDER CONSTRUCTION.

At least for members of the Boston-area building trades, the recession and Harvard's belt-tightening are in the rearview mirror. Major projects under way during the frenetic summer season included the wholesale reconstruction of the Kennedy School campus (opposite), beginning with excavation of the somewhat-sunken courtyard; it will be raised to street level, accommodating future kitchens, loading docks, and other utilities underneath (see harvardmag. com/hks-15). Across the Charles River, Harvard Business School's Ruth Mulan Chu Chao Center, a replacement executive-

education facility, took shape (top; see harvardmag. com/chaocenter). The reconstruction of Dunster House (center), part of the College's House renewal, drew to a close in time to welcome students back from swing spaces for the fall semester. Exterior work began on Winthrop House (bottom), to prepare for full renovation and expansion in 2016-2017. And in early August, scaffolding was erected to begin the exterior refurbishment of the former Holyoke Center, now the Smith Campus Center, in Harvard Square (not shown); pending regulatory review, it will be extensively renovated and, at street level, repurposed, and debut in 2018.

Rethinking the Medical Curriculum

HARVARD MEDICAL SCHOOL (HMS) is reforming its four-year curriculum structurally, pedagogically, and philosophically. The new curriculum, which builds on the New Pathway curricular reform of 1987 and

an iterative update in 2006 called the New Integrated Curriculum, further emphasizes the process of learning to learn, rather than rote memorization, and represents one of the most complete curricular reforms at a U.S. medical school since the scathing Flexner Report of 1910 led to the closure of many medical schools in the country.

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As dean for medical education Edward Hundert explains, ever since the Flexner Report put an end to for-profit schools that relied solely on apprenticeship to transmit knowledge from one generation of physicians to the next, medical schools have operated largely on what is called a "two plus two model." It begins with two years focused on basic science taught in the classroom; students have some patient exposure but are mainly involved in patient care only during the second half of their schooling. Nationally, all of this is changing. Some medical schools have moved the hospital clerkships into the first two years, and some