

# Why innovation and entrepreneurship are needed in the future of health care

## ASU Health students will work with industry partners to find solutions to current health care problems

By Scott Bordow, ASU News  
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ASU Health has embarked on its mission to transform health care and create a new kind of health professional.

ASU Health includes four academic units — two of which are new to the university ecosystem. The [John Shufeldt School of Medicine and Medical Engineering](#) and the [School of Technology for Public Health](#) join the [Edson College of Nursing and Health Innovation](#) and the [College of Health Solutions](#) to form the educational foundation for ASU Health.

In addition, the [Health Observatory](#) builds on ASU's existing relationship with Mayo Clinic to develop a better understanding of community health in Arizona, and the [Medical Master's Institute](#) creates opportunities for health professionals and medical students to upskill in areas like pediatrics, gerontology, advanced nursing and nutrition.

In the second part of a five-part series, ASU News talked to Jordan Coulston, assistant dean of clinical education at the John Shufeldt School of Medicine and Medical Engineering, about the role innovation and entrepreneurship will play in ASU Health.

*Note: Answers have been edited for length and/or clarity.*

### **Question: Why are innovation and entrepreneurship vital to ASU Health's mission?**

**Answer:** The typical outcomes that we're getting from the health care system aren't the ones that we desire. The development of the physician engineer is someone that is not just trained in systems thinking — like an engineer — and medical thinking — like a traditional physician — but it's someone who has this skillset that includes innovation, which is not just integrating tech. It is about solutions that are working within the current system but developing into something better

over time. And part of that has to do with the idea of being industrious, of building and being brave where others might be afraid.

**Q: Let's separate the two for now. In what specific ways will innovation be a part of ASU Health and in particular the John Shufeldt school?**

**A:** The most tangible way is this idea of the engineering capstone project. You can think of these as small startups instead of medical student research projects. Instead of the students coming out of medical school with a poster presentation at a regional or national conference, they're coming out with this experience, which is a minimum of 18 months working on a team on a startup project trying to achieve an actual outcome, like bringing a product closer to market.

**Q: Would these student teams work with any of the ASU Health partners?**

**A:** Absolutely. (There's) a network of innovation mentors who are industry experts and working with us to try to understand what the current problems are in the world, and then helping to kind of create this framework where small groups of student teams work on a particular project that's aligned with an ASU Health priority.

**Q: Can you provide an example?**

**A:** We've thought about this ... through the lens of the different phases of the curriculum. Early on in the curriculum in the medical school, we're thinking about the way in which engineering and the engineering mindset applies to medical education, health systems and the patient. So, everything they do is going to also include sessions where they learn about, say, not just how to interpret an EKG but why an EKG works the way it does. And the way you might train models to kind of interpret all EKGs. So, they're getting this duality in the beginning, and then they go out in their clinical rotations, and they see all the struggles in the health system — for example, they're learning the limits of current technology.

And then, in the last phase of the curriculum, the post clerkship phase, they're getting to develop a product or a solution to one of those limits that they saw. For example, we know that diseases are more commonly being managed at distance. So, there's this whole idea of wearables and the way in which software and hardware are not able to manage whole populations of patients at scale. We want students at their clerkship to kind of investigate that and understand what the limits are.

**Q: It seems as if this emphasis on innovation is not only preparing students for the health care field but putting them in position to improve health outcomes.**

**A:** You nailed it. The most common question we get asked at the medical school is, "Well, so they're going to get some engineering training. What are they going to become?" It's not an easy question to answer because the current pipeline is that someone graduates from medical school and then matches into a residency and essentially becomes a resident before they achieve their ability to practice independently. But I think we see other pathways. Having more doctors isn't really the only problem that we have to solve. We think if we can graduate a certain type of student to become a certain type of physician, they might be able to change the system in ways that we can't currently imagine.

**Q: Let's switch to entrepreneurship. How does that factor into ASU Health?**

**A:** One of the things that people learn about ASU pretty quickly is the importance of industry and the way in which we partner with industry. In many academic circles, entrepreneurship is, well, not a four-letter word, but there's all sorts of conflicts that tend to be the focus of conversation. I think what ASU has shown is that we actually need to work together.

**Q: What might those partnerships look like?**

**A:** We're dreaming up all sorts of cool things. One idea is following the model that ASU has in its Innovation Zones where they're kind of able to bring industry adjacent to the learning. We're imagining that at the ASU Health headquarters, medical students will actually have direct access to a select number of innovation partners who maybe are working on design solutions within our building. It's not so much a makerspace where there will be hardware and machining, but these folks will have identified a problem and are close to the students and teams that could develop the solutions.

**Q: I imagine the entrepreneurship piece will evolve as more industry partners want to get involved.**

**A:** Yes. There are clear leaders in town, and those connections either have been made or are being made. ASU Health's ability to kind of have reach is great because it allows us to try to work together on particular avenues. The medical school has identified a number of strategic areas in research and also societal problems that we want to get into. So, I think we will have these areas where we want to develop expertise and do research, and then naturally we'll find partners to try to help with those projects.

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## Learn more in our 5-part ASU Health series

Feb. 27 — Heather Clark: [Why health and engineering go hand in hand](#)

March 6 — Jordan Coulston: The role innovation and entrepreneurship will play in ASU Health

March 13 — Cora Fox: [The intersection of humanities and medical care](#)

March 20 — Jyoti Pathak: [Ways that AI could transform our health system](#)

March 27 — Swapna Reddy and Kristen Will: [What health systems science is and how it will impact ASU Health](#)

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*This story originally appeared on [ASU News](#).*

## Main image

Collage that features a man's portrait and illustrated health icons next to him

Graphic by Chad Musch/ASU