

ASSOCIATION OF
AMERICAN
MEDICAL COLLEGES

MINUTES
of the PROCEEDINGS
of the
FORTY-EIGHTH ANNUAL MEETING
Held in
SAN FRANCISCO, CALIFORNIA
OCTOBER 25, 26 and 27, 1937



Office of the Secretary
Five South Wabash Avenue
Chicago, Illinois

FIRST DAY

October 25, 1937

The opening session of the forty-eighth annual meeting of the Association of American Medical Colleges, held in San Francisco, California, October 25, 1937, convened in the Fairmont Hotel at 9:35 a. m., Dr. E. Stanley Ryerson president, presiding.

President Ryerson welcomed the delegates to the meeting and voiced the hope that it would be a most successful and instructive meeting.

Dr. Loren R. Chandler, vice president and chairman of the local committee of arrangements, and Dr. George S. Johnson, his associate, reported on what had been done by way of entertainment and gave the necessary information on how and when to take advantage of what had been provided. At the conclusion of the first day's session, lunch was to be served at the Stanford Hospital. After lunch a visit to Stanford Hospital, the Library and the School of Medicine of Stanford University and a visit to the Berkeley Campus of the University of California had been arranged. At 6 p. m. an informal reception was to be held in the Fairmont Hotel by the faculties of Stanford University School of Medicine and the University of California Medical School.

The first item on the program was a "Symposium on Examinations." The first paper in the symposium was read by Dr. Ewen W. MacEwen, dean of the College of Medicine of the State University of Iowa. The second paper was read by Dr. H. S. Diehl, Dean of medical sciences, University of Minnesota. The third paper was read by Dr. Harry J. Sears, professor of bacteriology, University of Oregon Medical School. The fourth paper, entitled "A Superior Written Examination (Objective Type) as Applied in the Medical School" was presented by Dr. Robert P. Dobbie, professor of clinical surgery, University of Buffalo School of Medicine.

This group of papers was discussed by Dr. F. A. Moss, director of study of the Committee on Aptitude Test, and, in closing by Dr. Diehl.

At this juncture the vice president, Dr. Chandler, took the chair while the president, Dr. Ryerson, read a paper entitled "Cultivation of Health in Relation to the Medical Curriculum."

This paper was discussed by Drs. Eben J. Carey (Marquette), Maurice H. Rees (Colorado) and, in closing, by Dr. Ryerson.

Dr. Ryerson assumed the chair.

An adjournment was taken at 12:10 p. m.

In the afternoon, the program detailed by Dr. Chandler was followed.

At 7 p. m., the delegates and guests assembled for dinner at which Dr. Chandler, vice president, officiated as toastmaster. Excellent singing, music and other entertainment served to make the occasion a memorable one. Addresses of welcome were delivered by Dr. Monroe Deutsch, vice president and provost of the University of California, and Dr. Ray Lyman Wilbur, president of Stanford University.

Dr. Ryerson delivered the president's address, speaking on the subject of "Health and Medical Education."

SECOND DAY

October 26, 1937

The delegates reassembled at 9:45 a. m. and were called to order by the president, Dr. Ryerson.

The program for this session consisted of papers presented by members of the faculties of Stanford University School of Medicine and the University of California Medical School. The following papers were read:

"Introduction of Medical Students to the Clinical Subjects; Introductory Course in Medicine," by Dr. George Barnett, professor of medicine, Stanford University School of Medicine.

"Introductory Course in Surgery," by Dr. Frederick L. Reichert, professor of surgery, Stanford University School of Medicine.

"Teaching of Pathology," by Dr. William Dock, professor of pathology, Stanford University School of Medicine.

"Organization of the Senior Curriculum at the University of California Medical School," by Dr. Salvatore P. Lucia, assist-

ant professor of medicine, University of California Medical School.

"Correlation between the Outpatient Clinic and the Senior Curriculum," by Dr. Frederick S. Bruckman, assistant clinical professor of medicine, University of California Medical School.

President Ryerson appointed the following Nominating Committee: Drs. Russell H. Oppenheimer (Emory), chairman; Currier McEwen (New York University) and J. C. Simpson (McGill).

Dr. Chandler announced that lunch would be served at the Family Farm, followed by a visit to the campus of Stanford University and to the University of California Medical School.

Adjourned at 11:30 a. m.

EXECUTIVE SESSION

Tuesday Evening, October 26, 1937

The Executive Session of the forty-eighth annual meeting of the Association of American Medical Colleges, held in the Fairmont Hotel, San Francisco, California, October 25-27, 1937, convened at 8:10 p. m., Dr. E. Stanley Ryerson, president, presiding.

ROLL CALL

The Secretary announced that fifty-eight (58) colleges were represented by one or more delegates. He called the roll and as the name of each college was called, if represented, the representative or representatives arose and gave their names, with the following result:

University of Alabama School of Medicine.—Stuart Graves
College of Medical Evangelists.—E. H. Risley; W. E. Macpherson

Stanford University School of Medicine.—L. R. Chandler
University of California Medical School.—Langley Porter
University of Southern California School of Medicine.—Paul S. McKibben; B. O. Raulston; C. H. Thienes

McGill University Faculty of Medicine.—J. C. Simpson
University of Alberta Faculty of Medicine.—Allan C. Rankin
University of Toronto Faculty of Medicine.—E. S. Ryerson

University of Western Ontario Faculty of Medicine.—F. J. H. Campbell

University of Colorado School of Medicine.—Maurice H. Rees

Georgetown University School of Medicine.—David V. McCauley; J. D. Hird.

Howard University School of Medicine.—Numa P. G. Adams

Emory University School of Medicine.—R. H. Oppenheimer

University of Georgia School of Medicine.—G. Lombard Kelly

Loyola University School of Medicine.—J. G. Powers

Northwestern University Medical School.—J. Roscoe Miller

University of Chicago Medical Schools.—A. C. Bachmeyer; Emmett A. Bay

Indiana University School of Medicine.—B. D. Myers

State University of Iowa College of Medicine.—Ewen M. MacEwen

University of Kansas School of Medicine.—H. R. Wahl

Tulane University of Louisiana School of Medicine.—C. C. Bass

Johns Hopkins University School of Medicine.—Alan M. Chesney

University of Maryland School of Medicine.—J. M. H. Rowland

Harvard University Medical School.—C. Sidney Burwell

Tufts College Medical School.—Dwight O'Hara

Wayne University College of Medicine.—Raymond B. Allen

University of Minnesota Medical School.—H. S. Diehl; C. D. Creevy

University of Minnesota Graduate School (Mayo Foundation).—Donald C. Balfour

University of Mississippi School of Medicine.—B. S. Guyton

St. Louis University School of Medicine.—A. M. Schwitalla; C. H. Neilson

University of Missouri School of Medicine.—Dudley S. Conley

Washington University School of Medicine.—Jos. Erlanger

Creighton University School of Medicine.—J. J. McInerney

University of Nebraska College of Medicine.—C. W. M. Poynter

Dartmouth Medical School.—John P. Bowler

Albany Medical College.—Harold Rypins

Columbia University College of Physicians and Surgeons and New York Postgraduate Medical School.—Laurence W. Sloan

Cornell University Medical College.—W. S. Ladd; Dayton Edwards

Long Island College of Medicine.—Frank L. Babbott; J. A. Curran

New York Medical College.—Claude A. Burrett

- New York University College of Medicine.—Currier McEwen
 Syracuse University College of Medicine.—H. G. Weiskotten
 University of Buffalo School of Medicine.—E. W. Koch; Robert P. Dobbie
 Wake Forest College School of Medical Sciences.—Ivan W. Procter
 University of Oklahoma School of Medicine.—Robert U. Patterson
 University of Oregon Medical School.—Ralf Couch; Norman A. David; Harry J. Sears
 Hahnemann Medical College.—F. J. von Rapp
 Jefferson Medical College.—Ross V. Patterson
 Meharry Medical College.—J. J. Mallowney
 University of Tennessee College of Medicine.—O. W. Hyman
 Baylor University College of Medicine.—W. H. Moursund
 University of Texas Medical School.—W. S. Carter
 University of Utah School of Medicine.—Chas. C. Johnson; Fred W. Clausen
 Medical College of Virginia.—Lee E. Sutton
 West Virginia University School of Medicine.—Edw. J. VanLiere
 Marquette University School of Medicine.—A. H. Berens; Eben J. Carey
 University of Wisconsin Medical School.—Walter J. Meek

MINUTES OF THE 1936 MEETING

The Secretary announced that the minutes of the 1936 meeting had been printed and were distributed, one copy to the dean of each member college, and offered them as such in lieu of further reading.

On motion, duly seconded, the minutes as printed were approved.

REPORT OF SECRETARY

The Secretary presented the following report:

In 1894 the Association met in San Francisco under the presidency of Dr. Nathan S. Davis, dean of the Chicago Medical College now Northwestern University Medical School.

MEMBERSHIP

The membership of the Association now numbers 83. Six of the members are Canadian medical colleges; three are grad-

uate and postgraduate schools. One application for membership, from the Dalhousie University Faculty of Medicine, is pending.

ACTIVITIES OF ASSOCIATION

The work of the Association is becoming more widely known from year to year. Numerous individuals and organizations seeking information on medical education are being referred to the Association which has a fund of information not available elsewhere. Therefore, the correspondence is growing to huge proportions. It is very clear that the existence of the Association and its activities are recognized as being an important factor in medical education and that its influence in this field is potent. Your secretary received an urgent invitation to attend the Congress on Graduate and Postgraduate Medical Education, held in Berlin, Germany, August 21 to 24, which unfortunately he was unable to attend. Representatives from many foreign countries were in attendance. Keen interest is being taken in this subject the world over which promises well for an early solution of many trying problems. America's way of handling these problems is attracting attention.

The Advisory Board for Medical Specialities, of which a representative from this Association, Dr. Willard C. Rappleye, recently was elected president, is initiating a study of graduate education by a special Committee to be appointed by the Board. This step, and the setting up of examining boards by the various national specialties groups, is significant of the interest being taken in the United States in graduate education. The facilities for this advanced education are at the present none too many. Universities which can set up a program of graduate education should be urged to do so. Judging from the many requests received at headquarters for fellowships in various specialty fields, graduates in medicine are keen to carry on to fit themselves for medical practice of the highest grade.

Cooperation between various groups interested in medical education in all its phases is increasingly apparent. At a meeting called in February by the president of the Association, Dr. Ryerson, in pursuance of the resolution adopted at the Atlanta meeting, the attendance was 100 per cent. Discussion was lively and disclosed the existence of an eagerness to get together on all matters of interest to medical educators, hospital executives, members of state licensing boards and the Federation of State Medical Boards. A brief report on this meeting was pub-

lished in the JOURNAL of the Association in March, 1937. Such meetings are fruitful of good results and it is desirable that they may be continued.

FOREIGN MEDICAL COLLEGES

The evaluation of credentials of American students who apply for admission to medical schools of Great Britain has been continued. The number of such applications has lessened considerably since this work was begun in 1930. In 1930, between 600 and 700 applications were reviewed; In 1936 only 14, and thus far in 1937, only 6. This is not, however, a true picture of what has happened. American applicants know that unless they wish to be enrolled in the British Medical Students' Register, medical colleges of Great Britain, such as will accept American students, will admit them without the intermediary participation of the General Medical Council. Hence, they do not ask to be enrolled in the Register and fewer applications of Americans are sent to the headquarters of the Association for evaluation and information. True, fewer Americans are in attendance in English schools, and each year, according to personal communications, more and more English schools refuse to accept Americans or other foreign students. A personal canvas of some of these schools in London showed that no Americans were enrolled.

The University of Vienna and the University of Innsbruck will not accept any Americans unless they hold a bachelor's degree and are recommended by this Association. France does not admit any foreigners (except Roumanians) under any circumstances. Every medical student in France must be a citizen of France. No exceptions are made. However, an American, or other foreigner, may attend classes; take all prescribed work and on satisfactory completion he is given a certificate or statement by the professor setting forth the character of his work.

Germany is very eager to avail itself of the help of the Association in this matter. There were no Americans enrolled in the medical schools in Berlin or Heidelberg. About a dozen were enrolled at Munich, enrollment having been made on the basis of the New York State medical student's certificate. However, it is likely that in the future none of the German schools will have American students unless they have been recommended by this Association. On the basis of religion, some Americans will find it impossible to secure admission. Germany has ruled

that "only Aryans will be permitted to serve an internship in any hospital in the Reich." Therefore, American students who come under this ban must serve their internship elsewhere than in Germany. Furthermore, the registration of "non-Aryan" students is being restricted more and more and it is not unlikely that in the very near future they will be refused admission entirely. Americans will do well to make certain that if enrolled in a German medical school they will be graduated on satisfactory completion of the work.

INTERN PLACEMENT BUREAU

The Intern Placement Bureau began to function early in the year. The results thus far justify its organization. More than 200 senior students filed placement blanks. Many of these were placed in desirable internships. About fifty hospitals availed themselves of this service and it was possible to give service to many of them. The Bureau serves only those students who have a good scholastic record, as shown by the data on file who have a good scholastic record, as shown by data on file in the Student Register, and serves only hospitals which have been approved by an acceptable standardizing agency. Through this Bureau, deans will be relieved of the sometimes trying duty of writing letters of recommendation, sometimes a dozen or more for one student, and the hospitals will receive a complete record of the student's scholastic history from the time he entered the arts college until his graduation, or senior year at least. Letters received from hospitals served prove that the Bureau is worth while. When its existence becomes more widely known to students, and its purpose is appreciated by hospitals, its functions will grow to considerable proportions and the end aimed at will be reached. Deans should call the attention of their students to the Bureau. The hospitals already know of its existence inasmuch as their national associations have endorsed it and collaborated in its establishment and functioning.

Four blanks are used: One gives the information asked for by hospitals on prospective interns. This blank is filled in by the college and the dean fills in confidential information. The student signs the blank. A second blank is filled in by the hospital asking for the service of the Bureau. It gives information regarding the hospital, its services, educational advantages, data on internships and such other particulars as cannot be obtained elsewhere. In this connection, the data on hospitals on file in the offices of the American Medical Association and the American College of Surgeons have been made available to the Bureau. A third blank advises the applicant of an opening at a hospital

and the fourth blank makes a recommendation to the hospital on behalf of an applicant for an internship. Personal data are supplied to the hospital on request and are strictly confidential. Thus far, the method of operation has proved entirely satisfactory.

Many requests for placement in residencies also have been received, but, unfortunately sufficient information on worth while residencies is not available. Medical colleges and universities generally should submit lists of residencies to the Association in order that help may be given to applicants for such positions. Cooperation with the Advisory Board for Medical Specialties in this endeavor is most desirable. It promises to give the best solution on how this activity can be helpful.

EXHIBIT

In May, 1936, the Association made an educational exhibit, consisting of about fifteen charts showing the activities of the Association and the results of many of the studies it has made, at the annual meeting of the American Medical Association held in Kansas City, Missouri. In June, 1937, a similar exhibit, with additional charts, was made at the annual meeting of the American Medical Association held in Atlantic City, New Jersey. The exhibit attracted much attention and many favorable comments were made about it. The exhibit was next shown at the annual meeting of the Canadian Medical Association, held in Ottawa in June, 1937. By request, the exhibit was next shown at the annual meeting of the Wisconsin State Medical Society held in Milwaukee in September, and, again by request, it was shown at the annual meeting of the Association of Military Surgeons of the United States held a few weeks ago in Los Angeles. Delegates to this meeting can view the exhibit elsewhere in this hotel.

It is apparent that there is interest being manifested in medical education and in the work of this Association. The data presented in the exhibit are original, represent only the work of the Association and are true and complete. The Association can justly take pride in what it is doing in the field of medical education and as its work becomes more widely known it is self-evident that many misconceptions held by critics of medical education will be corrected. Medical education is not as bad as some seem to think it is; it is forging forwards; something is being done every year to overcome defects of whose existence none are so well aware as the men who are actively engaged in this field.

The exhibit will go far to overcome criticism, especially when it is unjust and unfair.

NEWS BULLETIN

There is no need to enlarge on the worth of this publication. It is sent monthly for ten months to all member colleges and gives information which is more or less confidential, hence cannot be published in the JOURNAL. Colleges are urged to avail themselves of the BULLETIN if they wish to send word to the membership on important executive problems or actions.

ACCOMPLISHMENT REPORTS

During the year each member college received a composite report showing the accomplishment of all freshman medical students by arts colleges over a period of six years. This report should prove helpful in the selection of students as an additional aid to scholarship reports and aptitude test ratings. This report is supplementary to the one which is sent out annually for each immediately preceding academic year.

This study continues to elicit many favorable comments from the arts colleges, each one receiving a report on its students and giving, in return, a report on the class standing of these students while in college. This report is correlated with the reports of the medical colleges themselves and is published annually in the JOURNAL. It would be highly desirable if this study could be extended into the last three years of the medical course but at the present the working force is not sufficiently large to make the study possible. It is hoped that such a study can be made soon.

STUDY OF APPLICANTS

The study of applicants continues to be a source of much valuable information. The cards, even those of previous years, are in daily use and help to answer many questions sent to headquarters and detect conscienceless repeaters who succeed in being admitted by medical colleges on the basis of fraudulent credentials or misstatements. Member colleges are urged to send a list of their freshman class to headquarters to be checked against these files.

STUDENT REGISTER

This register is also proving useful. It has more than justified itself. In many instances, only this register can supply in-

formation of vital importance when needed most. It now contains about 35,000 cards, one for each medical student, beginning with the freshman class of 1932. The card contains a complete scholastic record of every student from the time he entered the arts college until he enters on his internship. This information is not available elsewhere.

ARTS COLLEGE REGISTER

This register, which was begun in 1928, contains about 5,500 card, one for each college for each academic year which was represented in a medical college by one or more students. The information given for each student consists of his name, pre-medical preparation, aptitude test rating, if any, medical college attended and his record and class standing for the year. All of this information is sent to the arts college. This work has received much commendation.

STUDIES

From time to time, various studies have been made on points of interest by way of giving information not previously available. It is not always the case that a study has immediate value in helping to solve a problem, but it does answer questions hitherto not answered. Such a study is the one on teaching personnel. How many physicians are members of the teaching staffs of medical colleges in the United States and Canada? Of itself, this is not a matter of particular importance, but, now, we have the answer. The study was published in the JOURNAL.

Many other studies could be made did time permit. Weekly some one writes wanting to know about this and that; has a study been made on such and such a point; where can information on this or that be found, etc., etc. No answer can be given because the particular study suggested has not yet been made. It should be made, however, because of the fact that some one wants to know about that point and this Association should be in a position to answer the question propounded.

At the moment a card index is in process of making which will list all teachers of professorial rank in every subject in all medical colleges of the United States and Canada. Information on that point is not now available. The name, address, rank and faculty affiliation will be given on these cards. Only professors, associate and assistant professors, numbering about 6,000, will be listed.

TEACHER PLACEMENT BUREAU

Every once in a while, and with increasing frequency in the last two years, colleges are writing in wanting to know whether any help can be given, any suggestions given with reference to securing teachers, usually in the professorial rank, and the head of a department as a rule. It has been possible to give that assistance in some cases. Teachers are also writing in and asking whether they can secure placement somewhere, whether we know of something that might be open for them, and we have been able to give that information.

The Association should assume responsibility for this activity rather than to make it an individual responsibility.

A few colleges have gone to the Medical Bureau and asked for assistance, and some teachers have likewise filed applications with the Medical Bureau. In both instances, it always costs the teacher, I believe, 40 per cent of his first month's salary. The help that can be given by the Association is naturally gratuitous, as is the intern placement.

JOURNAL

It is needless to call your attention to the improved appearance of the JOURNAL. Letters of commendation indicate that its readers are convinced that it is an improvement. The next forward step is either to increase the number of pages per issue or to publish monthly. For many reasons, the latter is the more desirable step to take. It will tend to make the JOURNAL a more vital factor in medical education; to fix its existence more firmly in the minds of its readers; and to publish sooner the large volume of material waiting for publication. The latter is important. Finally, from the standpoint of the advertiser, monthly publication is distinctly more worth while than less frequent publication. The oftener the reader sees an ad, the more likely is he to remember what it brings to his notice. Up to the present, only lack of sufficient funds to publish oftener has kept the JOURNAL a bimonthly, but the promise of greater returns from advertising in the coming year, doubtless will make monthly publication possible. Each issue consists of 2,500 copies of the JOURNAL, of which about 2,450 copies are sent to names included in the mailing lists. This list could easily be enlarged if all requests for placement on it could be honored, but here, again, cost of publication must be borne in mind. It is most desirable, however, that a copy of the JOURNAL be placed in the hands of

every teacher of professorial rank in the medical schools of the United States and Canada. This would necessitate printing at least 6,500 copies of each issue. Without a doubt the increased revenue from advertising would defray the entire cost of publication or at least a considerable portion of it. All of this is more than idle speculation. It is a matter that must be disposed of by action on the part of the Association. At the outset, until advertising returns will defray cost of publication, a contribution of \$25 from each member college, voluntary or raised by assessment, as has often been done in the past, would meet the cost of enlarging each issue of the JOURNAL to the extent that at least 5,000 copies can be printed and a larger distribution made to the teaching faculty of each member college. The Executive Council has limited the number of copies of the JOURNAL to be distributed to any one college to 25. Additional funds, either from advertising or from assessment or contribution by the colleges, would increase this number to 50. Obviously, this increased distribution will go far to spread information on medical education and teaching among those who have an interest in both. True, the most desirable achievement would be to deliver a copy of the JOURNAL to the 16,500 teachers of every rank in the medical colleges of the United States and Canada. What an inducement to advertise in the JOURNAL that would be! And, why should not every business which serves the medical colleges in one way or another help to support a worthwhile enterprise by advertising in it? If every such purveyor of goods were asked, "Why do you not advertise in our JOURNAL?" it would be helpful in securing this needed financial assistance without engendering the feeling that it is a "hold-up."

VARIATIONS IN PUBLISHED DATA

As increased attention is being taken in published data on medical education, the question is often asked "Why the variations in published data"? The answer is that there really is not any variation. Apparent variations are the result of data collected from various sources or at different times. The data published by this Association represent finals. Thus, all applicants accepted for admission to medical schools do not matriculate; all those who matriculate do not remain in college long enough to be listed as members of a class. Those students who finally complete a year's work are counted and reported. This is an absolute figure. The graduates of any year do not include only those students who began medical study four years pre-

viously. Quite a considerable number of graduates have been studying medicine for more than four years; some as long as eight or nine years. Some graduates have completed the work of four academic years in three calendar years by continuous attendance. Hence, the graduates of 1937 do not represent the entering class of 1933. Figures bearing on these variations have been published in the JOURNAL of the Association. It is definitely positive, however, that all data and figures published by the Association are correct and can be verified by consulting the files at headquarters. These files can be checked one against the other to prove that the data contained therein are correct. The Students' Register gives the most complete information on every student to be had.

The information on file at headquarters is being added to all the time with the hope that it may at some time be possible to answer any question bearing on medical education—the millennium in contemplation.

STUDENT EXCHANGE

German university medical colleges are eager to cooperate in an exchange of students between their medical schools and those of the United States. They even are willing to give American students a stipendium so that they can live in German. An appeal has come to the Association to interest itself in this problem and to lend its assistance in effecting such an exchange. Doubtless, such a plan has distinct advantages for many reasons. Americans would find it profitable to spend a semester or even two semesters at a German medical school, and German students would find it equally profitable to attend one of our medical schools for one year or even only one semester. So far as the Germans are concerned, there is no language difficulty. All German medical students speak English quite well. This probably is far from being the case with American students, but attendance at a German medical school for only one semester would soon overcome this difficulty.

German graduates also would like to intern in an American hospital, not with any idea of remaining in this country to practice as they wish to practice in their own country. At the moment such opportunities are given them by Belgium, England and other European countries, and they invariably come back home. They feel that such service adds materially to their education and makes them more proficient in practice.

German professors also would like to enter on an exchange arrangement with our medical colleges. Here, too, there are many advantages to be seen. This Association might well serve as a clearing house for all such exchanges in order to stabilize the practice and to ensure sound administration.

DEATHS

It is my sorrowful duty to record the deaths of two past presidents of the Association within the past year: Dr. E. P. Lyon, former dean of the University of Minnesota School of Medicine, and Dr. John Wyckoff, dean of New York University College of Medicine. Both men died suddenly. Dr. Lyon was president of the Association in 1913-1914, presiding at a meeting held in Chicago; Dr. Wyckoff was president in 1935-1936, presiding at the meeting held in Atlanta, Georgia. Dr. Wyckoff was also during that year chairman of the Executive Council. In their passing, the Association has been deprived of two zealous and trustworthy workers whose interest in the Association was at all time keen.

Dr. J. N. Jenne, dean of the College of Medicine of the University of Vermont, died last month, aged 76. He had been a regular attendant at the meetings of the Association for many years. His genial personality won him many friends.

(Signed) Fred C. Zapffe, *Secretary*

On motion, duly seconded this report was ordered published in the proceedings.

REPORT OF TREASURER

Balance Sheet — August 31, 1937

This report of the treasurer was made to the Executive Council which has charge of the finances of the Association and was accepted.

ASSETS:

Cash in Bank	\$ 8,876.87	
Petty Cash Advances	135.00	
Investments	15,000.00	
Prepaid Expense	85.50	
		<u>\$24,097.37</u>

LIABILITIES:

Deferred Income	\$ 2,250.00	
Membership Application Deposit	150.00	
Accumulated Net Income	21,679.37	
		<u>\$24,097.37</u>

STATEMENT OF INCOME AND EXPENSE

For the Year Ended August 31, 1937

INCOME:

Dues	\$12,450.00	
Advertising	1,257.59	
Journal Sales and Subscriptions	173.70	
Aptitude Tests	10,675.89	
		<u>\$24,557.18</u>

EXPENSE:

Association Office	\$11,369.38	
Treasurer's Office	168.08	
Journal	3,534.38	
Travel Expense to Colleges	276.62	
Annual Meeting Expense	356.10	
American Council on Education	100.00	
Contingency	403.48	
Aptitude Test Committee	7,696.53	
		<u>24,177.57</u>

EXCESS OF INCOME OVER EXPENSE		<u>\$ 379.61</u>
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DETAILED STATEMENT OF EXPENSE
For the Year Ended August 31, 1937

ASSOCIATION OFFICE:

Secretary—Salary	\$ 6,000.00
Stenographer—Salary	1,200.00
Clerk—Salary	1,110.00
Office Rent	1,794.00
Stationery, Printing & Supplies	470.15
Postage	165.75
Telephone & Light	124.76
New Equipment	356.12
Surety Bond Premium	25.00
Miscellaneous	123.60

\$11,369.38

TREASURER'S OFFICE:

Clerk—Salary	\$ 50.00
Surety Bond Premium	50.00
Auditing Fee	25.00
Postage & Miscellaneous	43.08

\$ 168.08

JOURNAL:

Publications	\$ 3,377.78
Postage	156.60

\$ 3,534.38

TRAVEL EXPENSE TO COLLEGES

\$ 276.62

ANNUAL MEETING EXPENSE:

Travel Expense—Secretary	103.05
Reporting	179.30
Printing	73.75

\$ 356.10

AMERICAN COUNCIL ON EDUCATION:

Membership	
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\$ 100.00

CONTINGENCY:

Advisory Board for Medical Specialties	\$ 100.00
American Medical Association Exhibit	175.80
Canadian Medical Exhibit	124.03
Wisconsin Exhibit	3.65

\$ 403.48

APTITUDE TEST COMMITTEE:

Salaries & Honorarium	\$ 5,727.00
Office Rent	600.00
Printing	873.66

DETAILED STATEMENT OF EXPENSE (CONT'D)

Postage & Miscellaneous	424.52	
Travel	238.35	
New Equipment	95.50	
Surety Bond Premium	10.50	
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		\$ 7,969.53
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GRAND TOTAL		\$24,177.57

Respectfully Submitted,

(Signed) A. C. BACHMEYER, Treasurer

REPORT OF THE EXECUTIVE COUNCIL

DR. E. S. RYERSON: As chairman of the Executive Council, I have the privilege of presenting this report. It might be expeditious to present each of these items and have them dealt with as read, instead of reading the report through and going back over it again.

APPLICATION FOR MEMBERSHIP

1. The first item to be considered was the application of Dalhousie University Faculty of Medicine, Halifax, Nova Scotia. The committee considered this application and recommended that the application for membership of this university be accepted.

Dr. C. Sidney Burwell (Harvard University) moved adoption of the recommendation, seconded by Dr. C. W. M. Poynter (University of Nebraska).

The motion carried.

DR. RYERSON: It is a particular pleasure to me, as president this year, to see this action taken. This means that now the seven English speaking medical schools in Canada are all members of this Association. (Applause).

REMOVAL OF PROBATION

2. The second item was consideration of the status of the University of Mississippi School of Medicine, which has been under probation for some time. On the basis of an inspection of this school, the Council recommends that probation be re-

moved, and the University of Mississippi School of Medicine be restored to full membership.

Dr. William S. Ladd (Cornell University), moved the adoption of the recommendation. Seconded by Dr. Stuart Graves (University of Alabama).

The motion carried.

REINSTATEMENT OF COLLEGES

3. The University of North Dakota School of Medicine and the University of South Dakota School of Medicine made application for reinstatement. The Council recommends that action be deferred, pending an inspection to be made by the Council, at the expense of each of these schools.

Dr. Currier McEwen (New York University), moved concurrence with the recommendation. Dr. H. R. Wahl (University of Kansas) seconded the motion.

The motion carried.

INSPECTION OF MEMBER COLLEGES

4. The Council recommends that inspection of member colleges be resumed on authorization of the Executive Council at the Association's expense; that applications for inspection be made by the college; other inspections to be made on order of the Council as authorized by the constitution and by laws.

Such inspections were for many years carried out periodically, but were discontinued during the past few years. The Executive Council feels that this activity should be resumed. It has been helpful to colleges in many ways, and should be made at the Association's expense. The Secretary has already had requests from two or three colleges for such inspection, and the Council feels this practice should be resumed.

Dr. F. L. Babbott (Long Island College of Medicine), moved adoption of the recommendation. Dr. B. D. Myers (Indiana University), seconded the motion.

The motion carried.

TEACHER PLACEMENT BUREAU

5. The Council recommends the institution of a Teacher Placement Bureau in the Association office as an aid to colleges

in securing teachers, and teachers in securing positions. The Secretary has outlined the position with regard to that in his reply, so I need not further outline the basis on which this recommendation is made.

Dr. C. W. M. Poynter (University of Nebraska), moved adoption of the recommendation. Dr. J. M. H. Rowland (University of Maryland) seconded the motion.

The motion carried.

REPORT OF THE TREASURER

6. The Council received the report of the Treasurer and the audit of accounts and approved of both. This report is printed in full in the minutes, of which every member college receives a copy. The constitution gives the Executive Council authority in matters of finance.

BUDGET FOR 1937-1938

7. The next item is the budget for the year 1937-1938. The Council considered this item very carefully. We have a balance in the treasury at the present time over and above the budget.

The budget for 1937-1938 as approved by the Executive Council is as follows:

BUDGET FOR 1937-1938

INCOME (Estimated)

Dues	\$12,300.00	
Journal advertising	1,500.00	
Journal sales & subscriptions.	150.00	
Aptitude tests	10,500.00	\$24,450.00

Underwriting from reserve funds

\$ 1,980.00

TOTAL INCOME

\$26,430.00

APPROPRIATIONS

Association office \$11,905.00

 Salaries

 Secretary6,000.00

 Stenographer1380.00

 Clerk1200.00

 General expense

 Rent2000.00

 Telephone & light..... 150.00

 Supplies & printing 500.00

 Postage 200.00

 Misc. & surety bond 325.00

 New equipment 150.00

 Treasurer's Office

 Salary, clerical 50.00

 Surety bond 50.00

 Audit 25.00

 Misc. & postage 50.00

 Journal

 Publication3600.00

 Postage 200.00

 Annual meeting expense

550.00

 Travel expense (inspectors
 committees, representatives)

500.00

 American Council on Edu'tion

100.00

 Aptitude Test Committee ...

8,400.00

 Salaries & honorarium ...5,025.00

 Statistical & other stud. .1,000.00

 Office expenses1,900.00

 Rent600.00

 Printing675.00

 Advertising } 625.00

 Postage } 625.00

 Supplies } 625.00

 Surety bond } 375.00

 Miscellaneous } 375.00

 Travel (Dr. Moss } 375.00

 & Committee }

 New equipment ...100.00

 Contingency

1,000.00

\$26,430.00

Dr. Ross V. Patterson (Jefferson Medical College), moved approval of this Budget as presented. Dr. Currier McEwen (New York University) seconded the motion.

The motion carried.

Dr. B. D. Myers (Indiana University) moved adoption of the report of the Executive Council as a whole. Seconded by Dr. Ross V. Patterson. The motion carried.

(Signed)

Alan M. Chesney
Maurice H. Rees
L. R. Chandler
C. W. M. Poynter
R. H. Oppenheimer
E. S. Ryerson, *Chairman*

REPORT OF COMMITTEE ON EDUCATIONAL POLICIES

This report was presented by the chairman of the committee, Dr. Frank L. Babbott. It was as follows:

The Committee on Educational Policies has met twice since the 1936 meeting of the Association. No matters had been specifically referred to the Committee for consideration, but the Committee has given much thought to two items:

First, graduate medical education: The Committee realized that most of the member colleges now have inadequate facilities for properly conducting their undergraduate obligations, and that further drain on the existing space and staff might interfere with its current uses. It was also appreciated that such programs as are now being contemplated by the various Boards of Medical Specialities will involve considerable additional expense to the colleges and hospitals participating in graduate education. From what sources can these expenses be obtained?

The Committee recommends that the representatives of the Association of American Medical Colleges who are to participate in the forthcoming survey of opportunities for graduate medical education be instructed to give careful thought to the additional facilities, personnel and costs which such graduate education programs would necessitate.

Second, the question of intern education: Pending the publication of the report of the New York Committee on the

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study on internships and residencies, this Committee has no recommendation to present to this Association.

Respectfully submitted,
(Signed)

Frank L. Babbott, *Chairman*
C. Sidney Burwell
L. R. Chandler
Alan M. Chesney
Alphonse M. Schwitalla

Dr. Babbott moved adoption of this report. Dr. Chesney seconded the motion.

The motion carried.

REPORT OF REPRESENTATIVE ON ADVISORY BOARD FOR MEDICAL SPECIALTIES

The following report was submitted by Dr. Willard C. Rappleye, president of the Advisory Board and representative on the Board from the Association of American Medical Colleges:

The Advisory Board for Medical Specialities adopted the following resolution at its meeting in Atlantic City on June 6, 1937:

RESOLVED, That the President appoint four members of the Advisory Board for Medical Specialities with power to add to their number and to form a Commission on Graduate Medical Education to study the problems of graduate and postgraduate medical training, such a Commission to be comprised of representatives of the medical profession, the hospitals, the universities, the medical schools, and the licensing bodies.

In keeping with that action may I report that a Commission on Graduate Medical Education has been created, the personnel of which is attached.

The Commission will undertake to mobilize current opinions as to how the problems in this field can best be solved and to formulate the educational principles involved in graduate and postgraduate medical training. It is hoped that standards of training can be drawn up which will be of help to the Council on Medical Education and Hospitals and other agencies concerned with the inspection and evaluation of the facilities needed. There would be no duplication of effort nor conflict with the

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Council and these other agencies. The results of the studies by the Commission should be of real assistance to the specialty boards, the medical profession, hospitals, medical schools, state board of medical examiners, and other institutions and organizations concerned with this phase of American medicine.

COMMISSION ON GRADUATE MEDICAL EDUCATION

FRED L. ADAIR, Chicago, vice-president, American Board of Obstetrics and Gynecology.

A. C. BACHMEYER, Chicago, University of Chicago Clinics former president, American Hospital Association.

DONALD C. BALFOUR, Rochester, director, Mayo Foundation; member, Board of Regents, American College of Surgeons.

KENNETH D. BLACKFAN, Boston, professor of pediatrics, Harvard Medical School.

JAMES D. BRUCE, Ann Arbor, Mich., vice-president and Director of Department of Postgraduate Medicine, University of Michigan; chairman, National Committee on Postgraduate Medical Training.

R. C. BUERKI, Madison, Wis., superintendent, University of Wisconsin Hospital; former president, American Hospital Association.

ANTON J. CARLSON, Chicago, professor of physiology, University of Chicago.

WALTER F. DONALDSON, Pittsburg, secretary, Pennsylvania State Medical Society, and former member of Council on Medical Education and Hospitals of American Medical Association.

REGINALD FITZ, Boston, member, American Board of Internal Medicine and of Council on Medical Education and Hospitals.

EVARTS A. GRAHAM, St. Louis, chairman, American Board of Surgery.

F. W. HARTMAN, Detroit, secretary-treasurer, American Board of Pathology.

WILLARD C. RAPPLEYE, New York, Dean Columbia University Faculty of Medicine; Director, New York Postgraduate Medical School; former Director of Study, Commission on Medical Education.

J. STEWART RODMAN, Philadelphia, secretary, American Board of Surgery; medical secretary, National Board of Medical Examiners.

HAROLD RYPINS, Albany, secretary, New York State Board

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of Medical Examiners; former president, Federation of State Medical Boards of United States.

ALFRED STENGEL, Philadelphia, vice-president in charge of medical affairs, University of Pennsylvania.

WILLIAM P. WHERRY, Omaha, secretary, American Board of Otolaryngology; executive secretary, The American Academy of Ophthalmology and Otolaryngology.

ALLEN O. WHIPPLE, New York, vice chairman, American Board of Surgery; member, Committee on Graduate Teaching American Surgical Association.

RAY LYMAN WILBUR, Stanford, president, Stanford University; chairman, Council on Medical Education and Hospitals of the American Medical Association; former president, American Medical Association; former president, Association of American Medical Colleges.

JOHN YOUMANS, Nashville, director of Postgraduate Instruction, Vanderbilt University School of Medicine.

Respectfully submitted,

(Signed)

Willard C. Rappleye.

ELECTION OF OFFICERS FOR 1937-1938

PRESIDENT RYERSON: The first item under new business is the election of officers for 1937-38. Will the chairman of the Nominating Committee, Dr. Oppenheimer, present the report of that committee.

DR. OPPENHEIMER presented the following report:

<i>For</i> President-Elect	Dr. Willard C. Rappleye
Vice President	Dr. W. S. Middleton
Secretary	Dr. Fred C. Zapffe
Treasurer	Dr. Arthur C. Bachmeyer

Members of the Executive Council:

Dr. Maurice H. Rees
Dr. Loren C. Chandler

(Signed)

J. C. Simpson
Currier McEwen
R. H. Oppenheimer, *Chairman*

Dr. Oppenheimer moved adoption of this report.

Dr. J. C. Simpson (McGill University), seconded the motion.

The motion carried.

PLACE OF 1938 MEETING

DR. RYERSON: The next item of business is a very important one, the place of meeting for the 1938 annual meeting.

SECRETARY ZAPFFE: I would like to remind you, that Dr. Weiskotten extended an invitation last year to have the 1938 meeting held in Syracuse. Recently, I received invitations as seconds from the mayor of Syracuse and the Syracuse Chamber of Commerce. Perhaps, Dr. Weiskotten has some additional invitations, or something further to say.

DR. H. G. WEISKOTTEN (Syracuse University): For quite a number of years we have hoped we might look forward to having the Association meet in Syracuse. After I had made a special visit to each, and every member college, I felt I was justified in asking the members to return the visit, and I was especially anxious to dispose of all skeletons in closets and dirty linen in Syracuse. So last year, undismayed by the eloquent, high-pressure sales talks of Beverly Douglas, Oppenheimer, and "Yank" Chandler, I dared to suggest that we would like to have this Association meet in Syracuse in 1938.

Tonight, still undismayed by the remarkable entertainment we have had here in San Francisco, I would like to renew that invitation, telling you frankly that probably Syracuse is not the dimple of the universe. Perhaps, we cannot compete with the entertainment that has been offered elsewhere. We are just plain folks in a small town and probably poor relations, but at the same time I think you would do us a lot of good, and we really will try to give you a good time if you come to Syracuse.

Dr. Russell H. Oppenheimer (Emory University), moved that the Association meet in Syracuse in 1938.

Dr. Ross V. Patterson (Jefferson Medical College), seconded the motion.

The motion carried.

DR. RYERSON: A very sad event occurred during the past in the loss of our past president, Dr. John Wyckoff. The Executive Council asked Dr. Babbott and Dr. MacTavish to prepare

an appropriate resolution. I will ask Dr. Babbott to present that resolution.

Dr. Babbott read the following resolution :

WHEREAS: John Henry Wyckoff, Dean of the New York University Medical School has been associated with this organization for more than fifteen years, and

WHEREAS: he has taken an active part in its deliberations as an individual member and as a member of important committees, and

WHEREAS: he served as its president for the year 1935-1936, an office which he filled with distinction, and

WHEREAS: his helpful counsel, vigorous personality and high character have been of significant help in the developement of medical education in this country.

Be it Resolved, that this Association pause in its deliberations to reflect on the personality, leadership, wisdom, and spirit of John Henry Wyckoff in grateful appreciation of his service to it and,

Be it further Resolved, that these resolutions be spread upon the minutes and that a copy be sent to his family.

(Signed)

W. C. Mac Tavish
Frank S. Babbott

PRESIDENT RYERSON: I ask you rise for a moment of silence.

The delegates arose and stood in silence in memory of Past President Wyckoff . . .

PRESIDENT RYERSON: By a tragic coincidence, Dr. MacTavish was suddenly called home today as the result of the death of his wife at two o'clock this morning. It would be very fitting if this Association would instruct the Secretary to convey the sympathy of the Association to Dr. MacTavish in his bereavement.

Dr. Harold Rypins (Albany Medical College), moved that the Secretary be so instructed. Dr. F. L. Bobbott seconded the motion.

The motion carried. (NOTE: The telegram was sent.)

DR. EBEN J. CAREY (Marquette University): Before we adjourn, the Secretary should be instructed to express our sincere appreciation to the deans of Stanford University School of Medicine and the University of California Medical Schools, to their faculties, and to their wives for the excellent entertainment they have given us.

The audience arose and applauded.

The meeting adjourned at 9:25 o'clock.

(Signed)

Fred C. Zapffe,
Secretary.

THIRD DAY

October 27, 1937

The final session of the forty-eighth annual meeting was convened at 9:40 a. m., Dr. Ryerson presiding.

Dr. Ryerson presented the new president, Dr. Alan M. Chesney, who assumed the chair.

Dr. Chesney expressed his appreciation at having been elected to the presidency of the Association in a few, well chosen words.

The program was resumed.

The first item on the program was a symposium on the "Community Aspects of Medicine." The first paper in this symposium was read by Dr. H. R. Wahl, dean University of Kansas School of Medicine. The second paper was presented by Dr. B. W. Black, director Alameda County Institutions. The third paper was presented by Mr. Ralf Couch, secretary and director of hospitals and clinics, University of Oregon Medical School.

The discussion on these three papers was participated in by Drs. H. G. Weiskotten (Syracuse); Langley Porter (Califor-

nia); Maurice H. Rees (Colorado); Alan M. Chesney (Johns Hopkins) and, in closing, by Dr. Wahl.

At this juncture, Dr. Chandler (Stanford) introduced the following resolution:

"In many instances, graduates who desire to serve an internship and/or who desire to obtain graduate medical education in a state other than the one in which undergraduate medical education was received, are penalized by the regulations made by state medical examining and licensing boards. In the interest of graduate medical education, particularly study in the various specialities in medicine, the Association of American Medical Colleges urge examining and licensing boards to provide methods whereby such graduates, during a limited period of graduate work, may carry on without being handicapped by board regulations which make such work difficult, embarrassing and, at times, impossible."

DR. CHANDLER: In other words, in certain states men who wish to take on residencies or assistant residencies are not permitted to do so as it is regarded as the practice of medicine, because their licensure is based on a year of practice after the completion of the internship. That is, they are not permitted to take the licensing examination in that state until they have practiced a year in some other state. Therefore, these students are really penalized. Some states are not yet reciprocating with the National Board of Medical Examiners. Hence, if they wish to get reciprocal registration, if that is possible, it will cost these students an additional \$100. If the state Boards were to allow such students to pursue their graduate studies, not practicing medicine on the outside, or anywhere else, privately or otherwise, but simply continuing their graduate work, it would make it possible for a number of states and a number of institutions to secure graduate students.

Dr. H. S. Diehl (Minnesota) moved the adoption of the resolution. Dr. C. W. M. Poynter (Nebraska) seconded the motion.

DR. C. W. M. POYNTER: (University of Nebraska): Is it not true that this will not apply to schools which do not grant a degree until after the intern year; that it will apply only to the schools which give the degree at the end of the fourth year

and those graduates may take the licensing board examination before serving an internship?

DR. LOREN CHANDLER (Stanford University): In some states that may be true. Nebraska grants a degree at the end of four years of work, hence, its graduates can take the state licensing examination. If they pass, they serve an internship and then, in the eyes of California, they have been licensed and are permitted to practice. If one of those men, at the end of his internship, chooses to come to California to take an assistant residency in any one of our hospitals which provides such training, he is penalized by being made to meet the requirements in California for a full medical license. In that instance, he will take an oral examination before the licensing board, and pay \$100 in addition for the privilege of having the year in California.

My thought was that inasmuch as several states have such requirements, this Association, if it sees fit to do so, could endorse this resolution, bringing it to the attention of the licensing and examining boards with the hope that they will adjust their regulations—and, in some instances, it would have to be an adjustment of the state law—so that those men can receive some form of limited license for this limited period while they are actually receiving further training and doing work under direction of an institution.

DR. HAROLD S. DIEHL (University of Minnesota): I am very much in favor of this resolution, but I should like to see the wording modified so as to include internships as well as residencies or graduate fellowships. I mention that because our state board in Minnesota has recently made a re-interpretation of their ruling regarding licensure, and this new interpretation states that licensure will be required of all physicians in state hospitals, except interns who have not received the M. D. degree. That is a new interpretation, and bars from the state of Minnesota interns from schools which grant the M. D. degree immediately following graduation from medical school. It would not interfere with our own interns or with the interns from schools which withhold the M. D. degree until after the internship. It is an interpretation that would work a hardship on graduates who wish to come to hospitals in the state of Minnesota for internships.

DR. B. W. BLACK (Director, Alameda County Institutions): From the standpoint of one who has to deal with interns as well

as with residents, I should like to ask whether these young physicians, whether they be residents or assistant residents would have any legal status under the terms of your resolution. In other words, do you propose that the state board, without granting a full license to practice, will grant any legal status to the work they may do in any state as a physician?

DR. CHANDLER: I think Dr. Rypins can answer that better than anybody in the room. It is my understanding, however, that in many states, in fact, in more than half the states they are granted a legal status and a limited license during that period.

DR. HAROLD RYPINS (Secretary Board of Medical Examiners of the State of New York): I think in most of the states the interns and residents are specifically exempted under the statute from the necessity of having a medical license. In some states, I remember particularly Massachusetts, the board issues a special limited license to interns and residents in the hospitals.

I favor this resolution, except that it seems to me a very ineffectual way of going about it. Apparently, this is rather an involved question and one of importance, and the situation varies from state to state. I would suggest that it would be more advisable for the Chair to appoint a small committee to actually get the facts on the situation and see how many states would be involved, and then bring these facts before the state licensing boards through their federation, so that we can have something tangible to act on. I think this body, which is, of course, primarily addressed to medical education, the interns' education and the education of residents and graduates, should have some concrete information to bring before the body which it desires to act. After you have acted on this resolution, I will make such a motion.

The motion to adopt this resolution presented by Dr. Chandler was put to a vote and was carried unanimously.

DR. H. G. WEISKOTTEN (Syracuse University): I do not know whether Dr. Rypins made himself entirely clear. You are not opposed to passing this resolution of Dr. Rypins', are you?

DR. RYPINS: I am in favor of it.

DR. RYPINS: I move that the Chair appoint a committee of three to collect specific facts in reference to the legal status of interns, graduate students and residents, and that these facts

be presented with this resolution to the Federation of State Boards and the various state medical licensing boards.

The motion was seconded, put to a vote and carried.

The president, Dr. Chesney, appointed the following committee on Dr. Rypins' motion:

Dr. Harold Rypins, chairman; Dr. H. S. Diehl (Minnesota) and Dr. L. R. Chandler (Stanford).

The program was resumed.

Dr. George S. Johnson, professor of psychiatry, Stanford University School of Medicine, read a paper entitled "Integration of the Teaching in Psychology and Psychiatry."

Dr. Calvin P. Stone, professor of psychology, Stanford University, read his presentation on the same subject.

Dr. Maurice H. Rees, dean University of Colorado School of Medicine, read for himself and for Dr. Franklin G. Ebaugh, professor of psychiatry, University of Colorado School of Medicine, and co-author, a paper entitled "Teaching of Psychobiology by Means of Personality Study."

These three papers were discussed by Drs. E. Stanley Ryerson (Toronto), and, in closing, by Dr. Stone and Dr. Rees.

PRESIDENT CHESNEY: This brings to an end the formal program of the morning.

The members of the Association have already expressed their gratitude and appreciation of the hospitality shown by our California colleagues. It occurs to me that there is one thing more this Association should do, and that is to express appreciation of the high manner in which Dr. Ryerson has conducted the duties of his office as President, and I suggest there is no more appropriate way to express our gratitude than to rise to Dr. Ryerson.

The delegates rose and applauded.

PRESIDENT CHESNEY: The meeting stands adjourned.

The meeting adjourned at 12:25 p. m. to meet again in Syracuse, New York, October 24, 25 and 26, 1938.

(Signed)

Fred C. Zapffe,
Secretary.

MINUTES OF THE ORGANIZATION MEETING OF THE
EXECUTIVE COUNCIL HELD OCTOBER 27, 1937, IN THE
FAIRMONT HOTEL, SAN FRANCISCO

The Council was called to order by Dr. Ryerson at 12:30 p. m., with the following members present: E. S. Ryerson; Maurice H. Rees; C. W. M. Poynter; L. R. Chandler; R. H. Oppenheimer; Alan M. Chesney.

Dr. Ryerson called for nominations for chairman for the ensuing year.

Dr. Maurice H. Rees was nominated and on motion, seconded and carried, was elected chairman for 1937-1938.

Dr. Rees assumed the chair.

The next order of business was the appointment of committees and representatives from the Association to other organizations. The following appointments were made:

COMMITTEE ON EDUCATIONAL POLICIES: Frank L. Babbott (Long Island), chairman; C. Sidney Burwell (Harvard); Loren R. Chandler (Stanford); E. M. MacEwen (Iowa); John R. Youmans (Vanderbilt).

COMMITTEE ON APTITUDE TEST: H. E. Jordan (Virginia) to succeed J. Parsons Schaeffer whose term expired.

REPRESENTATIVES ON ADVISORY BOARD FOR MEDICAL SPECIALTIES: W. C. Rappleye (Columbia); E. S. Ryerson (Toronto)

REPRESENTATIVE ON ADVISORY COUNCIL FOR:

New York World's Fair; W. S. Ladd (Cornell);

San Francisco World's Fair; L. R. Chandler (Stanford).

The secretary was instructed to request the Woman's Medical College of Pennsylvania to report on the progress of reorganization, financial status and other activities on which the dean of the college reported to the Executive Council at the Atlanta meeting in 1936 as at that time being in process of completion.

The nature of the program to be built up for the 1938 meeting was discussed. It was suggested that the following topics for discussion might be worth considering: (1) Preventive medicine and public health: (2) research by under-

graduates and faculties; (3) home visits. Further consideration as to details will be made by the Council at the meeting to be held in February, 1938.

Adjourned.

(Signed)

Fred C. Zapffe,

Secretary.