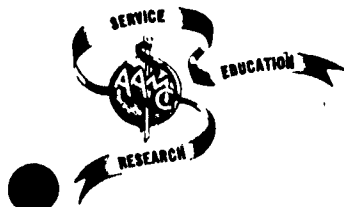


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## A C T I O N S

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### TAKEN AT MEETINGS OF:

|   |           |
|---|-----------|
| <i>Executive Council (September 18-19, 1975)</i>      | <i>7</i>  |
| <i>COD Administrative Board (September 18, 1975)</i>  | <i>6</i>  |
| <i>CAS Administrative Board (September 18, 1975)</i>  | <i>10</i> |
| <i>COTH Administrative Board (September 18, 1975)</i> | <i>16</i> |
| <i>OSR Administrative Board (September 17, 1975)</i>  | <i>19</i> |

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ASSOCIATION OF AMERICAN MEDICAL COLLEGES  
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## EXECUTIVE COUNCIL ACTIONS

September 18-19, 1975

### REPORT OF THE AAMC AUDITORS

ACTION: The Executive Council, on recommendation of its Executive Committee and Audit Committee, approved the report of the Association's auditors, Ernst & Ernst, for the fiscal year ending June 30, 1975.

### RATIFICATION OF LCME ACCREDITATION DECISIONS

ACTION: The Executive Council ratified the accreditation decisions made by the Liaison Committee on Medical Education at its June 25-26, 1975 meeting.

### LCME CHARGES FOR EARLY STAGE ACCREDITATION AND INITIAL PROVISIONAL ACCREDITATION SITE VISITS

ACTION: The Executive Council approved the recommendation of the LCME that medical schools seeking initial provisional accreditation or a letter of reasonable assurance be charged \$1,000 plus travel expenses for this site visit.

### LCME VOTING STATUS OF THE ACMC

ACTION: The Executive Council approved an LCME recommendation that the non-voting representative of the Association of Canadian Medical Colleges be granted a vote on the Liaison Committee on Medical Education.

### ELECTION OF INSTITUTIONAL MEMBERS

ACTION: The Executive Council recommended to the Assembly the election of the following schools to Institutional Membership in the AAMC:

University of South Florida  
College of Medicine

Southern Illinois University  
School of Medicine

### ELECTION OF ACADEMIC SOCIETY MEMBERS

ACTION: The Executive Council recommended to the Assembly the election of the following societies to Academic Society Member-

ship in the AAMC:

American Society of Hematology  
American College of Obstetricians & Gynecologists  
American Society of Plastic and Reconstructive Surgeons  
Association of Medical School Departments of Biochemistry  
Society for Gynecologic Investigation

#### ELECTION OF INDIVIDUAL MEMBERS

ACTION: The Executive Council recommended to the Assembly the election of 198 people to Individual Membership in the AAMC.

#### ELECTION OF DISTINGUISHED SERVICE MEMBERS

ACTION: On recommendation of the Council of Deans Administrative Board, the Executive Council recommended to the Assembly the election of the following individuals to Distinguished Service Membership in the AAMC:

Lewis Thomas  
Leon Jacobson  
George Aagaard  
Donald Anderson  
Stanley Olson  
Clifford Grulee  
William Mayer

#### ELECTION OF EMERITUS MEMBERS

ACTION: The Executive Council recommended to the Assembly the election of the following individuals to Emeritus Membership in the AAMC:

|                      |                   |
|----------------------|-------------------|
| John L. Caughey, Jr. | Leland E. Powers  |
| Thomas Hale Ham      | Lamar Soutter     |
| John P. Hubbard      | Harold C. Wiggers |

#### AMENDMENT OF THE AAMC BYLAWS TO ESTABLISH A CATEGORY OF CORRESPONDING MEMBERS

ACTION: The Executive Council approved and recommended to the Assembly two additions to the AAMC Bylaws to provide for a category of Corresponding Membership in the AAMC. Corresponding Members would be hospitals not meeting the criteria for COTH membership, but fulfilling criteria established by the Executive Council for this category of membership. The Executive Council recommended that dues for Corresponding Members be \$500 annually.

ESTABLISHMENT OF A SUBSCRIBER SERVICE TO NEW AND DEVELOPING MEDICAL SCHOOLS

ACTION: The Executive Council approved the establishment of a Subscriber Service at a rate of \$500 per year which would allow new and developing schools to receive all pertinent AAMC publications and memoranda prior to their eligibility for Provisional Institutional Membership.

1975 FLEXNER AWARD

ACTION: On the recommendation of its Flexner Award Committee, the Executive Council voted to present the 1975 Flexner Award for "extraordinary individual contributions to medical schools and to the medical educational community as a whole" to Dr. Thomas Hale Ham of Case Western Reserve University School of Medicine.

1975 BORDEN AWARD

ACTION: On the recommendation of its Borden Award Committee, the Executive Council voted to present the 1975 Borden Award for "outstanding research in medicine conducted by a member of the faculty of an affiliated college" to Dr. Andrew V. Schally of the VA Hospital in New Orleans and the Tulane University School of Medicine.

CCME REPORT: THE ROLE OF THE FOREIGN MEDICAL GRADUATE

ACTION: The Executive Council approved, with three specific exceptions, the recommendations contained in the CCME Report, "Physician Manpower and Distribution: The Role of the Foreign Medical Graduate."

REPORT OF THE NATIONAL HEALTH INSURANCE REVIEW COMMITTEE

ACTION: The Executive Council approved the Report of the National Health Insurance Review Committee and adopted its responses to the recommendations of the CCME/LCGME Committee on National Health Insurance and Financing Medical Education.

RECOGNITION OF NEW SPECIALTY BOARDS

ACTION: The Executive Council approved a statement setting forth its belief that the authorization of the formation of new specialty boards and the development of accreditation programs for new specialties must be the responsibility of the Coordinating Council on Medical Education.

#### MEDICAL SCHOOLS ACCEPTANCE PROCEDURES

ACTION: On recommendation of the Group on Student Affairs Steering Committee, the Executive Council modified its recommended medical school acceptance procedures to stipulate that medical schools should not agree to notify non-early decision plan applicants of acceptances prior to November 15 of each admissions cycle.

#### AAMC RECOMMENDATIONS ON THE COLLEGE LEVEL EXAMINATION PROGRAM

ACTION: The Executive Council approved two recommendations of the Group on Student Affairs Steering Committee concerning documentation and acceptance of College Level Examination Program credits.

#### AAMC RESPONSE TO THE PRINCIPAL RECOMMENDATIONS OF THE GAP COMMITTEE REPORT TO THE NBME

ACTION: The Executive Council approved for consideration by the Assembly in November a series of responses to the Goals and Priorities Committee Report recommendations to the National Board of Medical Examiners.

#### REPORT OF THE TASK FORCE ON IMPLEMENTATION OF HEALTH PLANNING LEGISLATION

ACTION: The Executive Council approved the Report of the Task Force on the Implementation of Health Planning Legislation, expressing its great concern over the implications of planning agency review of research and health manpower training funds.

#### RECOVERY OF MEDICAID FUNDS AND SOVEREIGN IMMUNITY

ACTION: The Executive Council voted to take no position on the legislation which would require states to waive immunity from legal action as a condition of receiving federal welfare support.

#### AAMC AFFIRMATIVE ACTION PROGRAM

ACTION: The Executive Council approved a revised AAMC Affirmative Action Program, modifying the Association's previous policy established in 1970.

#### REGULATION OF RESIDENCY PROGRAMS

ACTION: The Executive Council reaffirmed its previous position supporting the regulation of graduate medical education programs to assure appropriate distribution by specialty.

## OBSTETRICS AND GYNECOLOGY AS A PRIMARY CARE SPECIALTY

ACTION: The Executive Council agreed that the Association should continue to support the inclusion of obstetrics and gynecology as a primary care specialty, recognizing that further consideration of this issue by the Coordinating Council on Medical Education would be forthcoming.

## U.S. CITIZENS STUDYING MEDICINE ABROAD

ACTION: The Executive Council approved the following statement:

The United States should make available in our medical schools the number of places necessary to meet the need for physicians in future years, so that undergraduate medical education abroad not become a regular alternative to the study of medicine at home.

The Association and its constituent schools must recognize that there are qualified students in the group studying medicine abroad. In the public interest, those who are qualified should be provided the same educational opportunities and recognition as their colleagues who entered U.S. medical schools directly. If resources can be made available, qualified students should be selected by the faculty and admitted to advanced standing. Their level of admission should be determined by the policies of the faculty, and they should be provided the regular educational opportunity and challenge deemed necessary by a school's faculty for the awarding of the M.D. degree. Such programs would supercede existing "Fifth Pathway" programs.

The policies and programs for these transfer students should be subjected to the scrutiny of the accreditation process.

## RECOGNITION OF THE CHAIRMAN

ACTION: The Executive Council voted to express its great thanks and appreciation to Dr. Sherman M. Mellinkoff for his dedicated service as the AAMC Chairman during 1974-75.

COUNCIL OF DEANS  
ADMINISTRATIVE BOARD

September 18, 1975

LCME PROCEDURES FOR LEVYING CHARGES TO SCHOOLS FOR EARLY STAGE ACCREDITATION  
SITE VISITS AND PROVISIONAL ACCREDITATION

ACTION: The Board endorsed Executive Council approval of the principle that LCME levy charges for Letter of Reasonable Assurance site visits to developing medical schools.

LCME VOTING REPRESENTATION OF THE CANADIAN MEDICAL SCHOOLS

ACTION: The Board endorsed Executive Council approval of the seating of a representative of the ACMC as a voting member of the LCME.

ELECTION OF INSTITUTIONAL MEMBERS

ACTION: The COD Administrative Board endorsed Executive Council recommendation of the election by the Assembly of the University of South Florida College of Medicine and the Southern Illinois University School of Medicine to Institutional Membership in the AAMC, contingent upon ratification by the full Council of Deans.

AMENDMENT OF THE AAMC BYLAWS TO ESTABLISH A CATEGORY OF CORRESPONDING MEMBERS

ACTION: The Board suggested that the proposed amendments of the AAMC Bylaws be modified to read as follows:

Title I, Section 1, Paragraph I:

- I. Corresponding Members - Corresponding Members shall be hospitals involved in medical education (in the United States) which do not meet the criteria established by the Executive Council for membership in the Council of Teaching Hospitals.

Title I, Section 3, Paragraph F:

- F. Corresponding Members will be recommended to the Executive Council by the Council of Teaching Hospitals.



ACTION: The Board also recommended the establishment of the subscriber service which would make available for a set fee AAMC publications and mailings.

#### THE ROLE OF THE FOREIGN MEDICAL GRADUATE

ACTION: The Board recommended Executive Council approval of the report on the Role of the Foreign Medical Graduate of the Coordinating Council on Medical Education with specific exceptions as appear on p. 40 of the Executive Council agenda.

The Board further recommended that the letter of conveyance of the Council's decision to the CCME indicate the judgment that these were matters of policy, not mere editorial suggestions.

#### REPORT OF THE NATIONAL HEALTH INSURANCE REVIEW COMMITTEE

ACTION: The Board recommended Executive Council approval of the Committee Report.

#### RECOGNITION OF NEW SPECIALTY BOARDS

ACTION: The Board recommended that the following statement (with indicated phrase deleted) be sent to the Coordinating Council on Medical Education and its member organizations as a position of the Executive Council:

"The Executive Council of the Association of American Medical Colleges believes that the authorization of the formation of new specialty boards and the development of accreditation programs for new specialties must be the responsibility of the Coordinating Council on Medical Education ~~and its parent organizations~~. The Coordinating Council, in conjunction with the Liaison Committee on Graduate Medical Education, should establish specifications and procedures for, the authorization of the development of new specialties certifying boards and residency accreditation programs."

#### MODIFICATION OF "RECOMMENDATIONS OF THE AAMC CONCERNING MEDICAL SCHOOL ACCEPTANCE PROCEDURES"

ACTION: The Board recommended the Executive Council's approval of the recommendations of the GSA Steering Committee.

PLANNING AGENCY REVIEW OF FEDERAL FUNDS UNDER THE PUBLIC HEALTH SERVICE ACT

ACTION: The Board recommended that the Executive Council approve the task force report. It further recommended that the matter be fully discussed at the Executive Council meeting, so that the grave implications of this legislation be fully recognized.

RECOVERY OF MEDICAID FUNDS AND SOVEREIGN IMMUNITY

ACTION: After consideration and discussion of the matter, the Board expressed its belief that institutions should be reimbursed for services delivered by them and that some way of accomplishing this should be established. However, the Board expressed its lack of expertise on the broader implications of the proposed legislation and recommended that the Association take no stand on it.

U.S. CITIZENS STUDYING MEDICINE ABROAD

ACTION: The Board acknowledged the importance of the subject of U.S. citizens studying medicine abroad, but did not believe that the two statements offered for its approval are appropriate for adoption by the Association at this time. The Board, therefore, recommended the Executive Council not approve those statements as shown on page 97 of the Executive Council agenda.

NOMINATIONS OF DISTINGUISHED SERVICE MEMBERS

ACTION: The COD Administrative Board recommended the following persons be nominated by the Executive Council for election to Distinguished Service Membership:

Lewis Thomas  
Leon Jacobson  
George Aagaard  
Donald Anderson

Stanley Olson  
Clifford Grulee  
William Mayer

COD GUIDELINES FOR OSR

ACTION: The Board recommended that the COD adopt a resolution which encourages maximum involvement of the students in the selection of institutional representatives to the OSR.

SURVEY OF MEDICAL STUDENT LIABILITY INSURANCE COVERAGE

ACTION: The Board reviewed the questionnaire developed by the staff and made some suggestions for modification of the document.

IMPLEMENTATION OF THE AAMC DATA RELEASE POLICY

ACTION: The Board explored the document in detail and offered its advice on the appropriate classification of certain categories of data elements.

ACTIONS  
COUNCIL OF ACADEMIC SOCIETIES  
ADMINISTRATIVE BOARD

September 17-18, 1975

RATIFICATION OF LCME ACCREDITATION DECISIONS

ACTION: The CAS Administrative Board accepted the accreditation recommendations (as set forth in the Executive Council Agenda on pages 20-22).

LCME PROCEDURES FOR LEVYING CHARGES TO SCHOOLS FOR EARLY STAGE ACCREDITATION  
SITE VISITS AND PROVISIONAL ACCREDITATION

ACTION: The CAS Administrative Board approved the recommendation (as set forth in the Executive Council Agenda on page 23) that the Executive Council endorse the principle of the LCME levying charges for a Letter of Reasonable Assurance site visits to developing medical schools.

LCME VOTING REPRESENTATION OF THE CANADIAN MEDICAL SCHOOLS

ACTION: The CAS Administrative Board approved the recommendation (as set forth in the Executive Council Agenda on page 24) that the Executive Council endorse the seating of a voting representative of the Association of Canadian Medical Colleges on the LCME.

ELECTION OF INSTITUTIONAL MEMBERS

ACTION: The CAS Administrative Board approved the recommendation (as set forth in the Executive Council Agenda on page 25) regarding election to Institutional Membership in the AAMC of the University of South Florida College of Medicine and Southern Illinois University School of Medicine.

APPLICATIONS FOR MEMBERSHIP

ACTION: The CAS Administrative Board approved for recommendation to the full Council the applications for membership of the Association of Medical School Departments of Biochemistry and the American Society of Hematology.

#### ELECTION OF INDIVIDUAL MEMBERS

ACTION: The CAS Administrative Board approved the recommendation regarding the election of Individual Members (as listed in the Executive Council Agenda on pages 28-30).

#### ELECTION OF EMERITUS MEMBERS

ACTION: The CAS Administrative Board approved the recommendations for election to Emeritus Membership of the individuals listed in the Executive Council Agenda on page 31.

#### AMENDMENT OF THE AAMC BYLAWS TO ESTABLISH A CATEGORY OF CORRESPONDING MEMBERS

ACTION: The CAS Administrative Board disapproved the recommendation in the Executive Council Agenda on page 33 that would have established a new classification of AAMC members known as Corresponding Members. Additionally, the CAS Administrative Board voted to recommend to the Executive Council that a moratorium be declared on AAMC membership categories until the entire membership structure can undergo a thorough review.

#### FLEXNER AND BORDEN AWARD NOMINEES

ACTION: The CAS Administrative Board approved the recommendations of the Flexner and Borden Award Committees as contained on page 34 of the Executive Council Agenda.

#### THE ROLE OF THE FOREIGN MEDICAL GRADUATE

ACTION: The CAS Administrative Board reviewed the CCME Report, "Physician Manpower and Distribution: The Role of the Foreign Medical Graduate," that appeared in the Executive Council Agenda on pages 41-66. It approved the recommendation that:

1. The Executive Council approve the report on the Role of the Foreign Medical Graduate of the Coordinating Council on Medical Education with specific exceptions as follows:

- Recommendation B-11, a and b, page 14, lines 31-46 referring to the initiation of remedial programs for hitherto unqualified resident FMGs;

- Recommendation C-6, page 16, lines 33-40 referring to the "Fifth Pathway."

2. The letter of conveyance to the CCME of the Council's decision include the above comments.

It was noted (page 15) that in discussing U.S. nationals the word "American" was used in the final paragraph, and it was suggested that in future drafts this should be revised.

#### REPORT OF THE NATIONAL HEALTH INSURANCE REVIEW COMMITTEE

ACTION: The CAS Administrative Board approved the Report of the National Health Insurance Review Committee as set forth on pages 68-76 in the Executive Council Agenda.

#### RECOGNITION OF NEW SPECIALTY BOARDS

ACTION: With regard to this action, the CAS Administrative Board accepted the first sentence of the recommendation on page 77 of the Executive Council Agenda with the addition of the word "ultimate" and the deletion of the last sentence. The statement adopted reads:

"The Executive Council of the Association of American Medical Colleges believes that the authorization of the formation of new specialty boards and the development of accreditation programs for new specialties must be the ultimate responsibility of the Coordinating Council on Medical Education and its parent organizations. The Coordinating Council, in conjunction with the Liaison Committee on Graduate Medical Education, should establish specifications and procedures for the authorization of the development of new specialties certifying boards and residency accreditation programs."

#### MODIFICATION OF "RECOMMENDATIONS OF THE AAMC CONCERNING MEDICAL SCHOOL ACCEPTANCE PROCEDURES"

ACTION: The CAS Administrative Board approved the recommendation of the GSA Steering Committee that appeared on page 78 of the Executive Council Agenda.

PROPOSED RECOMMENDATIONS OF THE AAMC CONCERNING THE COLLEGE LEVEL  
EXAMINATION PROGRAM

ACTION: The CAS Administrative Board approved the recommendations of the GSA Steering Committee that appeared in the Executive Council Agenda on page 80.

THE RESPONSE OF THE ASSOCIATION OF AMERICAN MEDICAL COLLEGES TO THE PRINCIPAL RECOMMENDATIONS OF THE GOALS AND PRIORITIES COMMITTEE REPORT TO THE NATIONAL BOARD OF MEDICAL EXAMINERS

ACTION: The CAS Administrative Board approved the recommendations set forth in the Executive Council Agenda on pages 82-83.

PLANNING AGENCY REVIEW OF FEDERAL FUNDS UNDER THE PUBLIC HEALTH SERVICE ACT  
TITLES IV AND VII

ACTION: The CAS Administrative Board approved the Report of the Task Force on Implementation of Health Planning Legislation as set forth in the Executive Council Agenda on pages 86-91.

RECOVERY OF MEDICAID FUNDS AND SOVEREIGN IMMUNITY

ACTION: The CAS Administrative Board considered the information on page 92 of the Executive Council Agenda and decided to take no action on the recommendation.

U. S. CITIZENS STUDYING MEDICINE ABROAD

ACTION: After reviewing the material on this topic as set forth in the Executive Council Agenda on pages 93-100, the CAS Administrative Board voted to approve the recommendation on page 97 with the exception of the final clause on the next to last line. The clause deleted was "and COTRANS should be phased out on a compatible schedule."

APPOINTMENTS TO THE LCME APPEALS PANEL

ACTION: Noting the preponderance of Deans Emeriti comprising the list of members approved by the LCME appeals panel, the CAS Administrative Board indicated they will forward to Dr. Schofield names of younger individuals who are engaged in teaching or otherwise active in academic medicine.

### CAS BRIEF

ACTION: The CAS Administrative Board endorsed the new format of the CAS Brief as well as the content for the September issue.

### ANNUAL MEETING

ACTION: The CAS Administrative Board reviewed the AAMC Annual Meeting Schedule and decided:

1. To invite the Presidents (or an Official Representative as a designee) to attend a breakfast with the CAS Administrative Board on Tuesday, November 4.
2. To plan a lunch on the day of the CAS meeting, November 4.
3. To promote the November 4 session, in particular as open discussion on major topics will be featured instead of special presentations in earlier years.

### CAS NOMINATING COMMITTEE REPORT

ACTION: The CAS Administrative Board approved the slate endorsed on September 12 by the newly constituted Nominating Committee.

### CONTINUING MEDICAL EDUCATION

ACTION: In a discussion of this topic, the CAS Administrative Board agreed that:

1. AAMC should work toward developing alternatives to relicensure based solely on continuing medical education credits;
2. AAMC should assess opportunities and problems which moves toward mandated continuing medical education will place before medical schools and faculties; and
3. AAMC should work with the major voluntary agencies in accomplishing (1) and (2).



### BIOMEDICAL RESEARCH TRAINING

ACTION: In a discussion of this topic the CAS Administrative Board agreed that:

1. The feasibility of the accreditation of research training programs should be explored;
2. Multidisciplinary programs should be supported as a means to training more broadly capable scientists; and
3. The AAMC Should work with other organizations such as the NAS, NIH, etc. to achieve long-term solutions to the research manpower problem and its support.

COUNCIL OF TEACHING HOSPITALS  
ADMINISTRATIVE BOARD

September 18, 1975

BYLAWS AMENDMENT TO PROVIDE FOR CORRESPONDING MEMBERS

ACTION: It was moved, seconded and carried to accept the following additions to the AAMC Bylaws:

- I. Corresponding Members - Corresponding Members shall be schools, organizations, hospitals or other institutions concerned with medical education in the United States or Canada which do not meet the criteria established by the Executive Council for any other class of membership listed in this section.
- F. Corresponding Members will be recommended to the Executive Council by either the Council of Deans, Council of Academic Societies or Council of Teaching Hospitals.

PLANNING AGENCY REVIEW OF FEDERAL FUNDS UNDER THE PUBLIC HEALTH SERVICE ACT:  
TITLE IV AND VII

ACTION: It was moved, seconded and carried that the report of the Planning Task Force entitled, "Planning Agency Review of Federal Funds Under Title IV and VII" be approved.

CCME REPORT ON FMGs

ACTION: It was moved, seconded and carried that the COTH Administrative Board approve the Report on the Role of the Foreign Medical Graduate of the Coordinating Council on Medical Education with specific exceptions as follows:

- A. Recommendation B-11, A and B, Page 14, Lines 31-46 referring to the initiation of remedial programs for unqualifying FMGs;
- B. Recommendation C-6, Page 16, Lines 33-40 referring to the "Fifty Pathway."

The letter of conveyance to the CCME of the Administrative Board's decision should include the above comments.

ACTION: It was moved, seconded and carried to reject item four on page nine of the CCME Report as written and recommended that it be rewritten as follows:

4. That commencing one year following the adoption of this report, the sponsorship of FMGs coming to the U.S. for graduate medical education as exchange visitor physicians be limited only to accredited U.S. medical schools and their affiliated hospitals or other accredited schools of the health professions.

#### U.S. CITIZENS STUDYING MEDICINE ABROAD

ACTION: It was moved, seconded and carried to defer decision on this document to the Council of Deans.

#### REPORT OF THE NATIONAL HEALTH INSURANCE COMMITTEE

ACTION: It was moved, seconded and carried that the COTH Administrative Board reaffirm its acceptance of this report as stated at the June Administrative Board meeting.

#### AAMC POLICY ON THE GAP REPORT

ACTION: It was moved, seconded and carried that the AAMC policy on the GAP Report be approved.

#### BORDEN AND FLEXNER AWARD NOMINATIONS

ACTION: It was moved, seconded and carried that the COTH Administrative Board approve the recommendation of Dr. Thomas Hale Ham as the Flexner Award nominee and Dr. Andrew W. Schally as the recipient of the Borden Award.

#### LEGISLATION TO ALLOW SUIT FOR WITHHELD MEDICAID FUNDS

ACTION: It was moved, seconded and carried that the COTH Administrative Board recommend to the Executive Council that the AAMC support S.1856.

RECOGNITION OF NEW SPECIALTIES

ACTION: It was moved, seconded and carried that the following statement be sent by the AAMC to the Coordinating Council on Medical Education and its member organizations as a position of the Executive Council:

"The Executive Council of the Association of American Medical Colleges believes that the authorization of the formation of new specialty boards and the development of accreditation programs for new specialties must be the responsibility of the Coordinating Council on Medical Education and its parent organizations. The Coordinating Council, in conjunction with the Liaison Committee on Graduate Medical Education should establish specifications and procedures for the authorization of the development of new specialties certifying boards and residency accreditation programs."

RESEARCH SUPPORT

ACTION: It was moved, seconded and carried that the request of Ms. Sally Eberhard for research support be denied.

MALPRACTICE INSURANCE EXPERIMENTAL REIMBURSEMENT PROJECT

ACTION: It was moved, seconded and carried that the Council of Teaching Hospitals not become engaged in the experimental reimbursement project for malpractice insurance.

## OSR ADMINISTRATIVE BOARD ACTIONS

September 17, 1975

### RATIFICATION OF LCME ACCREDITATION DECISIONS

ACTION: The OSR Administrative Board endorsed the recommendation that the Executive Council approve the LCME accreditation decisions.

### LCME PROCEDURES FOR LEVYING CHARGES TO SCHOOLS FOR EARLY STAGE ACCREDITATION SITE VISITS AND PROVISIONAL ACCREDITATION

ACTION: The OSR Administrative Board endorsed the principle of the LCME levying charges for Letter of Reasonable Assurance site visits to developing medical schools.

### LCME VOTING REPRESENTATION OF THE ACMC

ACTION: The OSR Administrative Board endorsed the recommendation that a representative from the Association of Canadian Medical Colleges be seated as a voting member of LCME.

### ELECTION OF INSTITUTIONAL MEMBERS

ACTION: The OSR Administrative Board supported the recommendation that the University of South Florida College of Medicine and Southern Illinois University School of Medicine be elected to Institutional Membership in the AAMC by the Assembly.

### ELECTION OF CAS MEMBERS

ACTION: The OSR Administrative Board supported the recommendation of the CAS Administrative Board regarding the election of CAS members to AAMC membership.

### ELECTION OF INDIVIDUAL MEMBERS

ACTION: The OSR Administrative Board endorsed the recommended list of people for election to Individual Membership.

### ELECTION OF EMERITUS MEMBERS

ACTION: The OSR Administrative Board endorsed the list of recommended individuals for election to Emeritus Membership.

AMENDMENT OF THE AAMC BYLAWS TO ESTABLISH A CATEGORY OF CORRESPONDING MEMBERS

ACTION: The OSR Administrative Board supported the recommended amendments to the AAMC Bylaws to establish a category of corresponding members.

FLEXNER AND BORDEN AWARDS

ACTION: The OSR Administrative Board endorsed the nominations by the Flexner Award Committee and the Borden Award Committee for the recipients of these awards.

THE ROLE OF THE FOREIGN MEDICAL GRADUATE

ACTION: The OSR Administrative Board endorsed the CCME Report on Foreign Medical Graduates with the exception of recommendations B-6, B-11, and C-6. The OSR Administrative Board recommended that, in light of steps being taken to decrease the flow of FMG's into the U.S., AAMC continue to support efforts for increased U.S. medical school enrollment.

REPORT OF THE NATIONAL HEALTH INSURANCE TASK FORCE

ACTION: The OSR Administrative Board endorsed the Report of the National Health Insurance Task Force.

RECOGNITION OF NEW SPECIALTY BOARDS

ACTION: The OSR Administrative Board endorsed the recommended statement that authorization for the formation of new specialty boards and the development of accreditation programs for new specialties must be the responsibility of the CCME.

MODIFICATION OF "RECOMMENDATIONS OF THE AAMC CONCERNING MEDICAL SCHOOL ACCEPTANCE PROCEDURES"

ACTION: The OSR Administrative Board endorsed the GSA statement on the Early Decision Plan for inclusion in the "Recommendations of the AAMC Concerning Medical School Acceptance Procedures."

PROPOSED RECOMMENDATIONS OF THE AAMC CONCERNING THE COLLEGE LEVEL EXAMINATION PROGRAM

ACTION: The OSR Administrative Board supported the Proposed Recommendations of the AAMC Concerning the College Level Examination Program.

AAMC RESPONSE TO THE PRINCIPAL RECOMMENDATIONS OF THE GAP COMMITTEE  
REPORT TO THE NBME

ACTION: The OSR Administrative Board endorsed the AAMC Response to the Principal Recommendations of the GAP Committee Report to the NBME.

PLANNING AGENCY REVIEW OF FEDERAL FUNDS UNDER THE PUBLIC HEALTH SERVICE ACT

ACTION: The OSR Administrative Board endorsed the recommendation that the Executive Council approve the task force report.

RECOVERY OF MEDICAID FUNDS AND SOVEREIGN IMMUNITY

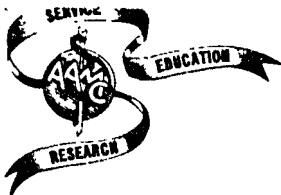
ACTION: The OSR Administrative Board recommended that the AAMC neither support nor oppose S. 1856.

U.S. CITIZENS STUDYING MEDICINE ABROAD

ACTION: The OSR Administrative Board endorsed the recommendations about U.S. Citizens Studying Medicine Abroad subject to a revision of the third paragraph of Recommendation #2 to read, "In order to diminish the flow of students seeking access to medicine by enrolling in foreign schools there should be a consensus that students enrolling in foreign schools after July 1, 1977 must meet the same criteria as other candidates seeking advanced standing admission to U.S. medical schools, and COTRANS should be phased out on a compatible schedule."

MCAT AND AMCAS FEE STRUCTURE

ACTION: The OSR Administrative Board requested that concerns about the procedure for determining MCAT and AMCAS fee levels be referred to the Executive Council for further discussion and clarification.



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## A C T I O N S

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### TAKEN AT MEETINGS OF:

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| <i>Executive Council (June 19-20, 1975)</i>      | <i>1</i>  |
| <i>COD Administrative Board (June 19, 1975)</i>  | <i>4</i>  |
| <i>CAS Administrative Board (June 19, 1975)</i>  | <i>7</i>  |
| <i>COTH Administrative Board (June 19, 1975)</i> | <i>12</i> |
| <i>OSR Administrative Board (June 18, 1975)</i>  | <i>15</i> |

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ASSOCIATION OF AMERICAN MEDICAL COLLEGES

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## EXECUTIVE COUNCIL ACTIONS

June 19 - 20, 1975

### DISCUSSION OF HEALTH MANPOWER LEGISLATION

The Executive Council devoted a considerable portion of its meeting to a discussion of the health manpower legislation pending in both Houses of Congress. Also discussed were meetings which the Executive Committee had had with Senator Kennedy and Congressman Rogers.

### FY 1976 AAMC GENERAL FUNDS BUDGET

ACTION: The Executive Council, meeting in Executive Session, approved the General Funds budget proposed for FY 1976. In separate actions, the Executive Council also approved the addition of FY 1975 funds to special reserves previously established for legal contingencies and for the Medical College Admission Assessment Program.

### AAMC PUBLICATIONS

ACTION: The Executive Council approved a proposal to discontinue publication of the AAMC Bulletin, to provide the Weekly Activities Report to Individual Members of the Association, to increase the subscription fee for the WAR, and to recommend to the Assembly that Individual Membership dues be increased from \$20 to \$25 per year.

### ELECTION OF PROVISIONAL INSTITUTIONAL MEMBER

ACTION: The Executive Council recommended to the Assembly the election of the University of South Carolina School of Medicine to Provisional Institutional Membership in the Association.

### CRITERIA FOR ELECTION TO PROVISIONAL INSTITUTIONAL MEMBERSHIP

ACTION: The Executive Council modified the Criteria for Provisional Institutional Membership in the AAMC to require provisional accreditation by the Liaison Committee on Medical Education as a prerequisite to this class of membership.

#### ELECTION OF COTH MEMBER

ACTION: The Executive Council recommended to the Assembly the election of Lutheran General Hospital, Park Ridge, Illinois, to Teaching Hospital Membership in the AAMC.

#### COTH MEMBERSHIP CRITERIA

ACTION: The Executive Council approved the recommendations of the COTH Ad Hoc Membership Committee, modifying the criteria for Teaching Hospital Membership in the AAMC and requesting that the staff prepare a Bylaws change to establish Corresponding Membership in the Association. Criteria for Corresponding Membership would be established by the Executive Council on recommendation of the individual Councils and would include the requirement of ineligibility for any other class of membership in the Association. The Executive Council recommended to the Assembly that dues for this class of membership be established at \$500 per year.

#### RATIFICATION OF LCME ACCREDITATION DECISIONS

ACTION: The Executive Council ratified the accreditation decisions made by the Liaison Committee on Medical Education at its March 26-27 meeting.

#### CCME 1975 BUDGET

ACTION: The Executive Council approved the budget of the Coordinating Council on Medical Education for the calendar year 1975.

#### CCME RELATIONS WITH PARENT ORGANIZATIONS

ACTION: The Executive Council agreed to implement two recommendations of the Coordinating Council on Medical Education relating to the approval of CCME policy recommendations by the parent organizations.

#### PATHWAYS INTO GRADUATE MEDICAL EDUCATION

ACTION: The Executive Council approved and forwarded to the

Liaison Committee on Graduate Medical Education a statement that the "pathways into graduate medical education in the United States should be defined by the LCGME and forwarded to the CCME for approval and forwarding to the parent organizations for ratification."

#### AMENDMENT TO THE AAMC BYLAWS

ACTION: The Executive Council approved and recommended to the Assembly a Bylaws change providing that schools having a student serving on the Organization of Student Representatives Administrative Board may designate a second OSR representative.

#### RECOMMENDATIONS OF THE CONFERENCE ON EPIDEMIOLOGY

ACTION: In response to the recommendations of the Conference on Epidemiology, the Executive Council adopted a statement "encouraging the Health Resources Administration to bring together representatives from the organizations and agencies listed in paragraph 6 of the conference report, for the purpose of developing the goals and objectives of an expanded effort in training in epidemiology."

#### ASSOCIATION POLICY ON THE NBME GOALS & PRIORITIES COMMITTEE REPORT

The Executive Council reviewed point by point the recommendations of the National Board of Medical Examiners' Goals and Priorities Committee, as well as the responses to the report which had been developed by the Council of Deans, the Council of Academic Societies, the Organization of Student Representatives, the Group on Medical Education, and the Task Force of the Executive Council. An Executive Council position on each GAP Committee recommendation was developed. The Executive Council's recommendations will be integrated into a coherent report for approval by the Assembly.

#### NATIONAL HEALTH INSURANCE COMMITTEE REPORT

The Executive Council received the recommendations of its National Health Insurance Review Committee and postponed substantive action on the recommendations until its September meeting.

COUNCIL OF DEANS  
ADMINISTRATIVE BOARD

June 19, 1975

ELECTION OF PROVISIONAL INSTITUTIONAL MEMBER

ACTION: The Board endorsed the Executive Council recommendation of the election of the University of South Carolina School of Medicine to Provisional Institutional Membership by the Assembly, subject to the ratification of this action by the full Council of Deans.

CRITERIA FOR ELECTION TO PROVISIONAL INSTITUTIONAL MEMBERSHIP

ACTION: The Board recommended that the Executive Council modify its Prerequisites for Provisional Institutional Membership so as to substitute Provisional Accreditation by the LCME for (a Letter of) Reasonable Assurance of Accreditation.

COTH AD HOC MEMBERSHIP COMMITTEE REPORT

ACTION: The Board recommended that Assembly amend the Association Bylaws to establish a class of Corresponding Members. Such members would be nominated by each Council Administrative Board for election by Assembly.

Corresponding members would receive appropriate services such as those recommended in the COTH Ad Hoc Membership Committee Report and others as recommended by staff. In addition to the qualitative criteria to be developed by the Councils, one absolute requirement for becoming a subscriber would be ineligibility for any class of membership in the Association. Dues would be set at an appropriate level; the staff recommendation of \$500 per year appears reasonable as an accurate reflection of the level of services which will be received.

The committee report was approved with these modifications.

AMA POLICY ON ELIGIBILITY OF FOREIGN MEDICAL STUDENTS AND GRADUATES FOR  
ADMISSION TO AMERICAN MEDICAL EDUCATION

ACTION: The Board recommended that the following statement be forwarded by the Executive Council to the LCGME for consideration by the LCGME at its next meeting in July:

The Executive Council of the Association of American Medical Colleges believes that the pathways into graduate medical education in the United States should be defined by the LCGME and forwarded to the CCME for approval and forwarding to the parent organizations for ratification.

AMENDMENT OF THE AAMC BYLAWS

ACTION: The Board recommended that the Executive Council approve the proposed amendment to the AAMC Bylaws regarding OSR representation (as stated on p. 47-48 of the Executive Council Agenda) and recommend its approval to the Assembly in November.

DEVELOPMENT OF AN AAMC POLICY ON THE NBME GAP REPORT

ACTION: The Board recommended that the Executive Council address the GAP Committee's recommendations one by one, attempting to resolve the differences in the recommendations of the various groups. Thus, an Executive Council position on each of these recommendations should be developed. The staff would then integrate the Executive Council's recommendations into a coherent report for the approval of the Executive Council in September and ultimate consideration by the Assembly in November.

The Board indicated its intention to support in the Executive Council deliberations the positions taken by the COD at its Spring Meeting.

REPORT OF THE NATIONAL HEALTH INSURANCE COMMITTEE

ACTION: While the Administrative Board of the COD agrees in principle with the LCGME/CCME recommendations with regard to National Health Insurance, it has difficulty

accepting the manner in which these are stated. The Board recommended that the report be rewritten with consideration given to an appendix containing a definition of costs rather than a repetition of allowable costs throughout the Preamble. The Board also recommended that the Preamble refer to the principles contained within it as ones already generally supported not as newly developed ideas. The Board requested an opportunity to review the reconstructed recommendations before they are made public.

The Board also recommended that consideration be given to the establishment of an AAMC group to study the possible alternatives to future funding of graduate medical education.

#### NOMINATION OF DISTINGUISHED SERVICE MEMBERS

ACTION: The Board authorized the Chairman to appoint a committee which would solicit from the COD membership suggested nominations for Distinguished Service Members. Such a solicitation should require that the responses include a description of the "active and meritorious participation of the candidate in the affairs of the AAMC while a member of the Council of Deans". The committee would review the submissions and recommend such nominations as appeared appropriate to the Council of Deans, the Executive Council and the Assembly.

The Chairman appointed the following Committee:

J. Robert Buchanan, M.D., Chairman  
Christopher C. Fordham III, M.D.  
Robert L. Van Citters, M.D.

ACTIONS  
COUNCIL OF ACADEMIC SOCIETIES  
ADMINISTRATIVE BOARD

June 19, 1975

APPLICATIONS FOR MEMBERSHIP

ACTION: The applications for membership of the Society of Gynecologic Investigation and the American Society for Plastic and Reconstructive Surgeons were approved for recommendation to the full Council.

REINSTATEMENT TO MEMBERSHIP

ACTION: The request for reinstatement to membership status from the American College of Obstetrics-Gynecology was approved.

ACADEMIC MEDICAL CENTER PROBLEM IDENTIFICATION SURVEY

ACTION: The CAS Administrative Board voted unanimously that the Council of Academic Societies should participate with the Council of Deans in a study to identify problems in academic medical center governance.

1976 CAS SPRING MEETING

ACTION: The CAS Administrative Board voted unanimously that the Council of Academic Societies should convene its spring 1976 meeting in Philadelphia together with the proposed International Conference on Educational Patterns and Measurement being sponsored by the National Board of Medical Examiners.

REPORT OF THE CAS NOMINATING COMMITTEE

ACTION: The CAS Administrative Board voted unanimously to recirculate the slate proposed by the full committee for reconsideration to its members whose names do not appear on the slate. Resignations from the Committee were received from two members whose names were chosen for the slate, that of a third member will be requested.

#### MEMBERSHIP OF FUTURE CAS NOMINATING COMMITTEES

ACTION: The CAS Administrative Board voted unanimously to accept as an operating procedure the policy that no current members of the CAS Administrative Board be eligible to serve on the Nominating Committee. This will not require a change in the CAS Rules and Regulations.

#### PROVISIONAL INSTITUTIONAL MEMBER

ACTION: The CAS Administrative Board voted unanimously to approve for election to provisional institutional membership in the AAMC the University of South Carolina, Columbia, School of Medicine.

#### CRITERIA FOR ELECTION TO PROVISIONAL INSTITUTIONAL MEMBERSHIP

ACTION: The CAS Administrative Board voted unanimously for modification of the AAMC criteria for election to Provisional Institutional Membership as set forth in the Executive Council Agenda on pages 16-17.

#### COTH AD HOC MEMBERSHIP COMMITTEE REPORT

ACTION: The Cas Administrative Board voted unanimously to approve the recommendations of the COTH Ad Hoc Committee (pages 21-22 in the Executive Council Agenda) with the accompanying recommendation (pages 19-20 in the Executive Council Agenda) that institutions would be designated as "subscribers" rather than "members" and with the stipulation that each separate Council should determine whether it wishes to adopt the "subscriber" category rather than this being automatically extended to the COD and CAS (as in the recommendation on pages 19-20 in the Executive Council Agenda.)

#### RATIFICATION OF LCME ACCREDITATION DECISIONS

ACTION: The CAS Administrative Board voted unanimously to ratify the LCME Accreditation decisions as set forth in the Executive Council Agenda on pages 36-38.



COORDINATING COUNCIL ON MEDICAL EDUCATION RELATIONS WITH PARENT  
ORGANIZATIONS

ACTION: The CAS Administrative Board voted unanimously to approve the policies recommended to improve the responses of the parent organizations to CCME reports and recommendations as set forth in the Executive Council Agenda on page 40.

AMA POLICY ON ELIGIBILITY OF FOREIGN MEDICAL STUDENTS AND GRADUATES  
FOR ADMISSION TO AMERICAN MEDICAL EDUCATION

ACTION: The CAS Administrative Board voted unanimously to approve the recommendation that the pathways into graduate medical education in the United States should be defined by the LCGME and forwarded to the CCME for approval and forwarding to the parent organizations for ratification.

AMENDMENT OF AAMC BYLAWS

ACTION: The CAS Administrative Board voted unanimously to approve the proposed amendment to the AAMC Bylaws as set forth in the Executive Council Agenda on pages 47-48 with regard to representation to the Organization of Student Representatives by institutional members whose representatives serve on the OSR Administrative Board.

CONFERENCE ON EPIDEMIOLOGY

ACTION: The CAS Administrative Board voted unanimously to approve the following recommendation:

The Association encourages the Health Resources Administration to bring together representatives from the organizations and agencies listed in paragraph 6 of the conference report, for the purpose of developing the goals and objectives of an expanded effort in training in epidemiology. The outcome of this effort should be a document providing sufficient detail on goals so that the faculties of health professional schools may judge their programs against a national consensus.

TASK FORCE RESPONSES TO  
GAP COMMITTEE RECOMMENDATIONS

ACTION: The CAS Administrative Board voted unanimously on the following items -- reactions of COD, CAS, GME and OSR to summary of Task Force responses to the GAP Committee's major recommendations (Executive Council Agenda pp. 65-74):

- Recommendation 1. The CAS accepts the COD modification of the CAS recommended substitution.
- Recommendation 2. The CAS accepts the GME substitution.
- Recommendation 3. The CAS reaffirms its recommended substitution.
- Recommendation 4. The CAS accepts the last 3 paragraphs on page 68 as recommended by the COD. The CAS withdraws the 3 CAS recommendations (top page 69). The CAS supports neither the GME recommendations (page 69) nor that of the OSR (page 70).
- Recommendation 5. The CAS accepts the COD recommendation (page 71).
- Recommendation 6. The CAS accepts the GME recommendation (page 72).
- Recommendation 7. The CAS accepts the COD recommendation and rejects the OSR recommendation (page 73).
- Recommendation 8. The CAS reaffirms its position and rejects the OSR recommendation (page 74).

NATIONAL HEALTH INSURANCE

ACTION: The CAS Administrative Board voted unanimously to approve the Report of the National Health Insurance Review Committee.

#### FUTURE BOARD MEETINGS

ACTION: The CAS Administrative Board agreed to hold its quarterly business meeting the evening prior to the regularly scheduled meetings. The following morning will be devoted to considering prospective issues for which Board members will develop discussion papers.

#### ANNUAL MEETING

ACTION: The topic selected for the joint CAS-COD-COTH meeting at the time of the Annual Meeting is "Maximum Disclosure: Individual Rights and Institutional Needs."

COUNCIL OF TEACHING HOSPITALS

ADMINISTRATIVE BOARD

June 19, 1975

MEMBERSHIP APPLICATIONS

ACTION: It was moved, seconded and carried that the following application for membership in the Council of Teaching Hospitals be approved:

Lutheran General Hospital  
Park Ridge, Illinois

It was moved, seconded and carried that the following application be disapproved on the grounds that the institution does not fulfill the present membership criteria:

Pensacola Educational Program  
Pensacola, Florida

COTH AD HOC MEMBERSHIP COMMITTEE REPORT

ACTION: It was moved, seconded and carried that the COTH Ad Hoc Membership Committee Report be accepted as set forth on pages 21 and 22 of the Executive Council agenda book, and that the dues be set at \$500, the level recommended by AAMC staff.

NATIONAL HEALTH INSURANCE REVIEW COMMITTEE

ACTION: It was moved, seconded and carried that the report of the AAMC National Health Insurance Review Committee be approved with the following changes:

- A. Line 6 - Preamble to Read  
". . . excellent medical schools, teaching hospitals and other health care institutions. . ."
- B. Line 10 - Number 1  
". . . other available sources restricted to clinical post-doctorate doctoral medical education by the donor should be deducted. . ."

ACTION: It was moved, seconded and carried that the above modified report and the two items noted in the committee report on reimbursement for teaching facilities and philanthropy should constitute the essentials of any forthcoming AAMC policy statements on national health insurance.

#### DEPARTMENT OF HEALTH SERVICES REPORT

ACTION: It was moved, seconded and carried that there be representation from the COTH Administrative Board on the advisory panel appointed to the Ambulatory Care Restructuring Project.

#### STUDY OF MEDICAL SCHOOLS/TEACHING HOSPITAL RELATIONSHIPS

ACTION: It was moved, seconded and carried that there be an advisory group appointed which would consist of representatives from teaching hospitals and medical schools.

#### CCME RELATIONS WITH PARENT ORGANIZATIONS

ACTION: It was moved, seconded and carried that the two recommendations of the CCME be approved and that the Executive Council agree to implement the proposals.

#### AMA POLICY ON ELIGIBILITY OF FOREIGN MEDICAL STUDENTS AND GRADUATES FOR ADMISSION TO AMERICAN MEDICAL EDUCATION

ACTION: It was moved, seconded and carried that the Executive Council communicate the following statement to the LCGME for consideration by that body at its next meeting in July:

"The Executive Council of the Association of American Medical Colleges believes that the pathways into graduate medical education in the United States should be defined by the LCGME and forwarded to the CCME for approval and forwarding to the parent organizations for ratification."

#### AMENDMENT OF AAMC BYLAWS

ACTION: It was moved, seconded and carried that the Executive Council approve the proposed bylaws change and recommend its approval to the Assembly in November.

#### RECOMMENDATION OF THE CONFERENCE ON EPIDEMIOLOGY

ACTION: It was moved, seconded and carried that the Association encourage the Health Resources Administration to bring together representatives from the organizations and agencies listed in paragraph 6, of the conference report, for the purpose of developing the goals and objectives of an expanded effort in training in epidemiology. The outcome of this effort should be a document providing sufficient detail on goals so that the faculties of health professions may judge their programs against a national consensus.

#### DEVELOPMENT OF AN AAMC POLICY ON THE NBME GAP REPORT

ACTION: It was moved, seconded and carried that the COTH Administrative Board recommends that the Executive Council oppose the establishment of a category of limited licensure set forth as item 5 on page 71 of the Executive Council agenda. No further formal action was taken.

#### DEPARTURE OF DENNIS D. POINTER, Ph.D., ASSOCIATE DIRECTOR, DEPARTMENT OF TEACHING HOSPITALS

ACTION: It was moved, seconded and carried that the COTH Administrative Board officially offer their congratulations to Dr. Dennis Pointer and commend him for his work with the Council of Teaching Hospitals.

## OSR ADMINISTRATIVE BOARD ACTIONS

June 18, 1975

### ELECTION OF PROVISIONAL INSTITUTIONAL MEMBERS

ACTION: On motion, seconded, and carried the OSR Administrative Board endorsed the recommendation to the Executive Council that the existing criteria for election to provisional institutional membership be applied to South Carolina and that the Executive Council recommend its election to the Assembly.

### CRITERIA FOR ELECTION TO PROVISIONAL INSTITUTIONAL MEMBERSHIP

ACTION: On motion, seconded, and carried the OSR Administrative Board endorsed the recommendation to the Executive Council that they modify the Prerequisites for Provisional Institutional Membership so as to substitute Provisional Accreditation by the LCME for a Letter of Reasonable Assurance of Accreditation.

### COTH AD HOC COMMITTEE REPORT

ACTION: On motion, seconded, and carried the OSR Administrative Board endorsed the recommendation to the Executive Council regarding provisions for institutions to become subscribers to the Association.

### RATIFICATION OF LCME ACCREDITATION DECISIONS

ACTION: On motion, seconded, and carried the OSR Administrative Board endorsed the recommendation that the Executive Council approve the LCME accreditation decisions.

### CCME 1975 BUDGET

ACTION: On motion, seconded, and carried the OSR Administrative Board endorsed the recommendation that the Executive Council approve the budget of the CCME.

### CCME RELATIONS WITH PARENT ORGANIZATIONS

ACTION: On motion, seconded, and carried the OSR Administrative Board endorsed the recommendation that the Executive Council agree to implement the proposals of the CCME regarding relations with parent organizations.

AMA POLICY ON ELIGIBILITY OF FOREIGN MEDICAL STUDENTS AND GRADUATES FOR  
ADMISSION TO AMERICAN MEDICAL EDUCATION

ACTION: On motion, seconded, and carried the OSR Administrative Board endorsed the recommendation to the Executive Council that a statement be forwarded to LCGME regarding the mechanisms for defining the pathways to graduate medical education.

AMENDMENT OF THE AAMC BYLAWS

ACTION: On motion, seconded, and carried the OSR Administrative Board endorsed the proposed Bylaw revision allowing for institutions whose representatives serve on the OSR Administrative Board to certify two representatives to the OSR.

RECOMMENDATIONS OF THE CONFERENCES ON EPIDEMIOLOGY

ACTION: On motion, seconded, and carried the OSR Administrative Board supported the recommendation to the Executive Council that the AAMC encourage the organizations and agencies cited in the report to develop goals and objectives of an expanded effort in training in epidemiology.

PRIMARY CARE PRACTICE OF MEDICINE

ACTION: On motion, seconded, and carried the OSR Administrative Board approved a resolution that admissions incentives and priorities be given to qualified students from areas of physician shortage and referred it to the GSA as an information item.

REHABILITATION TRAINING IN UNDERGRADUATE MEDICAL EDUCATION FOR THE  
PRIMARY PHYSICIAN

ACTION: On motion, seconded, and carried the OSR Administrative Board approved a revised resolution submitted at the Annual Meeting about rehabilitation training and forwarded the revised statement to the GME for information.

OSR RULES AND REGULATIONS REVISIONS

ACTION: On motion, seconded, and carried the OSR Administrative Board approved the revisions proposed by staff.





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## A C T I O N S

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### TAKEN AT MEETINGS OF:

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|---|----|
| <i>Executive Council (April 3, 1975)</i> . . . . .                | 1  |
| <i>COD Administrative Board (April 3, 1975)</i> . . . . .         | 4  |
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| <i>OSR Administrative Board (April 1 &amp; 2, 1975)</i> . . . . . | 11 |

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ASSOCIATION OF AMERICAN MEDICAL COLLEGES

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## EXECUTIVE COUNCIL ACTIONS

April 3, 1975

### AMICUS CURIAE BRIEF ON RECOGNITION OF HOUSESTAFF UNIONS

ACTION: The Executive Council approved the action of its Executive Committee in authorizing the staff and the Association's attorneys to prepare and submit an amicus curiae brief on behalf of several member hospitals opposing the assertion of jurisdiction of the National Labor Relations Board over housestaff organizations.

### AMICUS CURIAE BRIEF - DEMARCO v. UNIVERSITY OF HEALTH SCIENCES-THE CHICAGO MEDICAL SCHOOL

ACTION: The Executive Council asked the Executive Committee to follow this case and to analyze the desirability of filing an amicus brief. It was generally felt that such a brief should not be filed at this stage in the appeal.

### TASK FORCE ON IMPLEMENTING THE NATIONAL HEALTH PLANNING AND RESOURCES DEVELOPMENT ACT, P.L. 93-641

The Executive Council concurred with the staff recommendation that a task force be appointed by the Chairman to work with DHEW officials in developing regulations to implement P.L. 93-641.

### ELECTION OF COTH MEMBER

ACTION: The Executive Council approved and recommended to the Assembly the election of Memorial Hospital, Worcester, Massachusetts, to teaching hospital membership in the AAMC.

### LEGAL ACTION ON SECTION 223 OF THE 1972 SOCIAL SECURITY AMENDMENTS

ACTION: The Executive Council reaffirmed its June 1974 authorization that the Executive Committee examine the desirability of filing suit to enjoin the application of the final regulations implementing Section 223 of P.L. 92-603. The Executive Committee was asked to commence legal action if no other remedy seemed available.

### RESIGNATION OF DR. CLIFFORD GRULEE

ACTION: The Executive Council accepted with regret the resignation of Dr. Clifford G. Grulee, who resigned upon leaving the deanship at Louisiana State University-Shreveport.

#### ELECTION OF DR. CHRISTOPHER FORDHAM

ACTION: The Executive Council, on recommendation of the Council of Deans Administrative Board, elected Dr. Christopher C. Fordham to fill the unexpired term of Dr. Clifford Grulee.

#### RATIFICATION OF LCME ACCREDITATION DECISIONS

ACTION: The Executive Council approved as accredited a list of schools approved by the Liaison Committee on Medical Education at its January 1975 meeting.

#### STATEMENT ON THE ROLE OF RESEARCH IN MEDICAL SCHOOL ACCREDITATION

ACTION: The Executive Council voted not to approve a statement on The Role of Research in Medical School Accreditation forwarded by the Association of Chairmen of Departments of Physiology.

#### OSR RECOMMENDATION TO ESTABLISH AN OFFICE OF WOMEN'S AFFAIRS

The Executive Council did not act on a recommendation of the Organization of Student Representatives that the Association establish an Office of Women's Affairs. Instead, the Council asked the staff to examine the substantive activities proposed by the OSR and to make recommendations to the Council as to how the staff might best pursue and highlight these objectives.

#### SPECIAL RECOGNITION OF QUIGG NEWTON

ACTION: The Executive Council awarded a citation "for eminent achievement in promoting and encouraging medical education and biomedical research" to Mr. Quigg Newton, who had recently resigned as the President of the Commonwealth Fund.

#### NATIONAL HEALTH INSURANCE

ACTION: The Executive Council requested that the Chairman appoint a small review committee to analyze the Association's position on national health insurance and the CCME recommendations on national health insurance, and to make specific recommendations on two proposed additions to the Association policy.

#### NATIONAL HEALTH PROFESSIONS DATA BASE

ACTION: The Executive Council approved a recommendation of the Health Services Advisory Committee that the Association

support the establishment of a national health professions data base, constructed on uniform methods of reporting by state and regional licensure boards. The Executive Council further indicated its support for the development of this activity within the National Center for Health Statistics, if this seemed appropriate to the Health Services Advisory Committee.

COUNCIL OF DEANS  
ADMINISTRATIVE BOARD

April 3, 1975

RESIGNATION OF DR. GRULEE

ACTION: The COD Administrative Board recommends that the Executive Council appoint Christopher C. Fordham III, M.D., Dean of the University of North Carolina School of Medicine to succeed Dr. Grulee and to complete Dr. Grulee's unexpired term on the Executive Council. Such a term would expire in November 1976.

THE ROLE OF RESEARCH IN MEDICAL SCHOOL ACCREDITATION

ACTION: The Board recommends that the Executive Council does not approve the last paragraph of the statement for transmittal to the Liaison Committee on Medical Education. However, the Board does:

1. Recognize the importance of biomedical research to programs for the education of physicians.
2. Believes that accreditation as it is currently performed does take this into account and believes that this resolution is supportable to the extent that it highlights the importance of this relationship; it is inaccurate to the extent that it assumes that there is no attention presently being paid to this matter; it is not helpful to the extent that it does not propose an approach which addressed the current deficiencies and their remediation.

OSR RECOMMENDATION TO ESTABLISH AN OFFICE OF WOMEN'S AFFAIRS

ACTION: On the basis of concerns expressed by the constituency, the Administrative Board recommends that the AAMC staff be requested to reexamine the problems and issues reflected in the statement of the functions to be performed by the proposed new office and that the staff report back to the Executive Council the present and projected activities of the Association directed toward these problems and that this report contain suggested approaches to how these activities might be appropriately highlighted to meet the perceived needs for visibility and accessibility of the efforts.

#### NATIONAL HEALTH INSURANCE AND MEDICAL EDUCATION

ACTION: The Board recommends that the Executive Council consider adding these positions to its policy on national health insurance and commenting on the recommendations to the CCME. It further recommends that a new task force not be appointed at this time.

On the basis of the discussion, the Board intends to devote its next meeting to a comprehensive review of the AAMC policies relating to medical health insurance.

#### HEALTH SERVICES ADVISORY COMMITTEE RECOMMENDATION

ACTION: With the stipulation that the Health Services Advisory Committee be consulted on the matter the Board recommends that the Executive Council approve in principle the recommendation that it support the establishment of a national health professions data base, constructed on uniform methods of reporting by state and territorial licensure boards. It further recommends that the Executive Council consider supporting the development of this activity within the National Center for Health Statistics.

#### REPORT OF THE AAMC PILOT MEDICAL SCHOOL ADMISSIONS MATCHING PROGRAM

- ACTION:
1. The COD Administrative Board recommends matching not be implemented or studied further as a solution to the admissions crisis or as an advantageous method of medical student selection for any reason, at this time; and
  2. Given the continuing demands made on admissions staff by the processing of applications and of the efforts currently being made within the AMCAS and MCAAP programs to alleviate problems related to admissions, the COD Administrative Board recommends that all medical schools continue to monitor and refine admissions policies and procedures, internally and in cooperation with one another and with the existing programs of AAMC.

#### PROPOSAL ON MEMBERSHIP ON THE OSR ADMINISTRATIVE BOARD

ACTION: The Board recommends that the Association's Bylaws be amended to include a provision stipulating that schools having a student elected to the OSR Board may designate a second OSR

representative. This would allow schools, at their discretion, to redesignate the Administrative Board representative as an official OSR representative and thus provide for his/her continued participation. The staff will prepare the necessary revisions to the AAMC Bylaws and OSR Rules and Regulations for consideration at the June meetings.

ACTIONS  
COUNCIL OF ACADEMIC SOCIETIES  
ADMINISTRATIVE BOARD

April 3, 1975

RESIGNATION OF DR. GRULEE

ACTION: The CAS Administrative Board noted with regret the resignation of Dr. Clifford G. Grulee from the Executive Council. No official action was deemed necessary, and, therefore, none was taken.

RATIFICATION OF LCME ACCREDITATION DECISIONS

ACTION: The CAS Administrative Board reviewed the accreditation recommendations (as set forth in the Executive Council agenda on pages 19-20). No official action was deemed necessary, and, therefore, none was taken.

ROLE OF RESEARCH IN MEDICAL SCHOOL ACCREDITATION

ACTION: The CAS Administrative Board reaffirmed its position with regard to the role of research in medical school accreditation (as set forth in the recommendation to the Executive Council on page 21 of the Executive Council agenda). Since this recommendation had originated in the Council of Academic Societies' Board, pursuant to the recommendation transmitted by a CAS constituent, the Association of Chairmen of Departments of Physiology, no additional action was deemed necessary, and, therefore, none was taken.

OSR RECOMMENDATION TO ESTABLISH AN OFFICE OF WOMEN'S AFFAIRS

ACTION: The CAS Administrative Board unanimously adopted the recommendation (as set forth in the Executive Council agenda on page 23) that the Executive Council not approve the OSR recommendation to establish an Office of Women's Affairs. The CAS Administrative Board agreed, in addition, to encourage the AAMC to establish a mechanism by which problems of women in medical education and in their career development might be explored and defined. In cases where a careful monitoring would reveal that significant problems are found to exist, where indicated, appropriate intervention should be offered.

SPECIAL RECOGNITION OF QUIGG NEWTON

ACTION: The CAS Administrative Board noted with interest the recommendation that Mr. Newton's "eminent achievement in promoting and encouraging medical education and biomedical research" receive special recognition. No official action was deemed necessary, and, therefore, none was taken.



#### NATIONAL HEALTH INSURANCE AND MEDICAL EDUCATION

ACTION: The CAS Administrative Board unanimously approved the recommendation regarding National Health Insurance and medical education (as set forth in the Executive Council agenda on page 25).

#### HEALTH SERVICES ADVISORY COMMITTEE RECOMMENDATION

ACTION: The CAS Administrative Board unanimously approved the recommendation (as set forth in the Executive Council agenda on page 30) regarding supporting the establishment of a national health professions data base within the National Center for Health Statistics.

#### SOCIETY REPRESENTATION AT CAS MEETINGS

ACTION: Based on the analysis of attendance by official representatives of member societies since the February 1972 meeting, the CAS Administrative Board unanimously agreed that these records should be verified with the societies, that societies consistently unrepresented at meetings should be polled as to the reason for their absence and with concern that information about the programs of the Council and of the AAMC may not be reaching them. Further, societies consistently being represented at meetings should be encouraged to continue their participation.

#### NEXT CAS ADMINISTRATIVE BOARD MEETING

ACTION: The CAS Administrative Board unanimously agreed that, depending upon the availability of the AAMC President and Vice President, a retreat, beginning the evening of June 17 and concluding at noon on June 19, should be planned in conjunction with the next regularly scheduled meeting. The purpose of this meeting is to review the development and progress of the Council of Academic Societies with particular emphasis on assessing its priorities for the future.

COUNCIL OF TEACHING HOSPITALS  
ADMINISTRATIVE BOARD

April 3, 1975

MEMBERSHIP APPLICATIONS

ACTION: It was moved, seconded and carried that the following application for membership in the Council of Teaching Hospitals be approved:

The Memorial Hospital  
Worcester, Massachusetts

OSR RECOMMENDATION TO ESTABLISH AN OFFICE OF WOMEN'S AFFAIRS

ACTION: It was moved, seconded and carried that the COTH Administrative Board disapprove the OSR statement recommending the establishment of a separate and distinct office of women's affairs.

ROLE OF RESEARCH IN MEDICAL SCHOOL EDUCATION

ACTION: It was moved, seconded and carried that the COTH Administrative Board disapprove the recommendation of the Association of Chairmen of Departments of Physiology "that all accreditation survey teams include at least one recognized investigator in the biomedical sciences."

NATIONAL HEALTH INSURANCE AND MEDICAL EDUCATION

ACTION: It was moved, seconded and carried that the COTH Administrative Board approve items 1, 2, 5, 6, and paragraph 1 of item 7 on the CCME/LCGME Committee on National Health Insurance and Financing Medical Education summary of recommendations. The Board also recommended the deletion of numbers 2 and 4.

ACTION: It was moved, seconded and carried that if an AAMC task force is appointed, it be charged to recommend AAMC policy with regard to the specific issues of the impact of National Health Insurance on medical education.

#### HEALTH SERVICES ADVISORY COMMITTEE RECOMMENDATION

ACTION: It was moved, seconded and carried that the recommendation of the Health Services Advisory Committee be accepted.

#### SECTION 223 OF P.L. 92-603:

ACTION: It was moved, seconded and carried that the following statement in regard to the proposed Section 223 regulations be approved and submitted to the AAMC Executive Council:

The COTH Administrative Board recommends that the Executive Council reaffirm its previous action and retain legal counsel in keeping with the June 20, 1974 COTH Administrative Board resolution. This action should be taken to apply both to existing 1974-1975 regulations and to any proposed 1975-1976 regulations. The Board also recommends appointment of a small ad hoc committee of the COTH Board to work with the staff and legal counsel in recommending appropriate courses of action both with regard to current and proposed regulations.

#### DISTRIBUTION OF AMICUS CURIAE BRIEF ON HOUSESTAFF UNION ORGANIZATION

ACTION: It was moved, seconded and carried that the Department of Teaching Hospitals use the COTH REPORT as a vehicle for distributing information on the forthcoming amicus curiae brief on housestaff union organization.

## OSR ADMINISTRATIVE BOARD ACTIONS

April 1 and 2, 1975

### STUDENT INPUT TO MEDICAL SCHOOL ACCREDITATION

ACTION: The OSR Administrative Board recommended the formation of a small working group which would work with AAMC staff to develop a pamphlet about the accreditation process to be distributed to student representatives prior to LCME site visits.

### ROLE OF RESEARCH IN MEDICAL SCHOOL ACCREDITATION

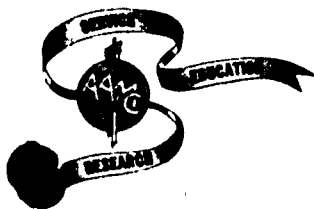
ACTION: The OSR Administrative Board endorsed the segment of the last paragraph of the Statement which reads, "That the evaluation of medical schools for the purposes of accreditation include an identifiable component which addresses itself to the quantity and quality of biomedical research."

### NATIONAL HEALTH INSURANCE AND MEDICAL EDUCATION

ACTION: The OSR Administrative Board endorsed the recommendation to the Executive Council that the AAMC consider adding the summary positions to its policy on national health insurance, that they comment on those recommendations to the CCME, and that a new task force not be appointed.

### HEALTH SERVICES ADVISORY COMMITTEE RECOMMENDATION

ACTION: The OSR Administrative Board endorsed the recommendation of the Health Services Advisory Committee regarding the establishment of a national health professions data base.



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## A C T I O N S

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### TAKEN AT MEETINGS OF:

|   |           |
|---|-----------|
| <i>Executive Council (January 16-17, 1975)</i>        | <i>1</i>  |
| <i>COD Administrative Board (January 15, 1975)</i>    | <i>6</i>  |
| <i>CAS Administrative Board (January 15, 1975)</i>    | <i>9</i>  |
| <i>COTH Administrative Board (January 15, 1975)</i>   | <i>12</i> |
| <i>OSR Administrative Board (January 13-14, 1975)</i> | <i>16</i> |

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ASSOCIATION OF AMERICAN MEDICAL COLLEGES

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## EXECUTIVE COUNCIL ACTIONS

January 16 - 17, 1975

### APPOINTMENT OF THE EXECUTIVE COMMITTEE

ACTION: The Executive Council appointed the following individuals to serve as the Executive Committee of the Association with the authority stipulated below:

Dr. Sherman M. Mellinkoff - Chairman  
Dr. Leonard W. Cronkhite, Jr. - Chairman-Elect  
Dr. Ivan L. Bennett, Jr. - COD Chairman  
Dr. Jack W. Cole - CAS Chairman  
Mr. Sidney Lewine - COTH Chairman  
Dr. John A. D. Cooper - President

At such time when the Executive Council is not formally in session, the Executive Committee shall have and may exercise the full power and authority, otherwise commonly incident to and vested in the Executive Council, to act on behalf of and to manage the affairs of the Association, and to make any and all necessary and appropriate policy interpretations on behalf of the Executive Council.

### REPORT OF THE HEALTH MANPOWER TASK FORCE

ACTION: After adopting two minor amendments modifying the time at which National Health Service Corps scholarship recipients would begin service, the Executive Council approved as Association policy the Report of the Health Manpower Task Force chaired by Dr. Daniel C. Tosteson.

### APPROVAL OF TEACHING HOSPITAL MEMBER

ACTION: The Executive Council approved and recommended to the Assembly the membership of the following institution:

Crozer-Chester Medical Center  
Chester, Pennsylvania

### APPOINTMENT OF THE SECRETARY-TREASURER

ACTION: The Executive Council appointed Mr. Sidney Lewine, COTH Chairman, as Secretary-Treasurer of the Association.

#### APPOINTMENT OF EXECUTIVE COUNCIL COMMITTEES

ACTION: The Executive Council approved a list of Executive Council committees and members proposed by the Chairman.

#### CLASSIFICATION OF AAMC COMMITTEES

ACTION: The Executive Council approved a proposal classifying AAMC committees into:

1. Committees and task forces of the Executive Council;
2. Committees of Councils, Organizations, or Groups;
3. Project advisory committees.

These classifications were defined and criteria set forth as guidelines for committees in each category.

#### REPORT OF THE TASK FORCE ON GROUPS

ACTION: After discussions with the chairmen of the five AAMC Groups, the Executive Council approved the Report of the Task Force on Groups chaired by Dr. Robert Van Citters as operating policy for the Association in this area.

#### RATIFICATION OF LCME ACCREDITATION DECISIONS

ACTION: The Executive Council approved the accreditation decisions made by the Liaison Committee on Medical Education at its October 16, 1974 meeting with the following comment:

The Liaison Committee on Medical Education should have placed Chicago Medical School on probation during this time of review and correction of its deficiencies. Failure to place this school on probation takes away a judgmental decision on the severity and nature of the deficiencies.

#### STATEMENT ON LCME ACCREDITATION STANDARDS

ACTION: The Executive Council adopted the following statement to be communicated to the Liaison Committee on Medical Education:

Based on information available concerning recent LCME accreditation decisions, the Executive Council of the AAMC expresses concern about accrediting medical education pro-

grams of apparently submarginal quality. Where there is evidence of major educational deficiencies, the Executive Council recommends that involved programs be denied accreditation or placed on probation. This action is intended primarily to provide a stronger stimulus for educational improvement and, secondarily, to assure continuing credibility for accreditation decisions.

#### AAALAC REQUEST FOR FINANCIAL SUPPORT

ACTION: The Executive Council, with one dissenting vote, denied a request from the American Association for Accreditation of Laboratory Animal Care that the AAMC contribute to the base financial support of AAALAC. This decision was taken in view of the current contributions of medical schools through site visit fees.

#### PROCEDURE FOR APPROVAL OF CCME REPORTS AND ACTIONS BY PARENT ORGANIZATIONS

ACTION: The Executive Council approved a procedure proposed by the Coordinating Council on Medical Education to govern the approval of reports and actions forwarded by the CCME. This procedure also governs CCME authority when amendments are offered by one or more parent organizations.

#### LCGME MEMBERSHIP OF THE AHME

ACTION: The Executive Council approved the CCME recommendation that the Association for Hospital Medical Education be represented on the Liaison Committee on Graduate Medical Education as a participant observer without vote.

#### CCME REPORT: THE PRIMARY CARE PHYSICIAN

ACTION: The Executive Council approved two modifications of the previously approved CCME Report on the Primary Care Physician. These amendments had been proposed by the CCME's Physician Distribution Committee in response to amendments offered by the Executive Council.

#### CCME REPORT: THE ROLE OF THE FOREIGN MEDICAL GRADUATE

ACTION: The Executive Council voted not to approve the CCME Report on the Role of the Foreign Medical Graduate but endorsed the final recommendation that the CCME sponsor as soon as



possible a national invitational conference at which the CCME report, among others, would serve as a working paper.

#### DISCUSSION OF THE NIRMP

The Executive Council discussed a draft report forwarded by the Liaison Committee on Graduate Medical Education Subcommittee on the National Intern and Resident Matching Program. In response to the recommendations contained in this report, the Executive Council reached consensus on the following policy considerations:

1. The Executive Council opposed the concept of having more than one matching date per year.
2. The Executive Council supported the all or none principal under which the NIRMP currently operates.
3. The Executive Council opposed the concept of having a re-match for individuals entering the second year of post-M.D. training.
4. The Executive Council supported the view that the sole purpose of accreditation is the determination of quality and the certification of that quality to the public. In this regard the Executive Council supported the LCGME Subcommittee recommendation that accreditation not be used as a sanction for violations in the matching process.
5. The Executive Council supported the LCGME Subcommittee recommendation that the NIRMP's continuation be supported as a necessary and desirable program.

#### JCAH GUIDELINES FOR THE FORMULATION OF MEDICAL STAFF BYLAWS

ACTION: The Executive Council tabled a motion to approve the report of an ad hoc committee of the Council of Teaching Hospitals on JCAH Guidelines for the Formulation of Medical Staff Bylaws, Rules and Regulations. The Executive Council recommended that an ad hoc review group representing all three Councils be appointed to review this report and prepare an Association position.

#### NATIONAL HEALTH INSURANCE AND MEDICAL EDUCATION

After considerable discussion of the potential impact of national health insurance legislation on medical education and of the CCME efforts to analyze this issue, the Executive Council agreed that the AAMC should appoint a committee to examine the potential impact on medical education

of each pending national health insurance proposal and to recommend AAMC positions as appropriate.

#### MODIFICATION OF THE NIH GENERAL RESEARCH SUPPORT PROGRAM

The Executive Council discussed several modifications in the NIH General Research Support Program which were being considered by the NIH staff. The Executive Council, after expressing strong support for the original objectives of the GRS program, agreed to support the merger of GRS grants with Biomedical Research Support grants, such a program to be continued on a formula basis with eligibility set at the \$200,000 level. The Executive Council also supported the Biomedical Research Development grant program as a separate, competitive program utilizing up to ten percent of available BRSR funds for non-renewable five year awards.

#### REPORT OF THE AAMC OFFICERS' RETREAT

ACTION: The Executive Council members discussed several of the issues and recommendations contained in the Report of the AAMC Officers' Retreat and voted to approved that Report.

COUNCIL OF DEANS  
ADMINISTRATIVE BOARD

January 15, 1975

CCME REPORT ON THE FOREIGN MEDICAL GRADUATE

ACTION: The COD Administrative Board recommended that the Executive Council not approve the CCME Report, endorsing only the final recommendation (III/4) that the CCME sponsor as soon as possible a national invitational conference for which the CCME Report among others, would serve as a working paper.

REPORT OF THE AAMC TASK FORCE ON GROUPS

ACTION: The Board recommended to the Executive Council that the report of the Task Force on Groups be approved.

REPORT OF THE AD HOC COMMITTEE TO REVIEW THE JCAH GUIDELINES FOR MEDICAL STAFF BYLAWS

ACTION: The COD Administrative Board recommended that the Executive Council approve the Committee's recommendation on page 76 of the Executive Council agenda regarding the duality of professional appointments.

The Board proposed the following modifications to the Committee's recommendation on pages 79-80 for Executive Council action:

1. Page 79, Section IV., paragraph 2, lines 7 and 8--the word "whether" and the phrase "or from a medical-administrative position" should be deleted.

Sentence to read: "Procedural due process protections (the right to notice and a hearing, if desired) should be accorded to each person subject to removal from a medical staff appointment."

2. Page 79, Section IV., paragraph 3, underlined section--the phrase "should be separated" should be deleted and the following phrase should be substituted: "should ordinarily be separate, but interinstitutional agreements may appropriately provide for a joint process."

Page 80--the phrase "subject to a review and hearing if requested" should be deleted.

Underlined recommendation to read: "In conclusion the committee recommends that where an administrative

position is held by the same individual on the medical staff and in medical school, the appointment procedures should ordinarily be separate, but interinstitutional agreements may appropriately provide for a joint process. Further, the appointee may be removed only by the appointing authority."

#### PROPOSED REVISIONS TO CCME REPORT ON THE PRIMARY CARE PHYSICIAN

ACTION: The Board recommended that the Executive Council approve the modifications proposed by the Physician Distribution Committee as editorial changes.

#### OSR RESOLUTIONS

ACTION: After a discussion of each of the proposed resolutions with the OSR Chairman, the tenor of which was to recommend that the OSR reformulate the recommendations, enunciating the problem and their objectives more precisely and couching their recommendations in more general language, the OSR Chairman agreed to withdraw the resolutions from Executive Council consideration.

#### OSR RULES AND REGULATIONS

ACTION: The Administrative Board--

1. declined to approve the insertion of new language into the Rules and Regulations relating to the institutional process of selecting OSR representatives to the effect that "only students may vote" in that process,
2. agreed to review the COD Guidelines on the OSR with the object of strengthening the language urging institutions to provide students the chief role in the selection of OSR representatives,
3. reached an informal understanding that the OSR would revise its Rules and Regulations to require approval of four of the four regions to make regional actions result in a formal OSR action, and
4. approved the Rules and Regulations as proposed with the above noted exceptions.

#### REVIEW OF THE SURVEY OF DEANS' COMPENSATION

ACTION: The Board approved the Revised Annual Survey of Deans' Compensation with the suggestions of the Board incorporated in it.

#### MEDICAL SCHOOL GOVERNANCE PROBLEMS

ACTION: The Board reaffirmed that the AAMC cannot assume the role of advocate in internal disputes in medical schools. Although it expressed skepticism as to the feasibility of creating medical school governance guidelines, it did think it appropriate to pursue the identification of governance problems and consider the potential role of the COD and AAMC in dealing with them. A Delphi survey of COD on this matter was suggested.

#### PROPOSAL FROM AMERICAN ASSOCIATION OF DENTAL SCHOOLS

ACTION: The Board responded to a request of the AADS Executive Director that there be a joint meeting of the Councils of Deans of the two Associations with a proposal that the Administrative Board meet with its counterpart in the AADS.

ACTIONS  
COUNCIL OF ACADEMIC SOCIETIES  
ADMINISTRATIVE BOARD

January 15, 1975

APPOINTMENT OF A SECRETARY-TREASURER

ACTION: The CAS Administrative Board unanimously approved the recommendation (as set forth in the Executive Council Agenda on p. 18) that the Executive Council appoint Mr. Sidney Lewine as AAMC Secretary-Treasurer.

RATIFICATION OF LCME DECISIONS

ACTION: Regarding the ratification of LCME accreditation decisions (as set forth in the Executive Council Agenda on pp. 19-22), the CAS Administrative Board adopted the following statement:

Based on information available concerning recent LCME accreditation decisions, the Administrative Board of the CAS expresses concern about accrediting medical educational programs of apparently submarginal quality. Where there is evidence of major educational deficiencies, the CAS Administrative Board recommends that involved programs be denied accreditation or placed on probation. This action is intended primarily to provide a stronger stimulus for educational improvement and, secondarily, to assure continuing credibility for accreditation decisions.

AAALAC REQUEST FOR FINANCIAL SUPPORT

ACTION: The CAS Administrative Board unanimously adopted the recommendation (as set forth in the Executive Council Agenda on p. 23) that since the medical schools are currently providing a substantial portion of the AAALAC revenue, it is recommended that the request for financial support be denied.

CCME ACTIONS

ACTION: The CAS Administrative Board unanimously approved the actions of the CCME (as set forth in the Executive Council Agenda on p. 29).

CCME REPORT: THE PRIMARY CARE PHYSICIAN

ACTION: The CAS Administrative Board unanimously approved the recommendation (as set forth in the Executive Council Agenda on p. 30) that the Executive Council approve the modifications proposed by the Physician Distribution Committee as editorial changes.

CCME REPORT: THE ROLE OF THE FOREIGN MEDICAL GRADUATE

ACTION: The CAS Administrative Board voted unanimously that the Executive Council accept the CCME Report, the Role of the Foreign Medical Graduate, in principle and recommend that a national invitational conference be sponsored for which the CCME Report, among others, would serve as a working paper.

THE NIRMP

ACTION: The CAS Administrative Board, after considering the GSA Recommendations and the draft of the LCGME NIRMP Subcommittee Report (as set forth in the Executive Council Agenda on pp. 65-70), voted unanimously to recommend to the Executive Council the appointment of a study group that would include students, grass-roots faculty, and hospital program directors to consider the problems in the NIRMP system.

REPORT OF THE AD HOC COMMITTEE TO REVIEW THE JCAH 1971 GUIDELINES  
FOR THE FORMULATION OF MEDICAL STAFF BYLAWS, RULES, AND REGULATIONS

ACTION: The CAS Administrative Board voted unanimously to accept the recommendations of the Ad Hoc Committee to Review the JCAH 1971 Guidelines for the Formulation of Medical Staff Bylaws, Rules, and Regulations (as set forth in the Executive Council Agenda on pp. 72-82).

REPORT OF THE TASK FORCE ON GROUPS

ACTION: The CAS Administrative Board voted unanimously to approve the Report of the Task Force on Groups (as set forth in the Executive Council Agenda on pp. 84-86).

In addition, the CAS Administrative Board decided that in an attempt to foster improved communication, it would in the future invite the Executive Secretary of the Group on Medical Education to meet with the Board regularly and report on GME activities. Also, the Chairman of the GME will be invited to report to the fall meeting of the full Council.

#### OSR ACTIONS OF SEPTEMBER 1974

ACTION: The CAS Administrative Board voted unanimously to approve the four recommendations (as set forth in the Executive Council Agenda at the bottom of p. 87) regarding the statements approved by the OSR Administrative Board at its September 14, 1974, meeting.

#### CAS POLICY REGARDING CAS ADMINISTRATIVE BOARD MEMBERS WHO BECOME DEANS

ACTION: The CAS Administrative Board voted unanimously:

1. That any person serving as a member of the CAS Administrative Board should, upon taking office as Vice President, Dean, or equivalent administrative officer in an academic medical center/medical school, cease to serve as a member of the CAS Board; and
2. That any seat so vacated should remain unfilled until the next Annual Meeting of the full Council at which time the established election procedures would pertain.

#### POLICY ON DESIGNATION OF NEW SPECIALTIES AND APPROVAL OF NEW SPECIALTY BOARDS

ACTION: The CAS Administrative Board expressed the opinion that, in principle, the Coordinating Council on Medical Education should eventually be responsible for authorizing the establishment of new specialty boards. However, the institution of this responsibility at this time might be too stressful to the smooth evolution of the Coordinating Council; therefore, efforts to achieve this principle should proceed with caution.

#### RESOLUTION FROM THE ASSOCIATION OF CHAIRMEN OF DEPARTMENTS OF PHYSIOLOGY ON "THE ROLE OF RESEARCH IN MEDICAL EDUCATION"

ACTION: With regard to the resolution "that the evaluation of medical schools for purposes of accreditation include an identifiable component which addresses itself to the quantity and quality of biomedical research and that the AAMC ensures that all accreditation survey teams include at least one recognized investigator in the biomedical sciences," the CAS Administrative Board unanimously recommended that:

1. The Association of Chairmen of Departments of Physiology forward this resolution (if they have not already done so) to the Liaison Committee on Medical Education; and
2. That the resolution be forwarded to the Executive Council for its April agenda.



COUNCIL OF TEACHING HOSPITALS

Administrative Board  
January 15, 1975

JCAH Guidelines:

ACTION: It was moved, seconded and carried that AAMC staff develop recommendations for reconsideration of the JCAH Guidelines for the Formulation of Medical Staff Bylaws, Rules and Regulations 1971.

Committees:

ACTION: It was moved, seconded and carried that the COTH Administrative Board take the following committee action:

- 1) discharge the first Ad Hoc Committee on COTH Membership Criteria, chaired by Charles Womer;
- 2) appoint a new committee to consider COTH membership criteria with David Thompson, M.D. as chairman; members of this committee will be Ivan Bennett, M.D., Malcom Randall, Daniel Capps and David Gee;
- 3) discharge the Ad Hoc Committee to Review the JCAH Medical Staff Guidelines, chaired by John Westerman.

Membership:

ACTION: It was moved, seconded and carried that the Crozer-Chester Medical Center in Chester, Pennsylvania be approved for membership in the Council of Teaching Hospitals.

Health Manpower Task Force Report:

ACTION: It was moved, seconded and carried that the following recommendations be brought before the AAMC Executive Council:

- 1) The fifty percent objective for primary care residencies is appropriate, but distribution and types of graduate medical education programs should be disassociated with and separate from undergraduate capitation requirements.

- 2) The CCME or some other body should be given the responsibility to address the specialty distribution question, and distribution of residency positions should be on a national basis tied to hospital reimbursement. (The Board indicated that a provision similar to that embodied in the Roger's manpower legislation may be appropriate.)
- 3) Direct support should be given for the establishment of new primary care residency programs.
- 4) Removal of the special preference visas for alien physicians should be withheld pending a full analysis of what the impact of this provision would be; concern was expressed for the number of positions that would be affected and the need for inclusion of a principle for gradual reduction rather than complete termination.

CCME Report: The Role of the Foreign Medical Graduate:

ACTION: It was moved, seconded and carried that the CCME Report, "The Role of the Foreign Medical Graduate" be tabled until a national invitational conference, as suggested in the report, be held. The Board also requested that AAMC staff prepare a brief analysis of each of the forty-four recommendations contained in the CCME Report before any further action is taken.

NIRMP: LCGME Subcommittee Report:

ACTION: It was moved, seconded and carried that the following action be taken regarding the LCGME Report on NIRMP:

- 1) Recommendation II should include the words "for the first year only," so as to read: "The all or none principle should be supported for the first year only."
- 2) Recommendation III should be deleted in entirety.
- 3) Recommendations I, IV and V should be supported as recommended.

Task Force on Groups:

ACTION: It was moved, seconded and carried that the Report of the Task Force on Groups be approved as submitted.

### OSR ACTIONS:

ACTION: It was moved, seconded and carried that the following actions be taken in regard to the five OSR statements:

- 1) It is recommended that the Executive Council disapprove Statement I, since the responsibility of the full faculty for promotion and graduation required access to the students' records.
- 2) It is recommended that any action on Statements II and III be deferred in view of the infeasibility of implementing them for the over 7,500 approved programs of graduate medical education. These recommendations would be more appropriate at some time in the future when institutional responsibility for graduate medical education is a reality.
- 3) It is recommended that Statement IV be forwarded to the members of the Group on Medical Education for consideration at the institutional level.

### 1975 Constituent Meetings:

The Board reviewed the format for the 1975 Annual Meeting and schedule outline and requested the staff to propose a set of optional program arrangements for review at the June, 1975 Board meeting.

The Board strongly endorsed a staff-initiated proposal for holding a Conference on Housestaff Collective Bargaining. Dr. Dennis Pointer reviewed the tentative schedule and noted that the conference would be scheduled for April 11, 1975 in Washington, D.C. Initial registration will be limited to two participants from each hospital with a maximum of 60-80 registrants. The Board also suggested that this type of activity - issue oriented conferences - be pursued this year instead of the traditional Spring COTH Regional Meetings.

### CCME Procedures:

The COTH Administrative Board approved the procedure for approval of the CCME report which advocates and recommended an item-by-item approval mechanism. This would allow the parent organization to propose a change in the recommended action or report and submit the proposal for subsequent consideration rather than limiting the decision to approval or disapproval.

Retreat Agenda and National Health Insurance Task Force:

In response to a recommendation regarding the need for a special task force to look at the educational component of a National Health Insurance plan, the COTH Administrative Board recommended that in the absence of any concrete movement towards NHI and with the lack of a clearly formulated issue, there does not appear to be a need for such a task force. In addition, most of the issues which would be addressed were covered by the previous task force and are outlined in the current AAMC position on National Health Insurance.

## OSR ADMINISTRATIVE BOARD ACTIONS

January 13 and 14, 1975

### APPOINTMENT OF EXECUTIVE COMMITTEE

ACTION: The OSR Administrative Board recommended the inclusion of the OSR Chairperson on the AAMC Executive Committee.

### LCME ACCREDITATION DECISIONS

ACTION: The OSR Administrative Board recommended that the AAMC Executive Council express to the LCME that Chicago Medical School should have been placed on probation due to the inappropriate use of financial contributions as a factor in the admissions decisions. The OSR Administrative Board further urged that the AAMC state the opinion that admissions decisions should not be based on present or future financial contributions and that the admissions process should be carefully reviewed before granting accreditation.

### AAALAC REQUEST FOR FINANCIAL AID

ACTION: The OSR Administrative Board endorsed the recommendation that the AAALAC request for financial support from the AAMC be denied.

### CCME ACTIONS

ACTION: The OSR Administrative Board endorsed the actions of the Coordinating Council on Medical Education.

### CCME REPORT: THE PRIMARY CARE PHYSICIAN

ACTION: The OSR Administrative Board endorsed the proposed modifications in the CCME Report.

### CCME REPORT: THE ROLE OF THE FOREIGN MEDICAL GRADUATE

ACTION: The OSR Administrative Board endorsed only the recommendation in the CCME Report for a national invitational conference.

### RECOMMENDATIONS ON THE NIRMP

ACTION: The OSR Administrative Board approved six recommendations regarding the NIRMP.

### JCAH GUIDELINES

ACTION: The OSR Administrative Board endorsed the JCAH Guidelines for the Formulation of Medical Staff Bylaws.

## OSR ACTIONS OF SEPTEMBER 1974

ACTION: The OSR Administrative Board revised their first recommendation in the Executive Council Agenda to read, " No person outside the Dean's office and committees on promotion and academic standing may review the student's record without that student's permission," and referred the information items regarding athletic and child care facilities to the GSA for discussion at 1975 regional meetings.

## OSR RESPONSE TO THE GAP TASK FORCE REPORT

ACTION: The OSR Administrative Board reviewed the OSR recommendations on the GAP Task Force Report which were suggested by an OSR discussion group and took the following action on those recommendations:

- #1: Approved
- #2: Approved
- #3: Approved
- #4: Approved
- #5: Approved
- #6: Approved with the following addition, "In most instances, written exams should not be viewed as the most appropriate instrument for such evaluation. Therefore, the NBME, while able to provide some assistance in the development of the evaluation methodologies, may not be the most appropriate group to do so. The OSR recommends that the AAMC Division of Educational Measurement and Research undertake a major effort in this area."
- #7: Approved with the following addition, "To be certified at this point for full licensure, the physician should be required to pass a standard nation-wide examination evaluating capabilities for providing patient care. The assessment should place emphasis on the ability to integrate and apply basic science knowledge in solving problems related to patient care. The examination should include components of basic science disciplines necessary to most career choices so that basic science information is assessed within the broad spectrum of clinical careers. The examination should be criterion-referenced rather than norm-referenced and should be reported as "passed" or "failed" to the physicians, to the graduate programs in which they are enrolled, and to the appropriate licensing boards. Physicians failing the examination should be responsible for seeking additional education and study."