

**ASSOCIATION OF AMERICAN
MEDICAL COLLEGES**

ANNUAL REPORTS

of

STAFF AND COMMITTEES

Presented at the 77th Annual Meeting

of the

Association

October 21, 1966

thru

October 24, 1966

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San Francisco, California

(Supplement)

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1965-66

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1965-66

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1965-66

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REPORT OF THE EXECUTIVE DIRECTOR

Robert C. Berson, M.D.

Since the business meeting on November 1, 1965, in Philadelphia, the Executive Council has met seven times, on November 2 and December 12-13, 1965; and February 4, March 30, June 21-22, July 19, and September 12-13, 1966. In addition to discussions which led to recommendations to the institutional members for consideration at their meetings on February 5, July 19-20, and October 24, 1966, and appropriate action on routine business matters, the Council considered and acted on a number of items of importance.

On the recommendation of President Thomas B. Turner, the Council concurred in the appointment of a Committee on Constitution and By-Laws, consisting of George A. Wolf, Jr., chairman, Joseph Stokes, Warren Bostick, John Deitrick, Manson Meads, Charles Sprague, Vernon Lippard, Douglas Surgenor, Marcus Kogel, Vernon Wilson, Winston Shorey, and Roger Egeberg. The recommendations of that committee to the institutional members are on the agenda for consideration at the meeting on October 24.

Council of Teaching Hospitals

At the business meeting in November, 1965, the institutional members authorized the conversion of what had been the Section of Teaching Hospitals into a more formal part of the Association, to be known as the Council of Teaching Hospitals. At its meeting in December, the Executive Council approved rules and regulations for the Council of Teaching Hospitals, which, among other things, specify the criteria to be used in determining a teaching hospital's eligibility for institutional membership in the Council and establish the level of annual dues. The Executive Committee of the Council of Teaching Hospitals met several times during the year to formulate plans for the annual meeting, discuss activities the Council should undertake, and the staff support needed for those activities, to consider hospitals applying for institutional membership and recommend those considered eligible to the Executive Council.

At the time of the Executive Council's meeting, September 12, 1966, 81 teaching hospitals had been nominated as their voting representative by medical schools, 149 additional hospitals had been nominated by medical schools on the basis of the importance of their affiliation for medical education, and 90 additional hospitals had been judged by the Executive Committee of the Council of Teaching Hospitals and the Executive Council of the AAMC as meeting the requirements for membership. On September 1, 1966, Mr. Matthew F. McNulty, Jr., immediate past chairman of the Section of Teaching Hospitals, joined the staff of the AAMC to develop a Division of Teaching Hospitals to support the programs of the Council. He reports to the Executive Director and will work very closely with the Executive Committee and the members of the Council of Teaching Hospitals. It is anticipated that annual and interim reports of the activities of the Council of Teaching Hospitals will be made to the institutional members, as well as to the officers and the Executive Council of the AAMC. The Committee on Constitution and By-Laws is recommending revision of the By-Laws that will clarify the role of councils such as the Council of Teaching Hospitals in the AAMC.

Task Forces Authorized in December

At its December meeting, the Executive Council authorized the appointment of three ad hoc task forces:

1) Location of Headquarters and Organization of the Staff of the AAMC-- Donald G. Anderson, William Anlyan and Robert Howard. At its March meeting, this task force recommended to the Council that it take official action to indicate that both the Evanston and Washington offices would be continued and expanded, have the present and projected space needs of the Association studied by a competent firm of architects or engineers, and have a study made of the possibility of an addition to the Evanston building. These studies are under way but have not yet been completed.

2) Affiliation with Other Organizations Composed of Medical School Faculty Members--Kenneth Crispell, George N. Aagaard, and Robert J. Slater. This task force has had a number of informal discussions with individuals very active in certain academic professional societies and has arranged a meeting with a number of these individuals October 20 and 21 to discuss active and close cooperation in specific programs in the early future.

3) Affiliations with Groups in the Health Related Professions--Isaac Taylor, Robert Hardin, and Samuel Martin. This task force has had a number of exploratory discussions with people active in educational associations in the allied health professions which have been encouraging but have not yet resulted in clearly defined plans.

At its February meeting, the Executive Council approved By-Laws for the Group on Student Affairs which have been circulated to each institutional member as well as to the members of that group. The Council also approved in principle the recommendation from the Group on Student Affairs that individuals not be required to accept binding commitments for residency appointments until at least six months of their internship year has passed. The Council has not, however, found any effective way to implement this desirable policy.

The Council approved the development of plans and the seeking of financial support for a National Health Professions Students Records Project. The proposal has been developed in cooperation with representatives of a number of educational organizations in the health field and presented to the Public Health Service, but no decision about its financial support has been reached.

Bulletin of the Association of American Medical Colleges

The Executive Council authorized the development and publication of a "Bulletin of the Association of American Medical Colleges" to report on current developments of great importance to medical educators. To date, seven issues of the Bulletin have been mailed to institutional and individual members, officers of foundations and federal agencies, and a considerable list of other interested individuals. William G. Reidy, who edits the Bulletin, and I would appreciate suggestions for its improvement. It is anticipated that the issues will become somewhat more frequent as experience with this new publication is gained.

National Fund for Medical Education

While the Executive Council has no authority over the National Fund for Medical Education, it is deeply interested and feels a sense of responsibility. Members of the Council and the Executive Director have followed the developments of the National Fund closely during the years. At its annual meeting in March, the National Fund decided to modify its granting programs and concentrate on development and improvement grants to medical schools, to ask Robert A. Moore, president of the AAMC 1955-56, to accept the position of medical director on a part-time basis, and to be chairman of an Evaluation Committee, to ask the AAMC to nominate four members of that committee and the National Fund, four, and elected Donald G. Anderson, president of the AAMC 1961-62, as president of the National Fund. James Faulkner continues as an active member of the Board of Directors. The Association's representatives on the Evaluation Committee are -- John Hogness, Leon Jacobson, William Maloney and Charles Sprague. After 15 years of effectiveness, Chase Mellen retired and was succeeded by Howard Corning, Jr., as Executive Director of the Fund. During this transitional year, the National Fund estimates that its collections from corporations will run approximately 50 percent of those in 1965, or somewhere between \$1 million and \$1.2 million. Experience so far is consistent with this estimate. The reaction of many corporate donors to the "new directions" of the Fund are quite encouraging, and the Board and officers of the Fund believe that donations from corporations will increase next year and the years thereafter. The effectiveness of the National Fund, in obtaining donations from corporations, will be greatly enhanced by cogent reports from the medical schools as to how helpful grants they receive are toward obtaining their objectives. In June, the Ford Foundation notified the Fund it had approved a three-year extension of the grant in the amount of about \$600 thousand, which had been scheduled to run out this year. The National Fund plans to keep the medical schools well informed about the evolution of its program and to notify them of action on the applications for improvement and development grants early in the calendar year 1967.

Borden Award Extension

On the recommendation of the Executive Director, the Executive Council approved the extension of the agreement of the Borden Company Foundation to continue the Borden Award for the Medical Sciences on approximately the same basis for the five years 1967 through 1971.

Conference on Psychiatry in Medical Education

The Association and the American Psychiatric Association are jointly sponsoring this conference which has been scheduled for March 6-10, 1967.

Conference on State Licensure Barriers to Innovations in Medical Education

The Executive Council accepted the invitation of the Federation of State Boards to join it in sponsoring this conference, to be held Saturday, February 11, 1967, at the Palmer House in Chicago.

Liaison with the Academy of General Practice

At its February meeting, the Executive Council approved the recommendation that Dr. Darley act as moderator at a series of regional conferences of medical educators and practitioners in cooperation with the Academy of General Practice and the Family Practice Foundation. Four such regional conferences have been held which brought forth a number of interesting ideas. The transcriptions of these conferences have not yet been pulled together for summarization.

Dr. Cheves Smythe, Associate Director

On August 1, Dr. Cheves Smythe joined the staff of the Association, succeeding Dr. William F. Maloney, as Associate Director. Dr. Maloney resigned to accept the position of Dean of the School of Medicine of Tufts University. Dr. Smythe's primary responsibility will be the Association's continued program of visitation to and accreditation of medical schools and work with the Liaison Committee on Medical Education. He is based in the Evanston office and will represent and speak for the Executive Director on many occasions and on many topics. He is already playing a key role in staff discussions of improvement of the Association's total program of collection, analysis, storage and retrieval of a wide variety of factual information about medical students and medical schools and study of the feasibility of developing a computerized data bank.

REPORT OF THE SECRETARY

RICHARD H. YOUNG, M. D.

The Liaison Committee on Medical Education carried out the following medical school surveys during the academic year 1965 - 1966:

Tulane University School of Medicine, January 25-28, 1965
The University of Maryland School of Medicine, September 27-30, 1965
State University of N.Y. at Buffalo School of Medicine, October 11-14, 1965
The University of Saskatchewan College of Medicine, November 8-11, 1965
The Creighton University School of Medicine, November 15-18, 1965
University of Montreal Faculty of Medicine, March 6-10, 1966
New Jersey College of Medicine and Dentistry, March 21-24, 1966
Meharry Medical College School of Medicine, January 17-20, 1966
Howard University College of Medicine, January 17-20, 1966
Hahnemann Medical College, January 31 - February 3, 1966
Loyola University Stritch School of Medicine, February 14-17, 1966
The Ohio State University College of Medicine, February 14-17, 1966
The University of Miami School of Medicine, February 21-24, 1966

The following reports are to be completed:

Queen's University Faculty of Medicine, November 4-5, 1965
The University of Missouri School of Medicine, January 24-27, 1966
(Report now with team members)
McGill University Faculty of Medicine, March 28-31, 1966
(Report now with team members)
The University of New Mexico School of Medicine, March 21-24, 1966
(Report in first draft)

The following established schools are scheduled for accreditation in 1966 - 1967:

Albany Medical College, September 26-29, 1966
University of Southern California, October 3-6, 1966
University of Manitoba, October 3-6, 1966
Dalhousie University, October 11-14, 1966
University of Chicago, October 31 - November 3, 1966
Medical College of Georgia, December 5-8, 1966
University of California, Los Angeles, December 12-15, 1966
Loma Linda University, January 9-12, 1967
California College of Medicine, January 16-19, 1967
The George Washington University, February 6-8, 1967
University of Virginia, February 20-23, 1967
The University of Arkansas, February 20-23, 1967
Meharry Medical College, March 6-9, 1967
University of Nebraska, March 20-23, 1967
New Jersey College of Medicine, March 27-30, 1967

REPORT OF THE TREASURER

Robert B. Howard, M.D.

The accompanying audited statements, submitted by Ernst & Ernst, constitute the substance of the Treasurer's Report. The audit shows clearly that the finances of the Association are capably handled. Operating economies effected by the Director of Business Affairs have made it possible to maintain a reasonably stable financial situation in the face of rising costs.

Major fiscal problems facing the Association at this time include the financing of badly needed additional physical facilities and the financing of the Division of Education and the Division of International Medical Education, both of which have been financed by foundation grants that are nearing their expiration.

ERNST & ERNST

231 SOUTH LA SALLE STREET

CHICAGO, ILL. 60604

Executive Council
Association of American Medical Colleges
Evanston, Illinois

We have examined the balance sheet of Association of American Medical Colleges as of June 30, 1966, and the related statements of equity and income and expense for the year then ended. Our examination was made in accordance with generally accepted auditing standards, and accordingly included such tests of the accounting records and such other auditing procedures as we considered necessary in the circumstances. We previously made a similar examination of the financial statements for the preceding year.

In our opinion, the accompanying balance sheet and statements of equity and income and expense present fairly the financial position of Association of American Medical Colleges at June 30, 1966, and the results of its operations for the year then ended, in conformity with generally accepted accounting principles applied on a basis consistent with that of the preceding year.

Ernst & Ernst

Chicago, Illinois
August 5, 1966

NOTES TO FINANCIAL STATEMENTS
ASSOCIATION OF AMERICAN MEDICAL COLLEGES

June 30, 1966

Note A - Inventory of Publications:

The Association follows the practice of including in inventory only those publications which are ten years old or less and provides an allowance equal to the carrying amount of publications older than one year. Following are the details of the inventory at the beginning and end of the year:

	<u>June 30</u> 1966	<u>July 1</u> 1965
Carrying amount of publications	\$52,344	\$49,204
Less allowance for publications over one year old	<u>43,989</u>	<u>38,652</u>
TOTAL	<u>\$ 8,355</u>	<u>\$10,552</u>

Note B - Land and Building:

The national headquarters of the Association are located on land donated by Northwestern University. Under terms of the grant, the land must be used as the site of the national headquarters and may not be sold or mortgaged without the consent of the University.

Note C - Lease Commitments:

At June 30, 1966, aggregate rentals of \$6,400 remain to be paid under several equipment lease agreements which expire in 1967. The Association has the option to purchase the equipment for approximately \$4,300 at the end of the lease terms.

Note D - Grants to be Received in Future Periods:

It is the practice of the Association to include grants in income when they are received. At June 30, 1966, the Association had been notified by several grantors that it may expect to receive \$791,750 for special purposes within the next six years.

BALANCE SHEET

ASSOCIATION OF AMERICAN MEDICAL COLLEGES

	June 30 1966	June 30 1965
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ASSETS

Cash	\$ 74,863	\$ 48,816
United States Government short-term securities - at cost and accrued interest	221,499	285,336
Accounts receivable	196,406	133,079
Accounts with employees	5,639	5,562
Supplies, deposits, and prepaid expenses	21,573	24,351
Inventory of publications, at the lower of cost or market - Note A	8,355	10,552
Land and building - at cost - Note B:		
Land improvements	\$ 9,002	\$ 9,002
Building	<u>287,854</u>	<u>287,854</u>
	<u>\$296,856</u>	<u>\$296,856</u>
	<u>\$825,191</u>	<u>\$804,552</u>

LIABILITIES AND EQUITY

Liabilities:		
Accounts payable	\$ 28,317	\$ 21,741
Salaries, payroll taxes, and taxes withheld from employees	<u>5,828</u>	<u>11,652</u>
	\$ 34,145	\$ 33,393
Deferred income:		
Institutional dues received in advance	\$ 55,750	\$ 750
Other dues received in advance	35,494	37,880
Subscriptions	<u>11,506</u>	<u>13,292</u>
	\$102,750	\$ 51,922
Equity:		
Restricted for special purposes	\$293,167	\$333,344
Invested in land and building	296,856	296,856
Retained for general purposes	<u>98,273</u>	<u>89,037</u>
	<u>\$688,296</u>	<u>\$719,237</u>
Lease commitments - Note C	<u>\$825,191</u>	<u>\$804,552</u>

See notes to financial statements.

STATEMENT OF EQUITY
ASSOCIATION OF AMERICAN MEDICAL COLLEGES

Year ended June 30, 1966

	Restricted for Special Purposes	Invested in Land and Building	Retained for General Purposes	Total
Balance at July 1, 1965	\$333,344	\$296,856	\$89,037	\$719,237
Expenses in excess of income	<u>40,177</u>	<u> </u>	<u>9,236*</u>	<u>30,941</u>
BALANCE AT JUNE 30, 1966	<u>\$293,167</u>	<u>\$296,856</u>	<u>\$98,273</u>	<u>\$688,296</u>

See notes to financial statements.

*Indicates income in excess of expenses.

STATEMENT OF INCOME AND EXPENSE
ASSOCIATION OF AMERICAN MEDICAL COLLEGES

	Year Ended June 30			1965 Total
	Special Purposes	General Purposes	Total	
Income:				
Dues		\$241,304	\$ 241,304	\$ 219,989
Grants	\$639,685	2,351	642,036	671,841
Services		276,332	276,332	256,841
Publications		130,166	130,166	118,424
Sundry		24,963	24,963	9,618
Transfers in-out**	50,807**	50,807	-0-	-0-
TOTAL INCOME	\$588,878	\$725,923	\$1,314,801	\$1,276,713
Expenses:				
Salaries	\$204,897	\$367,752	\$ 572,649	\$ 585,091
Other expenses	376,319	396,774	773,093	703,643
Transfers in-out**	47,839	47,839**	-0-	-0-
TOTAL EXPENSES	\$629,055	\$716,687	\$1,345,742	\$1,288,734
EXPENSES IN EXCESS OF INCOME	\$ 40,177	\$ 9,236*	\$ 30,941	\$ 12,021

See notes to financial statements.

*Indicates income in excess of expenses.

REPORT OF THE DIRECTOR
DIVISION OF OPERATIONAL STUDIES

This, the eighth Annual Report of the Division of Operational Studies (DOS) of the Association of American Medical Colleges (AAMC), summarizes the activities and accomplishments of the Division over the past year.

STAFF

Lee Powers, M.D., is Director of the Division; Mr. Augustus J. Carroll is Assistant Director; Mr. Harry Wiesenfelder is Research Associate; Rex Parmalee, Ph.D., is part-time Research Associate; Miss Marian Weber and Mrs. Sylvia Mussche are secretaries.

ACTIVITIES OF THE DIVISION

MEDICAL CENTER FINANCIAL SUPPORT

Trends in financing medical education - The continuing study of trends in financing medical education was expanded to include medical school expenditure data for 1963-64. The staff of the Division of Operational Studies (DOS) provided special tabulation of this data for Dr. Ward Darley's article "Medical School Financing and National and Institutional Planning," published in Vol. 41, No. 2, The Journal of Medical Education, February 1966, and provided assistance to Dr. Darley in preparation of several additional articles and addresses.

Program costs in medical schools - The DOS continued to provide consultation to medical schools in the utilization of the system of estimating medical school program costs.

Program costs in teaching hospitals - Criteria and procedures for program cost analysis in teaching hospitals are being developed and extensively tested in the Yale-New Haven Hospital. The resulting system will require approval by a committee composed of representatives of the American Medical Association (AMA), the American Hospital Association (AHA), and the AAMC. It is expected that this committee will resolve questions caused by conflicting interests and produce a system that will be acceptable to all concerned.

Summary of financial data for JAMA - The Division of Operational Studies for the fifth consecutive year provided the analysis of U.S. medical school expenditures for 1963-64, which was incorporated as a section of the Education Number of the Journal of the American Medical Association, Vol. 194, No. 7, November 15, 1965.

Medical school profile data - The annually updated profile facts on each medical school maintained by the DOS have been modified. A graphic method of presentation enhances the usefulness of this data for medical school deans in determining their position relative to all other medical schools in the important characteristics included in the profile. The new format has also been made available to the Liaison Committee on Medical Education for inclusion with pre-accreditation survey materials.

MEDICAL CENTER STAFF

Medical Faculty Roster - A major updating of the Faculty Roster was undertaken under support of a National Institutes of Health (NIH) contract signed in February 1966. A new system was developed whereby all existing AAMC information on full-time medical faculty members at the rank of instructor and above is listed on a departmental basis. These departmental lists are designed to be sent to departmental secretaries in the schools for verification or necessary modification to update information. A series of regional orientation meetings were held at eight locations throughout the country and were attended by two or more representatives of each school in the region. Detailed instructions were given on the preparation of the Faculty Roster forms, and one representative of each institution assumed the responsibility for providing assistance to departmental personnel. It is planned to update the information obtained in the Faculty Roster study on an annual basis each January, with the 1966 data serving as a base year for analysis of faculty staffing pattern trends.

A number of schools have expressed interest in the development of a basic medical faculty record that could be incorporated with the permanent personnel files. The DOS prepared, pretested, and distributed such a form to interested schools. Utilization of this form and its accompanying change-of-status form would obviate the need of preparing an annual faculty roster updating. General acceptance of this form would provide a faculty record system similar to the AAMC student record system, giving detailed, accurate information on a continuing basis.

Faculty vacancies - Information on faculty vacancies by medical school departments, as tabulated annually from the AAMC-AMA Liaison Questionnaire, was made available to applicants seeking academic appointments. The vacancy rate has remained at a relatively constant level, as have the requests for information from interested applicants.

Faculty salary study - The faculty salary studies have proven of considerable value to the member schools in planning budgetary needs and in obtaining necessary financing. Beginning in 1965, the salary studies were made on an annual basis to assure availability of the most up-to-date salary information.

Study of faculty fringe benefits - A report was made of fringe benefits available to medical faculty members; it was based on data obtained in the salary study and revealed a wide range of potential benefits. Interschool comparison indicates considerable difference in the potential dollar value of these benefits on both a total and individual basis.

Student-faculty ratios - The student-faculty ratios annually computed from information obtained in the AAMC-AMA Liaison Questionnaire were completed for the 1964-65 academic year. As the number of students for whom medical faculties have teaching responsibility continues to increase, the ratios in terms of student equivalents, as well as the person-to-person ratios, assume greater importance than before.

INFORMATION SERVICES

The DOS is called upon frequently to provide supplemental information pertaining to medical faculties, facilities, or finances by a vast array of agencies both private and governmental. These requests for information serve to highlight subject areas of current interest and have led to the initiation of data collection where no prior data have been available.

Datagrams - The monthly issues of Datagrams, detailing findings of AAMC studies and other information pertinent to medical education, continue to generate many inquiries and favorable comments. A cumulative index of the seven volumes of Datagrams was published in July 1966.

Reprint file and library - The reference reprint file initiated by the DOS is showing a rapid growth, reflecting the publication explosion occurring in the health sciences. The reference library maintained by the DOS for the AAMC shows greater qualitative rather than quantitative growth in the past year, as dictated by limitations of space and funds.

Microfilm document file - The DOS has prepared, on microfilm, a collection of legal documents pertaining to formal organizational structures related to medical schools. These include the previously developed file of Affiliation Agreements Between Medical Schools and Hospitals, the Medical School Constitutions and Bylaws file, and a new file of Medical Center Administrative Organization.

OTHER DIVISIONAL ACTIVITIES

Institutes on Medical School Administration - The Third Institute on Medical School Administration was held at the Americana Hotel, Bal Harbour, Florida, on December 12-15, 1965. This, the final Administrative Institute in a series of three, was devoted to an exploration of the interrelationships of the medical center and the university. The Institute examined the goals and purposes of the medical center as they relate to the following three major interdependent processes, which were treated as subtopic areas: (1) Education, (2) Research, and (3) Service.

In addition to the resource materials developed specifically for the Third Administrative Institute, participants received copies of the final reports of the two previous Administrative Institutes. The final report of the Third Administrative Institute is scheduled for completion early in 1967, and is to be followed at some future date by a total report of all three Administrative Institutes.

Special study of medical practice activities of women physicians - The DOS is proceeding with the tabulation analysis and the preparation of a report on the study of medical practice activities of women physicians, now in progress. To date, responses have been received from more than 80 per cent of a sample of male and female medical school graduates of selected years from 1931 to 1961. The high rate of response to this questionnaire should yield valuable new information on the levels of activities of male and female medical school graduates. Data analysis will be made to determine if trend changes have occurred in the level of professional activity among more recent women graduates.

Study of affiliation agreements - The study of medical school-hospital affiliations made by Dr. Cecil G. Sheps, formerly of the University of Pittsburgh, and his associates, was published in final form.

Consulting services - Departmental members are increasingly being called upon to provide consultative services to medical centers and other institutions and organizations. During the past year, staff provided consulting services in the areas of grants and fiscal management, administrative organizations, hospital affiliation agreements, and a variety of other related topics.

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JOINT REPORT OF THE COMMITTEE ON RESEARCH IN EDUCATION
AND
THE DIVISION OF EDUCATION

JULIUS B. RICHMOND, M.D.
Chairman of the Committee

PAUL J. SANAZARO, M.D.
Director of the Division

The Division of Education of the Association of American Medical Colleges (AAMC) was established in 1962 with the support of a five-year grant from the Carnegie Corporation. Its primary functions are to stimulate research in medical education, to promote the application of research results to on-going educational programs, to continue the AAMC's long established program of basic research, and to provide consultative services to faculty members, medical schools, and professional and scholarly societies. A major responsibility of the Division is the Medical College Admission Test Program (MCAT). Those activities of the Division which are of direct benefit to the medical student are supported by the AAMC. Other projects and special studies are often funded by grants from private foundations or the U.S. Public Health Service. The Division furnishes staff services for the Committee on Student Affairs and its several sub-committees and other AAMC committees which are administratively related to the Division.

During the past year the Committee on Research in Education, which has served in an advisory capacity to the Division since its inception, has reviewed the overall programs of the Division. On the basis of this review, the Committee has recommended to the Executive Council a number of significant changes which will be implemented in the coming year.

ORGANIZATION AND STAFF

The Division of Education conducts its programs within 3 integrated units. The Director is in charge of the unit on Educational Research and Services which includes the MCAT program and the CORE program. Edwin B. Hutchins, Ph.D., serves as Assistant Director in charge of the Office of Basic Research, assisted by William E. Sedlacek, Ph.D., Research Psychologist to the Division. Davis G. Johnson, Ph.D., is Assistant Director in charge of the Office of Student Studies and Services. His Office provides staff services for the AAMC Committee on Student Affairs, the Group on Student Affairs (GSA), and its several sub-committees. Miss Mary H. Littlemeyer is Administrative Assistant to the Division.

EDUCATIONAL RESEARCH AND SERVICES

All staff members of the Division contribute to the programs of this unit. Its major functions are to promote and undertake research in the educational process, to collect and provide information on cur-

ricular changes, to provide consultative assistance to medical schools in educational self-study, to promote the development of objective criteria for the assessment of educational programs, and to administer the Medical College Admission Test program.

Annual Conference on Research in Medical Education.--The Fourth Annual Conference on Research in Medical Education was conducted October 31, 1965. In addition to the presentation and discussion of original papers, formal critiques of their research design and methodology were presented. The Conference Proceedings, including these critiques, were published as a special issue of The Journal of Medical Education (1). The Fifth Annual Conference will be conducted October 22-23, 1966. The Conference is planned by a Committee which is appointed by the Committee on Research in Education. This year the members are Betty H. Mawardi, Ph.D., Chairman; Stephen Abrahamson, Ph.D.; Renée Fox, Ph.D.; J. A. L. Gilbert, M.D.; George E. Miller, M.D.; Charles F. Schumacher, Ph.D.; and Paul J. Sanazaro, M.D., Secretary.

The Medical College Admission Test (MCAT).--The MCAT program is under the supervision and guidance of an MCAT Advisory Committee which is appointed annually by the Committee on Research in Education. The members are Paul J. Sanazaro, M.D., Chairman; John L. Caughey, Jr., M.D.; Roy K. Jarecky, Ed.D.; Schuyler Kohl, M.D.; Woodrow W. Morris, Ph.D.; and William Schofield, Ph.D. Ex-officio members are Edwin B. Hutchins, Ph.D., and Davis G. Johnson, Ph.D.

During the past year the MCAT Advisory Committee conducted a searching analysis of the MCAT program. As a result of this, the existing contract with The Psychological Corporation was renewed but significantly modified according to recommendations of the MCAT Advisory Committee.

An ad hoc Advisory Committee on the Science Sub-test assisted in the development of an experimental test based upon the primary concepts of problem-solving rather than recall of information. This experimental sub-test was administered in the spring, 1966. Based upon analysis of the results, the test will be further refined and developed for ultimate inclusion in the MCAT.

An ad hoc Behavioral Science Advisory Committee, which was convened at the request of the MCAT Advisory Committee, concluded that it is not currently feasible to include an achievement test in the behavioral sciences as a regular sub-test of the MCAT.

In view of the development of molecular biology as a major discipline in colleges and universities and the emergence of unifying principles in the field of human biology, increasing numbers of medical school applicants already possess extensive knowledge in the areas which heretofore have been defined as basic medical sciences. In recognition of this, planning is under way for the development of achievement tests which may assist medical schools in developing working policies for the granting of advanced placement credit in certain subject areas.

Also under study is the inclusion of a brief biographical inventory as a portion of each MCAT administration with the intent that the resulting information be made available to medical schools as a preliminary application form.

On the recommendation of the MCAT Advisory Committee, the Committee on Research in Education has in turn recommended to the Executive Council that a full-time staff person be appointed whose primary responsibility would be to monitor the MCAT program.

Intramural Seminar.--The Division of Education conducted its annual Intramural Seminar based on an educational self-study with the Medical College of Georgia. The study concentrated upon an analysis of student characteristics, student and faculty attitudes, use of house staff in teaching, medical school characteristics, and the existing curriculum. The results of the self-study were analyzed during a five-day seminar conducted for selected faculty members and key administrative officers. Consultants who assisted in the self-study and in the conduct of the seminar were Stephen Abrahamson, Ph.D.; Lawrence A. Fisher, Ph.D.; George E. Miller, M.D.; and Christine McGuire, M.A. Paul J. Sanazaro, M.D., Edwin B. Hutchins, Ph.D., and William E. Sedlacek, Ph.D., represented the AAMC staff.

Conference on Preparation for the Study of Medicine.--This Conference will be an invitational workshop co-sponsored by the University of Chicago and the AAMC. Robert Page, M.D., Associate Dean of the University of Chicago School of Medicine, is Chairman, and Paul J. Sanazaro, M.D., is Co-chairman. The Conference will be held at the University of Chicago in April, 1967. The Planning Committee has defined the following major problem areas: (a) changes in content and teaching of disciplines in high schools, colleges, and medical schools, with major emphasis on biology and chemistry; (b) changes in curriculum in colleges and medical schools, e.g. advanced placement, honors, independent study, and special programs; and (c) implications of these changes for medical schools, including admissions requirements. The Conference is supported by grants from the Markle Foundation and the National Science Foundation. Data collected in preparation for the Conference and the discussions at the Conference will be summarized. The publication will serve as a definitive statement on the nature and magnitude of changes in the teaching of science in colleges which must bring about compensatory changes in admission procedures and teaching in medical schools.

Exploratory Study of Undergraduate Programs in Surgery.--Sponsored by the Society of University Surgeons and supported by a grant from a private foundation, Paul J. Sanazaro, M.D., and Thomas C. King, M.D., conducted a comparative study of teaching programs in 3 departments of surgery. The results of this exploratory study indicate the feasibility of applying techniques of educational assessment to the study of departmental teaching programs. A report of the study will be published (2).

Research in Medical Education.--The Division has continued to compile and analyze descriptive and comparative information which permits a direct assessment of educational programs in medical schools. By drawing upon studies which have been conducted under other auspices and

by other divisions of the Association, the Division of Education has demonstrated the capability for more definitively characterizing the educational process in medicine. A summary of the Division's experience in the self-studies, augmented by the results of other projects, is in preparation and will be published as a suggested "protocol for self-study in medical education."

Because of the heightened interest in the issue of optimal class size and its effects on the quality of education, an analytic review of this topic has been completed. Data were drawn from other areas of higher education as well as medical education itself. The paper will be published (3).

Research in medical education appears increasingly to focus upon the interrelationships of medical education and patient care. The perspectives which have emerged in the course of the Division's activities over the past four years have been presented elsewhere and will be published (4,5).

CORE Program.--In 1963 the Division of Education proposed a program of research which, if implemented, would enable the Association and medical education at large to utilize the resources of the university in more clearly defining major trends and issues which increasingly will influence the future direction of medical education. The details of the 4 projects have been presented in previous reports, notably that for 1964 (6). A summary of the current status of the CORE Program follows.

Project A. Projection of Physician Manpower.--A formal research project has been designed by an inter-disciplinary team. It focuses on the development of techniques for analyzing the major determinants of future supply of and demand for physician manpower. With the support of the AAMC, the project has been funded by a private foundation.

Project B. Criteria of Performance of Practicing Physicians.--The study is funded by a research grant from the U.S. Public Health Service and is now in its second year. The study will provide additional follow-up data on graduates of medical schools who served as subjects of the AAMC Longitudinal Study (7). When the study is completed, information will be available on the interrelationships in this sample of (a) student characteristics, including ability level, social and academic background, and personal characteristics; (b) their education in medical school, internship, and residency; and (c) their level of performance in practice.

Project C. Joint Study of Teaching Programs in Comprehensive Medicine.--Eight medical schools have cooperated in a study of teaching programs in comprehensive medicine. Data have been collected on the biographical and personal characteristics of students and their academic performance in medical school and on National Board examinations. These will be related to their level of performance in comprehensive medicine as assessed on a rating scale designed for this purpose. A formal report of the Joint Study is currently in preparation.

Project D. Research in Patient Care.--In view of the increasing interest in the quality of patient care as it relates to and influences clinical medical education, the Division of Education sponsored a Seminar on Research in Patient Care in March, 1965. Widespread interest has been engendered by the Seminar, and the Proceedings have been described in a number of publications (8-11).

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OFFICE OF BASIC RESEARCH

Medical College Admission Test (MCAT).--A number of reports pertaining to the MCAT program were prepared this past year. A study of the effect of restriction of range artifacts on the interpretation of validity coefficients was completed and presented at the AAMC Fourth Annual Conference on Research in Medical Education (1). An extension of the basic method of this study allows exploration of input-output differences based on MCAT and National Board data and the relation of these differences to independent indexes of the educational environment (2).

A technical report was prepared to explain the nature of an artifactual shift in MCAT Quantitative Ability scores as a function of practice effects in the norming procedures used in test development (3). This report was distributed to the admissions officers of all medical schools.

Studies on Non-Intellectual Characteristics of Medical Students.-- Analyses have progressed on parts of the Longitudinal Study. The 1965 follow-up questionnaires obtained information on student career choice patterns and in addition involved the readministration of the Medical School Environment Inventory (MSEI). Information on the construct validity of this instrument was presented in a technical report which will be submitted for publication (4).

Analyses of data on the female subjects were made separately and a paper is now in draft form. The data presented here should offer valuable supplementary information to that presented in the AAMC study of attrition and to the study of women in practice being conducted by the AAMC Division of Operational Studies. Part of this material will also be presented to the Group on Student Affairs Session of the AAMC Annual Meeting in October, 1966 (5).

The analyses of the Career Attitudes (CA) instrument are essentially completed and scale score profiles indicate that this instrument can distinguish career choice groups. Pre-testing of the instrument as a counseling device in a school setting has been accomplished.

Computer programs for the scoring of the MSEI and the CA have been prepared to facilitate the servicing of requests for the use of these instruments.

A symposium dealing with the measurement of career attitudes in a changing profession which was organized by the Office of Basic Research has been scheduled for the meeting of the American Psychological Association in September, 1966. Both Edwin B. Hutchins, Ph.D., and William E. Sedlacek, Ph.D., will present papers (6,7). Dr. Hutchins will present a second paper on school differences in patterns of student interests (8).

Work has begun on the development of a measure of student attitudes toward their role as students and will continue over the next year.

Survey Research.--During the past year the returns from the study of Negro Applicants were analyzed. The rate of return was quite low, but the study can serve as a pilot project.

Dr. Sedlacek cooperated with the Office of Student Studies and Services in a study of the type of reports of medical student progress transmitted by the schools to hospitals. The confidence of medical school administrators in these reports was also explored (9).

Cooperative Projects and General Support.--Cooperative projects and support efforts which account for major allotments of staff time included data preparation and participation in the Intramural Seminar, data collection and analyses for the Division's Joint Study of Teaching Programs in Comprehensive Medicine, participation in faculty retreats and seminars at a number of schools, and consultation to the research staffs of other organizations. Consultations with researchers in medical education and dissemination of research data to schools and researchers involved a large commitment of time. Excluding data compiled or disseminated as part of a major study, the Office of Basic Research

filled approximately 100 requests for data or information from researchers and medical educators.

Additional Professional Activities.--Dr. Sedlacek presented a paper summarizing the research on job satisfaction at the Midwestern Psychological Association meetings (10) and will present a paper on the use of factor analytic technique in the assessment of the efficacy of theory at the American Psychological Association meetings in September, 1966 (11).

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OFFICE OF STUDENT STUDIES AND SERVICES

The major functions of the Office of Student Studies and Services are to conduct studies, to provide services, and to serve as staff in the areas of Admissions and Student Affairs.

Student Studies.--The major study conducted by this Office was the Study of Medical Student Attrition, supported by the Maurice Falk Medical Fund (1,2). The final report, Doctor or Dropout?: A Study of Medical Student Attrition, will be published as a special issue of The Journal of Medical Education in December, 1966. Davis G. Johnson, Ph.D., and Edwin B. Hutchins, Ph.D., are the co-authors.

The U.S. Public Health Service-AAMC Survey of Medical Student Financing was published as Public Health Service Publication No. 1136 under the title, How Medical Students Finance Their Education. The significance of this report and how it supplements other AAMC studies of student finances was emphasized in an editorial (3).

Another major study which was done by this Office was the 1964-65 Study of Applicants (4,5). Smaller studies conducted in whole or in part by this Office included: (a) study of medical student grading and of the reporting of medical student performance to hospitals, (b) study of the time of acceptance of 1965-66 first-year medical students, (c) survey of policies and practices concerning medical school applicants and students with emotional problems, and (d) survey of current and proposed systems for handling records of applicants, students, and alumni.

Finally, a number of special reports for various groups and agencies, including the Educational Council for Foreign Medical Graduates, the National Institutes of Health, and several medical schools, were prepared.

Student Services.--This Office maintains complete and accurate records of medical school applicants and students as a basic service to medical schools. Based on these central records, a substantial amount of informational exchange continued to be provided to all medical schools in accord with recommendations developed by the AAMC Group on Student Affairs (GSA). More than the usual amount of time and effort went into the preparation of information related to the Medical College Admission Test (MCAT). A new records system was developed for studying foreign students.

Major effort during the year was given to exploring the feasibility of developing a comprehensive system to improve the manpower records of applicants, students, alumni, and faculty of medical schools and schools of the other health professions. Several planning meetings were held and funding for the project is being sought.

A final aspect of student services was the not inconsiderable amount of correspondence and consultation with medical school applicants, premedical advisors, GSA members, and others.

Staff Services.--The major staff effort of this Office is in planning and supporting GSA activities and projects. At the national level, much of this activity focused around preparing for and implementing the 1965 GSA annual meeting which included for the first time an orientation session for new GSA members.

A revised directory of GSA members, which includes lists of committee members, regional affiliations, schedules of meetings, and the newly-adopted GSA Bylaws, was published.

At the regional level, this Office coordinated the preparation of background references for consideration at the GSA regional meetings and provided staff representation at most of these meetings. Among the items considered at the 1966 regional meetings were preliminary application procedures, early acceptance plans, use of psychological tests in evaluating applicants, relations between medical schools and pharmaceutical companies, and financial aid for students.

This Office also provided staff services for the GSA Subcommittees. Under the auspices of the Committee on Relations with Colleges and High Schools (James R. Schofield, M.D., Chairman), a revised and enlarged Directory of Premedical Advisors for 1965-66 was prepared and distributed. The Directory identifies those undergraduate colleges which designate official committees for providing recommendations on applicants to medical schools.

The Committee on Financial Problems of Medical Students (John Chapman, M.D., Chairman) maintained liaison with the federal government on its scholarship and loan programs. The Committee also suggested revisions for the AAMC booklet, "Financing a Medical Education," which was originally published during the summer of 1965. The second edition is being prepared by Miss E. Shepley Nourse and Davis G. Johnson, Ph.D., and is scheduled for publication during the fall.

The Committee on Student Aspects of International Medical Education (Thomas J. Brooks, Jr., M.D., Chairman) refined the details of gathering data concerning foreign students who enroll in U.S. medical schools. The Committee prepared a new statement, "Information for U.S. Students Who Are Considering Earning a Medical Degree Abroad," for the Admission Requirements book.

The Committee on Research on Student Affairs (W. W. Morris, Ph.D., Chairman) sponsored studies of reporting student performance to hospitals, acceptance dates of entering students, and emotional problems of applicants and students. It also continued consideration of student evaluation.

A GSA Bylaws Committee (James W. Bartlett, M.D., Chairman) proposed a set of Bylaws for the Group on Student Affairs which were approved by the GSA representatives. The Bylaws were approved by the AAMC Executive Council on February 4, 1966.

The Committee on Communication with Student Organizations (William D. Mayer, M.D., and John H. Githens, M.D., Chairmen) represented the AAMC in communicating with the Student American Medical Association (SAMA) and other national student organizations.

A new Committee on Medical Student Health (L. W. Earley, M.D., Chairman) was organized and was approved by the AAMC Executive Council as the appropriate AAMC Committee to establish and maintain liaison with the American College Health Association. This Committee prepared

a questionnaire on medical student health which will be sent to all U.S. medical schools during the summer of 1966.

Additional Staff Services.--This Office continued to provide staff service for other committees, most notably for the AAMC Committee on Student Affairs, which held 3 meetings during the period covered by this annual report. Staff effort was also contributed to the MCAT Advisory Committee and to the Planning Committee for the Conference on Preparation for the Study of Medicine.

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JOINT REPORT OF
THE COMMITTEE ON INTERNATIONAL RELATIONS IN MEDICAL EDUCATION
AND
THE DIVISION OF INTERNATIONAL MEDICAL EDUCATION

Thomas H. Hunter, M.D.
Chairman of the Committee

Henry van Zile Hyde, M.D.
Director of the Division

Institute on International Medical Education

The highlight of the year was the Institute on International Medical Education which was held in Washington, D.C., March 27-30 1966 in the new headquarters building of the Pan American Health Organization. The Institute was attended by 280 persons representing essentially all of the member schools, and including representatives of private foundations, governmental and international agencies. Sixteen international guests also attended and participated in the discussion groups. These guests were prominent medical educators from, particularly, the developing countries. The speakers at the Institute included Barbara Ward (Lady Robert Jackson), the distinguished British economist, Dr. Karefa-Smart, Assistant Director General of the World Health Organization, Dr. K. N. Rao, Director General of Health of India, and David E. Bell, Administrator of the Agency for International Development. The Institute explored the question of medical education in the developing countries as a prelude to the Third World Conference on International Medical Education. The Report of the Institute is scheduled for publication as Part 2 of the September issue of The Journal of Medical Education.

AID Advisory Committee on Health Manpower

Acting upon the recommendation of the AAMC in its report "A World Program for Health Manpower" AID appointed an Advisory Committee on Health Manpower which met on June 2-3 under the Chairmanship of Dr. James P. Dixon, Jr., who had served as Chairman of the Advisory Committee on the AAMC/AID Study on Medical Education in the Developing Countries. The Committee includes in its membership the chairman of the AAMC Committee on International Relations in Medical Education and the Editor of The Journal of Medical Education. The staff work for the Committee was carried out primarily by the AAMC/AID Project Staff. The Committee adopted certain broad guiding principles for the AID program directed at medical health manpower, recommended the involvement of Committee members in project planning and review and planned to meet again in October.

Cooperation with AID

The AAMC signed a new contract with the AID, effective June 1, 1966 and extending through May 31, 1969. The contract covers the general nature of the cooperative relationship and defines broad areas of joint activity, as

well as covering the details of administrative procedures. It provides a mechanism for entering into subsidiary agreements through "task orders" which provide support for agreed programs and projects. Task Order Number One was signed simultaneously with the new contract and provides for a basic project staff consisting of a Project Director, two professional assistants, and the necessary secretarial staff. This Task Order covers the same three year period and provides for expenditure of approximately \$100,000 per year.

Dr. Harold Margulies serves as AID Project Director and as Associate Director of the Division of International Medical Education. In connection with this development AID has appointed a full-time staff man to deal with the problems of health manpower working in close conjunction with the AAMC project.

Second Annual Conference on International Medical Education

In conjunction with the 76th Annual Meeting of the AAMC in Philadelphia, the Association convened the Second Annual Conference on International Medical Education on October 31, 1965. Dr. Marcolino Candau, Director General of the World Health Organization was the luncheon speaker. Other speakers included Dr. Robert Debre', the distinguished French pediatrician and medical educator, Dr. Antonio Gallego, Professor of Physiology at the University of Madrid, and Dr. Jacob Chandy, Editor of the Indian Journal of Medical Education and Dr. Malcolm Merrill, the newly appointed Director of Health of AID. A special feature of the Conference was a panel on Aspects of Medical Education in the Americas which consisted of the members of the Administrative Committee of the Pan American Federation of Associations of Medical Schools, which was meeting in Philadelphia in conjunction with the AAMC Annual Meeting.

The Committee on International Relations in Medical Education

Dr. Thomas H. Hunter succeeded Dr. Robert A. Moore as Chairman of the Committee on the request of Dr. Moore who had served as Chairman since 1958, being the chief architect of the international program of the Association. During his period as Chairman of the Committee, the idea of the Division of International Medical Education was conceived, its general objectives and programs outlined, funds obtained, the Director and staff appointed, and a program initiated and carried out. During this time, as well, the student foreign fellowship program administered by AAMC under funds granted by SK&F Laboratories was initiated, with Dr. Moore as Chairman of the Selection Committee; the contract with AID was consummated and the Institute on International Medical Education was organized, with Dr. Moore as Chairman of the Steering Committee.

The Director of the Division wishes to take this opportunity to express his appreciation for the friendly and constructive support that he has been given at all times by Dr. Moore in his various capacities in relationship to the international program. Appreciation is also expressed to the retiring members of the Committee who have provided wise and helpful support to this growing program. The retiring Committee members are, Drs. Leroy E. Burney, Thomas P. Almy, Robert C. Berson, Lowell T. Coggeshall, Maxwell E. Lapham, Vernon E. Lippard and Francis Scott Smyth. The new appointees to the Committee are, Drs. Joseph Hirsh, Dieter Koch-Weser, Charles C. Sprague, and Douglas M. Surgenor.

The newly constituted Committee met May 24-25 at the Yale Club in New York City to review the policy and program of the AAMC in light of the deliberations at the Institute on International Medical Education. The Committee took two actions: one was the adoption of a resolution calling for continued support of the program by the Executive Council, and the second was the adoption of a Statement of Policy and Program (appended herewith) as a base for the AAMC's continuing activities in this field. This Statement was approved by the Executive Council on June 22.

Indian Association for the Advancement of Medical Education

The Annual Meeting of the Indian Association for the Advancement of Medical Education was convened in Bombay, January 1-3, 1966. Dr. George E. Miller and Dr. Robert A. Moore addressed the meeting which was also attended by the Director of DIME. The theme of the meeting was "Medicine and Society." The April issue of the Indian Journal of Medical Education included a 450 page report of the meeting.

On the instruction of the Board of Directors, the President of the Indian Association addressed a request to the AAMC for the development of a cooperative exchange program that would include the following elements:

1. Interchange of under-graduate students in their Senior Clinical years.
2. Interchange of Junior Teaching Staff who have completed their formal requirements for teaching positions.
3. Interchange of Senior Teachers for shorter periods.
4. Participation in the intensive medical teachers' training course in the United States.
5. Research in medical education, and other avenues may also be explored.

The request was signed by Sir Arcot L. Mudaliar and addressed to Dr. Thomas B. Turner, President of the AAMC. A series of conferences have been held in Washington to study this proposal, one of which was attended by Dr. K. N. Rao, the Director General of Health of India, during the course of his attendance at the Institute on International Medical Education. The question continues to be under study in the Public Health Service and the AID, both in Washington and New Delhi. It is hoped that a program can be developed and administered jointly by the two Associations under PL 480 funds available to the Public Health Service or AID.

Association of Medical Schools of Africa

The Annual Meeting of the African Association convened in Ibadan, Nigeria, April 12-15 was attended by Dr. Harold Margulies as the representative of the AAMC. He gave a paper on the use of Objective Examinations in Medical Education. He also visited Ghana, at the request of the Department of State

to determine the position with regard to medical education subsequent to the fall of Nkruma.

PAKISTAN

Dr. Margulies visited Pakistan twice during the course of the year as a member of White House missions sent to explore the initiation of a program in medical education in response to President Johnson's commitment to President Ayub Khan during his visit to Washington. The first visit was in the company of Dr. Peter Bing of the Office of Science and Technology on January 21-February 7; the second was made with Dr. Colin MacLeod, Deputy Director of the same office, Dr. M. David Levitt, Deputy Assistant Secretary of HEW, and Dr. Theodore Woodward, Professor of Medicine at the University of Maryland, July 14-24. Dr. Margulies had previously served for four years under an AID-University of Indiana Contract, as Director of the Postgraduate Medical Center of the University of Karachi.

Third World Conference on Medical Education

Dr. Moore continued to serve as Chairman of the Headquarters Executive Committee of the Third World Conference on Medical Education, with the Director of DIME as a member of the Committee and consultant to the Secretary of the Conference. Dr. Moore and Dr. Hyde both attended a joint meeting of Headquarters and Host of the Executive Committees in New Delhi on January 5, 1966, at which plans for the Conference were reviewed and approved.

GREECE

The Director visited Greece on January 8-11 consulting with Dr. Sotirios Papastamatis, Dr. Thomas Doxiadis, Director of the Evangelismos Hospital, Dr. Spyros Doxiadis, Chairman of The Queen Anna-Maria Institute of Child Health, and others concerned with medical education in Greece. Dr. Spyros Doxiadis is a member of the five man committee planning the new University in Patras and in this connection visited the AAMC in April where he studied developments in medical education in the United States with a view to introducing certain principles in the new school in Patras that it has not been possible yet to introduce into the older schools in Athens and Salonika.

Pan American Federation of Associations of Medical Schools

Dr. John A. D. Cooper continued to serve as a member of the Administrative Committee of the Pan American Federation. This Committee met, as pointed out above, in Philadelphia in conjunction with the Annual Meeting of the AAMC. The second meeting of the Council of the Federation and the first of its Conferences were scheduled to be convened in Bogota August 22. The Executive Council approved, as the AAMC delegation to these two meetings the following: Drs. George A. Wolf, Jr., Robert C. Berson, John A. D. Cooper, Thomas H. Hunter and Henry van Zile Hyde.

Conference for Foreign Medical Scholars

The Tenth Annual Conference on Medical Education for Foreign Scholars in the

Medical Sciences was held June 19-22 at the University of Minnesota College of Medical Sciences in Minneapolis, Minnesota. The Eleventh Annual Conference will be held June 18-21, 1967 at Duke University in Durham, North Carolina.

Foreign Fellowships Program

The Selection Committee, under the Chairmanship of Dr. Robert A. Moore, awarded Foreign Fellowships to 35 medical students from 85 applications received from 55 medical schools under the program financed by Smith Kline & French Laboratories. Funds were also provided for four professionally qualified wives to accompany their husbands and participate in the program. A list of this year's grant recipients by school and sponsor station is appended to this report.

FOREIGN FELLOWSHIPS PROGRAM

GRANT RECIPIENTS - 1966

<u>STUDENT</u>	<u>SCHOOL</u>	<u>STATION</u>
Bergfalk, Judith F.	Minnesota	India
Blake, Paul A.	Boston	Congo
Bransford, Richard S.	Johns Hopkins	Kenya
Brooker, Reginald J.	Emory	Burundi
Clayton, Paul S. & wife	Florida	Philippines
Cooke, Cynthia W.	Wisconsin	Peru
Dill, Thomas E.	Georgia	Ecuador
Eckert, David W.	Washington, U. of	South Africa
Erickson, Daryl R.	Northwestern	Thailand
Goellner, John R.	Iowa	Congo
Greene, Robert F.	California, S.F.	Tanzania
Haakenson, Robert C. & wife	Louisiana	Ethiopia
Harris, John D.	Pittsburgh	Nepal
Hollingshead, Joel D. & wife	Ohio	Nigeria
Horkheimer, Ronald W.	Marquette	Tanzania
Hunteman, Roy K.	Indiana	India
Irwin, Linda-Jane	Texas/Galveston	Tonga
Korobkin, Melvyn T.	Yale	Uganda
Martin, Lewis K.	Virginia, U. of	Kenya
Martinson, Alice M.	George Washington	Malaysia
McCarthy, Mary D.	Western Reserve	Nigeria
McKay, Judith L.	Tufts	Nigeria
McMullan, John B.	Mississippi	Thailand
Michaelian, Melvyn J.	Southern California	Ivory Coast
Murphy, Garland D.	Arkansas	Kenya
Newkirk, Darrel D.	Tulane	Tanzania
Popp, Albert J.	Albany	Philippines
Purtilo, David T. & wife	North Dakota	Swaziland
Reid, Audrey Y.	Howard	Uganda
Soles, William P.	Cornell	Tanzania
Stahmann, Fred D.	South Dakota	Malagasy
Watkins, Robert P.	Baylor	Ethiopia
Winer, Stephen F.	Wayne State	India
Wright, Elizabeth A.	Kentucky	Israel
Yudin, Sybil A.	SUNY/Syracuse	Brazil

ASSOCIATION OF AMERICAN MEDICAL COLLEGES

INTERNATIONAL PROGRAM

Policy and Program Statement

A. Long Range Goal

The Association of American Medical Colleges (AAMC) is concerned with the development of medical education to the highest academic level consistent with the economic position of each country. The long range goal of its international program is to speed the progress of medicine and of world health through effective application of available U.S. resources in the advancement of medical education, by the facilitation of productive interaction between practitioners of medical science and education in all cultures and places.

The interest of the U.S. medical school in participation in international affairs is in supporting the attainment of the humanitarian objectives of the United States and in widening professional and cultural experience of American medicine. It is viewed as a particularly enriching experience.

B. General Policy

As a professional organization, the AAMC is concerned with the definition of standards of medical education appropriate to the resources and often massive quantitative needs of the different countries, working with professional counterparts in institutions in all parts of the world to assist them in accomplishing their objectives.

As a social organization, the AAMC is concerned with the development of a deeper understanding of man's health needs and with the extension of effective health and medical care to all peoples through the training of health manpower at all levels.

As a national organization, the AAMC supports the attainment of the world objectives of the United States through the provision of advice and services to appropriate U.S. and international agencies.

As an institutional organization of the medical schools of the United States, the AAMC is concerned with assisting its member schools in the development and maintenance of effective international programs.

C. Priorities

In its participation in international programs, the AAMC will concentrate its efforts on programs and projects that appear to promise significant and identifiable results and will give priority attention to the ones that are designed to increase the supply of teachers, particularly programs that aim to build or strengthen training institutions abroad and to increase the supply of paramedical and subprofessional personnel. Assurance will be required that the programs are, in fact wanted by those directly concerned,

consistent with the national health plan, based on dependable indigenous leadership, and mutually beneficial.

D. Immediate Objective

The immediate objective of the AAMC will be to accomplish, through its influence and programs, the following:

1. Establishment within each member school of an organized approach to international activities providing a recognized international focus within the school and a link with other schools and agencies; concerning itself with the development of understanding, interest, and orientation among students, faculty, and foreign fellows with regard to international matters; and stimulating increased participation, within the capacity of the school, in international programs.
2. A substantial increase in the number of cooperative programs between U.S. schools and counterparts abroad.
3. Establishment of a national clearing house on international medical education which will assemble and integrate relevant information from the U.S. medical schools and all other available sources here and abroad; will provide reference services in international medical education; and will distribute information on international medical education in useful form regularly to all interested persons and agencies.
4. Establishment of a system of local and regional programs for the orientation of foreign medical scholars in the principles and practices of American medical education.
5. Federation of national and regional associations devoted to the advancement of medical education to provide mechanisms for regular international interchange of information and to convene at regular intervals world conferences on medical education.
6. Effective application of modern teaching methods and devices in the developing countries through organized programs involving training, distribution of materials, service, and experimentation.
7. Establishment of a coordinated national program to provide appropriate and competent professional training, and cultural orientation to foreign physicians, including the conduct of relevant studies and surveys and the development of reception and orientation centers.
8. A substantial increase in support provided by the U.S. Government and international agencies, through grants, contracts, loans, and services for the development of medical educational institutions in the developing countries, including the provision of the financial support required by U.S. medical schools in carrying out programs contributing to this objective.

REPORT OF THE DIVISION OF BUSINESS AFFAIRS

John L. Craner

ACCOUNTING DEPARTMENT

The program accounting pilot study was instituted during the year 1965-66, as recommended in the Coggeshall Report. The study was accomplished with existing accounting personnel, but increased Tabulating Department expenses were incurred while undertaking this study. The evaluation of the pilot study will be made in early 1967.

Division Directors continue to receive monthly IBM reports to compare expenditures against the budgets established for their Divisions.

Contributors and Grantors continue to receive financial reports consistent with their requirements.

THE JOURNAL OF MEDICAL EDUCATION, ADVERTISING

A new direct mail program was instituted this year. This program resulted in a 4% return (82) of prospects for Journal advertising. The program was necessitated by the lack of a full-time advertising representative on our staff. A recent analysis continues to indicate that probable cost of a full-time Advertising Manager may not be justified.

Income	\$34,341.00
Expense	<u>24,508.00</u>
Excess	\$ 9,833.00

All income in excess of expense is applied to support of the Journal.

MEMBERSHIP AND SUBSCRIPTIONS

New procedures have been instituted this year in an attempt to process the work load of this department without increasing personnel.

In the past two years the Membership and Subscription Department has assumed responsibility for the following additional functions:

Distribution of Publications:

All publications except the Washington Bulletin
Datagram Subscribers

New Addressograph Lists:

Number of Plates

Individual Members who are Pre-Med Advisors	212	
Datagram Mailings	320	
Washington Bulletin	147	
Foreign Medical Schools	519	
Council of Teaching Hospitals	<u>231</u>	1,429

Present Addressograph Lists:

Journal Distribution	6,300	
Nursing Schools	820	
Junior and Senior Colleges	2,000	
Advertisers	1,700	
Department Heads	1,725	
Miscellaneous	<u>2,300</u>	<u>14,845</u>
		<u>16,274</u>

This department continues to maintain the standard aging policy for Individual Memberships (July 1 through June 30 of each year). However, to give an up-to-date report, October 1 is used in the following tables.

October 1, 1966	Individual Membership	3187	
October 1, 1965	Individual Membership	<u>3248</u>	
	Net Decrease:		61
October 1, 1966	Sustaining Membership	23	
October 1, 1965	Sustaining Membership	<u>26</u>	
	Net Decrease:		3
October 1, 1966	Contributing Membership	19	
October 1, 1965	Contributing Membership	<u>27</u>	
	Net Decrease:		8

Subscriptions to The Journal of Medical Education are also reported as of October 1, 1966.

Paid subscriptions to The Journal of Medical Education:

October 1, 1966	1,523	
October 1, 1965	<u>1,466</u>	
	Net Increase:	57

In order to meet the requirements of the U.S. Post Office regarding zip codes, it has been necessary for us to study and re-evaluate our entire record and addressograph system.

We are now in the process of zip coding all domestic addressograph lists, approximately 12,000 plates. This involves a manual search, recording and graphotyping on each plate.

A study is also underway for new methods and procedures that may enable us to revise the basic structure of this department.

DIRECTORY

The new format instituted in the 1965-66 edition resulted in a decrease of the personnel required for editing.

The 1966-67 edition will be published shortly after the 1966 Annual Meeting. This will enable us to incorporate the names of the new AAMC officers and committee members.

MAILING AND REPRODUCTION

An investigation has been undertaken to determine the feasibility of locating this department out of the headquarters building in order to release space for other Divisions. The M & R Department has met the requirements of the Association this year without the addition of any major equipment or personnel.

STATISTICS:

	<u>1965-66</u>	<u>1964-65</u>	
Number of Jobs Produced	1,100	958	
Amount Charged	\$108,698	\$109,608	
Expense	109,588	104,312	
Excess	<u>\$ (890)</u>	<u>\$ 5,296</u>	
Temporary Help	\$ 4,304	\$ 5,383	Decrease <u>\$1,079</u>
Overtime	\$ 5,518	\$ 6,371	Decrease \$ <u>853</u>

In accordance with recommendations from the AAMC auditors, \$4,000.00 was applied to Pioneer Leasing Company in order to retire the lease on the equipment at an earlier rate.

It should be noted that even though M & R handled 142 more jobs during the 1965-66 period than the previous year, the dollar amount charged to various budgets was almost \$1,000.00 less. This is due to the fact that:

1. Procedures are under constant review to effect more economical methods of operation.

2. A program to educate the various divisions and department personnel on the high cost of crash printing jobs has met with some success.

These two programs resulted in a reduction in expenditures for temporary help in the amount of \$1,079.00 and a similar reduction in expenditures for overtime in the amount of \$853.00.

This department continues to investigate methods for further cost-reduction

PUBLICATIONS

The storage of all publications has been consolidated into one physical location in order to comply with the recommendations of Ernst & Ernst.

New procedures have been instituted to maintain closer control of the publications inventory.

FILM LIBRARY

The Film Library has been transferred to the American Medical Association by direction of the Executive Committee. The film handling equipment has been sold.

MEETINGS

The Division continues to handle the physical arrangements for the Annual Meeting and most other meetings. This consists of site inspection of the proposed cities and available hotel facilities. A report is then made to the Executive Council. This division establishes liaison with the convention bureau and the hotel selected and sets up and supervises the meeting rooms. The Division has no control over sleeping rooms.

EXHIBITS

The AAMC Exhibit has been displayed at:

1. Annual Meeting of the American Medical Association
2. 1965 Annual Meeting of the AAMC
3. AMA Annual Congress on Medical Education

DATA PROCESSING DEPARTMENT

The department continues to process the regular reports and studies; Applicant Study, Faculty Salary Study, Medical School Operating Costs, National

Intern Matching Programs, Accomplishment Reports to Undergraduate Schools and to the Medical Schools, the Competitive School Report and various in-school reports.

New projects added during the current year include a Residency Matching Program, Program Accounting, an expanded Faculty Roster with counts of all professional and supporting personnel in the medical schools, and the Women in Medicine Study.

The Faculty Roster information will involve about 200,000 cards to prepare the up-dated forms. This volume of cards has made the use of a computer imperative to provide the statistical analysis desired.

The applicant Study indicates an increase in the number of applicants to the medical schools. The 87,111 applications for the 1965 year is a 3% increase over the previous year.

MISCELLANEOUS ACTIVITIES

NATIONAL INTERN MATCHING PROGRAM

The National Intern Matching Program's accounting function is performed by this Division. Association procedures are used and the books are audited yearly by NIMP auditors.

BUILDING SERVICES

This Division continues to supervise the cleaning and maintenance requirements of the Headquarters office and the Annex.

In spite of our overcrowded conditions we continue to meet the Evanston Fire Department's safety regulations.

SCHOOL VISITATIONS

That portion of the school visitations program formerly handled by the Division of Business Affairs has been transferred to the office of the Associate Director.

COUNCIL OF TEACHING HOSPITALS

Under the direction of the Executive Committee of the Council of Teaching Hospitals and the Executive Director of the Association of American Medical Colleges, the Division of Business Affairs assisted in the development and initiated and supervised procedures for the administrative functions of the Council during the preliminary organizational stages which included printing the application blank, typing letters of invitation, invoicing, record keeping,

setting up and maintaining the files. The Division has prepared reports for the Executive Council Meetings of AAMC and Executive Committee meetings of COTH. Addressograph plates have been cut and a mailing list maintained for members of the Council. All functions of COTH previously handled by this department have been transferred to the Washington office except the accounting activity.

REPORT OF THE
COMMITTEE ON MEDICAL EDUCATION FOR NATIONAL DEFENSE

WILLIAM S. STONE, M.D.
Chairman

Upon the retirement of Captain Bennett F. Avery, M.C., U.S.N., the MEND Committee desires to express its appreciation and commend Captain Avery for his work as National Coordinator. Captain Avery's imaginative work and enthusiasm has been one of the major reasons for the MEND program developing from an initial program in five schools to its present level in which all medical schools are participating.

We wish to express our appreciation to Mr. Ralph Hirsch for the able way he handled the administrative aspects of the MEND program during his tenure with the Navy and to wish him much success in his new duties with the U.S. Public Health Service.

Through the MEND activities medical school faculty are able to keep up to date on medical data and Armed Force experience in the handling of casualties in disaster situations, as well as those professional programs essential for the medical programs of the Armed Forces. The orientation of young faculty and the refresher programs of value to experienced faculty are considered to have great value in the medical education programs needed for national defense.

We wish to welcome Lt. Colonel David M. Tormey as National Coordinator and Mr. Charles W. Pendergraft as Administrative Officer in the National Coordinator's office.

We further desire to express the appreciation for the great support given the MEND program by Rear Admiral William N. New, M.C., U.S.N. Admiral New's able handling of the MEND affairs in the Office of the Secretary of Defense is largely responsible for the recognition of this program at Department of Defense level and the development of a more stable program of financing these activities. We wish to extend our best wishes to Admiral New in his assignment to other duties and to welcome Brigadier General Bedwell, M.C., U.S. Air Force as Admiral New's successor.

During the 1965-66 year the attendance of faculty at MEND symposium and courses was as follows:

<u>Attendance</u>	<u>FY 64</u>	<u>FY 65</u>	<u>FY 66</u>
Symposia	395	553	965
Short Courses	114	68	187
Mass Casualty	209	211	230

The instructional program for faculty during 1965-66 was excellent and Colonel Tormey and Mr. Pendergraft are to be congratulated on the excellent content and arrangements.

Plans for 1966-67

1. Symposia

- A. New field for new Doctors - October '66, Washington, D C.
- B. Trauma: From battle field to highway - December '66, Washington, D.C.
- C. Aerospace Medicine - February '67, San Antonio, Texas
- D. Infectious Diseases: A Global Perspective - April '67, Atlanta, Ga.

2. Short Courses

239 spaces in 14 courses - places to be announced.

3. Mass Casualty Course, San Antonio, Texas (300 spaces in two courses)

4. Coordinator's Conference, Puerto Rico - January '67

Theme - Health Manpower

Deferment of medical students and essential faculty

The MEND Committee through its Chairman has kept careful check on national policies in regard to deferment. In recent months the dissatisfaction in some areas with deferment policies has lead some local boards to use their prerogative on questioning the deferment of medical students and essential faculty. While the national policy has not changed local board actions are leading to more appeals on reclassification, and there is a need for a statement of position on the deferment of medical students and essential faculty at the highest U.S. Governmental manpower level.

William S. Stone, M.D.

Chairman

Granville A. Bennett, M.D.

John L. Caughey, Jr., M.D.

Harold Hixson

Clayton G. Loosli, M.D.

Stanley W. Olson, M.D.

JOINT REPORT OF THE EDITOR AND EDITORIAL BOARD
THE JOURNAL OF MEDICAL EDUCATION

John A. D. Cooper, M. D., Ph. D.

The Journal of Medical Education published 1,781 pages of editorial material (including supplements) for the period from July 1, 1965, to June 30, 1966.

SPECIAL ISSUES

March, 1966: Proceedings of the Fourth Annual Conference on Research in Medical Education.

SUPPLEMENTS

September, 1965: Medical Schools and Hospitals: Interdependence for Education and Service.

October, 1965: Research, Graduate Education, and Postdoctoral Training in Departments of Preventive Medicine: Report of the Conference of the Association of Teachers of Preventive Medicine, Saratoga Springs, New York, June 10-14, 1963.

November, 1965: Medical School--Teaching Hospital Relations: Report of the Second Administrative Institute. Report of the Twelfth AAMC Institute, Association of American Medical Colleges, Miami Beach, Florida, December 6-9, 1964.

EDITORIAL BOARD AND STAFF

Dr. John A. D. Cooper continued as Editor of The Journal. Assistant Editors are Mrs. Rosemarie D. Hensel and Miss Carol A. Spears, who was appointed Assistant Editor October 1, 1965. Mrs. Leah Simon was appointed secretary on June 23, 1966, to replace Mrs. Sue Johns who resigned June 30, 1966.

In accordance with the Editorial Board's decision to extend the Board Members' terms of service from three years to five years, Drs. John J. Conger, Leonard D. Fenninger, and Peter V. Lee were appointed to serve five-year terms beginning December 1, 1965, to replace Drs. George Harrell, William Hubbard, and Kenneth Penrod, whose Board duties terminated as of November 30, 1965. Drs. Gordon W. Douglas and Peter F. Regan were appointed to five-year terms on the Board beginning May 1, 1966. Dr. C. Arden Miller resigned his Board position as of June 30, 1966. Members of the Editorial Board continue their invaluable efforts to maintain the high standards of The Journal.

ANNUAL REPORT 1965-66
October 1, 1966

ASSOCIATION OF AMERICAN MEDICAL COLLEGES
COUNCIL OF TEACHING HOSPITALS

It is interesting to note retrospectively, that the original Teaching Hospital Section first met on October 10-11, 1958, at the Hotel Sheraton, Philadelphia, Pennsylvania. It was at the same hotel in October, 1965, that the institutional members of the Association of American Medical Colleges approved the establishment of the Council of Teaching Hospitals.

The year of 1965-66 has been devoted largely to the organizational phases of the new Council, now 320 member hospitals. In that time, hospitals designated by Deans of medical schools as one type of membership in the Council now numbers 230. Of this number (230), 81 hospital Chief Administrative Officers represent hospitals designated as voting members by the Dean of each medical school. Ninety hospitals became members as qualifying under the provision of approved internship programs and full residencies in three of the following five disciplines: Medicine, Surgery, Ob-Gyn, Pediatrics, Psychiatry. At the Annual Meeting of the Council, all members vote for officers and members of the Council Executive Committee. Voting on all other matters is limited to the one representative hospital administrator designated by each medical school. In order to give broad representation, the hospital administrator designated by the medical school is urged to consult with other Teaching Hospital Council members in his geographic region.

Enthusiasm for the Council of Teaching Hospitals has been observed country-wide and manifested specifically in correspondence, other communications with the COTH office and the prompt submission of a large number of applications for membership.

During the 1965-66 year, the Executive Committee of the Council met four times to review thoroughly each application for membership and to discuss other business in relation to membership as well as Council business generally.

The 320 hospitals accepted into membership were presented to the Executive Council of the AAMC at their meeting September 13, 1966. The Executive Council approved unanimously the membership list.

A well attended informational meeting of the general membership of the COTH was held in Chicago at the Hall of States of the American Hospital Association on Monday, August 29, 1966. The meeting call was issued quickly in response to membership request. The purpose was to establish a forum for discussion of certain aspects of the Medicare Program as those aspects relate to "Teaching Hospitals." The program included comments as to the status of reimbursement for General Clinical Research Centers. No definitive results were anticipated for the meeting was planned as a discussion session. Discussion was very active including effective comments from Harold L. Bost, Ph.D., Deputy Director, Bureau of Health Insurance, Social Security Administration.

The initiation of a full-time staff was accomplished September 1, 1966, with the appointment of the undersigned as Director of the COTH. Effective that day also, Miss Mary L. Doty joined the AAMC as secretary to the COTH.

As a result of the capable leadership of Russell A. Nelson, M.D., Chairman, the very effective work of Lad F. Grapski, Secretary, and the helpful follow-through of the Evanston staff of the AAMC, files on each hospital member are now available. As of this report, the files are in transit from the Evanston to the Washington Office of the AAMC (1501 New Hampshire Avenue, N. W., Washington, D.C. 20036, AC 202/232-5870) where the headquarters of the COTH is located.

It is now planned to use a computer resource for the various roster types which have been requested by members and of interest to a number of public and voluntary agencies in Washington. It will be approximately two to three months before the mechanics of establishing rosters, statistical information and the like are completed.

Following the establishment of "administrative housekeeping routine," emphasis will be placed on program activity, designation of priority for the element of the program, appointment of standing committees and recruitment of staff to insure a well developed, carefully implemented, and vigorously sustained program to meet the needs of membership. Priority order for program would be accomplished through evaluation and decision by the Executive Committee of the Council and the concurrence of the Executive Council of the AAMC.

Matthew F. McNulty, Jr.
Director
Council of Teaching Hospitals

NOTES

The Association of American Medical Colleges (AAMC) was organized in 1895, with the appointment of the first president as Secretary of the AAMC. Executive Director Dr. Robert L. Long joined the AAMC as Secretary in 1975.

As a result of the ongoing efforts of Harold A. Nelson, M.D., Secretary, the staff of the AAMC, the staff of the AAMC, and the national office, the AAMC has been able to provide a wide range of services to its members. As of this report, the AAMC is in receipt from the Secretary of the AAMC of the AAMC's financial statements for the year 1975. The AAMC's financial statements are available to all members of the AAMC.

The AAMC is committed to providing a high quality of service to its members and to the public. The AAMC's financial statements are available to all members of the AAMC. The AAMC's financial statements are available to all members of the AAMC.

The AAMC's financial statements are available to all members of the AAMC. The AAMC's financial statements are available to all members of the AAMC. The AAMC's financial statements are available to all members of the AAMC.

Robert L. Long, Secretary
AAMC
Washington, D.C.