ASSOCIATION OF AMERICAN MEDICAL COLLEGES SUITE 200. ONE DUPONT CIRCLE, N.W., WASHINGTON, D.C. 20036

October 1, 1970

# TO: $\quad$ Council of Academic Societies Official Representatives 

FROM: D. C. Tosteson, Chairman

SUBJECT: Annual Business Meeting October 31, 1970

Enclosed are (1) Agenda for the Business Meeting of the Council of Academic Societies to be held October 31, 1970, from 3:30 5:00 p.m., Hotel Biltmore, Los Angeles, and (2) a list of organizations recommended for membership.

Presiding: D.C. Tosteson, Chairman

GENERAL SESSION
2:00 p.m. Report \& Recommendations
Committee on Potential Educational Services From a National Biomedical Communications Network Eugene A. Stead
Report \& Recommendations
Conmittee on Biomedical Research Policy Louis G. Welt
3:15 p.m. Adjournment
BUSINESS MEETING
3:30 p.m. Call to Order
Roll Call Harry A. Feldman
Consideration of Minutes of 1969Annual Meeting
Report of the President John A. D. Cooper
Report of the Executive Committee D. C. Tosteson
Report of the Bylaws CommitteeSam L. Clark, Jr.
Recommendations for MembershipWilliam B. Weil, Jr.
Other Committee ReportsGraduate Medical EducationExpansion of Medical EducationNominating CommitteeMedicarePhysicians' Assistants
Thomas D. Kinney
James V. WarrenD. C. TostesonJonathan E. RhoadsE. Harvey Estes
Next Meeting
Other Business
5:00 p.m. Adjournment

The Executive Conmittee of the Council of Academic Societies recommends that the following organizations be nominated for membership*:<br>1. American Academy of Allergy<br>2. American Academy of Ophthalmology and Otolaryngology<br>3. American Academy of Pediatrics<br>4. American Association for Thoracic Surgery<br>5. American College of Obstetricians and Gynecologists<br>6. American College of Physicians<br>7. American College of Surgeons<br>8. American Gastroenterological Association<br>9. American Society for Clinical Investigation, Inc.<br>10. Association for Academic Surgery<br>11. The Endocrine Society<br>12. Plastic Surgery Research Council<br>13. Society for Pediatric Research<br>14. Southern Society for Clinical Investigation

[^0]Section 4. In the future, additional societies will be nominated as constituent socicties of the Council of Academic Societies by vote of two thirds of the members present at a duly constituted meeting of the Council of Academic Societies, provided that notice of the proposed nominations shall have been circulated to the members at least one month in advance of the mecting. The nomination of new constituent societies, after being passed upon by the Council of Academic Societies, will be sent to the Executive Council of the Association of American Medical Colleges and to the Institutional Membership of the Association of American Medical Colleges for ratification.

October 9, 1970

TO: Council of Academic Societies<br>FROM: D. C. Tosteson, Chairman<br>SUBJECT: CAS Annual Meeting October 30-31, 1970

The purposes of this letter are to bring you up-to-date on the activities of the Council of Academic Societies, and to urge you to attend the annual meeting of the CAS which will occur on October 30-31, 1970 in the Biltmore Hotel in Los Angeles in conjunction with meetings of the other AAMC Councils and with the Assembly of the AAMC.

Enclosed are (1) a summary of the activities of the CAS during the period November 1969 to November 1970, (2) a list of the membership of several of the key committees of the CAS and the AAMC Executive Council, and (3) a synopsis of the program of the CAS Los Angeles meetings. Please communicate the information in these enclosures to the members of your Society.

I particularly hope that you will be able to join us in los Angeles. Many matters of importance to the future of the CAS, the AAMC, and biomedical education and research in the U. S. will be considered. The CAS is making an increasingly important contribution to the growing effectiveness of the AAMC in helping further the goals and finding solutions to the problems facing academic medicine and its faculties. I urge you to exercise your franchise and to exert your influence in support of this effort to develop more comprehensive and coherent leadership for American academic medicine.

[^1]The programs of the Council of Academic Societies can be grouped in three closely related categories: biomedical research, education leading to the production of physicians and other medical manpower, and the delivery of health services. These programs involve action both of groups within the CAS and also of conmittees of the Executive Council of the AAMC on which representatives from the CAS serve.

During the past year, the CAS has increased the intensity of effort in the direction of formulation and implementation of biomedical research policy. Highlights include the following events.

The program of the annual meeting in 1969 was devoted to the role of basic science in medical education.

A special meeting on biomedical research policy was held in Chicago in February, 1970. The group heard talks by Dr. Cooper, President of the AAMC, Drs. Berliner and Endicott from NIH, and Mr. William Carey, formerly of the Bureau of the Budget.

At the February meeting, the Biomedical Research Policy Conmittee (BRPC) of CAS was formed, and charged with the responsibility to recommend a policy for support of biomedical research in the U.S. and procedures to implement such a policy. This Committee consists of representatives of most of the biomedical disciplines, and is chaired by Dr. Louis Welt.

The BRPC has met four times since February. It has consulted with such leaders as Dr. L. Du Bridge, at that time Science Advisor to President Nixon, Dr. R. Egeberg, Assistant Secretary for Health, and Dr. J. Shannon, former Director of NIH.

On behalf of the BRPC, the AAMC staff conducted a survey of all U.S. medical schools on the consequences of the proposed cessation of research training grants. The results of this survey together with a first draft of the BRPC report will be presented at the 1970 annual meeting in Los Angeles.

The Chairman of the CAS for 1970, Dr. Tosteson, participated with other members of the Executive Committee of the Executive Council of the AAMC in the preparation of testimony for the Congressional hearings on the 1971 NIH budget. Dr. Cooper stated forcefully before both House and Senate Committees the AAMC position in favor of increased support of biomedical research.
luring 1970, the CAS was involved in many projects which relate to medical education.

The Cormittee on a National Communication Network for medical education continued its work supported by a contract with the National Library of Medicine (NLM). The purpose of this project is to inform NLM planners about needs of medical education which could be met by such a network.

The Committee on Graduate Medical Education continued to work toward a re-evaluation of the role of the university in graduate medical education. The proceedings of the CAS sponsored Conference in Graduate Medical Education edited by Drs. Smythe and Kinney were published.

The Committee on Physicians Assistants has worked toward the development of adequate curriculum and accreditation standards for such training programs.

Dr . D. Sabiston represented the CAS on an ad hoc Committee on Increased Medical Manpower of the Executive Council of the AAMC. After careful study and deliberation, this Committee has framed recommendations about future levels of production of physicians in the U.S. The report will be made public at the annual meeting in Los Angeles.

The 1970 annual meeting of the CAS includes a program on the education of the 'primary' physician.

In the area of health services, CAS representative R. Chase chaired an AAMC Executivc Council ad hoc Committee on Medicare. This Committee, with the able assistance of Mr. J. Danielson, Head of the Department of Health Services of the AAMC staff, spent many hours working with representatives of the Social Security Administration on developing more equitable policies for administration of Part B Medicare payments to physicians working in academic medical centers.

## Thursday, October 29

5:30-7:00 pm $\quad \begin{aligned} & \text { Department of Academic Affairs Reception } \\ & \text { Gold Room }\end{aligned}$

Friday, October 30

| 2:00-5:00 pm |  |
| :---: | :--- |
| Renaissance Room |  |
| $2: 00$ | CAS General Session <br> Theme: EDUCATION OF MANPOWER FOR PRIMARY HEALTH CARE |
| $2: 15$ | The Hospital's Needs for Primary Heal th Care Personnel <br> H. Robert Cathcart |
| $2: 30$ | Needs of the General Practitioner in an Urban Setting <br> Joseph T. Ainsworth, M.D. |
| Needs from the Viewpoint of an Internist in an Urban, <br> Non-Medical School Setting <br> Donald E. Saunders, Jr., M.D. |  |
| $3: 45$ | Needs of a Large Pre-Paid Health Plan <br> Eugene Vayda, M.D. |
| $3: 15$ | Needs of Federally Sponsored Community Health Centers <br> Joyce Lashof, M.D. |
| $3: 30$ | Position of the Medical Schools <br> James V. Warren, M.D. |
| Intermission |  |

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\text { Saturday, October } 31
$$

2:00-3:15 pm Music Room

CAS General Session
Preliminary Report \& Recommendations Committee on Biomedical Research Policy Louis G. Welt, M.D.

CAS Business Meeting

## Executive Committee

Chairman
Robert B. Howard
Chairman-Elect
William G. Anlyan
Chairman, Council of Academic
Societies
D. C. Tosteson

Chairman, Council of Deans Charles C. Sprague

Chairman, Council of Teaching Hospitals
T. Stewart Hamilton

President
John A. D. Cooper
Secretary-Treasurer
T. Stewart Hamilton

Carleton B. Chapman

Executive Council
Chairman
Robert B. Howard
Chairman-Elect
William G. Anlyan
President
John A. D. Cooper
Council Representatives
Council of Academic Societies
D. C. Tosteson

James V. Warren
Jonathan E. Rhoads
Thomas D. Kinney

Council of Deans
Charles C. Sprague Ralph J. Cazort Carleton B. Chapman Kenneth R. Crispell Merlin K. DuVal Robert H. Felix William F. Maloney Sherman M. Mellinkoff David E. Rogers

Council of Teaching Hospitals T. Stewart Hamilton Russell A. Nelson Roy S. Rambeck

## Council of Academic Societies Executive Conmittee

## Chairman

D. C. Tosteson

Chairman-Elect<br>James V. Warren

## Secretary

Harry A. Feldman
Sam L. Clark, Jr. Patrick J. Fitzgerald
Charles Gregory Thomas D. Kinney Jonathan E. Rhoads
William B. Weil, Jr.

CAS Biomedical Conmunications Network

Chai man
Eugene A. Stead
Jack W. Cole
William G. Cooper
Ronald Estabrook
Daniel S. Fleisher
William G. Harless
S. Richardson Hill, Jr.

Richard Judge
Donald W. King
Ernst Knobil
James A. Merrill
Herluf V. Olsen, Jr.
William Schwartz
Warner Slack

CAS Biomedical Research Policy
Chairman
Louis G. Welt
W. Gerald Austen

Robert M. Berne
Robert E. Cooke
Herman N. Eisen
Don W. Fawcett
Donald J. Hanahan
Bernard C. Holland
Henry S. Kaplan
A. Brian Little

Peter Nowell
Robert G. Petersdorf
Frederick E. Shideman

CAS Nominating Committee
Chairman
Charles A. Janeway
Sam L. Clark, Jr.
Charles F. Gregory
Thomas D. Kinney
Eugene A. Stead
D. C. Tosteson

Louis G. Welt

## Expansion of Medical Education

## Chairman

Robert B. Howard
Edward J. Connors
Christopher C. Fordham, III
David B. Sabiston, Jr.
James A. Shannon
Charles C. Sprague
William H. Stewart
James V. Warren
Meredith Wilson

## Financing Medical Education

Chairman
Russell A. Nelson
Robert A. Chase
Leonard W. Cronkhite, Jr.
William D. Mayer
Robert G. Petersdorf
Charles C. Sprague
William H. Stewart
Meredith Wilson

## CAS Bylaws

Chairman
Sam L. Clark, Jr.
Patrick J. Fitzgerald
Charles Gregory
John I. Nurnberger
James V. Warren
Ralph J. Wedgwood

EDucation

October 16, 1970

TO: CAS Executive Committee
Dr. D. C. Tosteson
Dr. James V. Warren
Dr. Sam L. Clark, Jr.
Dr. Patrick J. Fitzgerald
Dr. Charles F. Gregory
Dr. Thomas D. Kinney
Dr. Harry A. Feldman
Dr. Jonathan E. Rhoads
Dr. William B. Weil, Jr.
FROM: Mary H. Littlemeyer
SUBJECT: Annual Meeting
October 29-November 1, 1970

Enclosed are (1) a revised calendar of activities and (2) an expense reimbursement form with self-addressed envelope.

MHL:lew

Enclosures
cc: Mr. Amrine
Mrs. Bucci
Dr. Cooper
Mr. Danielson
Mr. Morey
Mr . Murtaugh
Mr. Thomas
Dr. Wilson

Thursday, October 29

1:00 pm - 3:00 pm

3:00 pm - 5:30 pm
5:30 pm - 7:00 pm
8:00 pm

Friday, October 30
8:30 am - 12:30 pm 12:30 pm - 2:00 pm 2:00 pm - 5:00 pm 5:00 pm - 6:00 pm 6:00 pm - 7:00 pm

7:00 pm - 11:00 pm

Saturday, October 31
8:30 am - 12:30 pm
2:00 pm - 5:30 pm

5:30 pm - 6:00 pm
6:00 pm - 7:30 pm
7:30 pm - 9:00 pm

Sunday, November 1
8:30 am - 12:30 pm
2:00 pm - 5:00 pm

Dr. Warren's Suite

Room 2341
Gold Room
Outside Hotel

Biltmore Bowl
Dr. Warren's Suite
Renaissance Room
Biltmore Bowl
Dr. Tosteson's Suite

Florentine Room

Ad Hoc Planning Group - February, 1971 Meeting, Luncheon Meeting (Drs. Clark, Fitzgerald, Weil, and Warren)

CAS Executive Committee Meeting
Department of Academic Affairs Reception
CAS Executive Committee Dinner-Wives invited

## AAMC Plenary Session

CAS Speakers Panel Luncheon
CAS General Session
AAMC Assembly
Cocktails (Executive Committee \& Biomedical
Research Policy Committee) Research Policy Committee)

BRP Committee Dinner Meeting (\& Drs. Tosteson \& Warren)

AAMC Plenary Session
CAS General Session (2:00-3:15) and
Business Meeting (3:30-5:30)
New CAS Executive Committee
Chairman's Reception
AAMC Annual Banquet

AAMC Plenary Session
AAMC Assembly

# ASSOCIATION OF AMERICAN MEDICAL COLLEGES <br> OOUNCIL OF ACADEMIC SOCIETIES <br> Annual Meeting <br> The Biltmore Hotel <br> Los Angeles, California <br> October 31, 1970 <br> 2-5p.m. <br> Music Room 

Presiding: D. C. Tosteson, Chairman

GENERAL SESSION

| 2:00 p.m. | Report \& Recommendations <br> Committee on Potential Educational <br> Services From a National Biomedical <br> Communications Network | Eugene A. Stead |
| :--- | :--- | :--- |
|  | Report \& Recommendations <br> Committee on Biomedical Research Policy | Louis G. Welt |

3:15 p.m. Adjournment

## BUSINESS MEETING

3:30 p.m. Call to Order
Roll Call Harry A. Feldman
Consideration of Minutes of 1969 Annual Meeting

Report of the Executive Cormittee D. C. Tosteson
Report of the Bylaws Committee
Sam L. Clark, Jr.
Recommendations for Membership
William B. Weil, Jr.
Other Committee Reports
Expansion of Medical Education James V. Warren
Graduate Medical Education
Medicare
Nominating Cormittee Thomas D. Kinney

Physicians' Assistants
D. C. Tosteson

Plans for February, 1971 Meeting
Other Business
5:00 p.m. Adjournment

Minutes<br>Council of Academic Societies 1969 Annual Meeting

## Meeting of the Council of Academic Societies

## Plenary Sessions

The theme of the November 1, 1969 meeting of the Council of Academic Societies was "Which Basic Science Departments in the Medical School?"

Dr. Jonathan E. Rhoads, Professor and Chairman, Department of Surgery, University of Pennsylvania School of Medicine, presided over a meeting marked by an attendance of approximately 300. Dr. Archic S. Duncan, Executive Dean and Professor of Medical Education, University of Edinburgh Medical School, spoke on "Varying Patterns in the United Kingdom." He emphasized that, with the exception of the situation in London, basic science departments are a vital link between university and medical school. In his opinion, it would be to the disadvantage of both to change the usual pattern. In the twelve hospital schools associated with the University of London, the basic science units are identified only with the medical school.

Dr. John W. Corcoran, Professor and
Chairman, Department of Biochemistry, Northwestern University Medical School, discussed "Basic Science: The Skeleton of Medical Education." His presentation emphasized that not only the knowledge but the attitudes of basic science were vitally necessary to sound medical education. He concluded that it would be most unfortunate for biochemistry to weaken its identification with the medical school.

Dr. William B. Weil, Jr., Professor and Chairman, Department of Human Development, Michigan State University College of Human Medicine, addressed "The Dilemma of Medical Curriculum Innovation for the University Science Departments." He compared the relative advantages and disadvantages of universitywide departments with those that are medical school based. He said that the advantages of one system are the disadvantages of the other. Both have real strengths and are readily assimilable in the current patterns of medical education.

Dr. Eugene Braunwald, Professor and Chairman, Department of Medicine, University of California, San Diego School of Medicine, spoke on "The Clinical Depart-
ment as a Scientific Critical Mass.' In his paper, the curriculum at San Diego with the absorption of pharmacology and physiology by medicine and of anatomy and microbiology by surgery and pathology, as well as the addition of the strengths of many other university departments to the medical school, were set forth.

Dr. Hans Popper, Dean for Academic Affairs and Professor and Chairman, Department of Pathology, Mount Sinai School of Medicine, supported "The Hospital as a Desirable Base for Medical Education." Dr. Popper's paper concluded that the university is the priper base for medical education. The experience at Mount Sinai has been satisfactory only because $0_{i}^{-}$particular conditions there. Only an unusual hospital can serve as the primary base for medical education.

Dr. Stuart Bondurant, Professor and Chairman, Department of Medicine, Albany Medical College, discussed "The University Medical School-Fact or Illusion?" His paper concluded strongly that the university was the only satisfactory base for medical education.

Robert Cerza, fourth-year student, Northwestern University School of Medicine, reported on "The Student's Demand for Relevance."

Dr. Daniel C. Tosteson, Professor and Chairman, Department of Physiology and Pharmacology, Duke University School of Medicine, reemphasized "The Relevance of Basic Science to Medicine."

On Sunday afternoon, the theme of the program was centered around a discussion of "The Full-Time System Revisited."

Dr. Harry A. Feldman, Professor and Chairman, Department of Preventive Medicine, SUNY-Upstate Medical Center, chaired a meeting attended by approximately 250 .

Dr. Richard H. Egdahl, Associate Dean for Hospital Relations and Professor and Chairman, Department of Surgery, Boston University School of Medicine, discussed the
"Advantages of a Geographic Full-Time System" without rigid controls.

Dr. Richard V. Ebert, Professor and Chairman, Department of Medicine, University of

Minnesota Medical School, described the "Advantages and Disadvantages of a Mixed System." He stated that the advantages inherent in the flexibility of a mixed system, such as that at Minnesota, are offset by its inherent instability and some of the tensions involved.

Dr. Gene H. Stollerman, Professor and Chairman, Department of Medicine, University of Tennessee College of Medicine, spoke on "A Changing Role for the City Hospital." He emphasized the provision of emergency and special care in a group practice type arrangement.

Dr. Walter F. Ballinger, Professor and Chairman, Department of Surgery, Washington University School of Medicine, St. Louis, discussed his school's experience with multiple reviews of its strict full-time system in a presentation entitled "Reasons for Changing a System." In effect for almost fifty years, the system was reviewed two years ago. The conclusion of the faculty was overwhelmingly that there should be a nucleus of full-time, full-salaried physicians in all departments. The successful administration of this system demands flexibility in its application.

The meeting ended with a panel discussion and questions from the floor.

## Annual Business Meeting

The meeting was called to order by Dr. Jonathan E. Rhoads at 3:30 P.M. on November 2, 1969.

Dr. Rhoads read the report of the Executive Committec, and Dr. Harry A. Feldman presented the report of the Secretary-Treasurer.

## TRAINING OF PHYSICLANS' ASSISTANTS

Dr. Eugene A. Stead spoke on the desirability of setting standards for schools producing physicians' assistants and requested that the CAS take an active role in these educational programs. He pointed out the need for some standard curriculum and accreditation or review procedures. It was recommended that a task force be appointed to study these programs and bring recommendations on what should be done to the next CAS meeting in February, 1970. A motion embodying this recommendation was made, seconded, and passed.

FEDERAL SUPPORT FOR BIOMEDICAL RESEARCH Dr. Daniel C. Tosteson described the role of the Council of Academic Societies in seeking federal support for biomedical research. He gave an account of the testimony delivered before appropriate committees of the Congress
and described correspondence suggesting the appearance of many interested biomedical research workers in Washington seeking con.finued support of this important national activity. This matter had been resolved with the suggestion that such efforts might be better focused through the professional organizations of men involved in biomedical research as well as through the Association of American Medical Colleges.

A recommendation was made requesting that the AAMC staff elaborate information on the effects of decreased federal support for biomedical research and education on fulltime faculty staffing. This request received the support of the members present.

## FACULTY SALARY STUDY

The rapid increase in salaries in the medical schools and the relation of this inflationary trend to federal funding was also discussed. The recommendation of the Council of Deans that the federally derived portion of the salary of faculty members be based on a percentage of effort and a nationally determined median salary level for strict full-time faculty in medical schools was reviewed. The Council of Teaching Hospitals had suggested that this matter be reviewed by representatives of the three Councils. The Council of Deans has already agreed to such a course. It was the recommendation of the Executive Committee of the CAS tiat "policy concerning the federal portion of faculty salaries be reviewed by a Conference Committee made up of two or three representatives of each of the Councils. The final recommendations of this Committee
are to be sent back to the Councils before they are passed upon by the Assembly." A motion eubodying this recommendation was. made, seconded, and passed.

## graduate medical education

Dr. Thomas D. Kinney reported that the Standing Committee on Graduate Medical Education had met three times and had drafted a paper describing the corporate structure of graduate medical education and some of the implications of it for the university. The committee recommended that this paper be reviewed before being circulated in light of the experience with institutionwide surveys now scheduled for four academic medical centers. This review will be embodied in a subsequent report of the committee to be made to the CAS in February, 1970. This recommendation was accepted.

## MEMBERSHIP

The Executive Committee reported that it had reviewed applications from ten socicties and recommended the following seven for membership: American Gastroenterological Association; American Association for Thoracic Surgery; Association of University Professors of Neurology; Association of Academic Physiatrists; Association of Anatomy Chairmen; Association for Medical School Pharmacology; and Society of Academic Anesthesia Chairmen, Inc. A written ballot was distributed, and five of the above societies were elected by large majorities and two by only small majorities.

## election of officers and executive COMmITtEE MEMBERS

The report of the Nominating Committee was submitted to the membership in the form of a written ballot to fill the expired terms.

Officers.-Elected as officers for the coming year were: Dr. Daniel C. Tosteson, Duke, Chairman; Dr. James V. Warren, Ohio State, Chairman-Elect; Dr. Harry A. Feldman, SUNY-Syracuse, Secretary; and Dr. Jonathan E. Rhoads, Pennsylvania, AAMC Executive Council Representative (1972). Dr. Thomas D. Kinney, Duke, is presently serving an
unexpired term as AAMC Executive Council Representative.

Execulive Cominittee Members.-In addition to the officers listed above, members elected to the Exccutive Committee were: Dr. Sam L. Clark, Jr., Massachusetts; Dr. Patrick J. Fitzgerald, SUNY-Brooklyn; and Dr. William B. Weil, Michigan State.

## other business

A request was made that the Council of Academic Societies go on record as showing a grave concern with the current status of student financing and that the CAS take every step to ensure an adequate supply of loan and scholarship funds. A motion was made, seconded, and passed.

The meeting was then adjourned.

PROPOSED REVISIONS<br>OF THE BYLAWS<br>October 31, 1970

The Executive Committee of the Council of Academic Societies reconmends that the Bylaws of the Council of Academic Societies be amended as set forth herein. A line has been drawn through those words to be deleted, and those words to be added are underscored.

# COUNCIL OF ACADEMIC SOCIETIES OF THE ASSOCIATION OF AMERICAN MEDICAL COLLEGES 

## BYLAWS

## Article 1

Section 1. In addition to the annual meeting prescribed by the Constitution, there shall be at least 1 additional meeting each year. Such additional meetings shall be held at such times and places as may be decided by the Council of Academic Societies; whenever feasible these will be held in conjunction with other activities of the Association of American Medical Colleges. In addition, meetings may be called at the discretion of the Executive Conmittee of the Council of Academic Societies or at the request of 15 or more members of the Council. Notices of meetings shall be mailed to the last known address of each member of the Council, not less than thirty days prior to the date set for the meeting.

Section 2. In the case of the 2 regularly scheduled meetings, it shall not be necessary to give advance notice of items on the agenda except for amendments to the Constitution, election of additional constituent societies and members-at-large, and nomination of officers.

Section 3. In the case of especially called meetings, the agenda shall be set forth in the notice of the meeting and action on any other item introduced at the meeting shall require ratification, either by a two-thirds mail vote following the meeting or must be held over for a majority vote at the next regularly scheduled meeting.

## Article 2

Section 1. A reminder shall be sent to the appropriate officers of the constituent societies in January of each year, notifying them that they are entitled to 2 representatives on the Council and stating that their present representatives will continue to serve until the Secretary-Treasurer has been notified of a successor who will take office following the next annual meeting of the Council. In the event of the death or disability of a representative, his society will name a successor to complete the unexpired term.

Section 2. Fer-purpeses-өf-eleeting-the-neminating-єernititee, -the-Séfe-

 request-that-eaєh-membef-indieate-the-7-persers-he-thinks-best-qualified-te


 sefve-ө日-the-Reminating-єөmmittee-with-the-ex For purposes of electing the nominating committee, the Secretary-Treasurer shail send to the members of the Council, on or before December 1st, the names of 14 members of the Council, chosen by the Executive Committee, with a request that each member indicate the seven persons he thinks best qualified to serve as members of the nominating committee. The officers of the Council and its representatives to the Executive Council of the Association of American Medical Colleges are eligible to serve on the nominating commit-
tee with the exception of the Chairman-Elect. The nominating conmittee shall meet in person to select a slate of officers'. Fifteen days will be allowed for the return of the ballots; any ballots postmarked after fifteen days from the time that they were mailed will not be counted. The 7 persons receiving the largest number of votes will constitute the nominating conmittee. In the event of a tie, it will be broken by the officers in the manner providing the best balance between preclinical and clinical interests. The member receiving the highest number of votes will serve as Chairman of the nominating committee.

Section 3. The nominating committee shall nominate 2 individuals for each office and an appropriate number of members-at-large as specified in the Constitution at least three weeks prior to the annual meeting. In the event of a tie, it will be broken by vote of the Chairman, Vice-Chairman, and Secre-tary-Treasurer, whose votes will be secret.

Article 3. Dues
Each constituent society shall pay dues of $\$ 100.00$ for the first year, and thereafter, recommendations for dues shall be made by the Executive Committee and acted upon by the Council at the time of the annual meeting. Failure to pay dues for two consecutive years will constitute grounds for termination of the constituent society's membership.

## Article 4. Accounts

The funds of the Council shall be deposited with the Association of American Medical Colleges in a special account which may be drawn upon by any of the 3 officers of the Council of Academic Societies in accordance with action taken by the Council. Expenses in connection with meetings may be paid by the Secretary-Treasurer without specific authorization but shall be reported to the Council. The constituent societies shall be responsible for the travel and per diem expenses of their representatives, except as it may be determined by the societies that their representatives will utilize other funds for this purpose. Actual and necessary living and travel expenses will be paid from the funds of the Council in the case of officers no longer serving as representatives of constituent societies.

The funds of the Council shall be audited annually in accordance with the practices of the Association of American Medical Colleges; a report will be filed by the Secretary-Treasurer and incorporated in the minutes. The Council may also receive funds from the parent organization, the Association of American Medical Colleges, or any other source. The acceptance of such funds and the restrictions pertaining thereto will be by vote subject to Article 13 of the Constitution.

84 Article 5. Members-at-Large
85 Members-at-large may serve as officers if elected but not more than 1 such 86 member-at-large may be nominated for each office. Nominations will be made
87 for members-at-large by the nominating committee or by 15 or more chosen
88 representatives to the Council if this is submitted in writing to the Secre-
89 tary-Treasurer not less than six weeks prior to an annual meeting. Such nom-
inations are to be circulated not less than thirty days prior to the meeting. Elections of members-at-large will be conducted only at regularly scheduled meetings. If the number of nominations exceeds the maximum number of places, those receiving the largest number of votes will be elected. Ties are to be broken by secret ballots cast by the 3 officers.

Article 6
Section 1. The members of the Assembly of the AAMC to be designated by the CAS shall be representatives of constituent societies of the CAS. No society shall be represented by more than 1 vote.

Section 2. Representatives to the Assembly shall be designated from among the constituent societies in annual rotation based upon the date of admission of each society to the CAS.

Section 3. Designated representatives shall be asked to commit themselves to attendance at meetings of the Assembly well in advance, so that alternates may be appointed to insure that all seats will be filled.
Article 7
Officers and members of the executive committees or councils of constituent societies shall be considered members, ex-officio, of the Council of Academic Societies and shall receive all information concerning meetings and activities of the Council of Academic Societies that is distributed to its regular members. However, no ex-officio member may vote or hold office in the Council of Academic Societies unless he is an officially designated representative of a constituent society to the Council of Academic Societies.
*Article 8.
Amendments to the bylaws may be made at any stated meeting or at a special meeting called for the purpose by a two-thirds vote of those present, provided there is a quorum in attendance.

[^2]
# RECOMMENDATIONS FOR MEMBERSHIP <br> COUNCIL OF ACADEMTC SOCIETIES <br> October 31, 1970 <br> Business Meeting 

The Executive Committee of the Council of Academic Societies recommends that the following organizations be nominated for membership*:

\author{

1. American Academy of Allergy <br> 2. American Academy of Ophthalmology and Otolaryngology <br> 3. American Academy of Pediatrics <br> 4. American Association for Thoracic Surgery <br> 5. American College of Obstetricians and Gynecologists <br> 6. American College of Physicians <br> 7. American College of Surgeons <br> 8. American Gastroenterological Association <br> 9. American Society for Clinical Investigation, Inc. <br> 10. Association for Academic Surgery <br> 11. The Endocrine Society <br> 12. Plastic Surgery Research Council <br> 13. Society for Pediatric Research <br> 14. Southern Society for Clinical Investigation
}
[^3]Section 4. In the future, additional societies will be nominated as constituent societies of the Council of Academic Societies by vote of two thirds of the members present at a duly constituted meeting of the Council of Academic Societies, provided that notice of the proposed nominations shall have been circulated to the members at least one month in advance of the meeting. The nomination of new constituent societies, after being passed upon by the Council of Academic Societies, will be sent to the Executive Council of the Association of American Medical Colleges and to the Institutional Membership of the Association of American Medical Colleges for ratification.
Number of
SocietyMembers

1. Academic Clinical Laboratory Physicians and Scientists ..... 223
2. American Association of Anatomists ..... 2157
3. American Association of Chairmen of Departments of Psychiatry ..... 94
4. American Association of Neurological Surgeons ..... 1443
5. American Association of Neuropathologists ..... 351
6. American Association of Pathologists and Bacteriologists ..... 1094
7. American Association of Plastic Surgeons ..... 100
8. American Association of Chairmen of Medical School Departments of Pathology, Inc. ..... 110
9. American Neurological Association ..... 411
10. American Pediatric Society ..... 254
11. American Physiological Society ..... 3286
12. American Society of Biological Chemists, Inc. ..... 2519
13. American Surgical Association ..... 290
14. Association for Medical School Pharmacology ..... 117
15. Association of Academic Physiatrists ..... 176
16. Association of American Physicians ..... 250
17. Association of Anatomy Chairmen ..... 105
18. Association of Chairmen of Departments of Physiology ..... 103
19. Association of Medical School Pediatric Department Chairmen, Inc. ..... 118
20. Association of Professors of Dermatology ..... 120
21. Association of Professors of Gynecology and Obstetrics ..... 250
22. Association of Professors of Medicine ..... 100
23. Association of Teachers of Preventive Medicine ..... 400
24. Association of University Anesthetists ..... 98
25. Association of University Professors of Neurology ..... 67
26. Association of University Professors of Ophthalmology ..... 85
27. Association of University Radiologists ..... 314
28. Joint Committee on Orthopaedic Research and Education Seminars ..... 475
29. Society of Academic Anesthesia Chairmen, Inc. ..... 85
30. Society of Chairmen of Academic Radiology Departments ..... 60
31. Society of Surgical Chairmen ..... 86
32. Society of University Otolaryngologists ..... 78
33. Society of University Surgeons ..... 236
34. Society of University Urologists ..... 156

## RECOMMENDATIONS FOR MEMBERSHIP COUNCFL OF ACADEMIC SOCIETIES October 31, 1970 Business Meeting

1. American Academy of Allergy
2. American Academy of Ophthalmology and Otolaryngology
3. American Academy of Pediatrics
4. American Association for Thoracic Surgery
5. American College of Obstetricians and Gynecologists
6. American College of Physicians
7. American College of Surgeons
8. 8. American Gastroenterological Association
1. American Society for clinical Investigation, Inc.
2. Association for Academic Surgery
3. The Endocrine Society
4. Plastic Surgery Research Council
5. Society for Pediatric Research
6. Southern Society for Clinical Investigation

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## EALLOT

ELECTIO: OF NEW OFFICERS

Chairman, cas ONE-YEAR TERA

James V. Warren

SECRETARY-treasurer, CAS ONE-YEAR TERA

W1111am B. Weil

Chalrman-ELECT, CAS ONE-YEAR TERA

VOTE FOR ONE
Sam L. Clark, Jr.
Patrick J. Fitzgerald

TWO-YEAR TERM ON
executive committee OF CAS

VOTE FOR ONE
William Holden
Louls G. Welt

VOTE FOR TWO
Ronald Estabrook $\qquad$
Harold Hodge $\qquad$
Ernst Knobil $\qquad$
David Whitlock
executive comittee, cas
VOTE FOR ONE
ONE-YEAR TEAR TO REPLACE DR. WEIL

William Longmire
Frank Moya

1. Nmerican Academy of Allergy
2. American ^cademy of Ophthalmology and Otolaryngology
3. American ^cademy of Pediatrics
4. American Association for Thoracic Surgery
5. American College of Obstetricians and Gynecologists
6. American College of Physicians
7. American College of Surgeons
8. American Gastroenterological Association
9. American Society for Clinical Investigation, Inc.
10. Association for Academic Surgery
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14. Southern Society for Clinical Investigation

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## ELECIIOM GE MEH OEFICEIS

Chairman, CAs
ONE-YEAR TERM
James V. Varren

SECRETARY-TPEASURER, CAS
ONE-YEAR TERG
William B. Yail


TWO-YEAR TERA ON
EXECUTIYE COMITTEE $\|\|+H$ VOTE FOR OGE
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executive comittee, cas hti HH Tll vote for ose


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|  | CAS ROL. CALL | $y \text { if } 6$ | hews | ent |
| Organization | Representative | Present | Designee | Present |
| Academic Clinical Laboratory Physicians and Scientists | George Brecher | $/$ |  |  |
| American Association of Anatomists | Burton L. Baker <br> Sam L. Clark, Jr. | $2$ |  |  |
| American Association of Chairmen of Departments of Psychiatry | Bernard C. Holland <br> L. Jolyon West | 0 |  |  |
| American Association of Neurological Surgeons | Eben Alexander, Jr. <br> Henry G. Schwartz | 2 | Edwin Boldrey Eugene Stern |  |
| American Association of Neuropathologists | George H. Collins Wolfgang Zeman | / |  |  |
| American Association of Pathologists and Bacteriologists | Kenneth M. Brinkhous <br> Patrick.J. Fitzgerald | $/$ |  |  |
| American Association of Plastic Surgeons | Stephen R. Lewis James E. Bennett |  |  |  |
| American Association of University Professors of Pathology | Thomas D. Kinney |  |  | . |
| American Neurological Association | Kenneth Magee <br> Samue1 A. Trufant | / |  |  |
| American Pediatric Society | Charles A. Janeway William B. Weil, Jr. |  |  |  |
| American Physiological Society | R. E. Forster Arthur B. Otis |  |  |  |
| American Society of Biological Chemists, Inc. | Ronald Estabrook <br> Robert A. Harte |  |  |  |
| American Surgical Association | William D. Holden. Lloyd M. Nyhus |  |  |  |

George H. Acheson

Association for Medical School Pharmacology

Association of Academic Physiatrists
Association of American Physicians

Association of Anatomy Chairmen

Association of Chairmen of Departments of Physiology

Association of Medical School Pediatric Department Chairmen, Inc.

Association of Professors of Dermatology

Association of Professors of Gynecology and Obstetrics

Association of Professors of Medicine

Association of Teachers of Preventive Medicine

Association of University Anesthetists

Association of University Professors of Neurology

Association of University Professors of Ophthalmology

Association of University Radiologists

Joint Committee on Orthopaedic Research and Education Seminars

Mieczyslaw Peszczynski
Louis G. Welt Eugene A. Stead

Jack Davies David G. Whitlock

Robert Berne
D. C. Tosteson

Ralph J. Wedgwood
William Thurman
Phillip C. Anderson Raymond R. Suskind

John Donovan
Robert Petersdorf Ludwig Eichna

Charles Lewis Kenneth Rogers

John J. Monica Robert M. Epstein

Maynard Cohen David Daily

Frank C. Newell
David Shock
John A. Campbell
Solomon Schwartz
Paul H. Curtiss, Jr.
Charles F. Gregory
cock

Harold F. Hardman

William J. Erdmann



 2


Henrik H. Bendixen

Page 3



November 20, 1970

TO: Council of Academic Societies
FROM: James V. Warren, M.D., Chairman

In response to many requests, we are enclosing a copy of the Minutes of the 1970 CAS Annual Meeting. A copy of the Bylaws adopted by the Membership on October 31 is appended. As you will note from the newly adopted Article 7, the CAS Membership has been expanded to include ex officio the officers and executive committee members of constituent societies. Accordingly these minutes are being forwarded not only to officially designated CAS members, but also to the officers and executive committee members of CAS organizations.

I would like particularly to call your attention to the motion unanimously adopted as reported in the Minutes on Page 10. Over the coming months, and in the February meeting, attention will be focused on future goals of the Council of Acadenic Societies and on the ways in which it can most effectively serve its Membership. We solicit your thoughts in this regard. I hope you will find an opportunity to write me in the very near future so that we can have the benefit of your viewpoints in long-range planning.

Encl. 1

MINUTES
COUNCIL OF ACADEMIC SOCIETIES
1970 Annual Meeting
October 30-31, 1970
Hotel Biltmore
Los Angeles, California

## PLENARY SESSIONS

The theme of the October 30, 1970 meeting of the Council of Academic Societies was 'Education of Manpower for Primary Health Care."

Dr. James V. Warren, Professor and Chairman, Department of Medicine, Ohio State University College of Medicine, and Chairman-Elect of the Council of Academic Societies (CAS) presided at a meeting marked by an attendance of over 200. Mr. H. Robert Cathcart, President of the Pennsylvania Hospital, Philadelphia, spoke on 'The Hospital's Needs for Primary Health Care Personnel." Mr. Cathcart observed that hospitals are becoming responsible for increased numbers of primary health service programs. Evaluative studies of these primary health care efforts are greatly needed.
'Needs of the General Practitioner in an Urban Setting," were discussed by Joseph T. Ainsworth, M.D., Houston, Texas. Dr. Ainsworth blamed the medical schools in part for the current manpower crisis. Among his recommendations were establishment of departments of family practice equal to other departments; establishment of a model family practice unit where students, interns, and residents are exposed to and trained in family practice; introduction early in the student's career to family practice; and optimal utilization of the paramedical persons in the health care team.

Presenting the 'Needs from the Viewpoint of an Internist in an Urban, NonMedical School Setting," was Dr. Donald E. Saunders, Columbia, South Carolina. According to Dr. Saunders, the physician who is knowledgeable about the sprawling and complex way in which health care is delivered will possess the tools to
be a good citizen. His character will determine whether he is motivated to use these tools. The medical school faculty must provide the necessary training by word and deed.

Dr. Eugene Vayda, Associate Professor of Clinical Epidemiology and Medicine, Faculty of Medicine, McMaster University, reported on the 'Needs of a Large PrePaid Health Plan." Dr. Vayda said that when the physician becomes an adequately paid member of a team assuming responsibility for the care of a defined segment of the population, and when his income is not dependent on a numerical count of services provided, rational planning based on utilization could be instituted. Such planning could, in turn, be related to medical education and postgraduate training programs. In this way, health manpower needs and medical education could be co-ordinated so that physicians could be trained to meet the health and medical care needs of society.

Dr. Joyce Lashof, Director of Community Medicine, Rush-Presbyterian-St. Luke's Medical Center, Chicago, cited the 'Needs of Federally Sponsored Community Health Centers." Among these are that the physician and other health personnel be committed to treating all patients with respect and dignity. To carry out his role successfully, the physician needs the help of anthropologists, social psychologists, and sociologists who have a body of knowledge that can contribute to the physician's understanding of his patient and the society in which he lives. Students must be introduced to the culture of poverty and to the social and economic factors that influence patient behavior. Finally, institutions need to reorganize their ambulatory care facilities.

Concluding the presentations was Dr. Warren, who then convened the panel for a vigorous discussion with the audience.

The second plenary session, held on October 31, was convened by Dr. D. C. Tosteson, Professor and Chairman, Department of Physiology and Pharmacology, Duke University School of Medicine, and Chairman of the CAS.

The program was opened by a Preliminary Report and Recormendation from the CAS Committee on a Biomedical Communications Network. Speaking for the Committee was its Chairman, Dr. Eugene A. Stead, Professor of Medicine at Duke University School of Medicine. The final report of this Cormittee will be submitted to the National Library of Medicine in December, 1970.

Next to appear was Dr. Louis G. Welt, Professor and Chairman, Department of Medicine, University of North Carolina School of Medicine, and Chairman of the AAMC-CAS Committee on Biomedical Research Policy. Dr. Welt presented a Preliminary Report and Reconmendations on behalf of the Committee. His paper is available upon request.

In the discussion which followed the presentation, several members objected to the economic approach of developing a national biomedical research policy: Drs. Eugene Stead, Jonathan Rhoads, William Weil, and Cheves Smythe. Dr. Ronald Estabrook was critical of the failure to communicate with the constituent societies. Mailings to the members had been:

April 30 - Appeal for contributions to Presidents, all CAS member organizations

May 15 - Communication regarding Committee survey, Representatives, all CAS Professorial Societies

May 20 - Summary of activities, including material on NIH study, Presidents, all CAS member organizations

ANNJAL BUSINESS MEETING

The meeting was called to order by Dr. Tosteson at 3:45 p.m. on October 31, 1970.

## Roll Call

The roll was called by Dr. Harry A. Feldman, Secretary-Treasurer. Of the 63 current members, a total of 47 were present. The only constituents not represented were the American Association of Chairmen of Departments of Psychiatry and the Association of Academic Physiatrists.

## Approval of Minutes

The minutes of the 1969 Annual Meeting were approved as circulated.

## Report of the President

AAMC President, Dr. John A. D. Cooper, described new staffing in the Association planned to strengthen the resources available to all the Councils.

## Report of the Executive Conmittee

Dr. Tosteson then presented the report of the Executive Committee. Since the last Annual Meeting, the Executive Committee held 10 meetings. In addition, the Chairman of the Council of Academic Societies meets with the Executive Committee of the AAMC Executive Council, and the Council of Academic Societies has four representatives to the Executive Council.

The programs of the Council of Academic Societies can be grouped in three closely related categories: biomedical research, education leading to the production of physicians and other medical manpower, and the delivery of health services. These programs involve action both of groups within the CAS and also of committees of the Executive Council of the AAMC on which representatives from the CAS serve.

During the past year, the CAS has increased the intensity of effort in the direction of formulation and implementation of biomedical research policy. Highlights include the following events.

The program of the annual meeting in 1969 was devoted to the role of basic science in medical education.

A special meeting on biomedical research policy was held in Chicago in February, 1970. The group heard talks by Dr. Cooper, President of the AAMC, Drs. Berliner and Endicott from NIH, and Mr. William Carey, formerly of the Bureau of the Budget.

At the February meeting, the Biomedical Research Policy Committee (BRPC) of CAS was formed, and charged with the responsibility to recommend a policy for support of biomedical research in the U.S. and procedures to implement such a policy. This Comittee consists of representatives of most of the biomedical disciplines and is chaired by Dr. Louis Welt.

The BRPC has met four times since February. It has consulted with such leaders as Dr. L. Du Bridge, at that time Science Adviser to President Nixon, Dr. R. Egeberg, Assistant Secretary for Health, and Dr. J. Shannon, former Director of NIH.

On behalf of the BRPC, the AAMC conducted a survey of all U.S. medical schools on the consequences of the proposed cessation of research training grants. The results of this survey together with a preliminary report from the BRPC were just presented by Dr. Welt.

The Chairman of the CAS for 1970 participated with other members of the Executive Committee of the Executive Council of the AAMC in the preparation of testimony for the Congressional hearings on the 1971 NIH budget. Dr. Cooper stated forcefully before both House and Senate Conmittees the AAMC position in favor of increased support of biomedical research.

During 1970, the CAS was involved in many projects which relate to medical education.

The Committee on a National Communication Network for medical education continued its work supported by a contract with the National Library of Medicine (NLM). As Dr. Stead indicated, the purpose of this project is to inform NLM planners about needs of medical education which could be met by such a network.

The Committee on Graduate Medical Education continued to work toward a re-evaluation of the role of the university in graduate medical education. The proceedings of the CAS sponsored Conference in Graduate Medical Education edited by Dr. Smythe, Dr. Kinney, and Miss Littlemeyer were published.

The Committee on Physicians' Assistants has worked toward the development of adequate curriculum and accredition standards for such training programs. The February 5, 1970 Report of the AAMC Task Force on Physicians' Assistants Programs was distributed to members of the CAS in March.

Dr. D. Sabiston represented the CAS on an ad hoc Committee on Increased Medical Manpower of the Executive Council of the AAMC. After careful study and deliberation, this Cormittee has framed recommendations about future levels of production of physicians in the U.S. The report was made public at the annual meeting.

The 1970 annual meeting of the CAS included a program on the education of the "primary" physician.

In the area of health services, CAS representative R. Chase chaired an AAMC Executive Council ad hoc Committee on Medicare. This Committee, with the able assistance of Mr. J. Danielson, Head of the Department of Health Services and Teaching Hospitals of the AAMC staff, spent many hours working with representatives of the Social Security Administration on developing more equitable policies for administration of Part B Medicare payments to physicians working in academic medical centers.

Report of Bylaws Committee
Dr. Sam L. Clark, Jr., Chairman of the CAS Bylaws Committee, presented the report of the Bylaws Conmittee.

ACTION: Upon motion, duly seconded, the Bylaws as proposed for revision were approved by the CAS membership.
(Att.)

Recommendations for Membership
Applications for membership were next considered.
ACTION: Upon motion, duly seconded, the application of the Southern Society for Clinical Research was tabled pending a definition of criteria for membership and mechanism for representation at the Assembly.

ACTION: Upon motion, duly seconded, applications for membership of the following 13 societies were approved:

1. American Academy of Allergy
2. American Academy of Ophthalmology \& Otolaryngology
3. American Academy of Pediatrics
4. American Association for Thoracic Surgery
5. American College of Obstetricians and Gynecologists
6. American College of Physicians
7. American College of Surgeons
8. American Gastroenterological Association
9. American Society for Clinical Investigation, Inc.
10. Association for Academic Surgery
11. The Endocrine Society
12. Plastic Surgery Research Council
13. Society for Pediatric Research

## Other Reports

The membership reviewed the AAMC position statement on the Carnegie Commission Report. The following amendment, offered by the Council of Academic Societies, was adopted by the Assembly:
> 'It should be noted that several of the recommendations in the report cover issues on which the AAMC has not taken a position and, in certain instances, may, indeed, be matters on which AAMC views might differ. In particular, the AAMC believes that the Commission's recommendations relating to the Educational opportunity Bank and federal support of biomedical research are too restrictive and incompatible with the broadening health objectives of the nation. We are pleased, however, at the close concurrence on many key issues between the basic objectives being sought by the AAMC and the findings and recommendations of this disinterested and prestigious group."

ACTION: The following motion, offered hy Dr. Robert Petersdorf on behalf of the Biomedical Research Policy Committee, was unanimously adopted:

> That the Association of American Medical Colleges establish an Office of Biomedical Research within the Department of Academic Affairs. The purpose of this Office would be to attract a full-time staff to implement a biomedical research policy and to facilitate communication between the CAS and its constituent societies in matters of biomedical research.

Dr. Thomas D. Kinney, Chairman of the CAS Conmittee on Graduate Medical Education, briefed the membership on the status of the paper, "Corporate Responsibility for Graduate Medical Education". Under final review at this time, this statement is expected to be distributed within the near future.

The AAMC Committee on the Expansion of Medical Education, chaired by Dr. Robert B. Howard, had submitted a proposal to be acted upon in the AAMC Assembly. Copies of this document were forwarded to the CAS Membership for review on September 28.

ACTION: The following motion, offered by Dr. James V. Warren, was unanimously adopted:

That the Association of American Medical Colleges establish a group for the study of the problems in the education of physicians for primary health care.

Dr. Jonathan Rhoads next presented a summary of the activities of the AAMC Committee on Medicare, which is chaired by Dr. Robert Chase. Additional information is available upon request to the AAMC Department of Health Services and Teaching Hospitals.

Concluding the Annual Reports was Dr. E. Harvey Estes, Chairman of the Task Force on Physicians' Assistants. As a result of action of the CAS, a Task Force was appointed in November, 1969 to recommend to the Council the actions which should be taken by the Council and the AAMC with respect to various programs training assistants to physicians. The Task Force also had representation from the Council of Teaching Hospitals and the Council of Deans.

A report was presented to the Executive Committee of the CAS on February 5, 1970. This report was forwarded to the CAS in March. It was presented to the Executive Council of the AAMC, which resulted in the suggestion that AAMC work with the AMA to achieve the recommendations outlined in the report (i.e., establishment of an accrediting mechanism). There has been no activity over the intervening six months to achieve these ends.

Dr. Estes reviewed the need for national leadership in this area, and urged that the CAS assume this leadership role.

Reasons warranting concern by a body of medical educators were:

1. Because it is unlikely that the combination of talent, interest, and facilities necessary to train these individuals will be found outside the teaching centers represented by AAMC, and
2. Because medical educators must be concerned with any means for more efficient delivery methods for health care, and
3. Because medical educators should be concerned that the student learn to function in a team relationship.

Needs for action now are based on the following:

1. There are serious suggestions that health care delivery should not be entrusted to products of medical schools. While it may be true that medicine has not assumed its proper role in many areas, the establishment of pathways of medical care excluding the physician would not be in the best interests of the patient or the public at large. The provision of personnel to allow stratification of care, in the interest of increased availability and reduced cost will be accomplished. This should preferably be done by the medical educational mechanism rather than outside it.
2. Various bodies have requested such leadership
(a) Civil Service Commission
(b) AMA Health Manpower Conference
(c) Carnegie Commission for Higher Education
3. The Armed Forces are developing delivery systems utilizing such personnel, and in the absence of leadership will be forced into establishing their own standards.

In view of these facts, Dr. Fstes proposed the following resolution which was unanimously adopted by the Membership:

ACTION: That the Association of American Medical Colleges appoint a committee to study the establishment of definitions and standards for various assistants to physicians, and an accrediting mechanism for programs producing such individuals, and that such action be taken, if necessary, without participation of the AMA.

## Election of Officers and Executive Committee

The report of the Nominating Committee was submitted to the Membership in the form of a written ballot.

Officers.--Elected as officers for the coming year were: Dr. James V. Warren, Chairman; Dr. Sam L. Clark, Jr., Chairman-Elect; and Dr. William B. Weil, Secretary-Treasurer.

Executive Conmittee.--In addition to the officers listed above the following were elected to two-year terms on the Executive Conmittee: Drs. Louis G. Welt, Ronald Estabrook, and Ernst Knobil. Dr. William Longmire was elected to a one-year term to fill the vacancy created by Dr. Weil's election as Secretary-Treasurer.

Other Business
It was suggested that an agenda containing materials upon which action was to be taken should be distributed ahead of the meeting. Included should be summary material relating to any applications for membership.

Finally, the following motion, offered by Dr. Ralph Wedgwood, was unanimously adopted:

ACTION: That the Executive Committee bring to the Council at the next meeting more specific recommendations for eligibility criteria for component societies, and for representation of the CAS at the Assembly, to meet the stated objectives of the CAS, namely to serve as a form and expanded medium for communication between the AAMC and the faculties of schools of medicine, such recommendations, including possible totally alternative options, to be formulated aither by the Executive Committee, or by an ad hoc conmittee composed of voting members containing a reasonable balance between

Next Meeting
The Council of Academic Societies will next meet on February 12, 1971,in conjunction with the AMA Congress on Medical Education, at the PalmerHouse Hotel, Chicago, Illinois. An all-day meeting is planned.
Adjournment
The meeting was adjourned at $6: 30 \mathrm{p} . \mathrm{m}$.
Att.

# COUNCIL OF ACADEMIC SOCIETIES <br> OF THE ASSOCIATION OF AMERICAN MEDICAL COLLEGES 

BYLAWS
AS ADOPTED OCTOBER 31, 1970

## ARTICLE 1

Section 1. In addition to the annual meeting prescribed by the Constitution, there shall be at least 1 additional meeting each year. Such additional meetings shall be held at such times and places as may be decided by the Council of Academic Societies; whenever feasible these will be held in conjunction with other activities of the Association of American Medical Colleges. In addition, meetings may be called at the discretion of the Executive Committee of the Council of Academic Societies or at the request of 15 or more members of the Council. Notices of meetings shall be mailed to the last known address of each member of the Council, not less than thirty days prior to the date set for the meeting.

Section 2. In the case of the 2 regularly scheduled meetings, it shall not be necessary to give advance notice of items on the agenda except for amendments to the Constitution, election of additional constituent societies and members-at-large, and nomination of officers.

Section 3. In the case of especially called meetings, the agenda shall be set forth in the notice of the meeting and action on any other item introduced at the meeting shall require ratification, either by a two-thirds mail vote following the meeting or must be held over for a majority vote at the next regularly scheduled meeting.

## ARTICLE 2

Section 1. A reminder shall be sent to the appropriate officers of the constituent societies in January of each year, notifying them that they are entitled to 2 representatives on the Council and stating that their present representatives will continue to serve until the Secretary-Treasurer has been notified of a successor who will take office following the next annual meeting of the Council. In the event of the death or disability of a representative, his society will name a successor to complete the unexpired term.

Section 2. For purposes of electing the nominating comittee, the Secre-tary-Treasurer shall send to the members of the Council, on or before December 1st, the names of 14 members of the Council, chosen by the Executive Committee, with a request that each member indicate the seven persons he thinks best qualified to serve as members of the nominating committee. The officers of the Council and its representatives to the Executive Council of the Association of American Medical Colleges are eligible to serve on the nominating committee with the exception of the Chairman-Elect. The nominating committee shall meet in person to select a slate of officers. Fifteen days will be allowed for the return of the ballots; any ballots postmarked The 7 fersons days from the time that they were mailed will not be counted. The 7 persons receiving the largest number of votes will constitute the nominating committee. In the event of a tie, it will be broken by the officers in the manner providing the best balance between preclinical and clinical interests. The member receiving the highest number of votes will serve as Chairman of the nominating committee.

Section 3. The nominating committee shall nominate 2 individuals for each office and an appropriate number of members-at-large as specified in the Constitution at least three weeks prior to the annual meeting. In the event of a tie, it will be broken by vote of the Chairman, Vice-Chairman, and Secre-tary-Treasurer, whose votes will be secret.

ARTICLE 3. DUES
Each constituent society shall pay dues of $\$ 100.00$ for the first year, and thereafter, recommendations for dues shall be made by the Executive Conmittee and acted upon by the Council at the time of the annual meeting. Failure to pay dues for two consecutive years will constitute grounds for termination of the constituent society's membership.

ARTICLE 4. ACCOUNTS
The funds of the Council shall be deposited with the Association of American Medical Colleges in a special account which may be drawn upon by any of the 3 officers of the Council of Acadmeic Societies in accordance with action taken by the Council. Expenses in connection with meetings may be paid by the Secretary-Treasurer without specific authorization but shall be reported to the Council. The constituent societies shall be responsible for the travel and per diem expenses of their representatives, except as it may be determined by the societies that their representatives will utilize other funds for this purpose. Actual and necessary living and travel expenses will be paid from the funds of the Council in the case of officers no longer serving as representatives of constituent societies.

The funds of the Council shall be audited annually in accordance with the practices of the Association of American Medical Colleges; a report will be filed by the Secretary-Treasurer and incorporated in the minutes. The Council may also receive funds from the parent organization, the Association of American Medical Colleges, or any other source. The acceptance of such funds and the restrictions pertaining thereto will be by vote subject to Article 13 of the Constitution.

## ARTICLE 5. MEMBERS-AT-LARGE

Members-at-large may serve as officers if elected but not more than 1 such member-at-large may be nominated for each office. Nominations will be made for members-at-large by the nominating committee or by 15 or more chosen representatives to the Council if this is submitted in writing to the Secre-tary-Treasurer not less than six weeks prior to an annual meeting. Such nominations are to be circulated not less than thirty days prior to the meeting. Elections of members-at-large will be conducted only at regularly scheduled meetings. If the number of nominations exceeds the maximm number of places, those receiving the largest number of votes will be elected. Ties are to be broken by secret ballots cast by the 3 officers.

ARTICLE 6
Section 1. The members of the Assembly of the AAMC to be designated by the CAS shall be representatives of constituent societies of the CAS. No society shall be represented by more than 1 vote.

Section 2. Representatives to the Assembly shall be designated from among the constituent societies in annual rotation based upon the date of admission of each society to the CAS.

Section 3. Designated representatives shall be asked to commit themselves to attendance at meetings of the Assembly well in advance, so that alternates may be appointed to insure that all seats will be filled.

## ARTICLE 7

Officers and members of the executive committees or councils of constituent societies shall be considered members, ex-officio, of the Council of Academic Societies and shall receive all information concerning meetings and activities of the Council of Academic Societies that is distributed to its regular members. However, no ex-officio member may vote or hold office in the Council of Academic Societies unless he is an officially designated representative of a constituent society to the Council of Academic Societies.

## ARTICLE 8

Amendments to the bylaws may be made at any stated meeting or at a special meeting called for the purpose by a two-thirds vote of those present, provided there is a quorm in attendance.


[^0]:    * The procedure for election of new societies into the Council of Academic Societies is set forth in the Constitution of the Council of Academic Societies, Article 2, Section 4:

[^1]:    Enclosures - 3

[^2]:    * Was Article 6

[^3]:    * The procedure for election of new societies into the Council of Academic Societies is set forth in the Constitution of the Council of Academic Societies, Article 2, Section 4:

