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C association of american medical colleges

AGENDA FOR COUNCIL OF DEANS

ANNUAL BUSINESS MEETING MONDAY, OCTOBER 23, 1978 2 p.m. – 5 p.m. BALLROOM C NEW ORLEANS HILTON HOTEL NEW ORLEANS, LOUISIANA

ASSOCIATION OF AMERICAN MEDICAL COLLEGES COUNCIL OF DEANS ANNUAL BUSINESS MEETING Monday, October 23, 1978 Ballroom C New Orleans Hilton Hotel New Orleans, Louisiana

AGENDA

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II.	Quo	rum Call	
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IV.	Cha	irman's Report Julius R. Krevans, M.D.	
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VI.	Con	sideration of Assembly Action Items	
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VII.	Dis	cussion Items	
	Α.	Task Force Report on Minority Student Opportunities in Medicine Paul Elliott, Ph.D.	
	Β.	Task Force Report on Student Financing Bernard Nelson, M.D.	
	с.	Task Force Report on the Support of Medical Education Stuart Bondurant, M.D.	
	D.	Task Force Report on Graduate Medical Education Kay Clawson, M.D.	
	Ε.	Ad Hoc Committee on Continuing Medical Education John Jones, M.D.	

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- F. Biomedical Research Policy Developments Theodore Cooper, M.D.
- VIII. Information Item
 - A. VA Scholars Program Harrison Owens
 - IX. Old Business
 - X. New Business
 - XI. Installation of Chairman
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ASSOCIATION OF AMERICAN MEDICAL COLLEGES COUNCIL OF DEANS SPRING BUSINESS MEETING

Thursday, April 27, 1978 8:30 a.m. - 12 Noon Cottonwood Conference Center Snowbird Village Snowbird, Utah

MINUTES

I. Call to Order

The meeting was called to order at 8:30 a.m. by Julius R. Krevans, M.D., Chairman.

II. Quorum Call

Dr. Krevans announced the presence of a quorum.

III. Consideration of Minutes

The minutes of the November 7, 1977, Annual Business Meeting, held at the Washington Hilton Hotel were approved as submitted.

IV. Chairman's Report

Dr. Krevans reported that he had been meeting with small groups of deans and would continue to do so since it was proving helpful to hear their concerns.

Dr. Krevans then asked Dr. Phil Caper, Assistant Vice Chancellor, University of Massachusetts, to discuss a concern which he had raised in discussions with several deans. It was his feeling that there is a need for the AAMC to become more involved with public policy makers in the solution of health manpower problems and in the development of appropriate legislation. He presented a resolution to this effect for consideration by the Council. Dr. Krevans suggested that the statement be forwarded to the Council of Deans Administrative Board and the Executive Council for their consideration.

Dr. Krevans also reported that the response to the deans salary survey was very small and raised the question of whether or not the salary survey was regarded as sufficiently useful to justify its continuance. The deans were asked to express their opinion on this in a forthcoming letter from the AAMC.

Dr. Krevans asked Dr. Cooper to briefly discuss the efforts needed to acquire support for the funding of biomedical research, health manpower, and the health coalition. Dr. Cooper explained that the Association had spent time working with the Budget Committee and the Appropriations Committee of both the House and Senate in regard to FY 79 appropriations



and requested that members who had Representatives or Senators on those committees to contact them for their support of an appropriation at the level adopted by the Senate.

V. Action Item

Executive Council Action on Revising the AAMC Dues Structure

The proposed revision of the AAMC dues structure had received considerable discussion at the Executive Committee and Executive Council meetings. It was discussed in detail by Dr. Petersdorf in a presentation at this meeting. The Council of Deans recommended that the Assembly adopt the new dues structure.

VI. Discussion Items

A. Report of the Task Force on the Support of Medical Education

Dr. Bondurant summarized the current status of the work of the Task Force and presented the key issues which would be addressed. The chief question was whether or not general institutional support for undergraduate medical education, by the Federal government, should be continued. A second issue was the consideration of additional programs of federal support that the Association should ~ recommend.

Dr. Bondurant explained that the Task Force had divided itself into five working groups, with each group responsible for developing a paper which would be a potential position statement. The groups and chairmen included: I) Relationship of the University to the Federal Government and the Rationale for Continuing Federal Support, John E. Chapman, M.D.; II) Character and Need for Financial Support, Ivan L. Bennett, Jr., M.D.; III) Number and Distribution of Physicians, Christopher C. Fordham, M.D.; IV) Role of the Medical School in Cost Containment, Stanley M. Aronson, M.D.; V) Special Initiatives, Edward J. Stemmler, M.D. He then summarized the issues assigned each group and urged members to contact the chairmen of the groups if they had suggestions, questions, or comments.

B. Report of Task Force on Student Financing

Dr. Bernard Nelson presented a draft final report of the Task Force. He explained first that the Task Force had rescinded a previous recommendation that the Federal government develop a special loan program for students in the health professions and instead recommended that the borrowing limits under the guaranteed student loan program be increased for medical students and that the repayment terms be modified to suit the growing debt. He also called for comments from the Council so that the report could continue to be modified. C. Biomedical and Behavioral Research Policy

Dr. Thomas Morgan of the AAMC staff presented this issue to the Council of Deans. He summarized the history of the material included in the agenda and explained that the document should be viewed as a statement of the present beliefs of the constituents of the AAMC, and not as a policy statement for public consumption. After further discussing the evolution of some of the recommendations included in the statement, Dr. Morgan requested that comments be given to him so that the modification of the document could be continued.

D. Industry-Sponsored Research and Consultation: Responsibilities of the Institution and the Individual

Dr. Thomas Kennedy of the AAMC staff led this discussion for the After giving a brief history of its evolution, Dr. Kennedy group. summarized the recommendations of the staff paper which concluded that it is highly appropriate for universities, health profession schools and research centers to conduct industry-sponsored research, provided that such research serves the public interest and is compatible with the goals, objectives, and traditions of the institution. The paper had been approved by the Executive Council and would be distributed to member institutions for their consideration as guidelines for faculty and administration treatment of this set of issues. The submission of the documents to Mr. Rogers as the AAMC response to his questions and the distribution to the member schools was awaiting a review by the leadership of the AAU which was for the purpose of ascertaining whether the document would create problems for university presidents.

E. NIH Division of Research Grants Workload

Dr. John Sherman of the Association staff led this discussion and distributed a draft describing workload problems being encountered by NIH in reviewing grant applications. The first section was an attempt to enumerate some of the causes of the workload increase which at the time exceeded all reasonable proportions. The second part reviewed some of the possible approaches toward solution and the third part constituted a series of recommended actions to be considered by the groups involved, including the Federal government, the academic community, and the operating agency. While no resolution by the COD appeared to be warranted, Dr. Sherman suggested that the most important action to be taken at this time was the development of a broader awareness of the problem within the research community. The deans discussed ways in which this could be accomplished and actions which might be taken at an individual institutional level.

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F. Criteria for Admissions

The Executive Council authorized the Chairman of the AAMC to appoint a task force to develop some model guidelines for the use of individual institutions in implementing the HEW regulations for the handicapped. Under the Rehabilitation Act, each institution has the obligation of providing the remedial and supportive structure to sustain the handicapped individual during the period of instruction.

Dr. Eckenhoff then presented an issue on which he sought the advice of the Council of Deans. At the present time, the National Board, individual institutions, and COTRANS sponsor students to take the qualifying exam for admission to advanced standing. But the problem is that U.S. citizens attending schools within the U.S. or Canada which are not accredited do not fit into those categories of sponsorship. After various alternative courses of action were enumerated, the matter was referred to the COD Administrative Board with a request that the NBME set out the implications of each alternative for the Board's consideration.

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Dr. Beering brought an item which arose at the last LCME meeting: the procedure utilized by the schools in matriculating students with advanced standing. He suggested that member institutions ought to utilize the same standards and procedures used in the regular admissions process.

G. National Institutes of Health Care Research

Dr. Thomas Kennedy briefly summarized the National Health Care Research Act of 1978 which would create a new organizational entity within the Public Health Service. The bill had been endorsed by the Executive Committee with several suggestions for improvement.

- VII. Information Items
 - A. Southern Deans Resolution

The members voted to endorse the following resolution presented by the Southern Deans:

"The Council of Deans reaffirms its continuing commitment to affirmative action programs for recruitment and retention of qualified disadvantaged students, including minority students, to the medical schools of this country." B. Management Advancement Program Recent Developments

Dr. Marjorie Wilson summarized new or planned developments in the MAP and emphasized the Financial Management Seminar scheduled for deans in November.

C. Continuing Medical Education Report of the Regional Meetings

Dr. Thomas Bruce reported that the deans of the southern and midwest sections had participated in nominal group discussions on the issues related to medical school involvement in continuing medical education earlier in the week. The focus of their discussions centered on three topics: the roles of the medical school, forces which fostered or inhibited medical school involvement, and the advantages and disadvantages of introducing continuing medical education programs of a character which comported more closely with the principles of adult learning.

VIII. <u>New Business</u>

Dr. Sherman presented a brief report on the status of H.R.2222.

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IV. Adjournment

The meeting was adjourned at 11:30 a.m.

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ELECTION OF PROVISIONAL INSTITUTIONAL MEMBERS

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The following schools have received provisional accreditation from the Liaison Committee on Medical Education and are eligible for membership in the AAMC:

Marshall University School of Medicine

Catholic University of Puerto Rico School of Medicine

School of Medicine at Morehouse College

East Tennessee State University College of Medicine

The Executive Council has recommended, contingent upon approval by the full Council of Deans, Assembly election of the schools listed above to Provisional Institutional Membership in the AAMC.

RECOMMENDATION

That the Council of Deans approve the election of these schools to Provisional Institutional Membership.

THE WITHHOLDING OF MEDICAL CARE BY PHYSICIANS

At its June 1977 meeting, the Executive Council responded to a suggestion that the Association formulate a position on the withholding of professional services by physicians by appointing a working group to recommend a policy statement. The suggestion arose from a concern that the adoption of this technique by physicians as a means of bringing pressure to bear on the solution of perceived problems raised serious ethical issues. Strikes by practicing physicians over malpractice premiums and job actions by resident physicians for various reasons are examples of this practice which raised the concern.

This working group was chaired by Dr. Clayton Rich and its membership included: Dr. Steven C. Beering, Dean & Medical Center Director, Indiana University, Dr. Edward W. Hook, Chairman, Department of Medicine, University of Virginia, Dr. David Kindig, Director, Montifiore Hospital, Dr. Louis C. Lasagna, Chairman, Department of Pharmacology and Toxicology, University of Rochester, Dr. Albert Jonsen, Associate Professor of Bioethics, University of California, San Francisco, Dr. William Merritt, Department of Pediatrics, University of Maryland Hospital, and Paul Scoles, Class of '79, CMDNJ-Rutgers Medical School.

Several drafts of the resultant statement have been considered by each of the Administrative Boards and the Executive Council. A review committee consisting of Mr. John Colloton, Dr. John Gronvall, Dr. Tim Oliver, Dr. Clayton Rich, and Mr. Paul Scoles further refined the paper and presented à draft to the Executive Council at the September 1978 meeting. The Council approved the statement as it appears on the following pages and forwarded it for action by the Assembly.

The Executive Council has recommended that the Assembly approve the proposed statement on the withholding of medical care by physicians.

RECOMMENDATION

That the Council of Deans endorse Assembly approval of this statement.

BACKGROUND

The medical schools, teaching hospitals and academic societies of the AAMC have a unique responsibility for the education of physicians. As organizations, as representatives of the professionals who constitute a significant portion of the medical community and as providers of medical care, they should maintain by both precept and example the high standards of the medical profession.

Mindful of this responsibility, the AAMC advances the following statement on the withholding of care by physicians. The statement emphasizes the ethical issues that students and physicians must resolve for themselves when they are called upon to consider concerted action to withhold medical care.

STATEMENT

Fundamental ethical tenets of the medical profession mandate that physicians provide care for the sick and neither abandon nor exploit their patients. These ethical tenets apply to physicians whether they are acting individually or in concert as members of groups or associations.

An important ethical issue, one not ordinarily present in the traditional relationship between an individual physician and his patients, emerges when physicians act together to restrict or withhold medical services. An individual physician need not accept as his patient every person who seeks medical attention because, in most situations, alternative sources of care are available. However, the option of alternative care may be foreclosed when physicians act together to limit or withhold medical care. It is clear that physicians acting in concert have an ethical responsibility to all of those in the general public who could be patients of individual physicians had a group decision denying them some form of medical care not been made. When such a decision is implemented by all available physicians, these physicians who act in concert to restrict or withhold medical care. Therefore, physicians who act in concert to restrict or withhold medical care contravene some of the profession's primary ethical precepts.

(Physicians are, of course, justified in refusing to perform procedures or acts designed to further inherently corrupt or evil purposes. Indeed there is an ethical mandate that they do so, but such acts are not properly defined as medical care.)

In the recent past groups of physicians have acted to restrict or withhold medical care in order to call attention to social issues, such as the need to improve the quality of care afforded one segment of the public. An analysis of the ethical considerations raised by this practice begins with the recognition that physicians are members of the public with special knowledge and experience which provide a unique perspective on the conditions of medical practice, the relations between the profession and the public, and the major social issues involving health and welfare. Physicians acting

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individually or together have a special social responsibility to provide advice and leadership in such matters. However, in advancing positions about social issues, physicians act as specially informed citizens, not from their unique and primary positions as healers. Any attempt to justify on ethical grounds the decision to restrict medical care in order to advance an assumed social good confounds the specific role of physicians in society as providers of healing services, with a more general role shared with all other citizens. These considerations make it doubtful that a justification reasonably can be advanced. To the extent that an element of self-interest motivates a decision to limit or withhold professional services, ethical justification of that stance is even more suspect.

Because the ethics and public duty of the profession restrain physicians from acting in concert to withhold services, they should avoid this powerful method of advancing their interests. It is a responsibility of society to forgo exploitation of this ethical standard by providing a fair process for resolving valid economic and organizational issues which influence the welfare of the profession and the quality of medical care.

The Association of American Medical Colleges reaffirms its support of fair processes for resolving concerns of medical professionals and opposes the withholding of medical care by groups of physicians as a means of resolving such issues.

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The Nominating Committee of the Council of Deans consisted of:

Stanley M. Aronson, Chairman Ephraim Friedman James T. Hamlin III Charles C. Lobeck Harry P. Ward

The committee solicited the membership for recommendations of persons to fill the available positions by memorandum dated April 7, 1978. The returned Advisory Ballots were tabulated and the results distributed to each committee member. The committee met by telephone conference call on June 16, 1978. Dr. Aronson's letter report (dated June 26, 1978) of the committee's recommended slate of officers follows.



BROWN UNIVERSITY Providence, Rhode Island • 02912

Division of Biology and Medicine

June 26, 1978

Julius R. Krevans, M.D., Dean University of California at San Francisco School of Medicine Third and Parnassus San Francisco, California 94143

Dear Dr. Krevans:

This letter constitutes my report as Chairman of the Council of Deans' Nominating Committee to you as Chairman of the Council of Deans. The committee met at 1:30 P.M. EDT on June 16, 1978, by telephone conference call. At that time we had available to us the tallies of the advisory ballots submitted by the Council of Deans.

The following offices will be filled by vote of the Council of Deans. The slate proposed by your Nominating Committee is as follows:

Chairman-Elect of the Council of Deans:

Stuart Bondurant, M.D., Dean and President Albany Medical College

Member-at-Large of the Council of Deans Administrative Board: Allen W. Mathies, Jr., M.D., Dean University of Southern California

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The following offices are filled by election of the Assembly. Consequently, the slate proposed for the Assembly's consideration will be developed by the AAMC Nominating Committee of which I am a member. Thus, these names will be submitted in the form of a recommendation from our Nominating Committee:

Chairman-Elect of the Assembly:

David L. Everhart, President or C Northwestern Memorial Hospital L

Charles B. Womer, President University Hospitals of Cleveland Julius R. Krevans, N. D.

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The Nominating Committee, aware of the AAMC tradition of rotating the chairmanship to a representative of the Council of Teaching Hospitals every fourth year focused its deliberations on members of that Council. The advisory ballots included an equal number of recommendations for David Everhart and Charles Womer. The Nominating Committee concluded that the best course of action would be to bring both of these names to the AAMC Nominating Committee with the advice that either would be an appropriate nomination.

Council of Deans Representatives to the Executive Council:

Clayton Rich, M.D., Dean Stanford University

William H. Luginbuhl, M.D., Dean University of Vermont

John E. Chapman, M.D., Dean Vanderbilt University

These nominations, I believe, accurately reflect the wishes of the members of the Council of Deans. I am confident that we have a slate which will contribute to the work of the Association.

Thank you for the opportunity to serve in this capacity.

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Sincerely, milme

Stanley M. Aronson, M.D. Dean of Medicine

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cc: Ephraim Friedman, M.D. James T. Hamlin III, M.D. Charles C. Lobeck, M.D. Harry P. Ward, M.D. Joseph A. Keyes

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ALABAMA		
University of Alabama	James A. Pittman	
University of South Alabama	Robert A. Kreisberg	
Arizona		
University of Arizona	Louis J. Kettel	
ARKANSAS		
University of Arkansas	Thomas A. Bruce	
CALIFORNIA		· · · · · · · · · · · · · · · · · · ·
University of California - Davis	C. John Tupper	
University of California - Irvine	Stanley van den Noort	
University of California - L.A.	Sherman M. Mellinkoff	· · · · · · · · · · · · · · · · · · ·
University of California - San Diego	John H. Moxley III	
University of California - San Fran.	Julius R. Krevans	
Loma Linda University	G. Gordon Hadley	

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Allen W. Mathles, Jr.	
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Bruce C. Paton	
Robert U. Massey	
Robert W. Berliner	
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John C. Rose	
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William B. Deal	
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	CUD ROTI CALL - OCTODER 1978	
University of South Florida	Hollis G. Boren	
CEORGIA		
Emory University	Arthur P. Richardson	
Medical College of Georgia	Fairfield Goodale	
* Morehouse College	Louis W. Sullivan	
HAWAII		
University of Hawaii	Terence A. Rogers	
ILLINOIS		· · · · · · · · · · · · · · · · · · ·
Chicago Medical School	Marshall A. Falk	· · · · · · · · · · · · · · · · · · ·
Loyola University	Clarence N. Peiss	
Northwestern University	James E. Eckenhoff	
Rush Medical College	Robert S. Blacklow	
Southern Illinois University	Richard H. Moy	
University of Chicago	Robert B. Uretz	

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University of Illinois	Truman O. Anderson
INDIANA	
Indiana University	Steven C. Beering
IOWA	
University of Iowa	John W. Eckstein
KANSAS	
University of Kansas	James T. Lowman
KENTUCKY	
University of Kentucky	D. Kay Clawson
University of Louisville	Arthur H. Keeney
LOUISIANA	
Louisiana State - New Orleans	Paul F. Larson
Louisiana State - Shreveport	Ike Muslow
Tulane University	James T. Hamlin III

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MARYLAND	,	
Johns Hopkins University	Richard S. Ross	
Uniformed Services University of the Health Sciences	J. Phillip Sanford	
University of Maryland	John M. Dennis	
MASSACHUSETTS		
Boston University	John I. Sandson	
Harvard Medical School	Daniel C. Tosteson	
University of Massachusetts	H. Maurice Goodman	·
Tufts University	Lauro Cavazos	
MICHIGAN		
Michigan State University	W. Donald Weston	
University of Michigan	John A. Gronvall	
Wayne State University	Robert D. Coye	
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MINNESOTA	·	
Mayo Medical School	John T. Shepherd	
University of Minnesota - Minneapolis	H. Mead Cavert for Neal L. Gault, Jr.	·
University of Minnesota - Duluth	John W. LaBree	
MISSISSIPPI		
University of Mississippi	Norman C. Nelson	
MISSOURI		
University of Missouri - Columbia	Charles C. Lobeck	
University of Missouri - Kansas City	Harry S. Jonas	
Saint Louis University	David R. Challoner	
Washington University	M. Kenton King	
NEBRASKA		
Creighton University	Joseph M. Holthaus	
University of Nebraska	F. Miles Skultety	

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NEVADA	,	
University of Nevada	Thomas J. Scully	
NEW HAMPSHIRE		
Dartmouth Medical School	James C. Strickler	
NEW JERSEY		
CMDNJ - New Jersey Medical School	Vincent Lanzoni	
CMDNJ - Rutgers Medical School	Richard C. Reynolds	
NEW MEXICO		
University of New Mexico	Leonard M. Napolitano	
NEW YORK		
Albany Medical College	Stuart Bondurant	
Albert Einstein Medical College	Ephraim Friedman	
Columbia University	Donald F. Tapley	
Cornell University	Theodore Cooper	

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Mount Sinai School of Medicine	Thomas C. Chalmers	
New York Medical College	Samuel H. Rubin	
New York University	Ivan L. Bennett, Jr.	
University of Rochester	J. Lowell Orbison	
SUNY - Buffalo	John P. Naughton	
SUNY - Downstate - Brooklyn	Calvin H. Plimpton	
SUNY - Stony Brook	Marvin Kuschner	
SUNY - Upstate - Syracuse	George F. Reed	
North Carolina		
Bowman Gray School of Medicine		
Bowman Gray School of Medicine	Richard Janeway	
Duke University	Ewald W. Busse	
East Carolina University	William E. Laupus	
University of North Carolina	Christopher C. Fordham III	
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Tom M. Johnson	
Frederick C. Robbins	
Robert S. Daniels	
John P. Kemph	
Robert A. Liebelt	
Henry G. Cramblett	
John R. Beljan	
Thomas N. Lynn, Jr.	
M. Roberts Grover	
	Tom M. Johnson Frederick C. Robbins Robert S. Daniels John P. Kemph Robert A. Liebelt Henry G. Cramblett John R. Beljan Thomas N. Lynn, Jr.

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PENNSYLVANIA		
Hahnemann Medical College	Joseph R. DiPalma	
Jefferson Medical College	William F. Kellow	
Medical College of Pennsylvania	Alton I. Sutnick	
Pennsylvania State University	Harry Prystowsky	
University of Pennsylvania	Edward J. Stemmler	
University of Pittsburgh	Don Leon	
Temple University	Roger W. Sevy	
RHODE ISLAND		·
Brown University	Stanley M. Aronson	
SOUTH CAROLINA		
Medical University of South Carolina	W. Marcus Newberry, Jr.	
University of South Carolina	Roderick J. Macdonald, Jr.	

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	COD ROIT CAIL - OCTODER 1978	
SOUTH DAKOTA		
University of South Dakota	Charles Hollerman	
TENNESSEE		
* East Tennessee State University	Jack E. Mobley	
Meharry Medical College	Ralph J. Cazort	
University of Tennessee	James C. Hunt	
Vanderbilt University	John E. Chapman	·····
TEXAS		· · · · · · · · · · · · · · · · · · ·
Baylor College of Medicine	William T. Butler	
University of Texas - Dallas	Frederick J. Bonte	
University of Texas - Houston	Robert L. Tuttle	
University of Texas - San Antonio	Stanley E. Crawford	
University of Texas - Galveston	George T. Bryan	
Texas Tech University	George S. Tyner	

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Texas A & M University	Robert S. Stone		
UTAH			
University of Utah	G. Richard Lee		
VERMONT			
University of Vermont	William H. Luginbuhl		
VIRGINIA			
Eastern Virginia Medical School	Gerald H. Holman		
Medical College of Virginia	Jesse Steinfeld		
University of Virginia	Norman J. Knorr		
WASHINGTON			
University of Washington	Robert L. Van Citters		
WEST VIRGINIA			
* Marshall University	Robert W. Coon		
West Virginia University	John E. Jones	<u>L</u>	

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WISCONSIN		
Medical College of Wisconsin	Edward J. Lennon	
University of Wisconsin	Arnold L. Brown, Jr.	
PUERTO RICO		
University of Puerto Rico	Pedro J. Santiago Borrero	
* Catholic University	Alfred M. Bongiovanni	
LEBANON		
American University of Beirut	Samuel P. Asper	· · · · · · · · · · · · · · · · · · ·
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