

III. Relationship of the Council of Deans to the Organization of Student Representatives

A. Report of the Chairman of the OSR to the Chairman of the COD

55 Cromwell
San Antonio, Texas
December 2, 1971

Carleton B. Chapman, M.D.
Dean
Dartmouth Medical School
Hanover, NH 03755

Dear Dr. Chapman:

Enclosed is my report as Chairman of the OSR to you as Chairman of COD.

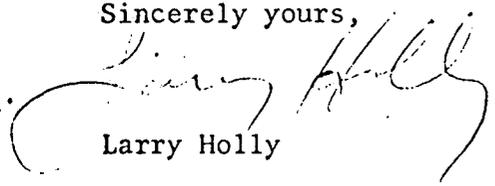
The first Annual Meeting of the OSR was productive. All of the necessary organizational details were dealt with. The process of defining the role of students in the AAMC also was begun.

This latter is perhaps the most difficult and definitely the most important issue before the OSR this year. As you can deduce from the list of committees and the resolutions considered, the interests and concerns of the OSR representatives are many and at the moment ill defined.

In keeping with the general direction of the Association, it will be the primary goal of the OSR this year to answer questions of priorities for student involvement and initiatives. As this goal takes shape and substance, I will make additional reports to you.

I would like to take this opportunity to formally thank you for your interest in support of the OSR and its activities.

Sincerely yours,


Larry Holly

LH:ca

This report of the activities of the Organization of Student Representatives at the Annual Meeting in Washington, D.C. is comprised of the following sections:

1. A revised and complete list of the members of the OSR with their address and the institution which they represent.
2. The names of the officers of the OSR elected at the meeting
3. Copies of the Agenda from the October 28 meeting and that from the October 29 meeting.
4. The text of the opening address by Larry Holly to the OSR
5. The titles of committees established by the OSR and a brief description of their function.
6. Membership of each committee with the Chairman if each designated.
7. Copies of the two resolutions passed by the OSR
8. Copies of several resolutions considered by the OSR but which were either not acted upon or were tabled until the February meeting.
9. A copy of the rules and regulations adopted by the OSR and approved by the assembly of the Association.
10. A text of Dr. Donald Wharton's address to the OSR on October 29 is not available to be included in this report.

OFFICERS OF THE ORGANIZATION OF STUDENT REPRESENTATIVES

Chairman

Larry Holly
University of Texas, San Antonio

Chairman-Elect

Kevin Soden
University of Florida, Gainesville

Secretary

Steven Ketchel
University of Arizona

REGIONAL REPRESENTATIVES

Southern Region

Harold Stewart
University of Oklahoma

Western Region

Allen Richardson
University of California, Los Angeles

Central Region

Sol Edlestein
Wayne State University

Northeast Region

Geraldine Richter
Georgetown University

REPRESENTATIVES-AT-LARGE

Winston C. Hughes
University of Southern California

Larry Wellikson
Temple University

ASSEMBLY RESOLUTION

1. Resolution as proposed by the Resolutions Committee - October 30, 1971.

"For the institutional members of the AAMC to prepare effectively students for the delivery of health care in the U.S.A. it is important that all students of human medicine and their respective schools be provided the opportunity for *participation* [representation] in the Association.

"Therefore, be it resolved that the AAMC strive toward providing for the active *participation* [membership] of schools of *osteopathic medicine* [osteopathy] in the Association and that the President and the Executive Council explore all possible steps towards accomplishing this goal."

2. Action of the Assembly.

- A. Motion to amend substituting words *italicized* for those in [] adopted by voice vote.
- B. Motion to table principle motion adopted.

RESOLUTION

Be It Resolved:

That the National Intern and Resident Matching Program retain the option for married students to match together under the program.

RESOLUTION:

It is our assumption that a fundamental human right is good health. It is with this perspective that we affirm:

Any factor having a detrimental effect on the health of an individual must be a subject of concern and opposition by all health workers.

Therefore, this body states UNCONSCIONABLE:

1. The war in Indochina is detrimental to the achievement of health and well-being, not only upon the battlefield, but at home where it perverts our priorities and distracts us from our primary commitments to medicine and health.
2. Destruction of the environment is counter to the goal of a healthy society.
3. The inequitable distribution and quality of healthcare delivery is a serious source of disease and human misery.

Be It Resolved:

1. The AAMC must actively appose the war in Indochina by pressuring the government and war related industry. Doctors must be encouraged to resist the draft and to refuse to use medical skills for military ends such as in the development chemical and biological warfare.
2. The AAMC establish a program dealing with the health hazards of environmental pollution which will include:
 - A. Recommendations to all medical colleges to establish curricula concerning the health hazards of environmental pollution
 - B. Recommendations that research into the dangers of environmental pollution be encouraged and the results of these studies be made available to the communities in which they are found.
 - C. Lobbying effort in Congress to establish stricter anti-pollution legislation
3. The AAMC encourage industry to recognize its responsibility for the pollution of the environment and to take immediate action to remedy this problem.

*Resolution may
not relate to
areas not clearly
formulated as
purpose in the
Charter*

4. The AAMC develop and distribute a position supporting a national health plan whose structure is such that all the resources of the health sciences are available equally to all citizens, regardless of the financial resources of such citizens.
5. The AAMC support the growth of neighborhood health centers developing both within and beyond the auspices of medical schools in recognition of the importance of accessible health care of educating communities about health and of the opportunities health students and doctors will have to learn from these clinics, to become more sensitive to patient needs, and to come in contact with patients in both a crisis oriented and preventative medicine setting.

Be It Resolved:

That the AAMC require for accreditation of its medical school affiliates prohibition of admissions discrimination on the basis of sex, and that active recruitment of women at the high school and college levels be established.

In addition, the AAMC must require representation in proportion to the number of women applicants, but not less than one woman on the admissions committee of the respective institutions.

ASSOCIATION OF AMERICAN MEDICAL COLLEGES

Organization of Student Representatives

October 28, 1971

AGENDA

- 7:00 P.M. Seating of Delegates
 Opening Address, Larry Holly
- 7:20 P.M. Rules and Regulations,
 Discussion and Adoption
- 8:20 P.M. Report of the Nominating Committee
- 8:30 P.M. Regional Caucus - designation of regional representatives
 to COD Administrative Board
- 9:15 P.M. Nominations from the Floor
 Candidates Speeches (3 minutes each)
 Election of 3 Officers
 Announcement of Regional Representatives
 Election of Additional Assembly Members
- 10:00 P.M. New Business - Plans for the Future
 a. Resolutions
 b. Resolutions to COD

ASSOCIATION OF AMERICAN MEDICAL COLLEGES

Organization of Student Representatives

AGENDA

October 29, 1971

- 7:00 P.M. Announcement of meeting on 10/30 between Dr. Cooper and
Chairman and Chairman-elect. Results of meeting to be
discussed at 7:00 P.M., 10/30/71.
- 7:10 P.M. Election of Representatives-at-large and introduction of
resolution concerning schools of Osteopathy.
- 7:30 P.M. Formation of O.S.R. Committees.
a) Nominations Committee
b) Finance Committee
c) Liaison with External Organizations
(SAMA, SNMA, etc.)
d) Committee on Rules and Regulations
e) Minority Affairs Committee
f) Action Committees
- 8:00 P.M. Dr. Wharton's address
- 9:00 P.M. Representatives to AAMC and GSA Committees
1) Journal of Medical Education
2) International Medicine
3) AAMC Student Affairs
GSA Steering Committee
- 9:20 P.M. Meetings and Communications
1) Meet with COD and GSA on regional basis
2) O.S.R. meeting in February
3) National Newsletter - Chairman
4) Regional correspondence
Regional representative
- 9:50 P.M. Additional Items

TEXT OF OPENING ADDRESS BY LARRY HOLLY TO OSR

The irony that American Medicine finds itself a part of is aptly described by Rosemary Stevens in her book, American Medicine and the Public Interest. She says:

Recent developments in medical education represent a striking success. The average doctor has been transformed in sixty years from an incompetent physician, whose strength lay in the "bedside manner" of his mystique, to a specialist...buttressed by an array of diagnostic and treatment aids and techniques. American doctors are among the best trained technological physicians in the world. Together, however, they are not providing optimal medical care; and it is this factor which has become the educational paradox - the manpower crisis- of the 1970's.

Simply stated the irony is, "GOOD DOCTORS BUT BAD MEDICINE".

You and I upon completion of post-graduate training will be among the best qualified physicians in the world today. We will not practice in the anecdotal medicine of herbs and spices as did our great grandfathers, rather we will practice the medicine of EKG's, EEG's, TIDEL VOLUMES, SERUM CREATININES and TISSUE BIOPSIES. In short, we will be good doctors..

But what of our medicine, that is, the delivery of daily health care to John Doe, Susie Smith and Clarence Jones. In the middle of a crisis if in the right place or if financially able they will receive excellent medical care. However, if in the wrong place or if financially unable, they may in fact receive no care at all. In addition the facilities for non-crisis or preventive medicine are almost exclusively restricted to infectious diseases and even those are inadequate. In short, we have a description of the remaining half of our irony, BAD MEDICINE.

Why is this ironical? Listen to the definition of irony: an incongruity between the actual result of a sequence of events and the normal or expected result. In 1910 the Flexner report addressed itself "to the task of reconstructing the American medical school on the lines of the highest modern ideas of efficiency and in accordance with the finest conceptions of public service." This report facilitated the assurance that our M.D.s would be GOOD DOCTORS. Unfortunately, good medicine which was expected to follow as a result did not. In 1970 the Carnegie commission report was concerned with the "vital importance of adopting the education of health manpower to the changes needed for an effective system of delivery of health care in the United States". Here it is implied that academic and scientific excellence alone in the training of a physician will not insure GOOD MEDICINE.

What relevance does a discussion of GOOD PHYSICIANS AND BAD MEDICINE have to do with an organizational meeting of the OSR? A great deal, I think.

In 1967 Bob Graham, A SAMA officer, first made the suggestion that the AAMC have an organized student input. At the Annual Meeting in the Fall of 1968, the assembly of the association passed a resolution supporting the inclusion of students in the activities of the association. In the Fall of 1970, each medical school dean was asked to send a representative of his institution to the Annual Meeting in Los Angeles. From that group of representatives a steering committee was elected to meet with the president and chairman of the association and devise a plan for student input. In February of 1971, in Chicago, the assembly approved the recommendation made by the steering committee for the formation of the Organization of Student Representatives.

Now the relevance of the irony, GOOD DOCTORS AND BAD MEDICINE. We have in name an organization and in fact an irony. It is my hope that the OSR within the AAMC can while maintaining the academic excellence in medical education begun by Flexner in 1910 move toward the accomplishment of the concerns of the Carnegie report of 1970, that is, GOOD MEDICINE for the United States.

COMMITTEES

Finance: To write a grant application with the assistance of the staff to underwrite the activities of the OSR

Rules & Regulations - To review the rules and regulations which have been adopted and to make recommendations for any changes.

Action Committee - To examine appropriate areas of concern to the OSR and make recommendations for formation of task forces or establishment of goals

Liaison Committee - To evaluate the working relationship between OSR and other student areas

Political Action - To examine appropriate governmental and legislative activities for the OSR

Nominations - To provide nominations to OSR, GSA and AAMC committees

Senior Electives - To compile and maintain a list of electives available to senior medical students

Minority Affairs - To parallel the activities of the Minority Affairs section of the GSA and to generate new goals and directions

ASSOCIATION OF AMERICAN MEDICAL COLLEGES

ORGANIZATION OF STUDENT REPRESENTATIVES

COMMITTEES

December 1, 1971 - November 30, 1972

FINANCE

Richard O'Connor, Chairman
Cliff Clark
Hal Strelnick
David Green
Peter Sherris
Earl Yunes
Tom Williams
Larry Holly

RULES & REGULATIONS

David Curfman, Chairman
John Horneff
Russ Keasler
John McPhail
Mark Cannon
Kevin Soden

ACTION COMMITTEE

John Palmintier, Chairman
Harold Stewart
Joseph Hillman
Robert Whipple
Mark Widome
Juan Iturregui-Pagan
Jane Henney

LIAISON

John Ward, Chairman
Timothy Smith
Eugene Belogorsky
Jan Weber
Gerald Germano
Robert Walther
Gary Peterson
Vinny Voci
Steven Ketchel

The OSR Chairman is Ex Officio
on all Committees

11/30/71-LH

W#8225

POLITICAL ACTION

Barry Sussman, Chairman
Geraldine Richter
Kenneth Pariser
Todd Swick
Leonard Finn
Jim Sbarbaro
Nelson Goldberg
Gordon Josephson
Dan Pearson
Donald Berwick
Earl Yunes

NOMINATIONS

Jeff Ackerman, Chairman
Larry Ransom
Martin Craven
Kevin Soden

SENIOR ELECTIVES

Barbara Costin, Chairman
Tony Castle
Maureen Herlihy
Larry Ransom
Boyd Myers
Blane Crandall

MINORITY AFFAIRS

Vernon Daly, Chairman
Alfonzo Jones
Alice Rothchild
Nathania Jones
Dan Longo
Bob Rankin
James Pendleton
Tom Simpson
William Terrell

GUEST

Tim Nice, Student Body President
Kirksville College of Osteopathic Med.
Kirksville, MO 63501