AGENDA
FOR
COUNCIL OF ACADEMIC SOCIETIES

WEDNESDAY, FEBRUARY 24, 1988
JOINT BOARDS SESSION AND RECEPTION
6:00 - 7:30 P.M.
JEFFERSON ROOM

CAS BOARD DINNER
7:30 - 9:30 P.M.
MILITARY ROOM

THURSDAY, FEBRUARY 25, 1988
CAS BOARD MEETING
8:00 A.M. - 12:30 P.M.
JACKSON ROOM

JOINT BOARDS LUNCH
12:30 - 1:30 P.M.
MILITARY ROOM

WASHINGTON HILTON HOTEL
WASHINGTON, D. C.
COUNCIL OF ACADEMIC SOCIETIES
ADMINISTRATIVE BOARD

SCHEDULE
February 24-25, 1988

Wednesday, February 24, 1988

6:00 - 7:00 p.m.                          Jefferson Room West
   Joint Boards Session
   Guest Speaker: Rep. David Obey (D-WI)

7:00 - 7:30 p.m.                         Jefferson Room East
   Joint Boards Reception

7:30 - 9:30                                  Military Room
   Council of Academic Societies Administrative Board Dinner

Thursday, February 25, 1988

8:00 - 11:00 a.m.                          Jackson Room
   Council of Academic Societies Administrative Board Meeting

11:00 a.m. - 12:30 p.m.                   Map Room
   CAS Administrative Board Meeting with Robert G. Petersdorf, M.D.

12:30 - 1:30 p.m.                          Military Room
   Joint Boards Luncheon

1:30 - 4:00 p.m.                           Hemisphere Room
   Executive Council Business Meeting

DATES TO REMEMBER

April 13-15, 1988                           CAS Spring Meeting
   San Diego, California

June 22-23, 1988                           Administrative Board/Executive Council
   Meetings, Washington, D. C.

September 7-8, 1988                        AAMC Annual Meeting

November 12-17, 1988                       Chicago, Illinois
COUNCIL OF ACADEMIC SOCIETIES
ADMINISTRATIVE BOARD

Thursday, February 25, 1988
8:00 - 11:00 a.m.
Jackson Room
Washington Hilton Hotel
Washington, D.C.

AGENDA

I. Chairman's Report -- Douglas E. Kelly, Ph.D.

II. Action Items
   A. Approval of Minutes.................................Y1
   B. Membership Applications
      Association of Anesthesiology Program Directors.............Y7
      Association of Pediatric Program Directors..................Y35
   C. Appointment of 1988 CAS Nominating Committee..............Y52
   D. Resident Supervision and Hours.............................B35
   E. ACGME Task Force Report on Resident Hours and Supervision...B78
   F. Statement on Professional Responsibility....................B90
   G. International Medical Scholars Program Bylaws...............B10
   H. Health Manpower Act..................................B82

III. Discussion Items
   A. Intramural Research at the NIH............................B97

IV. Information Items
   A. CAS Spring Meeting Schedule..............................Y56
   B. Group Reports to the Executive Council.....................R100
   C. Officers' Retreat.......................................B109

V. President's Report -- Robert G. Petersdorf, M.D.
   CAS Administrative Board goes to the Map Room of the Washington Hilton for this report.
COUNCIL OF ACADEMIC SOCIETIES  
ADMINISTRATIVE BOARD MEETING  

September 10, 1987  
8:00 a.m. - 12:30 p.m.  
Edison Room  
Washington Hilton Hotel  
Washington, D.C.

PRESENT:  

Board Members  
Frank G. Moody, M.D.  
Douglas E. Kelly, Ph.D.  
David H. Cohen, Ph.D.  
S. Craighead Alexander, M.D.  
Joe Dan Coulter, Ph.D.  
William F. Ganong, M.D.  
Ernst R. Jaffe', M.D.  
A. Everette James, Jr., M.D.  
Herbert Pardes, M.D.  

Staff  
James Bentley, Ph.D.*  
Robert Beran, Ph.D.*  
Jane Donovan*  
Richard Knapp, Ph.D.*  
David Moore  
Robert G. Petersdorf, M.D.*  
John Sherman, Ph.D.*  
Allan Shipp*  
Elizabeth M. Short, M.D.*  
Carl Taylor  
Kathleen Turner*  

Guests  
L. Thompson Bowles, M.D.  
John Colloton*  
Michael Gonzalez-Campoy, OSR  
Donald Langley, M.D., ABMS  
Kirk Murphy, M.D., OSR  
Edward J. Stemmler, M.D.*  

* Attended a portion of the meeting  

III. A. The minutes of the June meeting of the Board were approved as submitted.  

III. B. ACTION: The Board unanimously nominated David H. Cohen, Ph.D. and Virginia V. Weldon, M.D. as Distinguished Service Members of the AAMC.
III. D. Full Funding of Research Project Grants

The issue is: How can the Association best position itself to defend the legitimate costs of biomedical research and full funding of research project grants at study section/council recommended levels? The concern is that having lost the battle on number of grants, OMB is moving to cap costs per grant.

OMB compares costs with CPI, and the cost of research grants has been rising at a rate higher than CPI. The House Appropriations Committee report for FY 1988 requests the GAO to conduct a study of the underlying bases for cost increases at NIH, with special emphasis on differentiating between real program expansion and price growth.

Dr. Short reviewed a discussion paper on full funding of research grants prepared by the Division of Biomedical Research. The data show that in constant dollars the average cost of an awarded research project grant is less than it was in 1977.

Grant cost data are adjusted to constant dollars by the Biomedical Research Development Price Index (BRDPI). The Board speculated whether the BRDPI adequately reflects the true costs of research. The BRDPI does not reflect unpurchased buildings and equipment, cost sharing, increased costs due to regulation of research at the federal, state and local level, and increased costs resulting from using less than state-of-the-art equipment.

The concept of "full funding" sounds unsatisfactory and leaves the research community vulnerable to sounding greedy. Budgets in grant applications are soft; they are estimates. On what basis does one say that a grant is not fully funded? Researchers accept grants and somehow the work gets done. The Board agreed that funding should be determined by the peer review process, and a term such as "scientifically appropriate" peer-reviewed funding might be more appropriate.

The Board expressed dissatisfaction at the hurried and arbitrary way in which NIH Study Sections often review grant budgets. They preferred a more studied approach, and would like NIH to look into this situation to try to improve it. Sometimes Advisory Councils restore funds to grants that Study Sections have cut.

Lastly, Dr. Sherman reviewed the current AAMC goal of trying to get as much money into biomedical research as possible and the current strategy of not tying the appropriation to a specific number of grants. Dr. Sherman agreed with the Board that although the goal remains constant over time, the strategy for achieving that goal changes as conditions change. His perception was that specifying the number of grants to be funded might serve a secondary goal of spreading the appropriated funds as broadly as possible within the research community, but was not the determining factor in the size of the appropriation.
The Board supported a continuing effort by the Association on this topic.

V. D. Proposed Policies for the Establishment of a Jointly Sponsored AAHC/AAMC Group of Government Relations Representatives

Dr. Knapp announced the formation of a group of Government Relations Representatives (GRR). Government relations staff of Deans and Vice President’s for Medical Affairs (AAHC members) will participate.

Dr. Knapp explained that any CAS Society that wanted to place its name on the mailing list could do so. The only materials that the GRR will receive are those already being sent to all AAMC members.

The GRR will meet twice each year and share information -- a "networking" activity. A CAS Society representative or government relations full-time staff in a society is welcome to attend; however, consultants hired by some organizations will not be invited. The GRR will have a steering committee.

ACTION: The Board unanimously approved the establishment of the Group on Government Relations Representatives. The Board asked that consideration be given to determining how the CAS could be adequately represented on the steering committee of the GRR.

On a separate matter, Dr. Knapp informed the Board of a series of requests the Association had received to make political contributions. He explained that the Association cannot make such contributions as a 501(c)(3) organization. Only Political Action Committees can do this.

IV. A. Report on November 1 Dean’s Letter Release Date

Dr. Beran gave a progress report on the November 1 Dean’s letter release date. A few letters were sent out early, but at least 110 schools have fully complied with the November 1 date. The sentiment of the Board was to hold the line on the November 1 date for 1988, but it was agreed that discussion with all societies at the annual meeting was needed.

IV. D. Deferment of Student Loans for Residents

Dr. Beran explained that a housestaff in training can be declared a student for the purpose of having their GSL loans deferred through residency, starting with those whose borrowing begins July 1, 1987. In addition, the Department of Education has stated that "a borrower who is enrolled in a residency program at an eligible institution may, if he/she is considered by the school to be a full-time student, receive a deferment based on in-school status." This DOE ruling can be applied to all those currently in medical school or residency. These rulings do not
help residents in community-based hospitals, only those in academic hospitals. A proposed rule has also been published establishing procedures for loan deferment during research training; the Board will be informed when the rule becomes final.

IV. C. AAMC Inventory of Medical School-Industry Research Relationships

Dr. Short advised the Board that the Division of Biomedical Research will be conducting a study of medical school-industry research relationships in an attempt to gain an understanding of those relationships and help the medical schools as they enter into them. The first step in this effort will be a survey to go out late Fall. Deans, faculty, and business officers will be surveyed about current medical school activities and areas in which they perceive problems.

IV. B. Changes in the Examination Sequence for Licensure

Dr. Bowles explained that pressures are building in a growing number of states, especially New York and California, to require a single pathway to licensure. States have legal authority regarding licensure, and the licensing process will be determined by the states. The NBME and the Federation of State Licensing Boards have concluded that the timing is correct to review licensing procedures to devise a single national route to licensure. Cooperation of the academic community is essential.

One of the thoughts would be to change Part 3; instead of being Part 3 of an NBME Exam, it would be made a modification of the current FLEX 1 and 2. It would remain a FLEX examination and would be the third hurdle in a three-part national process leading to licensure.

Faculties would continue to control the first two parts of this process and would influence the third part because faculty members play a critical role on the FLEX committees that develop the FLEX exam. FMGs would be allowed to take the three-part exam. Eligibility criteria for taking this exam would be determined by state licensing boards, under state licensing authority. Dr. Langsley explained that this new approach would permit FMG access to graduate medical education through the licensing process.

Dr. Bowles emphasized that the process of reviewing licensing procedures would continue over one or two years, and the Board will be kept appraised of activity in this area.

II. President’s Report

Dr. Petersdorf announced the appointment of Edwin I. Crocker as AAMC Vice President for Administrative Services. Mr. Crocker comes to the AAMC from Mills College in Oakland, California, where he is Vice President for Finance and Treasurer. He will start his new position with AAMC on November 16.
He also announced the appointment of Robert I. Levy, M.D., as AAMC Vice President for Biomedical Research. Dr. Levy has an outstanding record in lipid research. He was director of the NHLBI from 1975 to 1981; he then served as dean of the medical school at Tufts University from 1981 to 1983. He is currently Senior Associate Vice President for Health Sciences at Columbia University. Dr. Petersdorf explained that the Association needs someone who has close relationships with senior officials at NIH and at the Institute of Medicine, and that Dr. Levy meets this need. He will join the AAMC January 1, 1988.

Senior staff of AAMC had held an "advance" retreat in early September to discuss issues important to the Association. Topics included management of AAMC data bases, AAMC programs in minority affairs, membership issues, and the new Group on Government Relations Representatives.

III. E. Paper on Housestaff Hours

A draft paper was written in response to the Executive Council decision in June that the Association should develop a position on this subject. The paper concludes that housestaff training has experienced a number of changes over the years and needs reexamination. Deans, hospital directors and OSR had offered suggestions for modifying the paper. This white paper will not focus solely on the situation in New York; California and other states were also expressing concern about the situation.

The Board supported continued efforts to develop an Association position regarding housestaff hours and supervision.

III. C. Report of Ad Hoc Committee on Housestaff Participation

The Committee proposed an Organization of Resident Representatives (ORR). COTH full-member hospitals should provide funding for the ORR, and therefore, they should also determine the selection of the representatives. The ORR Board would report to the COTH Board but also have a formal linkage with the CAS Board. The Committee emphasized the desirability of having a variety of disciplines represented on the Board of the ORR, and specified that the ORR focus on educational issues and not on local working conditions. They recommended that the report be discussed by each of the full Councils before final action by the Executive Council and Assembly.

ACTION: The Board unanimously voted to receive the report of the Committee for discussion at the Councils.

V. B. ACGME Guidelines for Accrediting Enduring Educational Materials

Dr. Short reported that the ACGME was seeking approval of a policy change that would permit them to accredit organizations that produce enduring educational materials such as tapes. The ACGME would develop standards for accreditation of these organizations.
ACTION: The Board unanimously approved the policy change.

V. C. JCAH Proposed Survey Guidelines for Academic Medical Centers

Dr. Short informed the Board that the JCAH recently developed a plan to improve the survey process for academic medical centers (AMCHs). The plan consists of (1) the addition of a physician with AMCH experience to the survey team, and (2) new survey guidelines designed to assess the extent to which teaching and research activities contribute to compliance with JCAH standards. The guidelines will be field tested at three or four AMCHs this fall, after which they will be referred back to the JCAH for final review and adoption. Dr. Langsley noted that these guidelines are based on a structural approach to quality; the JCAH has a further goal to develop process and outcome measures of quality over the next five years.
MEMBERSHIP APPLICATION
COUNCIL OF ACADEMIC SOCIETIES
ASSOCIATION OF AMERICAN MEDICAL COLLEGES

MAIL TO: AAMC, Suite 200, One Dupont Circle, N.W., Washington, D.C. 20036
ATTENTION: Jane Donovan

NAME OF SOCIETY: Association of Anesthesiology Program Directors

MAILING ADDRESS: AAPD
515 Busse Highway
Park Ridge, IL 60068

PURPOSE: The principal purpose of the Association of Anesthesiology Program Directors is to provide a forum for the discussion and development of educational, financial, and administrative policies concerning graduate medical education in anesthesiology.

AAPD Bylaws - Preamble

MEMBERSHIP CRITERIA: Program Directors of anesthesiology residency programs in the United States that have been approved by the Accreditation Council on Graduate Medical Education ("ACGME") shall qualify for membership in the Association.

AAPD Bylaws - Article II, Section 2.1

NUMBER OF MEMBERS: 140
NUMBER OF FACULTY MEMBERS: 140
DATE ORGANIZED: 10/24/86
SUPPORTING DOCUMENTS REQUIRED: (Indicate date of each document in blank)
1. Constitution and Bylaws 7/14/86
2. Program and Minutes of Annual Meeting 1986-87 (enclosed)
3. Copy of IRS Approval under Sections 501(c)(3) and 509(a) of the Internal Revenue Code 7/31/87 (enclosed)

1/5/88
Date Completed

James J. Richter, M.D., Ph.D.
Completed by - Signature
Completed by - Please Print

Secretary-Treasurer
Title

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PREAMBLE

The principal purpose of the Association of Anesthesiology Program Directors is to provide a forum for the discussion and development of educational, financial, and administrative policies concerning graduate medical education in anesthesiology.

ARTICLE I
OFFICES

Section 1.1. Principal Office. The principal office of the corporation (hereinafter referred to as the "Association") in the State of Illinois shall be located in the City of Park Ridge. The Association may have such other offices, either within or without the State of Illinois, as the Council may determine or as the affairs of the Association may require from time to time.

Section 1.2. Registered Office. The Association shall have and continuously maintain in the State of Illinois a registered office, and a registered agent whose office is identical with such registered office, as required by the Illinois General Not For Profit Corporation Act. The registered office may be, but need not be, identical with the principal office in the State of Illinois, and the address of the registered office may be changed from time to time by the Council.
ARTICLE II
MEMBERS

Section 2.1. Eligibility for Membership. Program Directors of anesthesiology residency programs in the United States that have been approved by the Accreditation Council on Graduate Medical Education ("ACGME") shall qualify for membership in the Association.

Section 2.2. Application for Membership. Any person who meets the qualifications for membership shall, upon making of proper application and payment of necessary initiation fee (if any) and dues fixed by the Council, be entitled to become a member. A member shall give immediate written notice to the Secretary/Treasurer if his employment changes, the ACGME withdraws approval, or the anesthesiology residency program for which he serves as Director is discontinued for any reason.

Section 2.3. Voting Rights. Each member shall be entitled to one vote on each matter submitted to a vote of the members.

Section 2.4. Termination of Membership. Any member who becomes ineligible for membership shall automatically cease to be a member of the Association, and the Secretary/Treasurer shall send such a member written notice to that effect. The Council, by affirmative vote of two-thirds of all of the members of the Council, may suspend or expel a member for cause after an appropriate hearing, and may, by a majority vote of those present
at any regularly constituted meeting, suspend or expel any member
who shall be in default in the payment of dues for the period
fixed in Section 10.3 of these bylaws.

Section 2.5. Resignation. Any member may resign by
filing a written resignation with the Secretary/Treasurer, but
such resignation shall not relieve the member so resigning of the
obligation to pay any dues, assessments or other charges
theretofore accrued and unpaid.

Section 2.6. Reinstatement. Upon written request
signed by a former member and filed with the Secretary/Treasurer,
the Council may, by the affirmative vote of two-thirds of all of
the members of the Council, reinstate such former member to
membership upon such terms as the Council may deem appropriate.

Section 2.7. Transfer of Membership. Membership in
this Association is not transferable or assignable.

ARTICLE III

MEETINGS OF MEMBERS

Section 3.1. Annual Meeting. An annual meeting of the
members shall be held in the fall in each year, beginning in
1986, at such time and place as fixed by the Council, for the
purpose of electing officers and Councillors and for the
transaction of such other business as may come before the
meeting. Only members shall attend business sessions, except as
otherwise provided by the Council. Members may bring the
teaching coordinator (or equivalent) of their anesthesiology
residency program to nonbusiness sessions of each annual meeting
and to all special meetings that are open to nonmembers. A substitute for a member shall be allowed to attend meetings only with the permission of the officers of the Association. If the election of officers and Councillors shall not be held on the day designated by the Council for any annual meeting, or at any adjournment thereof, the Council shall cause the election to be held at a special meeting of the members as soon thereafter as conveniently may be possible.

Section 3.2. Special Meetings. Special meetings of the members may be called by the President, the Council or not less than one-tenth of the members. The Council shall determine eligibility for attendance by nonmembers at special meetings.

Section 3.3. Place of Meeting. The Council may designate any place, either within or without the State of Illinois, as the place of meeting for any annual meeting or for any special meeting called by the Council.

Section 3.4. Notice of Meetings. Written notice stating the place, day and hour of any meeting of members shall be delivered, either personally or by mail, to each member entitled to vote at such meeting, not less than ten nor more than forty days before the date of such meeting, by or at the direction of the President, or the Secretary/Treasury, or the officers or persons calling the meeting. In case of a special meeting or when required by statute or by these bylaws, the
purpose or purposes for which the meeting is called shall be stated in the notice. If mailed, the notice of a meeting shall be deemed to be delivered when deposited in the United States mail addressed to the member at his address as it appears on the records of the Association, with postage thereon prepaid.

Section 3.5. Quorum. The members holding 25 percent of the votes which may be cast at any meeting shall constitute a quorum at such meeting. If a quorum is not present at any meeting of members, a majority of the members present may adjourn the meeting from time to time without further notice.

Section 3.6. Manner of Acting. A majority of the votes entitled to be cast on a matter to be voted upon by the members present at a meeting at which a quorum is present shall be necessary for the adoption thereof unless a greater proportion is required by law or by these bylaws.

Section 3.7. Voting by Mail. Where Councillors are to be elected by members, such election may be conducted by mail in such manner as the Council shall determine.

ARTICLE IV
COUNCIL

Section 4.1. General Powers. The affairs of the Association shall be managed by its Board of Directors. For purposes of these bylaws, the Board of Directors shall be referred to as the Council, and directors shall be referred to as Councillors. The Council shall consist of the officers and elected Councillors.

Section 4.2. Number and Qualifications. The number of
Councillors shall be not less than three nor more than fifteen, as shall be fixed from time to time by the members. Councillors need not be residents of the State of Illinois, but they must be members of the Association.

Section 4.3. Tenure of Non-Officer Councillors.

a. Except as provided in subparagraph c below, the term of office of a non-officer Councillor shall be for three years. No person shall be entitled to serve as such a Councillor for more than one term beginning with the organization meeting in 1986 or thereafter, provided that this limitation shall not prevent a person from being reelected to the Council after at least one year's absence, and provided further that service as a Councillor before the 1986 organization meeting or by virtue of election by the Council or by the membership to fill a vacancy shall not be counted for purposes of this limitation.

b. At the annual meeting in 1986, members shall elect six non-officer Councillors. In subsequent years, the members shall elect that number of non-officer Councillors as is necessary by virtue of the expiration of Councillors' terms on a staggered basis as provided in subparagraph c below and the total number of Councillors fixed by the members. Members shall be entitled to cast that number of votes as there are non-officer Councillors to be elected, but no member shall be entitled to cumulate his votes. That number of persons, corresponding to the number of non-officer Councillors to be elected, who each receive
a majority of votes shall be deemed elected. In the event of a
tie or a failure to obtain a majority, a runoff election shall be
held.

c. At its organization meeting held after the annual
meeting of members in 1986, the non-officer Councillors elected
at such meeting shall by lot divide themselves into three classes
having respective terms of one, two and three years each, so that
the terms of office of one-third of the non-officer Councillors
Service by a non-officer Councillor for a term of two years or
more shall be deemed service for one Councillor term, for
purposes of the limitation contained in subparagraph a above. If
the members increase or decrease the number of Councillors, they
shall identify the term of each non-officer Councillor in the
motion or resolution establishing the revised number of
Councillors, so that, insofar as possible, an equal number of
Councillors have terms of one, two, and three years each.

Section 4.4. Regular Meetings. A regular organization
meeting of the Council shall be held without other notice than
this bylaw, immediately after, and at the same place as, the
first annual meeting of members. The Council may provide by
resolution the time and place, either within or without the State
of Illinois, for the holding of additional regular meetings of
the Council without other notice than such resolution.

Section 4.5. Special Meetings. Special meetings of the
Council may be called by or at the request of the President or 50
percent of the Councillors then serving. The person or persons authorized to call special meetings of the Council may fix any place, either within or without the State of Illinois, as the place for holding any special meeting of the Council called by them.

Section 4.6. Notice. Notice of any special meeting of the Council shall be given at least ten days prior thereto by written notice delivered personally or sent by mail or telegram to each Councillor at his address as shown on the records of the Association. If mailed, such notice shall be deemed to be delivered when deposited in the United States mail in a sealed envelope so addressed, with postage thereon prepaid. Any Councillor may waive notice of any meeting. The attendance of a Councillor at any meeting shall constitute a waiver of notice of such meeting, except where a Councillor attends a meeting for the express purpose of objecting to the transaction of any business because the meeting is not lawfully called or convened. Neither the business to be transacted at, nor the purpose of, any regular or special meeting of the Council need be specified in the notice or waiver of notice of such meeting, unless specifically required by law or by these bylaws.

Section 4.7. Quorum. A majority of the Council shall constitute a quorum for the transaction of business at any meeting of the Council, but if less than a majority of the Councillors are present at said meeting, a majority of the
Councillors present may adjourn the meeting from time to time without further notice.

Section 4.8. Manner of Acting. The act of a majority of the Councillors present at a meeting at which a quorum is present shall be the act of the Council, unless the act of a greater number is required by law or by these bylaws.

Section 4.9. Vacancies. Any vacancy occurring in the Council may be filled by the affirmative vote of a majority of the remaining Councillors, though less than a quorum of the Council. A Councillor elected by the Council to fill a vacancy shall serve until the next annual meeting of members, at which time the members shall elect a Councillor for the unexpired term.

Section 4.10. Compensation. Councillors shall not receive any compensation for their services as such, but by resolution of the Council payment of expenses of attendance, if any, may be allowed for attendance at each regular or special meeting of the Council; provided that nothing herein contained shall be construed to preclude any Councillor from serving the Association in any other capacity and receiving compensation therefor.

Section 4.11. Informal Action by Councillors. Any action required by law to be taken at a meeting of the Councillors, or any action which may be taken at a meeting of Councillors, may be taken without a meeting if a consent in writing, setting forth the action so taken, shall be signed by all of the Councillors.
Section 4.12. Conference Calls. To the extent authorized by law, members of the Council may participate in a meeting by means of a conference telephone or similar communications equipment, provided that all other Councillors participating in such a meeting can hear each other. Participation in a meeting pursuant to this section shall constitute presence in person at such meeting.

ARTICLE V
OFFICERS

Section 5.1. Officers. The officers of the Association shall be a President, an Immediate Past-President, a President-Elect, and a Secretary/Treasurer. No two offices may be held by the same person.

Section 5.2. Election and Term of Office. The officers of the Association shall be elected by the members at the annual meeting of members. At the annual meeting of members in 1986, members shall elect a President, a President-Elect and a Secretary/Treasurer. Thereafter, members shall elect a President-Elect and a Secretary/Treasurer in even-numbered years beginning in 1988. The President shall serve a term of two years, except that the initial President elected in 1986 shall serve a one-year term. The President-Elect and the Immediate Past-President each shall serve a term of one year. The Secretary/Treasurer shall serve a term of two years, which shall run concurrently with that of the President-Elect. Following service for one year as President-Elect, the President-Elect
shall assume the office of President at the annual meeting of members. Each officer shall hold office until his successor shall have been duly elected and shall have qualified. A President shall not be eligible for reelection as an officer. The Secretary/Treasurer shall be eligible to serve one additional term as Secretary/Treasurer.

Section 5.3. Removal. By affirmative vote of two-thirds of all of the members of the Council, the Council may remove any officer whenever in its judgment the best interests of the Association would be served thereby, but such removal shall be without prejudice to the contract rights, if any, of the officer so removed.

Section 5.4. Vacancies. A vacancy in any office except those of President and Immediate Past-President because of death, resignation, removal, disqualification or otherwise, may be filled by the Council until the next annual meeting of members, at which time the members shall fill any vacancy for the unexpired portion of the term.

Section 5.5. President. The President shall be the principal executive officer of the Association and shall in general supervise and control all of the business and affairs of the Association. He shall preside at all meetings of the members and of the Council. He may sign any deeds, mortgages, bonds, contracts, or other instruments which the Council has authorized to be executed, except in cases where the signing and execution thereof shall be expressly delegated by the Council or by these
Section 5.6. President-Elect and Immediate Past-President. In the absence of the President or in the event of his inability or refusal to act, the President-Elect shall perform the duties of the President, and when so acting, shall have all the powers of and be subject to all the restrictions upon the President. If a President-Elect is not serving or in the event of his inability or refusal to act, the Immediate Past-President shall perform the duties of the President, and when so acting, shall have all the powers of and be subject to all the restrictions upon the President. The President-Elect and the Immediate Past-President each shall perform such other duties as from time to time may be assigned to them by the President or by the Council.

Section 5.7. Secretary/Treasurer. The Secretary/Treasurer shall keep the minutes of the meetings of the members and of the Council in one or more books provided for that purpose; see that all notices are duly given in accordance with the provisions of these bylaws or as required by law; be the custodian of the corporate records and of the seal of the Association and see that the seal of the Association is affixed to all documents, the execution of which on behalf of the Association under its seal is duly authorized in accordance with
the provisions of these bylaws; keep a register of the post-office address of each member, which shall be furnished to the Secretary/Treasurer by such member; have charge and custody of and be responsible for all funds and securities of the Association; receive and give receipts for monies due and payable to the Association from any source whatsoever, and deposit all such monies in the name of the Association in such banks, trust companies or other depositaries as shall be selected in accordance with the provisions of Article VII of these bylaws; and in general perform all duties incident to the office of Secretary/Treasurer and such other duties as from time to time may be assigned to him by the President or by the Council. If required by the Council, the Secretary/Treasurer shall give a bond for faithful discharge of his duties in such sum and with such surety or sureties as the Council shall determine.

ARTICLE VI

COMMITTEES

Section 6.1. Committees of Councillors. The Council, by resolution adopted by a majority of the Councillors in office, may designate and appoint one or more committees, each of which shall consist of two or more Councillors, which committees, to the extent provided in said resolution, shall make recommendations to the Council.

Section 6.2. Other Committees. Other committees of the Association not having and exercising the authority of the Council may be appointed in such manner as may be designated by a
resolution adopted by a majority of the Councillors present at a meeting at which a quorum is present. Except as otherwise provided in such resolution, members of each such committee shall be members of the Association, and the President of the Association shall appoint the members thereof. Any member thereof may be removed by the persons or persons authorized to appoint such member whenever in their judgment the best interests of the Association shall be served by such removal.

Section 6.3. Term of Office. Each committee member shall be appointed annually and shall continue as such until the next organization meeting of Councillors following an annual meeting of the members of the Association and until his successor is appointed, unless the committee shall be sooner terminated or unless such member shall be removed from such committee or shall cease to qualify as a member thereof.

Section 6.4. Chairman. One member of each committee shall be appointed chairman by the person or persons authorized to appoint the members thereof.

Section 6.5. Vacancies. Vacancies in the membership of any committee may be filled by appointments made in the same manner as provided in the case of the original appointments.

Section 6.6. Quorum. Unless otherwise provided in the resolution of the Council designating a committee, a majority of the whole committee shall constitute a quorum and the act of a majority of the members present at a meeting at which a quorum is present shall be the act of the committee.
Section 6.7. Rules. Each committee may adopt rules for its own government not inconsistent with these bylaws or with rules adopted by the Council.

ARTICLE VII

CONTRACTS, CHECKS, DEPOSITS AND FUNDS

Section 7.1. Contracts. The Council may authorize any officer or officers, agent or agents of the Association in addition to the officers so authorized by these bylaws, to enter into any contract or execute and deliver any instrument in the name of and on behalf of the Association, and such authority may be general or confined to specific instances.

Section 7.2. Checks, Drafts, and Evidence of Indebtedness. All checks, drafts or orders for the payment of money, notes or other evidences of indebtedness issued in the name of the Association, shall be signed by such officer or officers, agent or agents of the Association and in such manner as shall from time to time be determined by resolution of the Council.

Section 7.3. Deposits. All funds of the Association shall be deposited from time to time to the credit of the Association in such banks, trust companies or other depositaries as the Council may select.

Section 7.4. Gifts. The Council may accept on behalf of the Association any contribution, gift, bequest or devise for the general purposes or for any special purposes of the Association.
ARTICLE VIII
BOOKS AND RECORDS

The Association shall keep correct and complete books and records of account and also shall keep minutes of the proceedings of its members, Council and committees having any of the authority of the Council, and shall keep at its registered or principal office a record giving the names and address of the members entitled to vote. All books and records of the Association may be inspected by any member, or his agent or attorney, for any proper purpose at any reasonable time.

ARTICLE IX
FISCAL YEAR

The fiscal year of the Association shall begin on the first day of January and end on the last day of December in each year.

ARTICLE X
DUES

Section 10.1. Annual Dues. The Council may determine from time to time the amount of initiation fee, if any, and annual dues payable to the Association by members.

Section 10.2. Payment of Dues. Dues shall be payable in advance on the first day of January in each fiscal year. Dues of a new member shall be prorated from the first day of the month in which such new member is elected to membership, for the remainder of the fiscal year of the Association.
Section 10.3. Default and Termination of Membership.
When any member of any class shall be in default in the payment of dues for a period of six months from the beginning of the fiscal year or period for which such dues became payable, his membership may thereupon be terminated by the Council in the manner provided in Article II of these bylaws.

ARTICLE XI
SEAL
The Council shall provide a corporate seal, which shall be in the form of a circle and shall have inscribed thereon the name of the Association and the words "Corporate Seal - Illinois."

ARTICLE XII
WAIVER OF NOTICE
Whenever any notice is required to be given under the provisions of the Illinois Not for Profit Corporation Act or under the provisions of the articles of incorporation or the bylaws of the Association, a waiver thereof in writing signed by the person or persons entitled to such notice, whether before or after the time stated therein, shall be deemed equivalent to the giving of such notice.

ARTICLE XIII
INDEMNIFICATION
The Association shall indemnify its officers, Councillors, employees and agents to the extent permitted by Illinois law.
ARTICLE XIV
PROHIBITED ACTIVITIES

No member, officer, Councillor, employee, or agent of the Association shall take any action or carry on any activity by or on behalf of the Association which is not permitted to be taken or carried on by an organization exempt under Section 501(c)(3) of the Internal Revenue Code and its regulations, as they now exist or may be hereafter amended, or by an organization contributions to which are deductible under Section 170(c)(2) of such Code and regulations, as they now exist or as they may hereafter be amended.

ARTICLE XV
GENDER

Use of the masculine gender in these bylaws shall be deemed to include the feminine gender as well.

ARTICLE XVI
AMENDMENTS TO BYLAWS

Section 16.1. General Procedure. These bylaws may be altered, amended or repealed and new bylaws may be adopted by a two-thirds majority of the members present at any annual meeting or at any special meeting, if at least thirty days' written notice is given of intention to alter, amend or repeal or to adopt new bylaws at such meeting.

Section 16.2. Emergency Procedure. Notwithstanding anything in these bylaws to the contrary, these bylaws may be altered, amended or revoked or new bylaws may be adopted on an
emergency basis by a vote of three-fourths of the total number of Councillors upon such notice as may be reasonable under the circumstances where such action is necessary to enable the Association or the Council to comply with any statute, regulation or judicial or administrative decision or to meet an emergency situation which threatens to impair the ability of the Association or the Council to carry out, perform or accomplish any of the Association's purposes or objectives. Any changes in the bylaws approved pursuant to this emergency procedure shall be ratified by the members pursuant to the procedure set forth in Section 16.1 of these bylaws.
ASSOCIATION OF ANESTHESIOLOGY PROGRAM DIRECTORS

Annual Meeting, October 24, 1986
New Orleans Hilton Hotel

The meeting was called to order at 6:05 PM by Dr. Craig Alexander. Dr. Alexander reviewed the progress made by the Steering Committee since the first organizational meeting that occurred on October 27, 1985. The Steering Committee, in consultation with Attorney Judith Semo of Squire, Saunders, and Dempsey, proposed Bylaws of the Association of Anesthesiology Program Directors. Copies of the proposed bylaws were distributed to the entire membership prior to this meeting. Subsequent to a motion and its second from the floor, it was

VOTED: That the bylaws completed July 14, 1986 are adopted by the organization.

Dr. Alexander noted that the following statement was approved as part of Article II Section 3.1. "Members may bring the teaching coordinator (or equivalent) of the anesthesiology residency program to non-business sessions of each annual meeting and to all special meetings that are open no non-members.

It was suggested from the floor that the officers of AAPD confirm with legal counsel whether members will have financial liability if the association dissolves or goes bankrupt.

Following nominations by Dr. Alper and seconds from the floor, it was

VOTED: That Dr. S. Craighead Alexander serve as President until 1987.
That Dr. E. S. Siker serve as President-Elect.
That Dr. James Richter serve as Secretary/Treasurer.

Nominations for council members were suggested by the Steering Committee. There being no additional nominations from the floor, it was

VOTED: That the following members serve the indicated terms as councillors:

Dr. Lennart Fagraeus 3 years
Dr. John Mazuzan 3 years
Dr. William Owens 2 years
Dr. Gale Thompson 2 years
Dr. Louis Blancato 1 year
Dr. Ronald Gabel 1 year

Upon the recommendation of the Steering Committee, it was

VOTED: That dues of $150 be charged each member for 1987.

Dr. Alexander announced that the administrative affairs of the AAPD would be provided by Mr. Glenn Johnson at ASA headquarters in Park Ridge, Illinois
Dr. Paul Barash suggested that a "hot line" or an electronic bulletin board be established so that unexpected openings for residency positions could be announced. Dr. Robert Epstein strongly supported the suggestion. Following discussion the suggestion was referred to the AAPD Council for further action.

Following further discussion there was consensus that the officers of AAPD confer with officers of SAAC to coordinate programs and plans for the 1987 annual meetings.

Attached to these minutes are the bylaws as approved and a list of members who attended the meeting.

Respectfully submitted,

[Signature]

James J. Richter
Secretary/Treasurer
| Abadir, Adel                      | Brookdale, Brooklyn        |
| Ahlgren, Warner                  | Scott & White, Texas       |
| Albrecht, Ronald F.              | Michael Reese             |
| Alexander, S.C.                  | Univ. of Wisconsin        |
| Alper, Milton H.                 | Childrens Hospital, Boston|
| Arawaka, Kasumi                  | Univ. of Kansas           |
| Ascioti, Anthony                 | St. Joseph, Syracuse      |
| Barash, Paul                     | Yale                      |
| Batra, M.S.                      | Mason Clinic, Seattle     |
| Becker, Karl E.                  | Univ. of Kansas, Wichita  |
| Berkebile, Paul                  | Western Penna. Hospital   |
| Biebuyck, Julien                 | Milton S. Hershey         |
| Blancato, Louis                  | St. Luke’s, New York      |
| Brauer, Floyd                    | Loma Linda Univ.          |
| Cascorbi, Helmut                 | Univ. Hospital of Cleveland|
| Cottrell, James E.               | SUNY Downstate            |
| Craythorne, N.W.D.               | Univ. of Miami            |
| Crumrine, Robert S.              | Medical Coll. of Georgia  |
| Deleo, Bernard                   | Albany Medical Center     |
| Douglas, James R.                | Ochsner, New Orleans      |
| Eggers, C.W.N.                   | Univ. of Missouri         |
| Eisele, John                     | Univ. of California, Davis|
| Eller, Richard W.                | West Virginia School of Medicine |
| Epstein, Robert                  | Univ. of Virginia         |
| Ernst, Ed                        | Univ. of Alabama          |
| Fagraeus, Lennart                | Univ. of Oklahoma         |
| Fairlie, H. Barrie               | Stanford Univ.            |
| Gabel, Ronald A.                 | Strong Memorial           |
| Gibbs, Charles                   | Univ. of Colorado         |
| Goldiner, Paul                   | Albert Einstein          |
| Gordon, John L.                  | Creighton Univ.           |
| Grogono, Alan                    | Tulane                    |
| Hicks, Robert G.                 | St. Vincent’s, New York   |
| Hornbein, Thomas                 | Univ. of Washington       |
| Ivankovich, Anthony              | St. Luke’s, Chicago       |
| James, Francis M.                | North Carolina Baptist Hospital |
| Jimenez-Velez, Jose              | Univ. of Puerto Rico      |
| Karasik, Lawrence                | Monmouth Medical Center   |
| Karcha, R. K.                    | Cook County Univ., Chicago|
| Katz, Jeffrey                    | Univ. of Texas, Houston   |
| Katz, Ronald                     | Univ. of California, Los Angeles |
| Klein, E. F.                     | Richland, South Carolina  |
| Lees, Davie E.                   | New York Medical College  |
| Lucas, Melvin                    | Cleveland Metropolitan Hosp. |
| Macnamara, Thomas                | Georgetown Univ.          |
| Mahaffey, John E.                | Med. Univ. Hosp., South Carolina |
| Martin, John T.                  | Medical College of Ohio   |
| May, W. S.                       | Texas Tech Univ.          |
| Mazuzan, James E.                | Medical Center of Vermont |
| Miller, John                     | Univ. of South Alabama    |
| Nahrwold, Michael                | Univ. of Nebraska         |
| Nicodemus, H.F.                  | Naval Hospital, Maryland  |
| Plewes, John                     | Univ. of Oklahoma         |
Richter, James J.
Rigor, Benjamin
Roizen, Michael F.
Schweiss, John F.
Seltzer, Joseph
Smith, Jan D.
Stanec, Anna
Thompson, Dola S.
Trachtenberg, Howard
Tremper, Kevin K.
Underwood, Patricia
Vaughan, Robert W.
Wade, John
Watkins, W. David
Welch, Gary
Wen-Hsien, W.U.
Willock, Marcell
Winter, Peter
Wooten, Daniel J.

Hartford Hospital
Univ. of Louisville
Chicago
St. Louis Univ.
Thomas Jefferson
Northeastern Ohio
St. Joseph, Paterson, NJ
Univ. of Askansas
Baystate Medical Center
Univ. of California, Irvine
Albert Einstein
North Carolina Memorial Hosp.
Univ. of Manitoba
Duke Univ.
UMass
New Jersey Medical School
Univ. Hospital, Boston
Univ. of Pittsburgh
Drew Medical Center
Dear Applicant:

Based on information supplied, and assuming your operations will be as stated in your application for recognition of exemption, we have determined you are exempt from Federal income tax under section 501(c)(3) of the Internal Revenue Code.

Because you are a newly created organization, we are not now making a final determination of your foundation status under section 509(a) of the Code. However, we have determined that you can reasonably be expected to be a publicly supported organization described in section 509(a)(2).

Accordingly, you will be treated as a publicly supported organization, and not as a private foundation, during an advance ruling period. This advance ruling period begins on the date of your inception and ends on the date shown above.

Within 90 days after the end of your advance ruling period, you must submit to us information needed to determine whether you have met the requirements of the applicable support test during the advance ruling period. If you establish that you have been a publicly supported organization, you will be classified as a section 509(a)(1) or 509(a)(2) organization as long as you continue to meet the requirements of the applicable support test. If you do not meet the public support requirements during the advance ruling period, you will be classified as a private foundation for future periods. Also, if you are classified as a private foundation, you will be treated as a private foundation from the date of your inception for purposes of sections 507(d) and 4940.

Grantors and contributors may rely on the determination that you are
not a private foundation until 90 days after the end of your advance ruling period. If you submit the required information within the 90 days, grantors and contributors may continue to rely on the advance determination until the Service makes a final determination of your foundation status.

If notice that you will no longer be treated as a publicly supported organization is published in the Internal Revenue Bulletin, grantors and contributors may not rely on this determination after the date of such publication. In addition, if you lose your status as a publicly supported organization and a grantor or contributor was responsible for, or was aware of, the act or failure to act that resulted in your loss of such status, that person may not rely on this determination from the date of the act or failure to act. Also, if a grantor or contributor learned that the Service had given notice that you would be removed from classification as a publicly supported organization, then that person may not rely on this determination as of the date such knowledge was acquired.

If your sources of support, or your purposes, character, or method of operation change, please let us know so we can consider the effect of the change on your exempt status and foundation status. In the case of an amendment to your organizational document or bylaws, please send us a copy of the amended document or bylaws. Also, you should inform us of all changes in your name and address.

As of January 1, 1984, you are liable for taxes under the Federal Insurance Contributions Act (social security taxes) on remuneration of $100 or more you pay to each of your employees during a calendar year. You are not liable for the tax imposed under the Federal Unemployment Tax Act (FUTA).

Organizations that are not private foundations are not subject to the excise taxes under Chapter 42 of the Code. However, you are not automatically exempt from other Federal excise taxes. If you have any questions about excise, employment, or other Federal taxes, please let us know.

Donors may deduct contributions to you as provided in section 170 of the Code. Bequests, legacies, devises, transfers, or gifts to you or for your use are deductible for Federal estate and gift tax purposes if they meet the applicable provisions of sections 2055, 2106, and 2522 of the Code.

You are required to file Form 990, Return of Organization Exempt from Income Tax, only if your gross receipts each year are normally more than $25,000. If a return is required, it must be filed by the 15th day of the fifth month after the end of your annual accounting period. The law imposes a penalty of $10 a day, up to a maximum of $5,000, when a return is filed late, unless there is reasonable cause for the delay.

You are not required to file Federal income tax returns unless you are subject to the tax on unrelated business income under section 511 of the Code. If you are subject to this tax, you must file an income tax return on Form 990-T, Exempt Organization Business Income Tax Return. In this letter, we are
not determining whether any of your present or proposed activities are unrelated trade or business as defined in section 513 of the Code.

You need an employer identification number even if you have no employees. If an employer identification number was not entered on your application, a number will be assigned to you and you will be advised of it. Please use that number on all returns you file and in all correspondence with the Internal Revenue Service.

If the heading of this letter indicates that a caveat applies, the caveat below or on the enclosure is an integral part of this letter.

Because this letter could help resolve any questions about your exempt status and foundation status, you should keep it in your permanent records.

If you have any questions, please contact the person whose name and telephone number are shown in the heading of this letter.

Sincerely yours,

R. Starkey
District Director
Under section 6501(c)(4) of the Internal Revenue Code, and as part of a request filed with Form 1023 that the organization named below be treated as a publicly supported organization under section 170(b)(1)(A)(vi) or section 509(a)(2) during an advance ruling period,

Association of Anesthesiology Program Directors
515 Busse Highway
Park Ridge, IL 60068

and the District Director of Internal Revenue Chicago

Consent and agree that the period for assessing tax (imposed under section 4940 of the Code) for any of the 5 tax years in the advance ruling period will extend 8 years, 4 months, and 15 days beyond the end of the first tax year.

However, if a notice of deficiency in tax for any of these years is sent to the organization before the period expires, then the time for making an assessment will be further extended by the number of days the assessment is prohibited, plus 60 days.

Ending date of first tax year December 31, 1986

Name of organization
Association of Anesthesiology Program Directors

Date 2/25/87

Officer or trustee having authority to sign

By 3/28/87

Signature

District Director

By

For Paperwork Reduction Act Notice, see page 1 of the Form 1023 Instructions.
MEMBERSHIP APPLICATION

COUNCIL OF ACADEMIC SOCIETIES
ASSOCIATION OF AMERICAN MEDICAL COLLEGES

MAIL TO: AAMC, Suite 200, One Dupont Circle, N.W., Washington, D.C. 20036
ATTENTION: Jane Donovan

NAME OF SOCIETY: Association of Pediatric Program Directors

MAILING ADDRESS: Robert S. Holm, M.D., Secretary-Treasurer
SMAHEC, Stryker 4
1521 Gull Road
Kalamazoo, Michigan 49001

PURPOSE:
The Association is formed to advance medical education by benefitting and aiding the medical education programs of those hospitals located in the United States of America and the Commonwealth of Puerto Rico that are accredited by the Accreditation Council for Graduate Medical Education and those hospitals in Canada approved by the Royal College of Physicians and Surgeons to provide residency training programs in Pediatrics.

MEMBERSHIP CRITERIA:
Any accredited Pediatric Residency Program in the United States or Canada may join. Membership is by the Program Director or Department Chairman.

NUMBER OF MEMBERS: 248
NUMBER OF FACULTY MEMBERS: Not applicable
DATE ORGANIZED: February 12, 1986

SUPPORTING DOCUMENTS REQUIRED: (Indicate date of each document in blank)
1. Constitution and Bylaws 2/12/86 Bylaws - No separate constitution
2. Program and Minutes of Annual Meeting April 27, 1987
3. Copy of IRS Approval under Sections 501(c)(3) and 509(a) of the Internal Revenue Code July 16, 1986

12/23/87
Date Completed

Edward O. Reiter, M.D.
Completed by - Signature

Edward O. Reiter, M.D.
Completed by - Please Print

- President, Assoc Ped Prog Dir -

Title

-35-
This is to Certify That Articles of Incorporation of
ASSOCIATION OF PEDIATRIC PROGRAM DIRECTORS

were duly filed in this office on the 12TH day of FEBRUARY, 1986,

Association of Pediatric Program Directors
722 Trust Building
Grand Rapids, MI 49503
May ___, 1986

Conformed copy

In testimony whereof, I have hereunto set my hand and affixed the Seal of the Department,
in the City of Lansing, this 12TH day of FEBRUARY, 1986.

[Signature]
Director
ARTICLE I

Name

The name of the organization shall be Association of Pediatric Program Directors (hereinafter called the "Association").

ARTICLE II

Purposes

The Association is formed to advance medical education by benefitting and aiding the medical education programs of those hospitals located in the United States of America and the Commonwealth of Puerto Rico that are accredited by the Accreditation Council for Graduate Medical Education and those hospitals in Canada approved by the Royal College of Physicians and Surgeons to provide residency training programs in Pediatrics.

ARTICLE III

Members, Voting Etc.

A. The members of the Association shall be those holding the following positions at hospitals located in the United States of America and the Commonwealth of Puerto Rico that are accredited by the Accreditation Council for Graduate Medical Education and those hospitals in Canada approved by the Royal College of Physicians and Surgeons to provide residency training programs in Pediatrics:

1. The designated director of the residency training program, as listed with the Residency Review Committee for Pediatrics.
   or
   The chairman (director) of the Department of Pediatrics responsible for the training program, where there is a separately designated program director.

2. The director of a pediatric program that is an affiliate or component of a program listed with the Residency Review Committee or the Royal College of Physicians and Surgeons of Canada as a single program under another program director.

B. Each member or his/her designee shall have one vote on all matters relating to the election of officers, the adoption and amendment of bylaws, the amendment of the Articles of Incorporation and all other matters on which the President of the Association shall request a vote of the entire membership.
C. No member may vote on any matter unless the dues set by the Council of the Association with respect to membership have been paid currently.

ARTICLE IV
Meetings
There shall be at least one regular meeting of the Association as follows:

The annual meeting of the Association shall be held usually in the spring of each year, in conjunction with the meetings of the American Pediatric Society-Society for Pediatric Research-Ambulatory Pediatric Association, or the American Academy of Pediatrics, when feasible.

An interim meeting may also be held in the fall of each year if called by the Council of the Association. The Council of the Association may also call additional meetings.

ARTICLE V
Officers
The elected officers of the Association shall be chosen from among the members of the Association.

The elected officers of the Association shall consist of a President, a President-Elect, the Immediate Past President, a Secretary-Treasurer and three Councilors.

The elected officers shall constitute the Council of the Association.

Of the three councilors no more than one at any time may be representatives of any one of the following groups of hospitals:

A. Medical school owned, operated or controlled hospitals
B. Pediatric units in voluntary hospitals related to or affiliated with medical schools
C. Pediatric units in hospitals independent of medical schools
D. Pediatric units in military hospitals

At the time of becoming a member of the Association, the member will designate to which of the above categories his hospital belongs.

The terms of office of the President, President-Elect, and Immediate Past President shall be one year; the terms of office of the other elected officers shall be three years.
The President-Elect shall succeed to the presidency the year after election. If the President is unable to serve a full term, for any reason, the President-Elect shall assume the presidency for the remainder of the term and for the term to which he was elected. The presidency shall not be succeeded to by a member from the same hospital group as the retiring president.

Prior to the annual meeting, the President shall appoint a Nominating Committee consisting of three members of the Association: the Past President (Chair) and two others who are not officers and who represent different groups than the past president so that 3 of the constituent groups are represented on this committee. The Nominating Committee shall propose a slate of officers consisting of the President-Elect, Secretary-Treasurer and one Councilor. Nominations other than those proposed by the Nominating Committee may be made only at the time of the annual meeting by members who are in attendance at such meetings.

Election of officers shall take place at the annual meeting and election shall be by a majority of those members present and voting.

Notwithstanding the above procedures, at the first annual meeting of the Association, elections shall be held to fill the following offices for the terms set forth below. No officer or councilor may serve consecutive terms in the same office. A period of at least one year must separate terms of office.

<table>
<thead>
<tr>
<th>Office</th>
<th>Term</th>
</tr>
</thead>
<tbody>
<tr>
<td>President</td>
<td>1 year</td>
</tr>
<tr>
<td>President-Elect</td>
<td>1 year</td>
</tr>
<tr>
<td>Secretary-Treasurer</td>
<td>3 years</td>
</tr>
<tr>
<td>1 Councilor</td>
<td>1 year</td>
</tr>
<tr>
<td>1 Councilor</td>
<td>2 years</td>
</tr>
<tr>
<td>1 Councilor</td>
<td>3 years</td>
</tr>
</tbody>
</table>

The successors to the officers so elected shall be elected to serve the normal terms of office as provided above.

ARTICLE VI

Duties of Officers

The President shall prepare the agenda for and preside at the meetings of the Association and the Council. In addition, the President shall be responsible for dealing throughout the year with problems of major concern to the Association. The President shall be assisted by the other officers and may seek aid, as needed, from other members and non-members, including persons specifically requested to provide liaison between the Association and other organizations.

The President-Elect shall serve in the place of the President when necessary and shall otherwise function as a member of the Council of the Association.

The Secretary-Treasurer shall serve as recorder at the meetings of the Association and the Council and shall collect the dues. The Secretary-Treasurer shall be authorized to disburse the funds of the Association in accordance with the instructions of the President, who shall act with the advice of the Council.
The Council shall meet as often as necessary throughout the year and shall represent the Association as necessary. Meetings of the Council shall be called by the President. Because it will not always be possible to discuss all problems of current interest at the meetings of the Association, the Council may solicit opinions by mail from the membership and it shall act in accordance with the opinions expressed, without undue delay. When such solicitation does not, in the sole discretion of the Council, seem feasible, the Council shall be empowered to act for the Association, without a solicitation of the view of the members. The members shall receive copies of the minutes of each Council meeting.

ARTICLE VII

Committees

The President, with the advice of the Council, may appoint a series of standing and ad hoc committees to deal with specific items of business of concern to the Association.

ARTICLE VIII

Quorum and Voting

With respect to any meeting, there must be at least one-third of the total members present and entitled to vote to constitute a quorum. If a vote is taken on any matter at a meeting, except as otherwise provided in Article XI-D, the matter shall be acted upon affirmatively on a favorable vote of a majority of the members present and voting.

ARTICLE IX

Annual Dues

The annual dues shall be such as the Council may set from time to time.

ARTICLE X

Fiscal Year

The fiscal year of the Association shall be as set by the Council.

ARTICLE XI

Amendment to the By-Laws

An amendment to these By-Laws may be made in accordance with the following procedure only:

A. A proposed amendment may be presented at the annual meeting of the Association only.

B. The proposed amendment must be sponsored by at least twenty members of the Association or a 2/3 vote of the Council of the Association.
C. The proposed amendment must be circulated in writing, to all of the members of the Association, at least 30 days prior to the annual meeting at which it is to be proposed.

D. The proposed amendment may be adopted upon an affirmative vote of two-thirds of those members attending and voting at the annual meeting.

E. In the alternative, upon a vote of a majority of those members attending and voting at the annual meeting the proposed amendment may be voted on by mail. In such case, the Secretary of the Association shall within 20 days following the annual meeting send a written copy of the proposed amendment to each of the members, along with a printed ballot on which the member may indicate his or her vote. The members shall thereafter have twenty days from the date on which the proposed amendment is mailed to them to vote on the proposed amendment. A vote shall be cast by mailing the printed ballot to the Secretary and shall be deemed cast on the date of the postmark on the envelope containing the ballot. In order for the proposed amendment to be adopted under this procedure, it must be approved by the affirmative vote of two-thirds of the entire membership.
Association of Pediatric Program Directors

Evaluation of Residents and Residency Program
Sponsored by The Association of Pediatric Program Directors
Disneyland Hotel
Anaheim, California
April 27, 1987

8:30 - 8:35 am Greetings
Thomas Oliver, Jr., M.D.

EVALUATION OF RESIDENTS

Moderator: Thomas K. Oliver, Jr., M.D., President
Assoc. of Pediatric Program Directors

8:35 - 9:00 Role of Evaluation in Curriculum Planning
James T. Martinoff, M.D., Ph.D.
Professor of Pharmacy Education
USC School of Medicine and Pharmacy

9:00 - 9:20 Evaluating the Selection Process: Review of
the Resident Selective Process Developed for the
American Society of Plastic and Reconstructive Surgery
Edward M. Glaser, Ph.D.
Gary S. Brody, M.D.
Clinical Professor of Surgery
University of Southern California

9:20 - 9:40 Developing a Systems Approach in Evaluating
Residents in Medical Education
Frederic D. Burg, M.D.
Professor of Pediatrics
Children's Hospital of Philadelphia
 Assoc. Dean for Academic Programs,
 University of Pennsylvania School of Medicine

9:40 -10:00 Evaluation of Clinical Skills
John S. Lloyd, Ph.D.
Director of Research
American Board of Medical Specialties

10:00-10:20 Dealing with Stress in a Training Program
Abraham Bergman, M.D.
Professor of Pediatrics
University of Washington
Director of Pediatrics
Harborview Medical Center

10:20-10:35 BREAK
Association of Pediatric Program Directors

10:35-12:00 WORKSHOPS

#1 The Selection Process — led by Edward M. Glaser, Ph.D.

#2 Health Policy Issues in Graduate Medical Education
   led by
   Alfred Gellhorn, M.D.
   Director, Medical Affairs
   New York State Dept. of Health

#3 Evaluating Clinical Skills
   led by
   John S. Lloyd, Ph.D.
   Director of Research
   American Board of Medical Specialties

#4 Dealing with Stress in a Training Program
   led by
   Barbara M. Korsch, M.D.
   Professor of Pediatrics
   USC School of Medicine
   and
   Robert Adler, M.D.
   Associate Professor of Pediatrics
   USC School of Medicine

#5 Effective Evaluation of Electives: An example
   from Adolescent Medicine
   led by
   Lawrence S. Neinstein, M.D.
   Coordinator, Teenage Health Program
   Children's Hospital of Los Angeles
   Assoc. Prof. Clinical Pediatrics & Medicine
   USC School of Medicine

#6 Interpersonal Skill Evaluation
   led by
   Robert Pantell, M.D.
   Associate Professor of Pediatrics
   Director, Division of General Pediatrics
   University of California, San Francisco

#7 How to Decide What to Evaluate Vis-a-Vis the
   Competence of Residents
   led by
   Frederic D. Burg, M.D.
Association of Pediatric Program Directors

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Children's Hospital of Los Angeles
Division of General Pediatrics
4650 Sunset Boulevard
Los Angeles, CA 90027
(213) 668-2110

AGENDA

I. President's Report

II. Treasurer’s Report - Audit Report

III. Reports from Pediatric Organizations
   A. ABP - Robert Brownlee, M.D.
   B. AAP - James Strain, M.D.
   C. RRC - Grant Morrow, M.D.

IV. Nominating Committee Report
10:35-12:00 WORKSHOPS

#1 The Selection Process - led by Edward M. Glaser, Ph.D.

#2 Health Policy Issues in Graduate Medical Education
led by
Alfred Gellhorn, M.D.
Director, Medical Affairs
New York State Dept. of Health

#3 Evaluating Clinical Skills
led by
John S. Lloyd, Ph.D.
Director of Research
American Board of Medical Specialties

#4 Dealing with Stress in a Training Program
led by
Barbara M. Korsch, M.D.
Professor of Pediatrics
USC School of Medicine
and
Robert Adler, M.D.
Associate Professor of Pediatrics
USC School of Medicine

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Association of Pediatric Program Directors

Business Meeting Agenda Continued

V. Liaison with AMSPDC - Ed Reiter, M.D.

VI. Old Business

VII. New Business

VIII. Annual Meeting
   A. APD-SPR-APA (2-6 May 1988, Washington, D.C.)
      (100th meeting of APS)
   B. Program Topics

IX. Adjourn
MINUTES
Annual Meeting
Association of Pediatric Program Directors
Disneyland Hotel
Anaheim, CA
April, 27, 1987

INTRODUCTION
We received advance registration from 148 individuals representing 114 Pediatric Residency Programs. While an exact count was not kept at the door, approximately 10 of the pre-registered individuals did not pick up their name tags and another 50 plus people attended who were not pre-registered.

These minutes will not serve as a detailed discussion of the presentations in the educational portion of the meeting. Such a summary would be incomplete and probably biased, and is not normally a function of meeting minutes anyway. However, we have recorded the plenary sessions of this meeting and they are available on audio cassette tape to any member. Anyone who wishes those recordings may write to Dr. Holm, the Secretary-Treasurer, and he will have copies made for those people. He will invoice them for the cost of reproduction.

THE EDUCATIONAL PORTION OF THE MEETING
The President, Dr. Oliver, opened the meeting at 8:30 A.M. and extended greetings to the attendees. Dr. Oliver served as moderator of the morning session. He introduced Dr. Gates who was a fill-in for Dr. Martinoff who was unable to attend at the last minute. Dr. Gates discussed the role of evaluation and curriculum planning.

Dr. Edward Glaser then discussed evaluating the selection process. Dr. Glaser presented a review of the resident selective process developed for the American Society of Plastic and Reconstructive Surgery.

The next presentation was by Dr. Fredric Burg on the topic "Developing a Systems Approach and Evaluating Residents in Medical Education".

Dr. John Lloyd then presented a discussion of "Evaluation of Clinical Skills".

The plenary session in the morning concluded with Dr. Abraham Bergman discussing "Dealing with Stress in a Training Program". The group then broke into a series of seven workshops. These included:

"The Selection Process", led by Edward M. Glaser, Ph.D.
"Health Policy Issues and Graduate Medical Education", led by Alfred Gellhorn, M.D.
"Evaluating Clinical Skills", led by John S. Lloyd, Ph.D.
"Dealing with Stress in a Training Program", led by Barbara Korsch, M.D. and Robert Adler, M.D.
"Effective Evaluation of Electives: An Example from Adolescent Medicine", led by Lawrence Neinstein, M.D.
"Interpersonal Skill Evaluation", led by Robert Pantell, M.D.
"How to Decide What to Evaluate VIS-A-VIS The Competence Residents", led by Fredric Burg, M.D.

A break for lunch occurred and the meeting reconvened at 1:30 P.M. with Dr. Reiter, the President Elect, moderating.

The first presentation was on Legal Liability of Program Directors. The presentation was done by an attorney from the law firm of Carlo Coppor and Associates.

Dr. Oliver then presented "Program Director's Responsibility for the "Pink Sheets" and the American Board of Pediatrics".

Dr. Doughty then presented "Alternative Coverage for Inpatient Service Needs".

Dr. Gellhorn discussed "Funding Issues and Residency Training".

Dr. Vincent Fulginiti discussed "Overview of Future Educational Issues Facing Residency Training".

Business Meeting
Dr. Oliver gave the president's report. Included in his report were thanks to Robert Adler, M.D. for arranging the educational meeting. Dr. Oliver asked for a moment of silence in the memory of one of the founding members of APPD, Dr. Joseph St. Geme.

Dr. Holm presented the treasurer's report showing a balance of $8,674.39. The treasurer's report was accepted. Dr. Reiter, who had audited the checkbook, confirmed that the organization's money was being spent appropriately.

Reports were received from Pediatric organizations. The first was from Dr. Robert Brownlee from the American Board of Pediatrics. Dr. Brownlee discussed the ongoing concern about more careful definition of what the combined Internal Medicine/Pediatrics residency should be. The board will be working on this the coming year and Dr. Brownlee offered to update the APPD next year on the progress.

Errol Alden, the newly designated Director of Education of The American Academy of Pediatrics, next presented the program directors with a survey of the service available to residents from The American Academy of Pediatrics. The services center around educational opportunities as well as some "fringe benefits" to being a junior fellow of the academy.

Dr. Grant Morrow, Chairman of the Residency Review Committee for Pediatrics, presented a report to the APPD. Dr. Morrow stated that 72 programs had been reviewed in the previous year with 13 sustaining adverse actions. He noted that seven programs had asked for reconsideration. In three cases the adverse action was sustained and in one it probably would be sustained while in three other cases the adverse action was reversed. Dr. Morrow stated this is usually
Dear Applicant:

Based on information supplied, and assuming your operations will be as stated in your application for recognition of exemption, we have determined you are exempt from Federal income tax under the provisions of the Internal Revenue Code section indicated above.

Unless specifically excepted, you are liable for taxes under the Federal Insurance Contributions Act (social security taxes) for each employee to whom you pay $100 or more during a calendar year. And, unless excepted, you are also liable for tax under the Federal Unemployment Tax Act for each employee to whom you pay $50 or more during a calendar quarter if, during the current or preceding calendar year, you had one or more employees at any time in each of 20 calendar weeks or you paid wages of $1,500 or more in any calendar quarter. If you have any questions about excise, employment or other Federal taxes, please address them to this office.

If your sources of support, or your purposes, character, or method of operation change, please let us know so we can consider the effect of the change on your exempt status. In the case of an amendment to your organizational document or bylaws, please send us a copy of the amended document or bylaws. Also, you should inform us of all changes in your name or address.

The box checked at the top of this letter shows whether you must file Form 990, Return of Organization Exempt from Income Tax. If Yes is checked, you are required to file Form 990 only if your gross receipts each year are normally more than $25,000. If a return is required, it must be filed by the 15th day of the fifth month after the end of your annual accounting period. The law provides for a penalty of $10 a day, up to a maximum of $5,000, when a return is filed late, unless there is reasonable cause for the delay. This penalty may also be charged if a return is not complete. So, please make sure your return is complete before you file it.
You are not required to file Federal income tax returns unless you are subject to the tax on unrelated business income under section 511 of the Code. If you are subject to this tax, you must file an income tax return on Form 990-T, Exempt Organization Business Income Tax Return. In this letter we are not determining whether any of your present or proposed activities are unrelated trade or business as defined in section 513 of the Code.

You need an employer identification number even if you have no employees. If an employer identification number was not entered on your application, a number will be assigned to you and you will be advised of it. Please use that number on all returns you file and in all correspondence with the Internal Revenue Service.

If the heading of this letter indicates that a caveat applies, the caveat below is an integral part of this letter.

Because this letter could help resolve any questions about your exempt status, you should keep it in your permanent records.

If you have any questions, please contact the person whose name and telephone number are shown in the heading of this letter.

Sincerely yours,

[Signature]

District Director
NOTICE OF NEW EMPLOYER IDENTIFICATION NUMBER ASSIGNED

Thank you for your Form SS-4, Application for Employer Identification Number. The number assigned to you is shown above. This number will be used to identify your business account and related tax returns and documents, even if you do not have employees.

Please keep a copy of this number in your permanent records. Use this number and your name, exactly as shown above, on all Federal tax forms that require this information, and refer to the number on all tax payments and tax-related correspondence or documents.

If your business is a partnership which must obtain prior approval for its tax year, the tax year you entered in Block 3 of your Form SS-4 does not establish a tax year. For guidance in determining if you must request prior approval and the method of doing so, see IRS Publication 538, Accounting Periods and Methods, available at most IRS offices.

For Exempt Organizations, please see the message on the reverse side.

Thank you for your cooperation.
APPOINTMENT OF 1988 CAS NOMINATING COMMITTEE

Section V.1. of the CAS Rules and Regulations reads as follows:

"1. The Nominating Committee shall be comprised of seven members. The Chairman, three (3) basic science, and three (3) clinical science members, shall be appointed by the CAS Administrative Board from among representatives of the member societies. Not more than one representative may be appointed from a society and not more than two members may be current members of the Administrative Board. The Nominating Committee shall report to the Council at its Annual Meeting a slate of nominees for Administrative Board vacancies. Additional nominations for these positions may be made by any representative to the Council present at the meeting. The Committee will also recommend to the AAMC Nominating Committee candidates for Chairman-Elect of the Association of American Medical Colleges."

On the following pages is a list of all CAS representatives from which the Board must choose at least three basic scientists and at least three clinical scientists to serve on the CAS Nominating Committee. The Board also must select a chairman for the Nominating Committee. Traditionally, the Chairman and Chairman-Elect of the CAS are members of the Nominating Committee. Several Alternates should also be chosen. The Committee will meet by conference call in late May or early June to nominate a basic scientist to be Chairman-Elect of the CAS, as well as a nominee for Chairman-Elect of the AAMC. The Committee will also develop a slate of nominees to fill four positions on the Board.

The most recent CAS Nominating Committees are listed below:

1984
Robert L. Hill, Ph.D., Chairman
S. Craighead Alexander, M.D.
Lewis Aronow, Ph.D.
Joe Dan Coulter, Ph.D.
Gordon I. Kaye, Ph.D.
Virginia V. Weldon, M.D.
Benson R. Wilcox, M.D.

1985
David H. Cohen, Ph.D., Chairman
John M. Bissonnette, M.D.
William R. Drucker, M.D.
George A. Hedge, Ph.D.
William P. Jollie, Ph.D.
Louis M. Sherwood, M.D.
Virginia V. Weldon, M.D.

1986
Frank G. Moody, M.D., Chairman
JoAnne Brasel, M.D.
David H. Cohen, Ph.D.
Rolla B. Hill, M.D.
Mary Lou Pardue, M.D.
Jerry Wiener, M.D.
Nicholas Zervas, M.D.

1987
Douglas E. Kelly, Ph.D., Chairman
C. Paul Bianchi, Ph.D.
Paul Friedman, M.D.
Gordon I. Kaye, Ph.D.
Jack L. Kostyo, Ph.D.
Frank G. Moody, M.D.
Joel Sacks, M.D.
BASIC SCIENCES
ANATOMY
American Association of Anatomists
Roger Markwald, Ph.D.
Henry J. Ralston, III, Ph.D.
American Society for Cell Biology
Barbara Mclaughlin, Ph.D.
George Pappas, Ph.D.
Association for Anatomy Chairmen
Gordon I. Kaye, Ph.D.
Robert Kelley, Ph.D.

BEHAVIORAL SCIENCE
Association for the Behavioral Sciences and Medical Education
DeWitt Baldwin, M.D.
Beverley Rowley, Ph.D.

BIOCHEMISTRY
American Society for Biochemistry and Molecular Biology
Robert D. Wells, Ph.D.
William J. Whelan, Ph.D.
Association of Medical School Departments of Biochemistry
Thomas E. Smith, Ph.D.

GENETICS
American Society of Human Genetics
Maimon M. Cohen, Ph.D.
Elizabeth M. Short, M.D.

MICROBIOLOGY
Association of Medical School Microbiology Chairmen
Kenneth I. Berns, M.D., Ph.D.

NEUROSCIENCE
Society for Neuroscience
David H. Cohen, Ph.D.
Joe Dan Coulter, Ph.D.

PATHOLOGY
Academy of Clinical Laboratory Physicians and Scientists
S. Thomas Shaw, M.D.
American Association of Pathologists, Inc.
Yutaka Kikkawa, M.D.
Ronald S. Weinstein, M.D.
Association of Pathology Chairmen, Inc.
Aubrey J. Hough, Jr., M.D.
Vivian W. Pinn-Wiggins, M.D.

PHARMACOLOGY
American College of Neuropsychopharmacology
Arnold Friedhoff, M.D.
Oakley Ray, M.D.
American Society for Pharmacology and Experimental Therapeutics
Lewis Aronow, Ph.D.
William L. West, Ph.D.
Association for Medical School Pharmacology
Carmine Paul Bianchi, Ph.D.
James W. Fisher, Ph.D.

PHYSIOLOGY
American Physiological Society
George A. Hegg, Ph.D.
Jack L. Kostyo, Ph.D.
Association of Chairmen of Departments of Physiology
Mordecai Blaustein, Ph.D.
Stanley Schultz, Ph.D.

PREVENTIVE MEDICINE
Association of Teachers of Preventive Medicine
David L. Rabin, M.D.

CLINICAL SCIENCES
ANESTHESIOLOGY
Association of University Anesthetists
Milton H. Alper, M.D.
C. Philip Larson, Jr., M.D.
Society of Academic Anesthesia Chairmen
S. Craighead Alexander, M.D.
Burton S. Epstein, M.D.
CRITICAL CARE
Society of Critical Care Medicine
Solomon G. Hershey, M.D.
H. David Reines, M.D.

DERMATOLOGY
Association of Professors of Dermatology
Philip C. Anderson, M.D.
Thomas B. Fitzpatrick, M.D.

EMERGENCY MEDICINE
Society of Teachers of Emergency Medicine
Glenn C. Hamilton, M.D.
Richard M. Nowak, M.D.
University Association for Emergency Medicine
Michael Callaham, M.D.
Thomas Stair, M.D.

FAMILY MEDICINE
Association of Departments of Family Medicine
Thornton Bryan, M.D.
Harry Mayhew, M.D.
Society of Teachers of Family Medicine
Alfred O. Berg, M.D., MPH
Christian N. Ramsey, Jr., M.D.

GENERAL SURGERY
American Association for the Surgery of Trauma
William R. Drucker, M.D.
Donald S. Gann, M.D.
American Surgical Association  
Lawrence H. Cohn, M.D.  
Judson G. Randolph, M.D.  

Association for Academic Surgery  
Linda M. Graham, M.D.  
John V. White, M.D.  

Association for Surgical Education  
Anthony L. Imbembo, M.D.  
Norman Snow, M.D.  

Society for Surgery of the Alimentary Tract  
Henry A. Pitt, M.D.  
Lawrence W. Way, M.D.  

Society of University Surgeons  
Dana K. Andersen, M.D.  
Edwin Deitch, M.D.  

Surgical Infection Society  
Arthur E. Baue, M.D.  
John F. Burke, M.D.  

INTERNAL MEDICINE  
American College of Physicians  
Frank Davidoff, M.D.  
Marvin Turck, M.D.  

American Federation for Clinical Research  
William N. Hait, M.D.  
Willa Hseuh, M.D.  

American Gastroenterological Association  
John T. Farrar, M.D.  
Irwin H. Rosenberg, M.D.  

American Society for Clinical Investigation  
Robert J. Lefkowitz, M.D.  
C. Ronald Kahn, M.D.  

American Society of Hematology  
Harry Jacob, M.D.  
Ernst R. Jaffe', M.D.  

Association of American Physicians  
Leighton E. Cluff, M.D.  

Association of Professors of Medicine  
Harold J. Fallon, M.D.  
William N. Kelley, M.D.  

Association of Program Directors in Internal Medicine  
Jordan J. Cohen, M.D.  
Eleanor Z. Wallace, M.D.  

Central Society for Clinical Research  
John P. Phair, M.D.  

MULTISPECIALTY  
American Academy of Allergy and Immunology  
Paul Van Arsdel, M.D.  

American Association for the Study of Liver Diseases  
Michael F. Sorrell, M.D.  

American Society for Clinical Nutrition  
Roland Weinsier, M.D., DrPH  

Endocrine Society  
Jo Anne Brasel, M.D.  
Virginia V. Weldon, M.D.  

Society for Health and Human Values  
Rita Charon, M.D.  

NEUROLOGY  
American Academy of Neurology  
Rosalie A. Burns, M.D.  
H. Royden Jones, Jr., M.D.  

American Neurological Association  
Kenneth P. Johnson, M.D.  
Robert J. Joynt, M.D., Ph.D.  

Association of University Professors of Neurology  
Mark L. Dyken, M.D.  
Donald Silberberg, M.D.  

Child Neurology Society  
Gwendolyn R. Hogan, M.D.  
Samuel Shelburne, M.D.  

NEUROSURGERY  
American Association of Neurological Surgeon  
Robert G. Grossman, M.D.  
Nicholas T. Zervas, M.D.  

OBSTETRICS AND GYNECOLOGY  
American College of Obstetricians and Gynecologists  
William Easterling, Jr., M.D.  
Harrison C. Visscher, M.D.  

Association of Professors of Gynecology and Obstetrics  
Douglas R. Knab, M.D.  
Joseph C. Scott, M.D.  

Society for Gynecologic Investigation  
Daniel R. Mishell, M.D.  
Anne Colston Wentz, M.D.  

OPHTHALMOLOGY  
American Academy of Ophthalmology  
J. Bronwyn Bateman, M.D.  
Joel Sacks, M.D.  

Association of University Professors of Ophthalmology  
Claude L. Cowan, Jr., M.D.  
Michael A. Lemp, M.D.  

ORTHOPAEDICS  
American Academy of Orthopaedic Surgeons  
Wilton H. Bunch, M.D., Ph.D.  
James H. Herndon, M.D.  

American Orthopaedic Association  
Robert B. Greer, M.D.  
George E. Omer, Jr., M.D.  

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Association of Orthopaedic Chairmen
Joseph Kopta, M.D.
Gerald Laros, M.D.

OTOLARYNGOLOGY
Association of Academic Departments of Otolaryngology
Warren Y. Adkins, M.D.
Robert Kohut, M.D.
Society of University Otolaryngologists
Lanny Garth Close, M.D.
Lee A. Harker, M.D.

PEDIATRICS
Ambulatory Pediatric Association
Jay E. Berkelhamer, M.D.
Ruth Stein, M.D.
American Pediatric Society
Myron Genel, M.D.
Jiminy Simon, M.D.
Association of Medical School Pediatric Department Chairmen
Frank A. Oski, M.D.
Jane G. Schaller, M.D.
Society for Pediatric Research
Lawrence A. Boxer, M.D.
Harvey J. Cohen, M.D.

PHARMACOLOGY
American Society for Clinical Pharmacology and Therapeutics
David W. Nierenberg, M.D.
Richard Weinshilboum, M.D.

PHYSICAL MEDICINE AND REHABILITATION
American Academy of Physical Medicine and Rehabilitation
James T. Demopoulos, M.D.
Arthur E. Grant, M.D.
Association of Academic Physiatrists
Ernest W. Johnson, M.D.
Thomas E. Strax, M.D.

PLASTIC SURGERY
American Association of Plastic Surgeons
Hal G. Bingham, M.D.
Charles E. Horton, M.D.
Plastic Surgery Education Foundation
Robert L. Ruberg, M.D.
Scott Spear, M.D.
Plastic Surgery Research Council
Nancy McKee, M.D.
David J. Smith, Jr., M.D.

PSYCHIATRY
American Association of Chairmen of Departments of Psychiatry
Richard I. Shader, M.D.
Jerry M. Wiener, M.D.

American Association of Directors of Psychiatric Residency Training
George L. Ginsberg, M.D.
Stefan Stein, M.D.
American College of Psychiatrists
Peter F. Regan, M.D.
Robert L. Williams, M.D.
American Psychiatric Association
Daniel X. Freedman, M.D.
Herbert Pardes, M.D.
Association for Academic Psychiatry
Louis F. Rittelmeyer, Jr., M.D.
Carolyn B. Robinowitz, M.D.
Association of Directors of Medical Student Education in Psychiatry
Irwin N. Hassenfeld, M.D.
John Racy, M.D.

RADIOLOGY
Association of University Radiologists
Paul J. Friedman, M.D.
A. Everette James, Jr., M.D.
Society of Chairmen of Academic Radiology Departments
Ernest J. Ferris, M.D.
Douglas Maynard, M.D.

THORACIC SURGERY
American Association for Thoracic Surgery
Vincent L. Gott, M.D.
Thomas C. King, M.D.
Thoracic Surgery Directors Association
Hermes C. Grillo, M.D.
Benson R. Wilcox, M.D.

UROLOGY
Society of University Urologists
James F. Glenn, M.D.
David G. McLeod, M.D.

CAS REPRESENTATIVES

-55-
1988 SPRING MEETING
COUNCIL OF ACADEMIC SOCIETIES
April 13–15, 1988
San Diego, California

PROGRAM

Medical Education:
Issues for Our Time

Wednesday, April 13, 1988

6:00 p.m.
INTRODUCTIONS
Robert G. Petersdorf, M.D.
President, AAMC
John W. Colloton
Chairman, AAMC

KEYNOTE ADDRESS
Medical Education: Is It?
Edward J. Stemmler, M.D.
Executive Vice President
University of Pennsylvania
School of Medicine

7:00 p.m.
RECEPTION

8:00 p.m.
DINNER

Friday, April 15, 1988

9:00 a.m.–12:00 noon
CAS BUSINESS MEETING