Council of Teaching Hospitals
Executive Committee Meeting
John Danielson's Suite
Astroworld - Holiday Inn Hotel
Houston, Texas
September 12, 1970
9:00 a.m.

Breakfast Buffet - 8:00 a.m.

I. Call to Order - 9:00 a.m.

II. Approval of Minutes Meeting of May 7-8, 1970

III. Membership
A. New Applications
   1. Circulated and Approved by Mail Ballot
      St. Vincent's Medical Center of Richmond, Staten Island,
      Public Health Service Hospital, San Francisco, California,
      Veterans Administration Hospital, Newington, Connecticut,
      Veterans Administration Hospital, Albuquerque, New Mexico,
      Veterans Administration Hospital, Long Beach, California,
      Veterans Administration Hospital, Iowa City, Iowa,
      Baptist Memorial Hospital, Oklahoma City, Oklahoma
      University of Texas M.D. Anderson Hospital and
      Tumor Institute at Houston
      Veterans Administration Hospitals, San Juan, Puerto Rico
      Bayfront Medical Center, Inc., St. Petersburg, Florida
      Veterans Administration Hospital, Syracuse, New York
      St. Boniface General Hospital, St. Boniface, Manitoba
      Catholic Medical Center of Brooklyn & Queens, Inc.
      Greenville General Hospital, Greenville, South Carolina
   
   2. Circulated without Unanimous Approval by Mail Ballot
      Presbyterian Hospital of Dallas, Dallas, Texas
   
   3. Reconsideration - Hamot Hospital, Erie, Pennsylvania
   
   4. First Consideration of Applications
      Veterans Administration Hospital, Shreveport, Louisiana
      Children's Hospital of Pittsburgh
      Veterans Administration Hospital, Tucson, Arizona
      Iowa Methodist Hospital, Des Moines, Iowa
      Methodist Hospital of Dallas, Dallas, Texas

IV. Report of the Director - Council of Teaching Hospitals

V. Report of Meetings
   1. AAMC Ad Hoc Committee on Medicare Reimbursement in a Teaching Setting
   2. Meeting with Representatives of V.A. Division of Medicine and Surgery
   3. AAMC Executive Council Meeting with DHEW Secretary Richardson
   4. General Clinical Research Centers - Hospital Reimbursement
VI. Legislative Activities

VII. 1970 AAMC Annual Meeting Program

VIII. Proposal for Joint Practice Commission

IX. N.L.R.B. Rulings Relating to Non-Profit Educational Institutions

X. Student American Medical Association Request for Support

XI. Extension of TIAA-CREF

XII. Policy Statement of National Intern and Resident Matching Program

XIII. Research Activities
   A. COTHMED
   B. GOTHIC

XIV. Other Business

XV. Adjournment
MINUTES
COTH EXECUTIVE COMMITTEE

Conference Room
Association of American Medical Colleges
One Dupont Circle, N.W.
Washington, D.C.
May 7-8, 1970

Present:
T. Stewart Hamilton, M.D., Chairman
Irvin G. Wilmot, Chairman-Elect
Roy S. Rambeck, Immediate Past Chairman
Ernest N. Boettcher, M.D.
Charles E. Burbridge, Ph.D.
Joe S. Greathouse, Jr.
L. H. Gunter
Russell A. Nelson, M.D.
David Odell

Staff:
John M. Danielson
Fletcher H. Bingham, Ph.D.
Richard M. Knapp, Ph.D.
Grace W. Beirne
Clara J. Williams
Howard R. Veit
Armand Checker

AHA Representatives:
Merle S. Bacastow, M.D.

I. Call to Order:
Dr. Hamilton called the meeting to order at 7:15 p.m. in the Executive Room of the Dupont Plaza Hotel. Following a full discussion of the current activities of the Department of Health Services and the Council of Teaching Hospitals and the AAMC the meeting recessed at 9:30 p.m.
II. Reconvene:

The Chairman reconvened the meeting at 8:30 a.m. on Friday, May 8th in the Board Room of the offices of the Association with those present noted above.

III. Consideration of Minutes:

On motion, seconded and carried, the minutes of the Executive Committee Meeting held on February 6th in Chicago, Illinois were approved as distributed.

IV. Membership:

A. Confirmation of Previous Approval by Mail Ballot:

St. Francis Hospital, Peoria, Illinois
Fairview General Hospital, Cleveland, Ohio
Appalachian Regional Hospital, Beckley, West Virginia

ACTION #1 THE EXECUTIVE COMMITTEE CONFIRMED PREVIOUS APPROVAL OF THESE APPLICATIONS

B. Other Applications

Crawford W. Long Memorial Hospital, Atlanta, Georgia
The Jamaica Hospital, Jamaica, New York
Youngstown Hospital Association, Youngstown, Ohio
Veterans Administration Hospital, Martinez, California
Riverside General Hospital, Riverside, California
Oakwood Hospital, Dearborn, Michigan
Latter-Day Saints Hospital, Salt Lake City, Utah
Deaconess Hospital, Buffalo, New York
Wesley Medical Center, Wichita, Kansas
Veterans Administration Consolidated Hospital, Little Rock, Arkansas
Mac Neal Memorial Hospital, Berwyn, Illinois
ACTION #2  IT WAS MOVED, SECONDED AND CARRIED THAT THESE
HOSPITALS BE ACCEPTED

Bayfront Medical Center, Inc., St. Petersburg, Florida

ACTION #3  BECAUSE OF THE LACK OF CERTAIN NECESSARY INFORMATION
ON THE APPLICATION FORM, THE EXECUTIVE COMMITTEE
AGREED THAT MORE INFORMATION WAS NEEDED AND THAT
THIS APPLICATION SHOULD BE AGAIN REVIEWED AT THE
NEXT MEETING.

C. Osteopathic Hospital Membership

The relationship of the Des Moines School of Osteopathy and the
American Osteopathic Association and the suggestion of an
invitation for osteopathic hospital membership in the Council of
Teaching Hospitals was discussed. Dr. Bingham also reviewed
previous correspondence relating to the Detroit Osteopathic
Hospital.

ACTION #4  IT WAS MOVED SECONDED AND CARRIED THAT THE EXECUTIVE
COMMITTEE INTERPRETATION OF THE COTH RULES AND
REGULATIONS ASSUMED AMA-SPECIALTY BOARD RESIDENCY
APPROVAL FOR THOSE INSTITUTIONS WHICH ARE SELF-
NOMINATED AND THEREFORE OSTEOPATHIC HOSPITALS ARE
NOT ELIGIBLE FOR MEMBERSHIP IN COTH.

D. Membership Status

It was reported that the membership of the Council now stood at 379
based on previous action.

It was suggested that staff provide to the Executive Committee on a
periodic basis, information relating to those institutions that
terminated their membership in the Council. The staff agreed to
this request.
V. Budget and Staff:

Mr. Danielson distributed material and answered questions about the budget for the Association of American Medical Colleges. A recommendation was presented with no formal action taken that the current dues structure for COTH be examined. Mr. Danielson indicated that next year he would present a program budget for Fiscal Year 1971 for Executive Committee review.

VI. Report on Meetings:

A. AAMC-BCA Liaison Committee

The March 11th meeting of this Committee dealt with such issues as fiscal implications of the attending physician in the teaching setting; Medicare and the Teaching Hospital; Blue Cross payments in teaching hospitals; role of the teaching hospital in the delivery of health care; and National Health Insurance proposals.

B. AAMC Ad Hoc Committee on National Health Insurance

Following a review of an initial statement developed by the Committee, several questions were raised about the apparent direction which the Committee has taken. Of particular importance was the lack of any direct commentary in the statement dealing with medical schools and teaching hospitals. Both the factors in capital financing for medical schools and teaching hospitals and reimbursement for educational costs must be considered. The members of the Executive Committee felt that the conceptual approach is laudable, but that the problems of financing and reimbursement must be met head on. It was agreed that this was an item best handled at the staff level and Mr. Danielson was asked to convey to Dr. Cooper the Executive Committee's concern.

C. Ad Hoc Committee on Medicare and Medicaid

The Statement of Principles developed by this Committee had formed the nucleus for a presentation before the House Ways and Means
Committee on March 16, 1970. Mr. Danielson called the Committee's attention to the fact that the Association had been invited to present testimony on May 27th before the Subcommittee on Medicare and Medicaid of the Senate Finance Committee. It was noted that considerable assistance in the development of this Statement had been provided by short-term contractual agreements and the Committee endorsed this as an appropriate mechanism to augment staff activities.

Considerable discussion was generated on the problem of financing the construction of clinical facilities and the Chairman was given the authority to establish a Committee to assist the staff in the development of a rational formula for the use of service funds for educational purposes. There was a consensus of agreement to work with consultant groups on this issue and to have some proposals on this for the next Executive Committee Meeting.

D. Regional Meetings

The Southern Region met in Atlanta on Friday, May 1st. the Midwest/Great Plains in Chicago on May 25th and the Northeast in New York on June 3rd. The Western Regional Meeting originally scheduled for May 15th has been postponed until later date.

VII. Annual Meeting Discussion:

The format of the COTH portion of the Annual Meeting was discussed. The COTH Executive Committee will meet on Thursday, October 29th followed by the COTH luncheon and Business Meeting. The COTH General Session will be held on Saturday, October 31st. Working title for the Session is "Organization for Change in the Medical School-Teaching Hospital Relationship: Problems and Conflicts". The speakers will be Dr. Ivan L. Bennett
and Dr. Leonard W. Cronkhite, Jr. A panel to discuss these papers is composed of George E. Cartmill (Moderator); David H. Hitt, William D. Mayer, Ray E. Trussel and Thomas M. Tierney.

VIII. Proposal for a Joint Practice Commission:

A draft proposal (see attached) was distributed for a Committee review and comment. The Chairman asked each member of the Committee to provide staff with any observations or comments believed appropriate.

ACTION #5 THE EXECUTIVE COMMITTEE ENTHUSIASTICALLY SUPPORTS IN PRINCIPLE THE PROPOSAL AND REQUESTS THE STAFF TO DEVELOP MORE SPECIFIC INFORMATION FOR PRESENTATION AT THE NEXT EXECUTIVE COMMITTEE MEETING.

IX. Deans Seminar:

The Department of Health Services and Teaching Hospitals has assumed the responsibility for staffing the third management seminar for deans to be held in Hershey, Pennsylvania from September 25-29th. The overall theme of the Seminar will be "Management of Organizational Change" and four participants including a hospital administrator from each invited school will attend.

X. University Hospitals Executive Council Request for Position Statement:

A telegram sent to the Council by the UHEC on April 23rd urging that "full consideration be given to a formal position statement by the AAMC regarding education and/or service roles of house staff" was received. The Committee discussed not only the substance of the telegram, but also the structural relations between these essentially freestanding groups and the COTH and the AAMC. The Committee agreed that this was
an area in need of study and urged the staff to prepare a statement on interns and residents for possible publications. It was agreed that because these groups were essentially informal in nature and had membership in common with that of the Council that staff should indicate to each of those who signed the telegram the decision of the Executive Committee, addressing them as COTH members without reference to their other organizational membership.

XI. Development of the Department of Health Services:

It was reported that the transition in moving from a particular focus on teaching hospitals as individual institutions toward a broader viewpoint of health services is being made very gradually. The graduated approach is deliberate since it is necessary that the individual attention to teaching hospitals not be overlooked while at the same time the staff broaden its responsibilities to the systematic review of the medical center and its responsibility for the provision of health services. The proposal for a joint practice commission, responsibility for staffing of the Ad Hoc Committee on National Health Insurance, and active interest in the prepaid group practice arrangements developing throughout the country provide evidence of the direction the Department of Health Services is taking. Additionally, the staff is preparing a proposal with cooperation of Dr. Kerr White of Johns Hopkins University for submission to several foundations which would support two working conferences under the title, "The University Medical Center and Health Services". It is anticipated that this proposal will be ready for submission by June 15, 1970.

XII. Legislative Activities:

Miss Grace Beirne reviewed several pieces of legislation presently under consideration. The Health Services Improvement Act of 1970 (S.3443
and H.R. 15960) sponsored by the Administration provides for three-year authorizations for Comprehensive Health Planning and Services, for Regional Medical Programs, for Health Services Research and Development and for the initial steps in developing a Federal-State-local health information and statistical system. The scope of the RMP would be broadened to permit a wider range of activities. The AAMC through Doctor Michael DeBakey, had testified in support of the Senator Yarborough bill to extend and expand the RMP program (S.3355) since it would appear that any merger of CHP and RMP would serve to eliminate the present regional authorities which are beneficial to medical schools.

The second bill reviewed was the Health Training Improvement Act of 1970 (S.3586) which would establish eligibility of new schools of medicine, etc. and extend and expand the program of training of personnel in the allied health professions for a period of five years. The AAMC-COTH had prepared testimony in support of this bill since it would authorize special project and training grants for teaching hospitals and include these institutions also in a section which relates to the development of new methods and permit expansion of the fields for which these grants could be made. The hearings set for May 11th were cancelled and have been rescheduled for some future time.

COTH-AAMC has also prepared letters to the Chairman of the House and Senate Banking and Currency Committees in support of the provision for Mortgage Insurance for Health Facilities contained in the Housing and Urban Development Act of 1970 with recommendation that favorable consideration be given to increasing the $25 million ceiling to $50 million. Members of the Committee were furnished copies of a House Ways and Means Committee press release indicating recent action on amendments affecting
the Medicare-Medicaid programs which indicates that payments for services of teaching physicians, under these programs, would not be allowed unless other patients who have insurance or are able to pay are also charged for such services, among other changes in the law.

The letter Mr. Danielson had addressed to Commissioner Ball protesting the proposal regarding the elimination of accelerated depreciation was reviewed. This appeared in the Federal Register as a proposed regulation which gave interested persons an opportunity to present their opinions to the S.S.A. It was considered that the number of such protests received would hopefully result in favorable reconsideration of this regulation as it would affect non-profit teaching hospitals.

There was a discussion concerning the recent primary defeat of Senator Ralph Yarborough, Chairman of the Senate Committee on Labor and Public Welfare and the Health Subcommittee and his possible successor. The next Senator in line of seniority is Jennings Randolph of W. Va. but it is considered rather unlikely that he would relinquish his present post as Chairman of the powerful Public Works Committee. Next in line is Senator Williams of N. J. who seems to be facing a difficult time with re-election. If he doesn't make it, Senator Pell would attain the Chairmanship of the full committee and most likely Senator Kennedy would become Chairman of the Health Subcommittee. In the event the Senate elections result in a republican majority, Senator Javits would become Chairman of the full Committee and possibly Senator Dominick Chairman of the Health Subcommittee.
XIII. Review of AAMC Position on Physician Assistants:

A proposal prepared by the Ad Hoc Report of the Task Force on Physician's Assistants Training Programs was presented. It was noted that the AAMC Executive Council had on that previous day, received the same document and considered it full within the activities of the expanding responsibilities of the AMA-AAMC Liaison Committee on Medical Education. It was also suggested that Dr. Richard Cannon be involved in any further activities by the Association in this area.

XIV. Research Activities:

A. Dr. Knapp outlined progress on the six following projects being developed under the auspices of the Teaching Hospital Information Center:

1. House Staff Survey
2. Community Service Survey
3. Survey of Sources of Capital Financing
4. State Appropriations to Teaching Hospitals
5. Administrative Salary Survey
6. Monitoring Developments in Physician Assistant Programs

It was reported that negotiations are under way with the National Center for Health Services Research and Development for a 12 month extension of the contract to June 30, 1971. Prospects are excellent.

ACTION #6
THE EXECUTIVE COMMITTEE RECOMMENDED THAT THE ADMINISTRATIVE SALARY SURVEY BE REPEATED THIS YEAR, AND BE ACCOMPLISHED EVERY TWO YEARS THEREAFTER.

It was reported that an increasing number of requests have been received indicating interest in the development of full-time
chiefs of service and other salaried physicians in those institutions which are either unaffiliated or have a limited or graduate only affiliation with a medical school. Questions of concern are medical staff and administrative structures and relationships financing these individuals, and the level of remuneration. Following brief discussion, the following recommendation was endorsed.

**ACTION #7**

IT IS RECOMMENDED THAT A MEETING BE SCHEDULED IN LATE MAY OR EARLY JUNE TO DECIDE WHETHER A STUDY OF THIS PROBLEM SHOULD BE UNDERTAKEN. THE FOLLOWING PERSONS ARE RECOMMENDED TO ATTEND THE MEETING: CECIL G. SHEPS, M.D., CHAIRMAN, TEACHING HOSPITAL INFORMATION CENTER ADVISORY COMMITTEE; WALTER G. RICE, M.D., DIRECTOR, AAMC DIVISION OF OPERATIONAL STUDIES; COTH STAFF; FOUR COTH MEMBERS WHO HAVE EXPRESSED INTEREST IN THIS PROBLEM.

**C. COTHMED**

Approval of a change in scope of work for the COTHMED project was reported by the Project Director. This new scope of work permits a series of on-site survey visits to a sample of teaching hospitals instead of the originally proposed mailed survey to a total universe of teaching hospitals. A pretest of the survey forms was conducted in nine COTH hospitals earlier this year by the project director, assistant project director, and the project staff. The full scale survey will begin as soon as forms clearance from the Bureau of the Budget is obtained.
XV. Other Business:

It was noted that a number of COTH members had been resolicited for membership by the Association for Hospital Medical Education. After discussion, it was agreed that although no action by the committee was necessary at this point we should continue to monitor the activities of the organization.

XVI. Adjournment:

There being no further business the meeting adjourned at 1:50 p.m.
Advocacy of a Joint Practice Commission

There is growing frustration within and between the professions concerned with health care regarding the appropriateness, extent of involvement, and relevance of each profession in the delivery of health care. Since it is generally accepted that each profession has a right and responsibility to define and/or alter its own roles;

and since each find it increasingly difficult to rationalize their present roles in the changing expectation of the public;

and since the various professions feel the need for developing better job satisfaction among their membership;

and since it is the hospital that will be the arena where the collision will take place between the various professionals concerning their many assumed perogatives in patient care;

it seems appropriate that the COTH of the AAMC give strong advocacy to the establishment of a National Joint Practice Commission similar to that proposed by the recent National Commission on Nursing.

It would appear that the Commission should include representation from medicine, nursing, hospital administration, and organizations that are involved in the education of these professionals as well as allied health professionals.
It is generally accepted that we need to know what we are educating our professionals to do. We can look forward to continued and increasing confusion unless this issue is clearly met.

Necessary alterations in health practice acts, licensure, and regulations will be stifled without an understanding of the roles of the participants in the role of health care delivery.

A major study is being contemplated by the AMA, the Association for Allied Health Professionals, and the National Accrediting Commission to examine the appropriateness of present accreditation of allied health professionals as well as making recommendations for a more effective approach. A Joint Practice Commission would seem a necessary counter-part as the work of the above group is going to be effective.
Application for Membership in the Council of Teaching Hospitals

(Please type)

Hospital: St. Vincent's Medical Center of Richmond
Name
Staten Island, N.Y.C. 355 Bard Avenue
City New York 10310
Street State Zip Code

Principle Administrative Officer: Richard C. Herrmann
Name Vice President for Administration
Title

Date Hospital was Established 1903

Approved Internships:

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Information Submitted By:

John R. Walsh
Name

May 15, 1970
Date

Executive Vice President
Title of Hospital Chief Executive

*Council on Medical Education of the American Medical Association and/or with appropriate A.M.A. Internship and Residency Review Committees.

PLEASE READ INSTRUCTIONS ON REVERSE SIDE
Application for Membership
in the
Council of Teaching Hospitals

(Please type)

Hospital: Public Health Service Hospital

San Francisco
City
California
State

15th Avenue and Lake Street
Street
94118
Zip Code

Mr. Homer F. Ortmeyer
Name
Administrative Officer
Title

Date Hospital was Established: 1930

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Information Submitted By:
Karl F. Urbach, M.D.
Chief, Medical Education and Research

William M. Smith, M.D., M.P.H., Director
Title of Hospital Chief Executive

29 April 1970
Date

*Council on Medical Education of the American Medical Association and/or with appropriate A.M.A. Internship and Residency Review Committees.

PLEASE READ INSTRUCTIONS ON REVERSE SIDE

*Includes Preventive Medicine Residency.
Application for Membership in the Council of Teaching Hospitals

Hospital: Veterans Administration Hospital

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<th>Name</th>
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Principal Administrative Officer: Joseph M. Di Pietro

| Date Hospital was Established | 1930 |

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Information Submitted By:

Joseph M. Di Pietro

Hospital Director

Date: 4-29-70

Signature of Hospital Chief Executive

*Council on Medical Education of the American Medical Association and/or with appropriate A.M.A. Internship and Residency Review Committees.

PLEASE READ INSTRUCTIONS ON REVERSE SIDE
ASSOCIATION OF AMERICAN MEDICAL COLLEGES

Application for Membership
in the
Council of Teaching Hospitals

(Please type) Hospital: Veterans Administration Hospital

Name

2100 Ridgecrest Drive, S.E.

City

Albuquerque

State

New Mexico

Street

87108

Zip Code

Name

P. N. Schmoll

Hospital Director

Title

Date Hospital was Established

August 14, 1932

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<tr>
<td>Pediatrics</td>
<td>--</td>
<td>--</td>
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</tr>
<tr>
<td>Psychiatry</td>
<td>June 13, 1966</td>
<td>12</td>
<td>10</td>
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<td>December 5, 1967</td>
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<td>Orthopedics</td>
<td>February 24, 1966</td>
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<td>7</td>
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<td>9</td>
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<td>March 7, 1969</td>
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<td>4</td>
</tr>
<tr>
<td>Urology</td>
<td>July 15, 1969</td>
<td>6</td>
<td>3</td>
</tr>
</tbody>
</table>

Information Submitted By:

James F. Carlin, M.D.

Acting Chief of Staff

May 7, 1970

P. N. SCHMOLL, Hospital Director

Title of Hospital Chief Executive

Signature of Hospital Chief Executive

*Council on Medical Education of the American Medical Association and/or with appropriate A.M.A. Internship and Residency Review Committees.

PLEASE READ INSTRUCTIONS ON REVERSE SIDE
Application for Membership in the Council of Teaching Hospitals

(Please type)

Hospital: VETERANS ADMINISTRATION HOSPITAL

Name: JAMES S. GLOTFELTY, M.D.

City: Long Beach

State: California

Zip Code: 90801

Date Hospital was Established: 1946

Approved Internships:

<table>
<thead>
<tr>
<th>Type</th>
<th>Date Of Initial Approval</th>
<th>Total Internships Offered</th>
<th>Total Internships Filled</th>
</tr>
</thead>
<tbody>
<tr>
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<td>Straight</td>
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Approved Residencies:

<table>
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<th>Date Of Initial Approval</th>
<th>Total Residencies Offered</th>
<th>Total Internships Filled</th>
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</thead>
<tbody>
<tr>
<td>Medicine</td>
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<tr>
<td>Surgery</td>
<td>PLEASE SEE ATTACHED LIST</td>
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<tr>
<td>OB-Gyn</td>
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<td>Pediatrics</td>
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<td>Psychiatry</td>
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<td></td>
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<tr>
<td>Other</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Information Submitted By:

JAMES S. GLOTFELTY, M.D.

HOSPITAL DIRECTOR

April 29, 1970

Signature of Hospital Chief Executive

*Council on Medical Education of the American Medical Association and/or with appropriate A.M.A. Internship and Residency Review Committees.

PLEASE READ INSTRUCTIONS ON REVERSE SIDE
<table>
<thead>
<tr>
<th>Specialty</th>
<th>Date of Initial Approval by CME of AMA</th>
<th>Total Residencies Offered</th>
<th>Total Residencies Filled</th>
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<tr>
<td>Internal Medicine (Including Allergy, Cardiology, Gastroenterology, and Pulmonary Disease)</td>
<td>1946</td>
<td>48</td>
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<td>Phys. Med. &amp; Rehabilitation</td>
<td>7/11/62</td>
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<td>9</td>
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<tr>
<td>Otolaryngology</td>
<td>5/26/66</td>
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<td>Plastic Surgery</td>
<td>12/10/69</td>
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<td>Thoracic Surgery</td>
<td>7/12/67</td>
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<td>2</td>
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<tr>
<td>Urology</td>
<td>1946</td>
<td>9</td>
<td>7</td>
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Total: 161 128
(Please type) Hospital: Veterans Administration Hospital

Iowa City
City
Iowa

Highway 6 West
Street
52240

State
Zip Code

Name
George D. Frye

Assistant Hospital Director

Date Hospital was Established
March 16, 1952

Approved Internships:

<table>
<thead>
<tr>
<th>Type</th>
<th>Date Of Initial Approval</th>
<th>Total Internships Offered</th>
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</thead>
<tbody>
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<tr>
<td>Straight</td>
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Approved Residencies:

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<tr>
<th>Specialties</th>
<th>Date Of Initial Approval</th>
<th>Total Residencies Offered</th>
<th>Total Residencies Filled</th>
</tr>
</thead>
<tbody>
<tr>
<td>Medicine</td>
<td>1952</td>
<td>20</td>
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</tr>
<tr>
<td>Surgery</td>
<td>1953</td>
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<td>OB-Gyn</td>
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<tr>
<td>Pediatrics</td>
<td></td>
<td>none</td>
<td></td>
</tr>
<tr>
<td>Psychiatry</td>
<td></td>
<td>none</td>
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<td>Anesthesiology</td>
<td>1953</td>
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<td>Neurosurgery</td>
<td>1965</td>
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<td>Ophthalmology</td>
<td>1953</td>
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<td>Otolaryngology</td>
<td>1953</td>
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</tr>
<tr>
<td>Pathology</td>
<td>1952</td>
<td>4</td>
<td></td>
</tr>
</tbody>
</table>

Information Submitted By:

B. F. Brown

Hospital Director

May 7, 1970

*Council on Medical Education of the American Medical Association and/or with appropriate A.M.A. Internship and Residency Review Committees.

PLEASE READ INSTRUCTIONS ON REVERSE SIDE
Institutional Member of the AAMC from among the major medical schools, elected by the Council of Teaching Hospitals, and serving in the Assembly of Council of Teaching Hospitals shall designate up to 15 as members of the Council, each of whom shall have 1 vote at the Annual Meeting for officers and members of the Executive Committee.

Membership in the Council of Teaching Hospitals:

Teaching Hospital members shall be organizations operated exclusively for educational, scientific, or charitable purposes. Hospitals as institutions will be members of the Council and each institution will be represented by a person designated by the hospital for the purpose of voting at business meetings of the Council. All members will vote at the Annual Meeting for officers and members of the Executive Committee.

Religious to the Council will be determined by the following criteria:

1. Those hospitals nominated by a medical school Institutional Member or Provisional Institutional Member of the AAMC from among the major Teaching Hospitals affiliated with the Members and elected by the Council of Teaching Hospitals, or

2. Other hospitals which have approved internship programs and full, approved residencies in at least 4 recognized specialties including the following: Medicine, Surgery, Obstetrics-Gynecology, Pediatrics, and Surgery, and are elected by the Council of Teaching Hospitals.

List the name of the Council of Teaching Hospitals in the Assembly of their name in the following: The Council of Teaching Hospitals shall designate 35 members, up to a maximum of 35, each of whom shall have 1 vote in the Council.

If nominated by a school of Medicine, complete the following:

Name of School of Medicine: College of Medicine

Address of School of Medicine: University of Iowa

Iowa City, Iowa 52240

[Approval status: Approved, Disapproved, Pending]
ASSOCIATION OF AMERICAN MEDICAL COLLEGES

Application for Membership in the Council of Teaching Hospitals

(Please type)

Hospital: BAPTIST MEMORIAL HOSPITAL

Name

Oklahoma City, Oklahoma

City

5800 Northwest Grand Boulevard

Street

73112

Zip Code

Oklahoma

State

Principle Administrative Officer: James L. Henry

Date Hospital was Established

April 14, 1959

Approved Internships:

<table>
<thead>
<tr>
<th>Type</th>
<th>Date of Initial Approval</th>
<th>Total Internships Offered</th>
<th>Total Internships Filled</th>
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</thead>
<tbody>
<tr>
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<td>July, 1962</td>
<td>10</td>
<td>0</td>
</tr>
<tr>
<td>Straight</td>
<td></td>
<td>0</td>
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Approved Residencies:

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<th>Specialties</th>
<th>Date of Initial Approval</th>
<th>Total Residencies Offered</th>
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<tr>
<td>Medicine</td>
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<td>January, 1969</td>
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<td>1 (1 shared)</td>
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<td>OB-Gyn</td>
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<td></td>
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<tr>
<td>Pediatrics</td>
<td></td>
<td></td>
<td></td>
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<tr>
<td>Psychiatry</td>
<td></td>
<td></td>
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<td>Other</td>
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<tr>
<td>Pathology</td>
<td>June, 1965</td>
<td>4</td>
<td>5</td>
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<tr>
<td>Radiology</td>
<td>January, 1968</td>
<td>3</td>
<td>2</td>
</tr>
</tbody>
</table>

Information Submitted By:

F. H. McGregor, M.D., Director of Medical Education

Date

*Council on Medical Education of the American Medical Association and/or with appropriate A.M.A. Internship and Residency Review Committees.

PLEASE READ INSTRUCTIONS ON REVERSE SIDE
**APPLICATION FOR MEMBERSHIP IN THE COUNCIL OF TEACHING HOSPITALS**

(Please type)

Hospital: The University of Texas M.D. Anderson Hospital and Tumor Institute at Houston

Name

Houston City 6723 Bertner Avenue

Texas Street 77025

State Zip Code

Principle Administrative Officer: R. Lee Clark, M.D.

Name President

Title

Date Hospital was Established 1941

Approved Internships: None

<table>
<thead>
<tr>
<th>Type</th>
<th>Date Of Initial Approval by CME of AMA</th>
<th>Total Internships Offered</th>
<th>Total Internships Filled</th>
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<tbody>
<tr>
<td>Rotating</td>
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<tr>
<td>Straight</td>
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Approved Residencies:

<table>
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<tr>
<th>Specialties</th>
<th>Date Of Initial Approval by CME of AMA</th>
<th>Total Residencies Offered</th>
<th>Total Residencies Filled</th>
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</thead>
<tbody>
<tr>
<td>Medicine</td>
<td>1950</td>
<td>6</td>
<td>8</td>
</tr>
<tr>
<td>Surgery</td>
<td>1950</td>
<td>9</td>
<td>9</td>
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<tr>
<td>Ob/Gyn(elective)</td>
<td>1962(Ob-Gyn with U. T. Medical Branch, Galveston, Texas and St. Joseph Hospital, Houston, Texas)</td>
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<tr>
<td>Pediatrics</td>
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<tr>
<td>Psychiatry</td>
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</tr>
<tr>
<td>Other Pathology:</td>
<td>1950</td>
<td>5</td>
<td>3</td>
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<td>Radiology:</td>
<td>1950</td>
<td>5</td>
<td>12</td>
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<tr>
<td>Anesthesiology:</td>
<td>1955</td>
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<td>3</td>
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</table>

*All specialties also offer postresidency training programs and clinical research*

Information Submitted By:

Alfred G. Knudson, Jr., M.D., Ph.D.

Name

Executive Vice President and Director

Title of Hospital Chief Executive

April 3, 1970

Date

*Council on Medical Education of the American Medical Association and/or with appropriate A.M.A. Internship and Residency Review Committees.*

PLEASE READ INSTRUCTIONS ON REVERSE SIDE
Membership in the Council of Teaching Hospitals:

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b. teaching hospitals which have approved internship programs and full, approved residencies in at least 4 recognized specialties including 2 of the following: Medicine, Surgery, Obstetrics-Gynecology, Pediatrics, and Psychiatry, and are elected by the Council of Teaching Hospitals.

The voting rights of the Council of Teaching Hospitals in the Assembly of the AAMC shall be as follows: The Council of Teaching Hospitals shall designate 10 percent of its members, up to a maximum of 35, each of whom shall have 1 vote in the Assembly.

If nominated by a School of Medicine, complete the following:

Name of School of Medicine  The University of Texas Medical School at Houston
Name of Dean  Cheyes McCord Smythe, M.D.
Address of School of Medicine  102 Jesse Jones Library Building
                                    1133 M.D. Anderson Boulevard
                                    Houston, Texas 77025

FOR COTH OFFICE USE ONLY

Date  Approved  Disapproved  Pending
Remarks

Invoiced  Remittance Received
(Please type)

Hospital: **Veterans Administration Hospital**

Name

San Juan
City
Puerto Rico
State
GPO Box 4867
Zip Code

Principle Administrative Officer: **Mr. E. W. Christensen**

Name

Center Director
Title

Date Hospital was Established: **November 11, 1946 - Relocated November 24, 1969**

Approved Internships:

<table>
<thead>
<tr>
<th>Type</th>
<th>Date Of Initial Approval by CME of AMA*</th>
<th>Total Internships Offered</th>
<th>Total Internships Filled</th>
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</thead>
<tbody>
<tr>
<td>Rotating</td>
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<tr>
<td>Straight (medicine)</td>
<td>10-29-67</td>
<td>8</td>
<td>8</td>
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Approved Residencies:

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<td>10</td>
<td>10</td>
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<tr>
<td>Surgery</td>
<td>7-6-52</td>
<td>10</td>
<td>5</td>
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<tr>
<td>OB-Gyn</td>
<td>*As of July 1, 1970 residency in surgery is integrated with University Hospital, School of Medicine, University of Puerto Rico</td>
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<tr>
<td>Pediatrics</td>
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<td>Psychiatry</td>
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<td>Other</td>
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<tr>
<td>Urology</td>
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<td>Ophthalmology</td>
<td>7-1-63</td>
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<td>Orthopedics</td>
<td>1-9-68</td>
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<td>Radiology</td>
<td>4-18-58</td>
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<td>PM&amp;R</td>
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<tr>
<td>Anatomic Pathology</td>
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<td></td>
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</table>

Information Submitted by:

**Mr. E. W. Christensen**

Name

July 1, 1970
Date

*Council on Medical Education of the American Medical Association and/or with appropriate A.M.A. Internship and Residency Review Committees.

PLEASE READ INSTRUCTIONS ON REVERSE SIDE
Instructions:

Please complete all copies and return three copies to the Council of Teaching Hospitals, Association of American Medical Colleges, One Dupont Circle, N.W., Washington, D.C. 20036, retaining the Blue Copy for your files.

Membership in the Council of Teaching Hospitals:

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The voting rights of the Council of Teaching Hospitals in the Assembly of the AAMC shall be as follows: The Council of Teaching Hospitals shall designate 10 percent of its members, up to a maximum of 35, each of whom shall have 1 vote in the Assembly.

If nominated by a School of Medicine, complete the following:

Name of School of Medicine  School of Medicine, University of Puerto Rico

Name of Dean  Dr. José E. Sifontes

Address of School of Medicine  San Juan, Puerto Rico 00905

FOR COTH OFFICE USE ONLY

Date  Approved  Disapproved  Pending

Remarks

Invoiced  Remittance Received
Application for Membership in the Council of Teaching Hospitals

(Please type)

Hospital: Bayfront Medical Center, Inc.

St. Petersburg, 701 Sixth Street South
City Street
Florida 33701
State Zip Code

Principle Administrative Officer: William W. Turner

Date Hospital was Established 1910

 Approved Internships:

<table>
<thead>
<tr>
<th>Type</th>
<th>Date Of Initial Approval by CME of AMA*</th>
<th>Total Internships Offered</th>
<th>Total Internships Filled</th>
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 Approved Residencies:

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<th>Specialties</th>
<th>Date Of Initial Approval by CME of AMA*</th>
<th>Total Residencies Offered</th>
<th>Total Residencies Filled</th>
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<td>Medicine</td>
<td></td>
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<tr>
<td>Surgery</td>
<td>April 1962</td>
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<tr>
<td>OB-Gyn</td>
<td>June 1963</td>
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<td>4</td>
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<td>Pediatrics</td>
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<tr>
<td>Psychiatry</td>
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<tr>
<td>Other</td>
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<td></td>
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<tr>
<td>Gen. Prac.</td>
<td>December 1961</td>
<td>2/4 (2 ea. yr.)</td>
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<tr>
<td>Pathology</td>
<td>September 1962</td>
<td>4/4 (1 ea. yr.)</td>
<td>4</td>
</tr>
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</table>

Information Submitted By:

William W. Turner
President

April 7, 1970

*Council on Medical Education of the American Medical Association and/or with appropriate A.M.A. Internship and Residency Review Committees.

PLEASE READ INSTRUCTIONS ON REVERSE SIDE
Dr. Wiggins has been at Bayfront for approximately a year and one half, and is specifically charged with the responsibility of revitalizing the graduate medical education program and developing an affiliation with the new school at the University of South Florida. On the latter point, a statement of intent to integrate Bayfront as a major affiliate has been accomplished. Dr. Wiggins sees no unusual problems in bringing the affiliation to fruition.

The program in Pathology is viewed by Dr. Wiggins as excellent. He says the problem is one of a lack of understanding by the pathologists of why potential candidates don't apply. They now understand the competition, and this situation is being rectified. Dr. Wiggins has given major emphasis this year to the OB-GYN program which is evident in the statistics.

It is his intention during the coming year to develop a program in radiology and make the transition from a general practice program to one in family practice.

Dr. Wiggins is enthusiastic about the future of the institution, and mentioned he is hopeful that the application will receive a positive review.
ASSOCIATION OF AMERICAN MEDICAL COLLEGES

Application for Membership in the Council of Teaching Hospitals

(Please type)
Hospital: VETERANS ADMINISTRATION HOSPITAL

Name
Syracuse: Irving Avenue and University Place
City
New York 13210
State Zip Code

Principle Administrative Officer: Milton Michael, Jr.

Date Hospital was Established: June 14, 1953

Approved Internships: **

<table>
<thead>
<tr>
<th>Type</th>
<th>Date Of Initial Approval by CME of AMA*</th>
<th>Total Internships Offered</th>
<th>Total Internships Filled</th>
</tr>
</thead>
<tbody>
<tr>
<td>Rotating</td>
<td></td>
<td></td>
<td>16</td>
</tr>
<tr>
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Approved Residencies: **

<table>
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<tr>
<th>Specialties</th>
<th>Date Of Initial Approval by CME of AMA*</th>
<th>Total Residencies Offered</th>
<th>Total Residencies Filled</th>
</tr>
</thead>
<tbody>
<tr>
<td>Medical</td>
<td>7-5-55</td>
<td>5</td>
<td>6</td>
</tr>
<tr>
<td>Surgery</td>
<td>10-29-56</td>
<td>18*</td>
<td>3</td>
</tr>
<tr>
<td>OB-Gyn</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Pediatrics</td>
<td></td>
<td>5</td>
<td>7</td>
</tr>
<tr>
<td>Psychiatry</td>
<td>12-30-55</td>
<td>5</td>
<td></td>
</tr>
<tr>
<td>Other</td>
<td></td>
<td></td>
<td></td>
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<tr>
<td>Anesthesiology</td>
<td>1-3-56</td>
<td>4</td>
<td></td>
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<tr>
<td>Pathology</td>
<td>7-24-56</td>
<td>1</td>
<td></td>
</tr>
<tr>
<td>Radiology **</td>
<td></td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>Neurology **</td>
<td></td>
<td>2</td>
<td></td>
</tr>
</tbody>
</table>

**NOTE: The Syracuse VAN is an affiliate of the Upstate Med.Ctr.(SU). As such, our residency program is an integrated one with the residents and interns rotating through all the hospitals

Information Submitted By: Milton Michael, Jr.

Hospital Director
Name
Date of Hospital Chief Executive
Signature of Hospital Chief Executive

May 21, 1970

*Council on Medical Education of the American Medical Association and/or with appropriate A.M.A. Internship and Residency Review Committees.

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Instructions:

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If nominated by a School of Medicine, complete the following:

Name of School of Medicine State Univ. of N. Y. Upstate Medical Center

Name of Dean Julius B. Richmond, M. D.

Address of School of Medicine 766 Irving Avenue, Syracuse, New York 13210
<table>
<thead>
<tr>
<th>Hospital: ST. BONIFACE GENERAL HOSPITAL</th>
</tr>
</thead>
<tbody>
<tr>
<td>Name</td>
</tr>
<tr>
<td>ST. BONIFACE</td>
</tr>
<tr>
<td>City</td>
</tr>
<tr>
<td>MANITOBA</td>
</tr>
<tr>
<td>Street</td>
</tr>
<tr>
<td>ST. BONIFACE 6</td>
</tr>
<tr>
<td>Province</td>
</tr>
<tr>
<td>Zip Code</td>
</tr>
</tbody>
</table>

Principle Administrative Officer: Mr. L. A. Quaglia

Executive Director

Title

Date Hospital was Established: 1871

Approved Internships:

<table>
<thead>
<tr>
<th>Type</th>
<th>Date Of Initial Approval</th>
<th>Total Internships Offered</th>
<th>Total Internships Filled</th>
</tr>
</thead>
<tbody>
<tr>
<td>Rotating</td>
<td>around 1925</td>
<td>26</td>
<td>24</td>
</tr>
<tr>
<td>Straight</td>
<td></td>
<td></td>
<td></td>
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Approved Residencies:

<table>
<thead>
<tr>
<th>Specialties</th>
<th>Date Of Initial Approval</th>
<th>Total Residencies Offered</th>
<th>Total Residencies Filled</th>
</tr>
</thead>
<tbody>
<tr>
<td>Medicine</td>
<td>around 1950</td>
<td>5</td>
<td>5</td>
</tr>
<tr>
<td>Surgery</td>
<td></td>
<td>5</td>
<td>5</td>
</tr>
<tr>
<td>OB-Gyn</td>
<td></td>
<td>5</td>
<td>2</td>
</tr>
<tr>
<td>Pediatrics</td>
<td></td>
<td>5</td>
<td>3</td>
</tr>
<tr>
<td>Psychiatry</td>
<td></td>
<td>5</td>
<td>2</td>
</tr>
<tr>
<td>Other Pathology</td>
<td></td>
<td>5</td>
<td>4</td>
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<tr>
<td>Urology</td>
<td></td>
<td>5</td>
<td>1</td>
</tr>
<tr>
<td>Radiology</td>
<td></td>
<td>5</td>
<td>5</td>
</tr>
</tbody>
</table>

Information Submitted By:

Mr. L. A. Quaglia

Name

April 14, 1970

Date

Executive Director

Title of Hospital Chief Executive

Signature of Hospital Chief Executive

*Council on Medical Education of the American Medical Association and/or with appropriate A.M.A. Internship and Residency Review Committees.

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If nominated by a School of Medicine, complete the following:

Name of School of Medicine School of Medicine, University of Manitoba

Name of Dean Dean T. W. Fyles

Address of School of Medicine Bannatyne & Emily

Winnipeg, Manitoba

FOR COTH OFFICE USE ONLY

Date Approved Disapproved Pending

Remarks

Invoiced Remittance Received
ASSOCIATION OF AMERICAN MEDICAL COLLEGES

Application for Membership
in the
Council of Teaching Hospitals

(Please type)

Hospital: Catholic Medical Center of Brooklyn & Queens, Inc.

<table>
<thead>
<tr>
<th>Name</th>
<th>88-25 153rd Street</th>
</tr>
</thead>
<tbody>
<tr>
<td>City</td>
<td>Jamaica</td>
</tr>
<tr>
<td>State</td>
<td>New York</td>
</tr>
<tr>
<td>Zip Code</td>
<td>11432</td>
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 Principle Administrative Officer: Mr. Alvin J. Conway

<table>
<thead>
<tr>
<th>Name</th>
<th>Executive Director</th>
</tr>
</thead>
<tbody>
<tr>
<td>Title</td>
<td></td>
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</tbody>
</table>

Date Hospital was Established: July 1, 1966

Approved Internships:

<table>
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<tr>
<th>Type</th>
<th>Date Of Initial Approval</th>
<th>Total Internships Offered</th>
<th>Total Internships Filled</th>
</tr>
</thead>
<tbody>
<tr>
<td>Rotating</td>
<td>5/1/70</td>
<td>48</td>
<td>48</td>
</tr>
<tr>
<td>Straight</td>
<td></td>
<td></td>
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Approved Residencies:

<table>
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<tr>
<th>Specialties</th>
<th>Date Of Initial Approval</th>
<th>Total Residencies Offered</th>
<th>Total Residencies Filled</th>
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</thead>
<tbody>
<tr>
<td>Medicine</td>
<td>11/26/69</td>
<td>34</td>
<td>31</td>
</tr>
<tr>
<td>Surgery</td>
<td>1/22/70</td>
<td>20</td>
<td>20</td>
</tr>
<tr>
<td>OB-Gyn</td>
<td>10/20/69</td>
<td>9</td>
<td>9</td>
</tr>
<tr>
<td>Pediatrics</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Psychiatry</td>
<td>4/13/70</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Orthopedics</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Other(Pediatric)</td>
<td>6/30/69</td>
<td>4</td>
<td>4</td>
</tr>
<tr>
<td>Pathology</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>at Mary Immaculate</td>
<td>9/11/67</td>
<td>4</td>
<td>4</td>
</tr>
<tr>
<td>Pathology</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>at St. Mary's Hospital Division</td>
<td>1/3/69</td>
<td>2</td>
<td>2</td>
</tr>
</tbody>
</table>

Information Submitted By:

John J. Butler, M.D.
Name

Date: May 12, 1970

Signature of Hospital Chief Executive Director of Prof. Svcs.

*Council on Medical Education of the American Medical Association and/or with appropriate A.M.A. Internship and Residency Review Committees.

PLEASE READ INSTRUCTIONS ON REVERSE SIDE
Application for Membership in the Council of Teaching Hospitals

Hospital: GREENVILLE GENERAL HOSPITAL (A Division of Greenville Hospital System)

Name: L. Stanton Tuttle
Title: Administrator, Internal Operations

Date Hospital was Established: 1911

Approved Internships:

<table>
<thead>
<tr>
<th>Type</th>
<th>Date Of Initial Approval</th>
<th>Total Internships Offered</th>
<th>Total Internships Filled</th>
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</thead>
<tbody>
<tr>
<td>Rotating</td>
<td>Prior to 1935</td>
<td>18</td>
<td>12</td>
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<tr>
<td>Straight</td>
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Approved Residencies:

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<th>Date Of Initial Approval</th>
<th>Total Residencies Offered</th>
<th>Total Residencies Filled</th>
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<tbody>
<tr>
<td>Medicine</td>
<td></td>
<td>9</td>
<td>7</td>
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<tr>
<td>Surgery</td>
<td>1955</td>
<td>9</td>
<td>7</td>
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<tr>
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<td>1955</td>
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<td>Psychiatry</td>
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<td>1967</td>
<td>8</td>
<td>8</td>
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<tr>
<td>Gen. Practice</td>
<td>1954</td>
<td>4</td>
<td>3</td>
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</table>

Information Submitted By:
Robert E. Toomey, LL.D.
Name
5-21-70
Date

Signature of Hospital Chief Executive:

*Council on Medical Education of the American Medical Association and/or with appropriate A.M.A. Internship and Residency Review Committees.

PLEASE READ INSTRUCTIONS ON REVERSE SIDE
Application for Membership in the Council of Teaching Hospitals

Hospital: Presbyterian Hospital of Dallas
Name: Roderic M. Bell
Administrator

City: Dallas
Street: 8400 Walnut Hill Lane
State: Texas
Zip Code: 75231

Date Hospital was Established: May 2, 1966

Approved Internships:

<table>
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<tr>
<th>Type</th>
<th>Date Of Initial Approval</th>
<th>Total Internships Offered</th>
<th>Total Internships Filled</th>
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<tbody>
<tr>
<td>Rotating</td>
<td>AMA Nov. 12, 1968</td>
<td>12</td>
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Approved Residencies:

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<th>Date Of Initial Approval</th>
<th>Total Residencies Offered</th>
<th>Total Residencies Filled</th>
</tr>
</thead>
<tbody>
<tr>
<td>Medicine</td>
<td>Presbyterian Hospital is an affiliated teaching hospital with The University of Texas Southwestern Medical School, Dallas, Texas Residency Programs are affiliated with Southwestern Medical School</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Information Submitted By:

Roderic M. Bell
Administrator

May 11, 1970

Signature of Hospital Chief Executive

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If nominated by a School of Medicine, complete the following:

Name of School of Medicine: The University of Texas Southwestern Medical School

Name of Dean: Charles C. Sprague, M.D.

Address of School of Medicine: 5323 Harry Hines Boulevard

Dallas, Texas 75235

FOR COTH OFFICE USE ONLY

Date: Approved: Disapproved: Pending:

Remarks:

Invoiced: Remittance Received:
June 10, 1970

Dear Mr. Danielson:

Mr. Ennis asked me to reply to your letter of May 12, 1970, about our Medical Education Programs.

Our Medical Education Teaching Program revolves about two premises: (1) Since we are not in close proximity to a Medical University, we have a Visiting Professor Program, a list which is enclosed. This gives us the most recent concepts in medicine. However, I do not feel that we should be satisfied with this type of program exclusively; therefore, (2) We have a core of excellent physicians with excellent training and backgrounds who are the teaching faculty. They supplement and compliment the Visiting Professor Program. A list of our monthly teaching programs is enclosed, along with individual department programs in order to give you an idea of our range.

Should you desire a program of the entire year, I would be very happy to supply this to you. I give you the most recent programs because they are most handy. Beginning August 1, 1970, we will have a residency program in Family Practice under the direction of Dr. Ross Bryan.

As mentioned to you in the previous letter, we are approved in Surgery, Pathology, OB-GYN, Orthopaedics, Urology, and affiliated with Warren State Hospital in Psychiatry.

Perhaps our list may not be as long and impressive as some other community hospitals, but my policy is to print only what actually takes place. Our list is a comprehensive one yet each department will have informal teaching conferences which, of course, are not scheduled.

I am happy to inform you that every Resident that has finished his respective program with us since 1965, and who has taken their Board examination in their specialty has been certified.

Enclosed, for your perusal, is our Intern Information Guidline which may give you some idea of the type of program we have.

The Orthopaedic Program, as mentioned to you in our application, is affiliated with Duke University where there is an exchange of Residents at the fourth-year level.

Enclosed is a copy of their teaching schedule.
June 10, 1970

Since our application to you, the Department of Surgery will begin as of July 1, 1970, exchange of Residents with Cleveland Metropolitan Hospital-Case Western Reserve University, beginning a three-month rotation which will evolve into a six-month rotation as the program develops. This will be under the guidance of Dr. Walter Pories, Chief of Surgery, Cleveland Metropolitan Hospital-Case Western Reserve University.

Should you desire more specific details about our teaching program, please call or write me.

Sincerely yours,

George J. D'Angelo, M.D.
Director
Medical Education & Research

GJD/blc
Enclosures
Hospital: Hamot Hospital
4 East Second Street
Erie, Pennsylvania 16512

Principal Administrative Officer: Wm. H. Ennis
Executive Director

Hospital Statistics:
Date Hospital was Established: 1888
Average Daily Census: 390
Annual Outpatient Clinical Visits: 7,729

Approved Internships:

<table>
<thead>
<tr>
<th>Type</th>
<th>Date Of Initial Approval by CME of AMA*</th>
<th>Total Internships Offered</th>
<th>Total Internships Filled</th>
</tr>
</thead>
<tbody>
<tr>
<td>Rotating</td>
<td>1903</td>
<td>12</td>
<td>7</td>
</tr>
<tr>
<td>Mixed</td>
<td></td>
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<td>Straight</td>
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<td></td>
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Approved Residencies:

<table>
<thead>
<tr>
<th>Specialties</th>
<th>Date Of Initial Approval by CME of AMA*</th>
<th>Total Residencies Offered</th>
<th>Total Residencies Filled</th>
</tr>
</thead>
<tbody>
<tr>
<td>Medicine</td>
<td></td>
<td>4</td>
<td>4</td>
</tr>
<tr>
<td>Surgery</td>
<td>1947</td>
<td>4</td>
<td>4</td>
</tr>
<tr>
<td>OB-Gyn</td>
<td>1948</td>
<td>4</td>
<td>2</td>
</tr>
<tr>
<td>Pathology</td>
<td></td>
<td>4</td>
<td>4</td>
</tr>
<tr>
<td>Pediatrics</td>
<td>1946</td>
<td>4</td>
<td>4</td>
</tr>
<tr>
<td>Orthopaedics</td>
<td>1946</td>
<td>4</td>
<td>4</td>
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<tr>
<td>Psychiatry</td>
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<td></td>
<td></td>
</tr>
<tr>
<td>Urology</td>
<td>1957</td>
<td>4</td>
<td>4</td>
</tr>
</tbody>
</table>

Information submitted by:
George J. D'Angelo, M.D.

Name: Director, Medical Education and Research
Date: January 5, 1970

Signature:

*Council on Medical Education of the American Medical Association and/or with appropriate A.M.A. Internship and Residency Review Committees.
John M. Danielson, Director  
Council of Teaching Hospitals and Health Services  
1346 Connecticut Avenue, N.W.  
Washington, D.C. 20036

Dear Mr. Danielson:

In accordance with your letter of December 8, in which you indicated that membership is determined by two standards, one of which besides having an approved program, to have an approved Residency in two of the five that you mentioned. We have currently approved Residencies in Surgery, OB-GYN, Pathology, Urology, and Orthopaedics and an affiliated Residency Program in Psychiatry.

We are affiliated with the Warren State Hospital which has a fully approved Psychiatry Residency under H. J. Reinhard, M.D. Our Orthopaedic Program is now affiliated with the Duke University Medical Center Orthopaedic Residency under the direction of J. Leonard Goldner, M.D.

Enclosed is our completed application and our check in the amount of $700.00.

Sincerely yours,

[Signature]

George J. D'Angelo, M.D.
Director
Medical Education and Research

GJD/blc

Enclosures: 2
Application for Membership in the Council of Teaching Hospitals

(Please type)

Hospital: Veterans Administration Hospital

Name

Shreveport 510 East Stoner Avenue

City Street

Louisiana 71101

State Zip Code

Principle Administrative Officer: E. P. Whitaker

Hospital Director

Title

Date Hospital was Established 1950

Approved Internships:

<table>
<thead>
<tr>
<th>Type</th>
<th>Date Of Initial Approval</th>
<th>Total Internships Offered</th>
<th>Total Internships Filled</th>
</tr>
</thead>
<tbody>
<tr>
<td>Rotating</td>
<td></td>
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<td>Straight</td>
<td></td>
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Approved Residencies:

<table>
<thead>
<tr>
<th>Specialties</th>
<th>Date Of Initial Approval</th>
<th>Total Residencies Offered</th>
<th>Total Residencies Filled</th>
</tr>
</thead>
<tbody>
<tr>
<td>Medicine</td>
<td>Now in process of organizing.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Surgery</td>
<td>January 1969</td>
<td>8</td>
<td></td>
</tr>
<tr>
<td>OB-Gyn</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Pediatrics</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Psychiatry</td>
<td>Staff is qualified; have had residents in the past.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Other</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Pathology</td>
<td>Qualified and presently organizing.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Radiology</td>
<td>Qualified and presently organizing.</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Information Submitted By:

E. P. Whitaker

Hospital Director

Date Signature

August 21, 1970

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b. teaching hospitals which have approved internship programs and full, approved residencies in at least 4 recognized specialties including 2 of the following: Medicine, Surgery, Obstetrics-Gynecology, Pediatrics, and Psychiatry, and are elected by the Council of Teaching Hospitals

The voting rights of the Council of Teaching Hospital Members Assembly of the AAMC shall be as follows: The Council of Teaching Hospitals shall designate 10 percent of its members, up to a maximum of 35, each of whom shall have 1 vote in the Assembly.

If nominated by a School of Medicine, complete the following:

Name of School of Medicine  Louisiana State University School of Medicine in Shreveport
Name of Dean  Dr. Edgar Hull
Address of School of Medicine  510 East Stoner Avenue

FOR COTH OFFICE USE ONLY

Date  Approved  Disapproved  Pending

Remarks

Invoiced  Remittance Received
ASSOCIATION OF AMERICAN MEDICAL COLLEGES

Application for Membership in the Council of Teaching Hospitals

(Please type) Hospital: Children's Hospital of Pittsburgh

<table>
<thead>
<tr>
<th>Name</th>
<th>125 DeSoto Street</th>
</tr>
</thead>
<tbody>
<tr>
<td>City</td>
<td>Pittsburgh</td>
</tr>
<tr>
<td>State</td>
<td>Pennsylvania</td>
</tr>
<tr>
<td>Zip Code</td>
<td>15213</td>
</tr>
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</table>

Principle Administrative Officer: Harold W. Luebs

<table>
<thead>
<tr>
<th>Name</th>
<th>Administrator</th>
</tr>
</thead>
<tbody>
<tr>
<td>Title</td>
<td></td>
</tr>
</tbody>
</table>

Date Hospital was Established: 1887

Approved Internships:

<table>
<thead>
<tr>
<th>Type</th>
<th>Date Of Initial Approval by CME of AMA*</th>
<th>Total Internships Offered</th>
<th>Total Internships Filled</th>
</tr>
</thead>
<tbody>
<tr>
<td>Rotating</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Straight Pediatrics</td>
<td>Records not available</td>
<td>14</td>
<td>14</td>
</tr>
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</table>

Approved Residencies:

<table>
<thead>
<tr>
<th>Specialties</th>
<th>Date Of Initial Approval by CME of AMA*</th>
<th>Total Residencies Offered</th>
<th>Total Residencies Filled</th>
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</thead>
<tbody>
<tr>
<td>Medicine-Pediatrics</td>
<td>Records not available</td>
<td>28</td>
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<tr>
<td>Surgery-Pediatric</td>
<td></td>
<td>6</td>
<td>6</td>
</tr>
<tr>
<td>OB-Gyn</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Pediatrics</td>
<td></td>
<td>see above</td>
<td>see above</td>
</tr>
<tr>
<td>Psychiatry</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Other</td>
<td></td>
<td>see attached</td>
<td>see attached</td>
</tr>
</tbody>
</table>

Information Submitted By:

Harold W. Luebs
Name

June 23, 1970
Date

Administrator
Title of Hospital Chief Executive

Signature of Hospital Chief Executive

*Council on Medical Education of the American Medical Association and/or with appropriate A.M.A. Internship and Residency Review Committees.

PLEASE READ INSTRUCTIONS ON REVERSE SIDE
Children's Hospital of Pittsburgh

Approved Residencies

<table>
<thead>
<tr>
<th>Specialties, cont'd.</th>
<th>Total Offered</th>
<th>Total Filled</th>
</tr>
</thead>
<tbody>
<tr>
<td>Anesthesia</td>
<td>5</td>
<td>5</td>
</tr>
<tr>
<td>Allergy &amp; Immunology</td>
<td>2</td>
<td>2</td>
</tr>
<tr>
<td>Cardiology</td>
<td>2</td>
<td>2</td>
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<tr>
<td>Dental</td>
<td>5</td>
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<tr>
<td>Diabetic</td>
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<td>1</td>
</tr>
<tr>
<td>Eye</td>
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</tr>
<tr>
<td>Pathology</td>
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<td>5</td>
</tr>
<tr>
<td>Surgery</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Urology</td>
<td>1</td>
<td>1</td>
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<tr>
<td>Neurosurgery</td>
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<td>2</td>
</tr>
<tr>
<td>Thoracic Surgery</td>
<td>1</td>
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<td>Plastic Surgery</td>
<td>2</td>
<td>2</td>
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<tr>
<td>Orthopedic Surgery</td>
<td>9</td>
<td>9</td>
</tr>
<tr>
<td>Ear, Nose &amp; Throat</td>
<td>1</td>
<td>1</td>
</tr>
<tr>
<td>Radiology</td>
<td>5</td>
<td>5</td>
</tr>
</tbody>
</table>
Application for Membership in the Council of Teaching Hospitals

(Please type)

Hospital: Veterans Administration Hospital

Name

Tucson City Street
Arizona State 85723 Zip Code

Principal Administrative Officer: A. H. Fechner, M.D.

Name

Hospital Director

Title

Date Hospital was Established October 1928

Approved Internships:

<table>
<thead>
<tr>
<th>Type</th>
<th>Date of Initial Approval</th>
<th>Total Internships Offered</th>
<th>Total Internships Filled</th>
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<tbody>
<tr>
<td>Rotating</td>
<td>Fall, 1969</td>
<td>11</td>
<td>3</td>
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Approved Residencies:

<table>
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<th>Specialties</th>
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<th>Total Residencies Offered</th>
<th>Total Residencies Filled</th>
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<tbody>
<tr>
<td>Medicine</td>
<td>Spring 1968</td>
<td>15</td>
<td>6</td>
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<tr>
<td>Surgery</td>
<td>June 1967</td>
<td>12</td>
<td>12</td>
</tr>
<tr>
<td>OB-Gyn</td>
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<td></td>
<td></td>
</tr>
<tr>
<td>Pediatrics</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Psychiatry</td>
<td></td>
<td></td>
<td></td>
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<tr>
<td>Other (Neurology)</td>
<td>Fall 1968</td>
<td>2</td>
<td>2</td>
</tr>
<tr>
<td>(Plastic Surg.)</td>
<td>May 1969</td>
<td>2</td>
<td>2</td>
</tr>
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</table>

Information Submitted By:

A. H. Fechner, M.D.

Hospital Director

Name

Title of Hospital Chief Executive

August 4, 1970

Date

Signature of Hospital Chief Executive

*Council on Medical Education of the American Medical Association and/or with appropriate A.M.A. Internship and Residency Review Committees.

PLEASE READ INSTRUCTIONS ON REVERSE SIDE
Membership in the Council of Teaching Hospitals:

Teaching Hospital members shall be organizations operated exclusively for educational, scientific, or charitable purposes. Hospitals as institutions will be members of the Council and each institution will be represented by a person designated by the hospital for the purpose of voting at business meetings of the Council. All members will vote at the Annual Meeting for officers and members of the Executive Committee.

Membership to the Council will be determined by the following criteria:

a. those hospitals nominated by a medical school Institutional Member or Provisional Institutional Member of the AAMC from among the major Teaching Hospitals affiliated with the Members and elected by the Council of Teaching Hospitals, or

b. teaching hospitals which have approved internship programs and full, approved residencies in at least 4 recognized specialties including 2 of the following: Medicine, Surgery, Obstetrics-Gynecology, Pediatrics, and Psychiatry, and are elected by the Council of Teaching Hospitals.

The voting rights of the Council of Teaching Hospitals in the Assembly of the AAMC shall be as follows: The Council of Teaching Hospitals shall designate 10 percent of its members, up to a maximum of 35, each of whom shall have 1 vote in the Assembly.

If nominated by a School of Medicine, complete the following:

Name of School of Medicine University of Arizona College of Medicine

Name of Dean Merlin K. DuVal, Jr., M.D.

Address of School of Medicine Tucson, Arizona 85721
ASSOCIATION OF AMERICAN MEDICAL COLLEGES

Application for Membership in the Council of Teaching Hospitals

(Please type)

<table>
<thead>
<tr>
<th>Hospital:</th>
<th>Iowa Methodist Hospital</th>
</tr>
</thead>
<tbody>
<tr>
<td>Des Moines</td>
<td>1200 Pleasant</td>
</tr>
<tr>
<td>City</td>
<td>Street</td>
</tr>
<tr>
<td>Iowa</td>
<td>50308</td>
</tr>
<tr>
<td>State</td>
<td>Zip Code</td>
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Principle Administrative Officer: Donald W. Cordes
Name: Administrator
Title:

Date Hospital was Established: 1901

Approved Internships:

<table>
<thead>
<tr>
<th>Type</th>
<th>Date of Initial Approval by CME of AMA</th>
<th>Total Internships Offered</th>
<th>Total Internships Filled</th>
</tr>
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<tbody>
<tr>
<td>Rotating</td>
<td>1901</td>
<td>15</td>
<td>2</td>
</tr>
<tr>
<td>Straight</td>
<td>1969</td>
<td>4</td>
<td>1</td>
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Approved Residencies:

<table>
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<tr>
<th>Specialties</th>
<th>Date of Initial Approval by CME of AMA</th>
<th>Total Residencies Offered</th>
<th>Total Residencies Filled</th>
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</thead>
<tbody>
<tr>
<td>Medicine</td>
<td>1946</td>
<td>10</td>
<td>8</td>
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<tr>
<td>Surgery</td>
<td>1946</td>
<td>6</td>
<td>3</td>
</tr>
<tr>
<td>OB-Gyn</td>
<td>1946</td>
<td></td>
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<tr>
<td>Pediatrics</td>
<td>1946</td>
<td>6</td>
<td>3</td>
</tr>
<tr>
<td>Psychiatry</td>
<td>(3yr) 1946 (4yr) 1952</td>
<td>4</td>
<td>2</td>
</tr>
<tr>
<td>Other Pathology</td>
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<td>3</td>
<td>1</td>
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<tr>
<td>Radiology</td>
<td>1948</td>
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</table>

Information Submitted By:

Donald W. Cordes
Name
August 14, 1970
Date

Administrator
Title of Hospital Chief Executive

Signature of Hospital Chief Executive

*Council on Medical Education of the American Medical Association and/or with appropriate A.M.A. Internship and Residency Review Committees.

PLEASE READ INSTRUCTIONS ON REVERSE SIDE
ASSOCIATION OF AMERICAN MEDICAL COLLEGES

Application for Membership
in the
Council of Teaching Hospitals

(Please type)

Hospital: METHODOIST HOSPITAL OF DALLAS

<table>
<thead>
<tr>
<th>Name</th>
<th>P. O. Box 5999 (301 W. Colorado Boulevard)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Street</td>
<td>Dallas</td>
</tr>
<tr>
<td>City</td>
<td>Texas</td>
</tr>
<tr>
<td>State</td>
<td>75222</td>
</tr>
<tr>
<td>Zip Code</td>
<td></td>
</tr>
</tbody>
</table>

Principal Administrative Officer: Bolton Boone, D.D.

Executive Director

Hospital Statistics:

- Date Hospital was Established: 1927
- Average Daily Census: 376
- Annual Outpatient Clinical Visits: 11,192

Approved Internships:

<table>
<thead>
<tr>
<th>Type</th>
<th>Date Of Initial Approval by CME of AMA*</th>
<th>Total Internships Offered</th>
<th>Total Internships Filled</th>
</tr>
</thead>
<tbody>
<tr>
<td>Rotating</td>
<td>26 May 1936</td>
<td>18</td>
<td>11</td>
</tr>
<tr>
<td>Mixed</td>
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<td></td>
<td></td>
</tr>
<tr>
<td>Straight</td>
<td>22 July 1965</td>
<td>1</td>
<td>1</td>
</tr>
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</table>

Approved Residencies:

<table>
<thead>
<tr>
<th>Specialties</th>
<th>Date Of Initial Approval by CME of AMA*</th>
<th>Total Residencies Offered</th>
<th>Total Residencies Filled</th>
</tr>
</thead>
<tbody>
<tr>
<td>Medicine</td>
<td>7 April 1949</td>
<td>6</td>
<td>6</td>
</tr>
<tr>
<td>Surgery</td>
<td>20 January 1948</td>
<td>7</td>
<td>4</td>
</tr>
<tr>
<td>OB-Gyn</td>
<td>3 May 1948</td>
<td>6</td>
<td>4</td>
</tr>
<tr>
<td>Pediatrics</td>
<td>19 October 1961</td>
<td>2</td>
<td>0</td>
</tr>
<tr>
<td>Psychiatry</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Information submitted by:

Ivan E. Danhof, Ph.D., M.D.  Director of Medical Education

Date of Submission: 17 July 1970

Signature: Ivan E. Danhof

*Council on Medical Education of the American Medical Association and/or with appropriate A.M.A. Internship and Residency Review Committees.

PLEASE READ INSTRUCTIONS ON REVERSE SIDE
Instructions:

Please complete all copies and return three copies to the Council of Teaching Hospitals, Association of American Medical Colleges, 2530 Ridge Avenue, Evanston, Illinois 60201, retaining the blue copy for your file.

Membership in the Council:

Hospitals as institutions will be members of the Council and each institution will be represented by a designated person, designated by the hospital, for the purpose of conducting the business of the Council.

Membership in the Council will be annually determined and consist of:

a. Those hospitals nominated by a medical school member of the AAMC from among the major teaching hospitals affiliated with the school,

and

b. Teaching hospitals which are either nominated by a medical school member of the AAMC on the basis of important affiliations for the purposes of medical education or which have approved internship programs and full residencies in three of the following five departments: Medicine, Surgery, OB-Gyn, Pediatrics, Psychiatry, and are elected to membership by the members of the Council of Teaching Hospitals.

All members will vote at the annual meeting for officers and members of the Executive Committee. Voting on all other matters will be limited to one representative member for each medical school, who, in order to give broad representation, shall consult with the other teaching hospital members in his geographic region before votes are taken.

If nominated by School of Medicine, complete the following:

Name of School of Medicine: University of Texas (Southwestern) Medical School

Name of Parent University: University of Texas

Name of Dean of School of Medicine: Charles C. Sprague, M.D.

Complete address of School of Medicine: University of Texas (Southwestern) Medical School at Dallas

5323 Harry Hines Boulevard

Dallas, Texas 75235

AAMC OFFICE USE ONLY:

Date ___________ Approved ___________ Disapproved ___________ Pending ___________

Remarks: ______________________________________________________________________

______________________________________________________________________________

______________________________________________________________________________

______________________________________________________________________________

______________________________________________________________________________

______________________________________________________________________________

Invoiced ___________ Remittance Received ___________
Outline for Preamble:

(1) In reimbursing the physicians' services in the teaching setting, the basic problem has been to develop appropriate criteria to distinguish between a physicians' teaching services which can be covered only under the hospital insurance program on a cost basis and a physicians' personal services to patients which can be reimbursed under the medical insurance program on a fee-for-service basis. We believe the criteria for distinguishing between teaching and patient care need to be responsive to the wide variety of teaching settings in which physicians practice. At the same time it might be noted that the best of criteria will not meet the need unless they can be and are properly applied by carriers given the administrative difficulties which arise from the large number of differing fact situations.

(2) The nature of Medicare reimbursement to supervisory physicians in teaching hospitals is related to the circumstances of the case. There is, of course, a wide variety of teaching arrangements. At one extreme there is the large teaching hospital with an almost exclusively charity clientele in which the treatment of Medicare beneficiaries may, substantially be the responsibility of the house staff; in such hospitals many teaching physicians have had the roles exclusively of teachers and supervisory and have not acted as any one patient's physician.
At the other extreme, there is the community hospital with a residency program which relies in large part for teaching purposes on the private patients of teaching physicians who primary activities are in private practice. The resident or intern normally acts as a subordinate to the attending physician, and the attending physician personally renders the major portion of the care and directs in details the totality of the care.

Additionally, there are teaching hospitals in which a teaching physician may be responsible both for private patients whom he has admitted and for patients who have presented themselves to the hospital for treatment and who have been assigned by the hospital to his care.

With the change in the tax status, the pressure of private patient demand both in number and time and increased specialization which requires more time spent with each private patient, the voluntary physician has found it increasingly difficult to provide service to indigent patients without some compensation. The physician's time has become such an important part of his financial solvency he could no longer give it away and the institution's can not buy it and give it away, but they can buy it and sell it.

The salaried physician has similarly found that; because of increasing demands made by their responsibilities for administration or professional management, the demands for their time by the house staff and students, the complications of specialization, pressure to engage in productive research as a requirement of faculty advancement; coupled with a serious lack of funds on the part of the institution to meet the necessary level of salary which they require for an appropriate standard of living, it is necessary for them to be compensated similarly for the care of the indigent patient.
(7) When Medicare and Medicaid offered a solution to some of the above problems by offering to pay professional services rendered to their beneficiaries, it was considered almost fortuitous that a method of reimbursement had been authorized by the law that could and did in fact resolve the problems stated above and guaranteed the poor of this nation continued and improved accessibility to care and quality of professional care that, if not provided, may have caused a major breakdown.

(8) It is necessary therefore that legally acceptable methods of financial reimbursement be developed that will provide for a resolution of the existing problems in the reimbursement of attending physicians (voluntary, full-time and geographic full-time) in a teaching setting.

Outline of Specifications of Suggested Alternative Methods of Payment for Services of Attending Physicians in a Teaching Setting

1. It is necessary to emphasize that the Association believes that, because of the variability of circumstances and situations in differing teaching settings each of these alternatives must be legislatively permitted. No one of the following alternatives must be considered to have preferential endorsement by the Association.

It must also be emphasized that all of the following legislative recommendations would, we believe, fulfill the intent of the law, and would insure a high quality of care for each Medicare beneficiary admitted to a hospital.

a. All Part A

All reimbursement of attending physicians, including the imputed cost of voluntary faculty as well as House Staff would be based on a cost related formula as a part of hospital costs.
b. All Part B

The services of all licensed physicians in a teaching setting including both attending physicians and residents, would be paid under the Part B. The costs of interns would be included under Part A.

c. Interns and Residents would continue Part A and attending physicians would charge the established professional fee less some predetermined amount which recognizes that care in a teaching setting is rendered by a team and not an individual physician.

A recommended variant of this approach is as follows:

\[
\text{Accumulated Professional Fee By Service} = \frac{\text{Average Per Diem}}{\text{Patient Days}} \times \text{Professional Fee}
\]

This amount would be considered the professional fee charged for a visit of service rendered by the team. This unit charge would be billed at 15 percent less when evidence is provided by the institution that the care rendered is the same throughout the institution and that there is no dual standard of care provided. Additionally, documentation must be presented relating to the quality of care the existence of a team. Satisfactory institutional evidence of this would eliminate the necessity for the documentation now requested by IL 372 and the 15 percent reduction in the established professional fee would be an indication of this.

We also recommend that this formula relate to a maximum of 30 patients assigned to any one attending and that in those instances in which attendings are assigned up to 60 patients that an additional 15 percent
be reduced from the coverage per diem professional fee. In those cases, where an attending is assigned more than 60 patients, we recommend that the formula be: the average per diem professional fee less 80 percent.

The virtue of a proposal such as this is that it provides financial incentives for the institution to increase the size of their attending staff.
81st ANNUAL MEETING
PRELIMINARY PROGRAM
October 29-November 2, 1970

The Academic Health Center and Health Care Delivery

ASSOCIATION OF AMERICAN MEDICAL COLLEGES
Biltmore Hotel
Los Angeles, California
CALENDAR OF MEETINGS

WEDNESDAY, OCTOBER 28, 1970

Business Officers Section .................................. Reception 6:30 p.m. - 10:00 p.m.
GSA Colleges & Secondary Schools Committee .................. 1:00 p.m. - 3:00 p.m.
GSA Finance Committee ........................................ 7:30 p.m. - 10:00 p.m.
GSA Foreign Students Committee ............................... 3:30 p.m. - 5:30 p.m.
GSA Health Committee .......................................... 10:00 a.m. - 12:00 noon
GSA Legal Committee ........................................... 1:00 p.m. - 3:00 p.m.
GSA Minority Committee ......................................... 7:30 p.m. - 10:00 p.m.
GSA Records Committee ......................................... 9:00 a.m. - 12:00 noon
GSA Student Organizations Committee ......................... 3:30 p.m. - 5:30 p.m.

THURSDAY, OCTOBER 29, 1970

Assn. for Hospital Medical Education ......................... 2:00 p.m. - 5:00 p.m.
American Assn. of Chairmen of Departments of Psychiatry .... Lunch & Dinner 9:00 a.m. - 9:00 p.m.
Business Officers Section ..................................... 9:00 a.m. - 5:00 p.m.
Business & Discussion Groups ................................ 12:30 p.m. - 1:30 p.m.
Council of Academic Societies, Executive Committee ........ 2:00 p.m. - 5:30 p.m.
Dinner ........................................................... 8:00 p.m.
Council of Teaching Hospitals, Executive Committee .......... Breakfast 8:00 a.m. - 12:00 noon
Council of Teaching Hospitals .................................. Lunch & Business 12:30 p.m. - 5:00 p.m.
Continuing Education .......................................... Program & Discussion Groups 9:00 a.m. - 9:00 p.m.
Department of Academic Affairs ................................ Reception 5:30 p.m. - 7:00 p.m.
GSA ............................................................... Open Session 1:00 p.m. - 5:00 p.m.
GSA Medical Education Committee ............................... 9:00 a.m. - 11:00 a.m.
GSA Research Committee ........................................ 9:00 a.m. - 11:30 a.m.
GSA/Student Affairs Steering Committees ....................... 8:00 p.m. - 10:00 p.m.
Liaison Committee for Specialty Boards ......................... Dinner 6:30 p.m. - 10:00 p.m.
MCAT Advisory Committee ...................................... Lunch 12:00 noon - 2:00 p.m.
OE0 Advisory Board ............................................. Press 9:00 a.m. - 12:00 noon
Reception 5:30 p.m. - 7:00 p.m.
Public Teaching Hospitals ...................................... Society for Health & Human Values 2:00 p.m. - 6:00 p.m.

FRIDAY, OCTOBER 30, 1970

AMCAS Information Center .................................. 7:00 p.m. - 9:00 p.m.
Assembly ........................................................ 5:00 p.m. - 6:00 p.m.
Council of Academic Societies ................................ Program 2:00 p.m. - 5:00 p.m.
Children's Hospital Executive Council ........................ Dinner 6:00 p.m. - 10:00 p.m.
Council of Deans, Administrative Board ........................ Lunch 12:30 p.m. - 2:00 p.m.
Council of Deans ................................................. Business 2:00 p.m. - 5:00 p.m.
Reception 6:00 p.m. - 8:00 p.m.
Council of Teaching Hospitals .................................. Reception 6:00 p.m. - 8:00 p.m.
Directors of Research in Medical Education .................... Breakfast 7:00 a.m. - 8:30 a.m.
GSA Executive Session .......................................... 2:00 p.m. - 5:00 p.m.
GSA, Northeast ................................................... 8:00 p.m. - 10:00 p.m.
Internat'l Relations in Medical Education Comm. .............. Dinner 7:00 p.m. - 10:00 p.m.
International Medical Education Conference .................... 2:00 p.m. - 5:00 p.m.

- continued -
FRIDAY, OCTOBER 30, 1970

- continued -

"New Deans" Breakfast 7:00 a.m. - 8:30 a.m.
Plenary Session Breakfast 7:00 a.m. - 8:30 a.m.
Public Forum 8:30 a.m. - 12:30 p.m.
Public Relations Section Lunch 12:30 p.m. - 3:00 p.m.
Research in Medical Education Program & Disc. Grps Lunch 12:30 p.m. - 2:00 p.m.
Research in Medical Education Planning Committee Lunch 12:30 p.m. - 2:00 p.m.
Secretaries of Accreditation Teams Breakfast 7:00 a.m. - 8:30 a.m.
Univ. of Illinois College of Medicine Ctr. for Educational Development Reception 5:30 p.m. - 7:00 p.m.

SATURDAY, OCTOBER 31, 1970

AMCAS Information Center 3:00 p.m. - 5:00 p.m.
Annual Banquet Chairman's Reception 7:30 p.m. - 9:00 p.m.
Committee on the Measurement of Personality Breakfast 7:00 a.m. - 8:30 a.m.
Council of Academic Societies Program & Business Council of Teaching Hospitals Program
Deans of New & Developing Medical Schools Breakfast
"Development Programs for Medical Schools & Medical Centers" 2:00 p.m. - 5:00 p.m.
Educational Advisory Committee to the VA 1:00 p.m. - 4:30 p.m.
International Luncheon Journal of Medical Education
Editorial Board Cocktails 4:00 p.m. - 6:00 p.m.
Planning Officers of Medical Colleges & Academic Medical Centers Walking Tour 2:00 p.m. - 5:00 p.m.
Plenary Session Public Relations Section Program
Research in Medical Education Discussion Groups Student Program

SUNDAY, NOVEMBER 1, 1970

Alpha Omega Alpha Honor Medical Society, Board of Directors Lunch & Cocktails 12:30 p.m. - 4:00 p.m.
Assembly 2:00 p.m. - 5:00 p.m.
GSA/Student Affairs Steering Committees Dinner 6:00 p.m. - 10:00 p.m.
Medicare Committee Lunch 11:00 p.m. - 1:00 p.m.
Plenary Session 8:30 a.m. - 12:30 p.m.
Society of University Urologists 7:00 p.m. - 10:00 p.m.

MONDAY, NOVEMBER 2, 1970

Association of Anatomy Chairmen Conference on Longitudinal Research
in Medical Education Lunch 9:00 a.m. - 5:00 p.m.
DIME PL-480 Selection Committee 9:00 a.m. - 12:00 noon
Planning & Development Officers Planning & Development Officers Steering Committee
Society of Teachers of Family Medicine Society of University Urologists

Press Rooms, Exhibits, and a Hospitality Lounge for the Ladies will be open throughout the meeting.
FRIDAY MORNING, OCTOBER 30, 1970

Chairman's Address
Robert B. Howard, Chairman, AAMC; and
Dean, University of Minnesota Medical School

The Academic Health Center and
Health Care Delivery -
The Changing Scene

Carleton B. Chapman
Dean, Dartmouth Medical School

Joseph T. English
President, New York City Health &
Hospital Corporation

Charles E. Payton
President, Student American Medical
Association

Panel discussants

SATURDAY MORNING, OCTOBER 31, 1970

The Academic Health Center and
Health Care Delivery -
Preparing Personnel to Meet
the Demand

George E. Burket, Jr.
Former President, American Academy
of General Practice

Robert J. Haggerty
Chairman, Department of Pediatrics,
University of Rochester, School of
Medicine & Dentistry

Robert A. Aldrich
Vice President for Health Affairs
University of Colorado Medical Center

Panel discussants

SUNDAY MORNING, NOVEMBER 1, 1970

Alan Gregg Memorial Lecture
Lincoln Gordon
President, The Johns Hopkins University

The Academic Health Center and
Health Care Delivery -
Organizational Patterns for
New Responsibilities

John R. Evans
Dean, McMaster University

Irving London
Harvard MIT Planning Committee
Massachusetts Institute of Technology

William A. Robinson
President, Student National Medical
Association

George James
Dean, Mount Sinai School of Medicine
Advocacy of a Joint Practice Commission

There is growing frustration within and between those professions concerned with health care regarding the appropriateness, extent of involvement, and relevance of each profession in the delivery of health care. Since it has in the past been generally accepted that each profession has a right and responsibility to define and/or alter its own roles; and since such changes inevitably affect related professions and the public; and since each find it increasingly difficult to rationalize their present roles in the changing expectation of the public; and since the various professions feel the need for developing better job satisfaction among their membership; and since it is the hospital that will be one arena where the collision will take place between the various professionals concerning their many assumed perogatives in patient-care; it seems appropriate that the COTH of the AAMC give strong advocacy to the establishment of a National Joint Practice Commission similar to that proposed by the recent National Commission on Nursing.

It would appear that the Commission should include representation from medicine, nursing, hospital administration, and organizations that are involved in the education of these professionals as well as allied health professionals themselves. In addition it should have representation from the informed public.

It is generally accepted that we need to know what we are educating our professionals to do. We can look forward to continued and increasing confusion unless this issue is clearly met.
Necessary alterations in health practice acts, licensure, and regulations will be stifled without an understanding of the roles of the participants in the role of health care delivery.

A major study is being contemplated by the AMA, the Association for Allied Health Professionals, and the National Accrediting Commission to examine the appropriateness of present accreditation of allied health professionals as well as making recommendations for a more effective approach. A Joint Practice Commission would seem a necessary counterpart as the work of the above group is going to be effective.
June 11, 1970

Dear Mr. Elisburg:

Thank you for your June 3 letter expressing interest on part of the Sub-committee in the two suggestions regarding the National Labor Relations Act. One was that the NLRB be given jurisdiction over non-profit educational institutions. The other was that the Act be amended so as to give NLRB jurisdiction with respect to non-profit hospitals.

You asked also that the Sub-committee be kept informed of the Secretary of Labor's response to this request. Find attached a June 3 letter on behalf of Secretary Schultz from Solicitor L. H. Silberman. You noted that Senators Yarborough and Williams referred my correspondence to the Sub-committee on Labor. Find attached also, copies of responses from Senators Javits, Propty, Mondale and Brooke. As you will note, the general tenor of these letters is receptive and encouraging, but reflects a general feeling that no proposed legislation for amendment of the NLRA will come before the 91st Congress. Apparently, neither the Department of Labor nor the Administration per se intend to put forward any such proposals during the current session.

Both of the matters suggested are being currently considered by several organizations including The American Association of Universities, The American Association of Medical Colleges, the Council of Teaching Hospitals (of the AAMC), and others.

What is your suggestion with regard to getting the matter on the table, that is a matter of the amendment of the NLRA so as to put NLRB in the jurisdictional position with regard to non-profit hospitals? With respect to the other suggestion, that the NLRB exert jurisdiction it already has over non-profit educational institutions, I can see Solicitor Silberman's point that it would be inappropriate for the Department of Labor to comment now since the Board is considering reversing its decision in Trustees of Columbia University and the pending Cornell and Yale cases.

Sincerely,

Lewis H. Rohrbaugh

Mr. Donald E. Elisburg, Associate Counsel
Sub-committee on Labor
United States Senate
Committee on Labor and Public Welfare
Washington, D.C.  20510

bcc:  Mr. John Danielson
Mr. Lewis H. Rohrbaugh  
Boston University Medical Center  
80 East Concord Street  
Boston, Massachusetts 02118

Dear Mr. Rohrbaugh:

The Secretary of Labor has asked me to respond to your letter of April 24, 1970.

With respect to your opinion that the National Labor Relations Board should assert jurisdiction over non-profit educational institutions, the Board is considering whether to reverse its decision in Trustees of Columbia University in the currently pending Cornell and Yale cases. In fact, I have been informed that an amicus curiae brief was filed with the Board on behalf of Boston University by Mr. Joseph Kiebala, Jr., Treasurer, taking the position espoused in your letter.

Since this question is currently before the Board, however, it would be inappropriate for me to comment on this matter at the present time.

You have also suggested that the National Labor Relations Act be amended to confer Board jurisdiction over non-profit hospitals. At the moment there is no such legislation pending before Congress, but the Department very much appreciates having the benefit of your comments and views on the subject.

Sincerely,

L. H. Silberman  
Solicitor
Dear Mr. Rohrbaugh:

Thank you very much for sending me a copy of your letter of April 24, 1970 to Secretary Schultz concerning certain changes in the Taft-Hartley Act and the National Labor Relations Act. I have initiated an inquiry into this matter with the Department of Labor, and will be in touch with you again as soon as their report has been received.

With best wishes,

Sincerely,

Jacob K. Javits

Mr. Lewis H. Rohrbaugh
Director
Boston University Medical Center
80 East Concord Street
Boston, Massachusetts 02118
May 18, 1970

Lewis H. Rohrbaugh, Director
Boston University Medical Center
80 East Concord Street
Boston, Massachusetts 02118

Dear Mr. Rohrbaugh:

Thank you for sending me a copy of your recent letter to the Secretary of Labor concerning proposed changes in the jurisdiction of the National Labor Relations Board over non-profit educational institutions and charitable hospitals.

I am convinced that there will be no general revisions of provisions in the National Labor Relations Act during this session of Congress. I would not be surprised, however, to see our Labor Committee conduct a general review of all Federal labor laws in the next Congress. If and when such hearings are conducted, I am sure that you will either want to testify or to submit a detailed statement expanding on the position set forth in your letter.

I appreciate the benefit of your thoughts on these subjects.

Sincerely yours,

Winston Prouty
United States Senator
May 14, 1970

Mr. Lewis H. Rohrbaugh, Director
Boston University Medical Center
80 East Concord Street
Boston, Massachusetts 02118

Dear Mr. Rohrbaugh:

Thank you very much for your recent letter in which you attached your memo to Secretary of Labor Shultz regarding the exercise of NLRB jurisdiction over charitable hospitals.

As a member of the Labor Subcommittee of the Senate Committee on Labor and Public Welfare, I share your concern about the necessity to bring charitable hospitals within the ambit of the Act. However, it appears to be highly unlikely that there will be any legislation reported by the Labor and Public Welfare Committee during the 91st Congress that would amend the NLRA. You can be assured, however, that if such legislation is considered, I will keep your views in mind.

Thank you very much for writing me about this important matter.

With warm personal regards.

Sincerely,

Walter F. Mondale
Dear Mr. Rohrbaugh:

I appreciate having your recent communication.

You have given some helpful insight into proposed changes in the Taft-Hartley Act which would directly affect charitable hospitals, and the extension of NLRB jurisdiction to include Universities. Since we are searching for changes which will best meet the needs of our health facilities and higher institutions of learning, these recommendations of yours will be given careful consideration.

I will certainly keep this material in mind when this matter comes to the Congress.

Sincerely yours,

Edward W. Brooke

Lewis H. Rohrbaugh, Director
Boston University Medical Center
80 East Concord Street
Boston, Massachusetts 02118
July 7, 1970

Dear Dr. Hamilton:

In the past year the Student American Medical Association has embarked upon a new project which we feel will be of interest to you in your position as Chairman of COTH. Ten thousand questionnaires have been sent to interns in teaching hospitals throughout the country. The purpose of the questionnaires is to provide prospective applicants and hospital educators with first-hand views from those who are actually serving the internship. We feel that with this information at hand, along with the material supplied by the hospitals, students will be better able to choose the internship most likely to fit their needs, and hospital educators will be able to see not only how their own interns view their experiences, but will be able to see how other hospitals are conducting their internships, how the interns view it, and what problems they might have in common. The questionnaire contains a number of objective questions concerning such mundane matters as expenses, cultural and social climate of the community, and call schedules. More importantly, however, the questionnaire asks for subjective evaluations of two main points: 1) How worthwhile do you feel your internship experience has been, and 2) Was the primary purpose of your internship to have you learn or have you serve.

We attempted to establish this program as entirely self-supporting by charging $1.00 for reports on four different hospitals. Unfortunately, the budget didn't balance last year, and the prospect for this year is further losses.
The project will need financial support of $5,000 if it is to continue, and it is to you that we are turning for this support. We would be extremely grateful to you and your organization if you could help us in meeting this expense.

For further information, or if you have any questions, please contact me.

Thank you very much.

Sincerely,

Robert Steele,
SAMA Standing Committee on Medical Education

cc: Richard M. Knapp, Ph.D.
Project Director, COTH
May 26, 1970

John A. D. Cooper, M.D.
President
Association of American
Medical Colleges
Suite 200
One Dupont Circle, N.W.
Washington, D.C. 20036

Dear Dr. Cooper:

I am writing to you at the suggestion of Dean Buchanan of the Cornell University Medical College.

Numerous medical colleges throughout the country, as well as your Association, participate in the TIAA-CREF benefit system. As many of these institutions have entered agreements with hospitals to cooperate in areas of training and research, there has been an increasing number of requests from both the medical schools and their affiliated hospitals to permit these associated hospitals to develop TIAA-CREF benefit plans consistent with those in the medical schools. A dilemma is caused by our restricted eligibility, established by charter and by interpretation of our boards of trustees, which limits our services to educational institutions. As chairman of our standing Eligibility Committee, I would appreciate your help in determining if there are suitable guidelines which can be used to distinguish between those hospitals whose primary purpose is teaching and research and those continuing to have the primary objective of patient care.

I am sure you are aware that TIAA-CREF was developed to meet the staff benefit needs of the colleges and universities, following and continuing the work of the Carnegie Free Pension System. Over the years our trustees extended eligibility to certain categories of institutions having the primary function of serving and supporting the formal system of higher education, including such groups as scientific research institutions, libraries, and those foundations giving a substantial majority of their grants to institutions of higher education. There are no provisions for offering our services to hospitals or other health organizations. However, our Eligibility Committee has recognized the eligibility of a few "hospitals" which have research or teaching as their
primary function, for example the St. Jude Hospital of Nashville. Hospitals
which are owned and controlled by colleges and universities participate in the
TIAA-CREF plans of their parent university. In addition, we have recognized
the eligibility of individual, professional hospital staff members who hold
academic appointments on the staffs of the medical schools with which their
hospitals are affiliated. But in these cases their eligibility is derived from
employment by the medical school, rather than from their positions on the hospi-
tal staff. We are now under considerable pressure from several medical schools
and their affiliated hospitals to recognize the eligibility of these hospitals
on the basis that these institutions are providing essential support for the
clinical and research responsibilities of the medical schools, and that teaching
and research together constitute their primary functions. As nervous laymen, we
do not feel qualified to draw the line between hospitals that are and aren't
principally educational.

You may be aware that TIAA-CREF has come under repeated attack in
recent years from segments of the life insurance industry, and from some legis-
lators, who fear that we represent "unfair competition" and who accuse us of
having extended our services beyond our charter limitations. Of course we do
not feel that we have overreached our eligibility, but it is clear that we must
continue to impose careful restrictions in order to preserve the educational
pension system from taxation and from regulation that might disrupt its uniformity.

I would appreciate any thoughts or suggestions you or your staff might
have on this problem. I'll be in Washington on the afternoon of June 17 and
would be glad to discuss this further if that might be useful.

Sincerely yours,

William T. Slater
Director of Research

WTS:mmc
TO: All Hospitals with Approved Internships and Residencies

ATTENTION: Hospital Administrator and Director of Medical Education

SUBJECT: NIRMP Policy on First-Year Appointments in Graduate Medical

Attached to this letter is the policy statement approved by the Board of Directors of the National Intern and Resident Matching Program at its annual meeting held on May 28, 1970.

This policy position was established in response to the widespread concern and requests for guidance from program directors and medical school deans.

Also attached to this letter are copies of the Amended Hospital Agreement with instructions for the guidance of program directors who may or may not wish to revise their list of programs to be offered through the NIRMP.

It is imperative that hospitals return the Amended Hospital Agreement promptly in order to assure the listing of any revisions in the AMA DIRECTORY OF APPROVED INTERNSHIPS AND RESIDENCIES 1970-71.

The deadline for receipt of the revised hospital agreement is July 15, 1970. The forms should be returned to:

Department of Graduate Medical Education
American Medical Association
535 North Dearborn Street
Chicago, Illinois 60610

June 18, 1970
In 1950, the National Intern Matching Program was devised to bring order out of the chaos which had resulted from the confusion and unwarranted competition associated with intern appointments in the post-World War II period. This program provided a coordinated system for appointment of interns and was intended to serve the best interests of both interns and hospitals.

This program has operated successfully on a voluntary basis for 20 years, and the participation of graduating medical students and hospitals has been maintained at approximately 98%.

Once again, confusion and unwarranted competition is developing, partly as a result of the evolution of the internship year into the continuum of graduate medical education, but mainly because of the policies of certain specialty boards in deleting the requirement for an internship as a prerequisite for the required residency years.

As a result, graduating medical students are being subjected to undesirable pressures to withdraw from the matching program in order to accept appointments directly to residencies in those specialties which do not require a prior internship.

Questionnaire replies from both interns and residents during 1969 indicated that they were strongly in favor of continuing a matching program for the internship year. Furthermore, medical students, as represented by the SAMA, have always supported the matching program.

It is the conviction of the Board of Directors of the NIRMP that elimination of the internship requirement by some specialty boards is a sincere effort to shorten the total span of graduate medical education; therefore, such actions are not interpreted as attempts to obtain unfair advantage by inducing medical students to ignore the protection afforded them by participation in the matching program.

Accordingly, the Board of Directors of the National Intern and Resident Matching Program, recognizing that the distinction between internship and first-year residency is oftentimes only semantic, believes that it is in the continued best interest of both hospitals and graduating medical students for appointments to the first year of graduate medical education to be coordinated through the existing matching program mechanism.
The policy for the National Intern and Resident Matching Program for 1971-72 will be as follows:

1. Each hospital participating in the NIRMP must agree to make all of its first-year programs in graduate medical education available through the NIRMP. A participating hospital may not withhold any of the approved programs to which graduating medical students are eligible to apply.

2. The Hospital Agreement will be amended to provide that each first-year program in graduate medical education, whether identified as an internship, first-year residency, family practice program, or by other designation, will be offered through the NIRMP.

3. NIRMP Code Numbers will be assigned to all first-year programs to which graduating medical students are eligible to apply, and students should include all such programs in their confidential rank order lists.

This includes first-year residencies in the specialties of family practice, neurology, obstetrics-gynecology, ophthalmology, pathology, and psychiatry, at the present time.

4. This policy does not apply to those separate residency matching programs in specialty fields where internships or other graduate medical education programs are required prior to an appointment to a residency.

June 18, 1970

Edwin L. Crosby, M.D., President

John C. Cooper, M.D., Ph.D., Vice President

John C. Nunemaker, M.D., Treasurer
INSTRUCTIONS FOR COMPLETING THE AMENDED HOSPITAL AGREEMENT

Although there are six specialties in which internship is no longer required as an eligibility basis for specialty board certification, there is no requirement that program directors in those specialties must abandon their own internship requirements. In fact, some program directors in those fields have indicated that they will continue to recommend clinical internships to candidates for appointment to first-year residency positions.

For instance, if the director of a residency program in neurology feels graduating medical students should complete an internship prior to being appointed to his program as first-year residents in neurology, then he should leave blank that space on the agreement where he would request a code number. However, if he offers six first-year residency appointments in neurology but wishes to offer only two of them to graduating medical students, then he should indicate opposite "neurology" the number of positions to be filled through NIRMP and request a code number. The directory will still list the total appointments available.

This Amended Hospital Agreement is for the sole purpose of modifying the former Hospital Agreement so that code numbers and positions available through the NIRMP for the six specialties listed can be added to the AMA DIRECTORY OF APPROVED INTERNSHIPS AND RESIDENCIES 1970-71. (Where two or more hospitals participate in an integrated residency and are listed in the Directory by indentation beneath a program heading, the director of the over-all integrated program should include a special letter identifying all of the hospitals involved and requesting a single code number to be listed opposite the program heading.)

THIS REVISED HOSPITAL AGREEMENT IS NOT TO BE USED TO REVISE THE NUMBER OF RESIDENT POSITIONS TO BE LISTED IN THE DIRECTORY IN FIELDS OTHER THAN THOSE IN WHICH FIRST-YEAR POSITIONS ARE AVAILABLE TO GRADUATING MEDICAL STUDENTS. CHANGES CANNOT BE ACCEPTED IN THE NUMBERS OF AVAILABLE INTERNSHIP POSITIONS ALREADY REQUESTED ON THE FORMER HOSPITAL AGREEMENT.

ALL AMENDED HOSPITAL AGREEMENTS SHOULD BE RETURNED EVEN THOUGH THE HOSPITAL DOES NOT WISH TO MAKE CHANGES IN THE FORMER AGREEMENT.

If a hospital wishes to offer first-year residency appointments to graduating medical students but does not wish them to be available through the NIRMP, then it must withdraw from the NIRMP altogether and must offer its internships outside the NIRMP also.

June 18, 1970
AMENDED HOSPITAL AGREEMENT

For Appointments to First-Year Graduate Medical Education Positions
Starting between April 1 and December 31, 1971

On behalf of the hospital listed below, this is confirmation of my understanding of the NIRMP Policy, as announced in the letter and attachments dated June 18, 1970, with specific reference to including in the NIRMP all of this hospital's first-year programs in graduate medical education.

1. This hospital wishes to continue its participation in the NIRMP by listing all of its approved internship programs, but does not wish to have matching code numbers assigned to its approved first-year residencies, since graduating medical students are not eligible for such appointments in this hospital.

2. This hospital wishes to participate in the NIRMP by listing all of its approved internship programs plus its approved first-year residencies to which graduating medical students are eligible for appointment, as specified below:

<table>
<thead>
<tr>
<th>Specialty</th>
<th>No. of Positions to be offered through NIRMP</th>
<th>(Office Use Only) NIRMP CODE</th>
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</thead>
<tbody>
<tr>
<td>FAMILY PRACTICE</td>
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<tr>
<td>NEUROLOGY</td>
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<tr>
<td>OBSTETRICS - GYNECOLOGY</td>
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<td>OPHTHALMOLOGY</td>
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<td>PATHOLOGY</td>
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<tr>
<td>PSYCHIATRY</td>
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</tbody>
</table>

3. This hospital does not offer approved internships but is approved, independently, for residency programs in those specialties listed below to which graduating medical students are eligible for appointment to first-year positions. Code numbers are requested in those specialties listed below:

<table>
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<td>PSYCHIATRY</td>
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</table>

4. This hospital does not wish to continue its participation in NIRMP.

NAME OF HOSPITAL

NAME

POSITION

STREET ADDRESS

SIGNATURE

CITY  STATE  ZIP

DATE

June 18, 1970