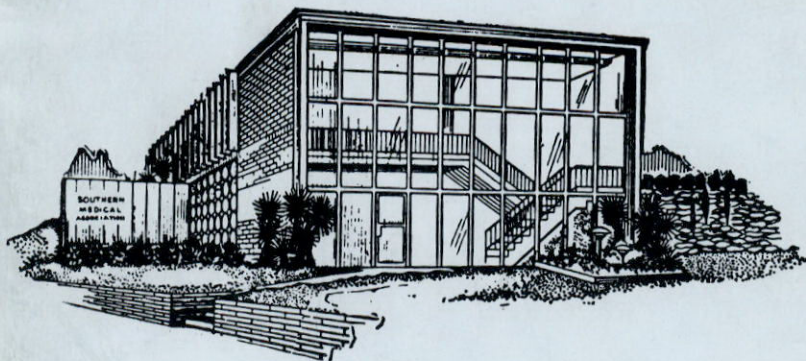


Southern Medical Association YEARBOOK

1976-1977

- ***Officers***
- ***Minutes, 70th Annual Meeting***
- ***Constitution and Bylaws***
- ***Facts on SMA***
- ***Guide for Section Officers***



2601 Highland Avenue
Birmingham, Alabama 35205

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OFFICERS

SOUTHERN MEDICAL ASSOCIATION

1976 - 1977

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President

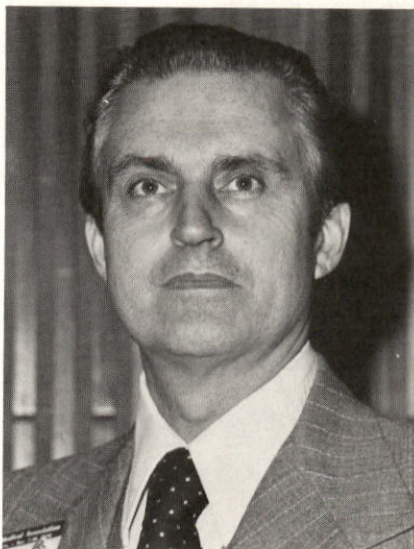
G. THOMAS JANSEN

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Telephone 501-663-8450

OFFICE ADDRESS

Department of Dermatology
University of Arkansas
Medical Center
4301 West Markham
Little Rock, Ark. 72201
Telephone 501-664-4161



BIRTHPLACE: Manitowoc, Wis.

BIRTH DATE: July 16, 1926

EDUCATION: B.S. degree, University of Wisconsin, 1948
M.D. degree, University of Wisconsin Medical School, 1950
Dermatology Training, University of Wisconsin, 1953-54;
University of Michigan, 1954-56

SPECIALTY: Dermatology

WIFE: Fran

JOINED SMA: June 1960

OFFICES HELD IN SMA:

Secretary, Section on Dermatology, 1966-1969
Associate Councilor from Arkansas, 1967-1969
Chairman, Section on Dermatology, 1969-1970
Councilor from Arkansas, 1969-1974
Member of the Executive Committee of the Council, 1970-1977
Vice-Chairman of the Council, 1972-1973
Chairman of the Council, 1973-1974
First Vice-President, 1974-1975
President-Elect, 1975-1976
President, 1976-1977

COMMITTEE APPOINTMENTS, 1976-1977

Committee on Finance
Committee on Insurance



President-Elect

ANDREW F. GIESEN, JR.

HOME ADDRESS

558 Mooney Road
Fort Walton Beach, Fla. 32548
Telephone 904-242-5409

OFFICE ADDRESS

P. O. Box 1488
Fort Walton Beach, Fla. 32548
Telephone 904-242-1151

BIRTHPLACE: Macon, Ga.

BIRTH DATE: October 11, 1925

EDUCATION: B.S. degree, Roanoke College, 1949

M.D. degree, Tulane University School of Medicine, 1952

SPECIALTY: Radiology

WIFE: Virginia

JOINED SMA: April 1959; became a life member in December 1964

OFFICES HELD IN SMA:

Secretary, Section on Radiology, 1964-1967

Vice-Chairman, Section on Radiology, 1967-1968

Chairman-Elect, Section on Radiology, 1968-1969

Chairman, Section on Radiology, 1969-1970

Councilor from Florida, 1970-1975

Member of the Executive Committee of the Council, 1970-1977

Vice-Chairman of the Council, 1973-1974

Chairman of the Council, 1974-1975

First Vice-President, 1975-1976

President-Elect, 1976-1977

COMMITTEE APPOINTMENTS, 1976-1977

Committee on Finance

Committee on Insurance

Committee on Personnel

First Vice-President

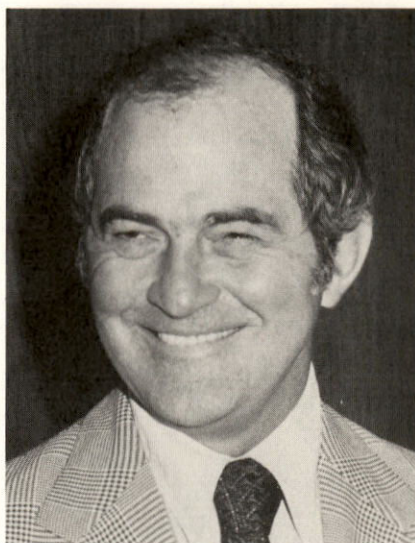
THOMAS B. DAMERON, JR.

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414 Scotland Street
Raleigh, N.C. 27609
Telephone 919-787-2846

OFFICE ADDRESS

P. O. Box 10707
Raleigh, N.C. 27605
Telephone 919-828-0887



BIRTHPLACE: Nashville, N.C.

BIRTH DATE: June 1, 1924

EDUCATION: University of North Carolina, 1941-43
M.D. degree, Duke University School of Medicine, 1947

SPECIALTY: Orthopedic Surgery

WIFE: Nancy

JOINED SMA: February 1956

OFFICES HELD IN SMA:

Associate Councilor from North Carolina, 1966-1971
Councilor from North Carolina, 1971-1976
Member of the Executive Committee of the Council, 1971-1977
Chairman of the Council, 1975-1976
First Vice-President, 1976-1977

COMMITTEE APPOINTMENTS, 1976-1977

Committee on Finance
Committee on Personnel
Committee on Publications
Committee on Special Awards, Chairman



Second Vice-President

RAFAEL C. SANCHEZ

HOME ADDRESS

411 Brenda Drive
Denham Springs, La. 70726
Telephone 504-665-8592

OFFICE ADDRESS

537 Kentucky Avenue
Bogalusa, La. 70427
Telephone 504-732-7107

BIRTHPLACE: Tampa, Fla.

BIRTH DATE: July 18, 1919

EDUCATION: B.S. degree, Loyola University, 1940

M.D. degree, Louisiana State University School of Medicine, 1950

SPECIALTY: Family Practice

WIFE: Sylvia

JOINED SMA: April 1958

OFFICES HELD IN SMA:

General Chairman on Arrangements, New Orleans Meeting, 1976
Second Vice-President, 1976-1977

COMMITTEE APPOINTMENTS, 1976-1977

Committee on Meeting Places
Committee on Scientific Work

Executive Vice-President

MR. ROBERT F. BUTTS

HOME ADDRESS

2216 Pine Crest Drive
Birmingham, Ala. 35216
Telephone 205-822-4360

OFFICE ADDRESS

2601 Highland Avenue
Birmingham, Ala. 35205
Telephone 205-323-4400



BIRTHPLACE: Eufaula, Ala.

BIRTH DATE: May 16, 1923

EDUCATION: B.S. degree, University of Alabama, 1947
Graduate work, Northwestern University, 1950

JOINED SMA: January 1948

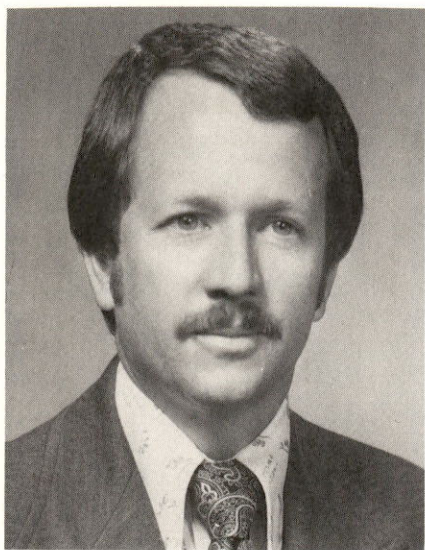
WIFE: Jeannine

OFFICES HELD IN SMA:

Assistant to Secretary-Manager, 1948-1950
Assistant Secretary-Manager, 1950-1954
Business Manager, 1954-1965
Associate Executive Secretary and Treasurer, 1959-1960
Executive Secretary and Treasurer, 1960-1961
Managing Editor, *Southern Medical Journal*, 1960-
Executive Director, 1961-1976
Executive Vice-President, 1976-

COMMITTEE APPOINTMENTS, 1976-1977

Committee on The Employees' Pension Trust
Committee on Journal Advertising
Committee on Meeting Places, ex officio member
Committee on Publications



Executive Director

MR. ROY B. EVANS, JR.

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OFFICE ADDRESS

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Birmingham, Ala. 35205
Telephone 205-323-4400

BIRTHPLACE: Jacksonville, Fla.

BIRTH DATE: June 10, 1936

EDUCATION: University of Alabama, 1954-1955
Birmingham Southern College, 1955-1957
Graduate work, Michigan State University, 1960

JOINED SMA: February 1960

WIFE: Janet

OFFICES HELD IN SMA:

Administrative Assistant, 1960-1961
Assistant Business Manager, 1961-1965
Business Manager, 1965-
Assistant Executive Director, 1971-1976
Executive Director, 1976-

COMMITTEE APPOINTMENTS, 1976-1977

Committee on Journal Advertising, ex officio member
Committee on Meeting Places, ex officio member
Committee on Scientific Work, ex officio member
Dial Access Committee

**Editor
Southern
Medical Journal**

HARRIS D. RILEY, JR.

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Children's Memorial Hospital
University of Oklahoma Health
Sciences Center
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Telephone 405-271-6453



BIRTHPLACE: Clarksdale, Miss.

BIRTH DATE: November 12, 1925

EDUCATION: B.A. degree, Vanderbilt University, 1945
M.D. degree, Vanderbilt University School of Medicine, 1948

SPECIALTY: Pediatrics

WIFE: Peg

JOINED SMA: November 1962

OFFICES HELD IN SMA:

Vice-Chairman, Section on Pediatrics, 1959-1960
Secretary, Section on Pediatrics, 1960-1961
Chairman, Section on Pediatrics, 1961-1962
Editorial Board, *Southern Medical Journal*, 1962-1966
Assistant Editor, *Southern Medical Journal*, 1966-1971
Associate Editor, *Southern Medical Journal*, 1971-1972
Editor, *Southern Medical Journal*, 1973-

COMMITTEE APPOINTMENTS, 1976-1977

Committee on Journal Advertising
Committee on Medical Students
Committee on Publications
Committee on Scientific Work, ex officio member



Editor Southern Medicine

R. H. KAMPMEIER

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Vanderbilt University
School of Medicine, Station 17
Nashville, Tenn. 37232
Telephone 615-322-2195

BIRTHPLACE: Clarksville, Iowa

BIRTH DATE: January 15, 1898

EDUCATION: A.B. degree, State University of Iowa, 1920

M.D. degree, State University of Iowa College of Medicine, 1923

SPECIALTY: Internal Medicine

WIFE: Blanche

JOINED SMA: July 1935; became a life member in June 1961

OFFICES HELD IN SMA:

Editor, *Southern Medical Journal*, 1954-1972

Editor, *Southern Medicine*, 1961-

First Vice-President, 1962-1963

President-Elect, 1963-1964

Member of the Executive Committee of the Council, 1963-1965

President, 1964-1965

Member, Board of Trustees, 1965-1971

COMMITTEE APPOINTMENTS, 1976-1977

Committee on History, Chairman

Committee on Publications

Dial Access Committee, Chairman

Alabama

D. JOSEPH JUDGE
Councilor

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104 Fair Way
Anniston, Ala. 36201
Telephone 205-236-4743

OFFICE ADDRESS

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Anniston, Ala. 36201
Telephone 205-237-1618



BIRTHPLACE: New York, N. Y.

BIRTH DATE: January 29, 1922

EDUCATION: B.S. degree, Notre Dame University, 1942
M.D. degree, Georgetown University School of Medicine, 1945

SPECIALTY: Pediatrics

WIFE: Rita

JOINED SMA: November 1956

OFFICES HELD IN SMA:

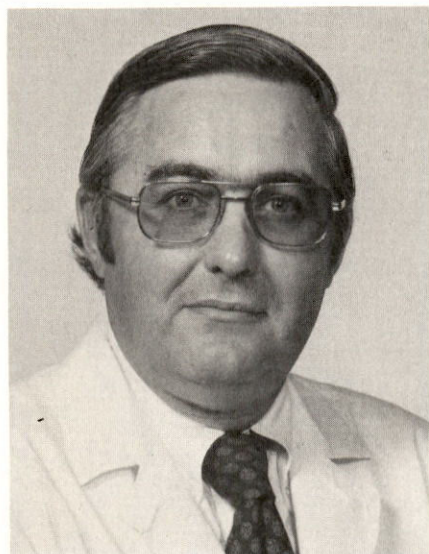
Secretary, Section on Pediatrics, 1965-1972
Chairman, Section on Pediatrics, 1972-1973
Associate Councilor from Alabama, 1971-1972
Councilor from Alabama, 1972-1977

COMMITTEE APPOINTMENTS, 1976-1977

Committee on Constitution and Bylaws
Committee on The Employees' Pension Trust
Committee on Personnel, Chairman
Committee on Scientific Work, Program Coordinator
Committee on Selections, Chairman

Associate Councilors

GEORGE E. CASSADY, Department of Pediatrics, University of Alabama Medical Center, University Station, Birmingham (35294)
MARGARET S. KLAPPER, University of Alabama Medical Center, University Station, Birmingham (35294)
ROBERT G. ROSSER, 301 Medical Arts Building, Birmingham (35205)
GAYLE STEPHENS, Dean, University of Alabama School of Primary Care, P.O. Box 1247, Huntsville (35807)
CLAUDE M. WARREN, JR., 1720 Springhill Avenue, Mobile (36604)



Arkansas

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Councilor

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OFFICE ADDRESS

Department of Obstetrics—
Gynecology
University of Arkansas
Medical Center
Little Rock, Ark. 72201
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ext. 831

BIRTHPLACE: Everett, Wash.

BIRTH DATE: September 17, 1930

EDUCATION: University of Washington, 1951

M.D. degree, University of Washington School of Medicine, 1955

SPECIALTY: Obstetrics-Gynecology

WIFE: Janie

JOINED SMA: August 1963

OFFICES HELD IN SMA:

Secretary, Section on Gynecology, 1967-1969
Chairman-Elect, Section on Gynecology, 1969-1970
Chairman, Section on Gynecology, 1970-1971
Associate Councilor from Arkansas, 1973-1974
Councilor from Arkansas, 1974-1979

COMMITTEE APPOINTMENTS, 1976-1977

Committee on Grants and Loans
Committee on Insurance
Committee on Medical Students

Associate Councilors

J. CLYDE HART, JR., 1420 West 43rd, Pine Bluff (71601)
WILLIAM P. PHILLIPS, 408 South 16th Street, Fort Smith (72901)
BASCOM P. RANEY, 403 East Matthews, Jonesboro (74201)
BEN N. SALTZMAN, Professor, Department of Family & Community Medicine, Box #127,
University of Arkansas Medical Center, Little Rock (72201)
HERBERT B. WREN, III, Box 1409, Texarkana (75501)

District of Columbia

W. REAMS PERKINS

Councilor

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McLean, Va. 22101
Telephone 703-356-1730

OFFICE ADDRESS

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Washington, D.C. 20037
Telephone 202-337-2727



BIRTHPLACE: Richmond, Va.

BIRTH DATE: October 27, 1934

EDUCATION: B.S. degree, University of Richmond, 1957
M.D. degree, Medical College of Virginia, 1961

SPECIALTY: Obstetrics-Gynecology

WIFE: Andrea

JOINED SMA: February 1974

OFFICES HELD IN SMA:

Associate Councilor from the District of Columbia, 1973-1974
Councilor from the District of Columbia, 1974-1979

COMMITTEE APPOINTMENTS, 1976-1977

Committee on Constitution and Bylaws

Associate Councilors

CHARLES E. BICKHAM, JR., 5920 Searl Terrace (20016)
WILLIAM P. HERBST, III, 1835 Eye Street, N.W., Suite #798 (20006)
LEONARD T. PETERSON, 916 Nineteenth Street, N.W. (20037)
MAXINE SCHURTER, 2700 Q Street, N.W. (20007)
JAMES G. SITES, 3301 New Mexico Avenue, N.W. (20016)



Florida

WALTER C. JONES, III
Councilor

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Miami, Fla. 33133
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OFFICE ADDRESS

2801 Ponce de Leon Boulevard
Suite 222
Coral Gables, Fla. 33134
Telephone 305-448-1776

BIRTHPLACE: Miami, Fla.

BIRTH DATE: September 4, 1927

EDUCATION: A.B. degree, University of Virginia, 1949
M.D. degree, University of Miami School of Medicine, 1958

SPECIALTY: Orthopedic Surgery

WIFE: Suzanne

JOINED SMA: August 1964

OFFICES HELD IN SMA:

Associate Councilor from Florida, 1970-1975
General Chairman on Arrangements, Miami Beach Meeting, 1971
Second Vice-President, 1971-1972
Councilor from Florida, 1975-1980

COMMITTEE APPOINTMENTS, 1976-1977

Committee on Insurance
Committee on Medical Students

Associate Councilors

LAWRENCE S. COHEN, 4600 North Habana Avenue, Suite 35, Tampa (33614)
J. LEE DOCKERY, Associate Professor of Obstetrics-Gynecology, University of Florida College of Medicine, Gainesville (32610)
RONALD J. MANN, Department of Orthopedics & Rehabilitation, University of Miami School of Medicine, P.O. Box 520875, Biscayne Annex, Miami (33152)
SAM E. STEPHENSON, JR., University Hospital of Jacksonville, 655 Eighth Street, West, P.O. Box 2751, Jacksonville (32209)
THOMAS J. ZAYDON, 3661 South Miami Avenue, Suite #409, Miami (33133)

Georgia

EDWIN C. EVANS

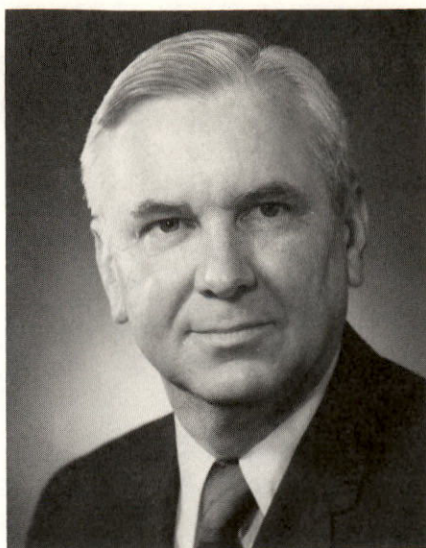
Councilor

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500 Westover Drive, N.W.
Atlanta, Ga. 30305
Telephone 404-355-2203

OFFICE ADDRESS

414 Baptist Professional Building
340 Boulevard, N.E.
Atlanta, Ga. 30312
Telephone 404-577-1231



BIRTHPLACE: Milledgeville, Ga.

BIRTH DATE: June 30, 1917

EDUCATION: B.S. degree, University of Georgia, 1936

M.D. degree, Johns Hopkins University School of Medicine, 1940

SPECIALTY: Internal Medicine

WIFE: Margie

JOINED SMA: December 1969

OFFICES HELD IN SMA:

Secretary, Section on Medicine, 1969-1970

Vice-Chairman, Section on Medicine, 1970-1971

Chairman-Elect, Section on Medicine, 1971-1972

Chairman, Section on Medicine, 1972-1973

Associate Councilor from Georgia, 1973-1974

Councilor from Georgia, 1974-1979

Member of the Executive Committee of the Council, 1974-1977

COMMITTEE APPOINTMENTS, 1976-1977

Committee on Finance

Committee on Journal Advertising, Chairman

Committee on Meeting Places

Committee on Publications, Chairman

Committee on Selections

Associate Councilors

JOSEPH M. ALMAND, JR., 606 South Greenwood Street, La Grange (30240)

WALDO E. FLOYD, JR., 870 High Street, Macon (31201)

THOMAS A. HUFF, Medical College of Georgia, Augusta (30902)

WILLIAM E. HUGER, JR., Suite 675, Piedmont Professional Building, 35 Collier Road, N.W.,
Atlanta (30309)

WILLIAM D. LOGAN, 272 Boulevard, N.E., Atlanta (30312)



Kentucky

HIRAM C. POLK, JR.
Councilor

HOME ADDRESS

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Louisville, Ky. 40222
Telephone 502-426-3141

OFFICE ADDRESS

Department of Surgery
University of Louisville
School of Medicine
Health Sciences Center
Louisville, Ky. 40201
Telephone 502-583-5220

BIRTHPLACE: Jackson, Miss.

BIRTH DATE: March 23, 1936

EDUCATION: B.S. degree, Millsaps College, 1956
M.D. degree, Harvard Medical School, 1960

SPECIALTY: General Surgery

WIFE: Wanda

JOINED SMA: November 1965

OFFICES HELD IN SMA:

Secretary, Section on Surgery, 1968-1972
Associate Councilor from Kentucky, 1971-1972
Chairman, Section on Surgery, 1972-1973
Councilor from Kentucky, 1972-1977

COMMITTEE APPOINTMENTS, 1976-1977

Committee on Grants and Loans
Committee on Medical Students

Associate Councilors

CECIL L. GRUMBLES, 39 Hill Road, Louisville (40204)
PAUL F. MADDOX, Box 127, Campton (41301)
WILLIAM R. MEEKER, JR., 417 Fayette Park, Lexington (40506)
ROBERT SCHIAVONE, 2908 Lighthouse Road, Louisville (40222)
WILLIAM P. VONDERHAAR, 1908 Tyler Lane, Louisville (40205)

Louisiana

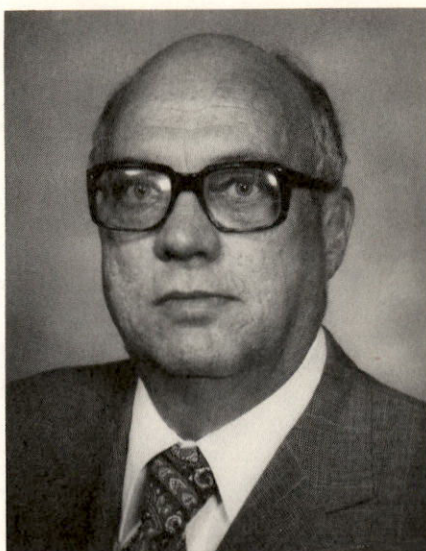
J. RALPH MEIER
Councilor

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1220 Jefferson Avenue
New Orleans, La. 70115
Telephone 504-895-0891

OFFICE ADDRESS

2021 Perdido Street
New Orleans, La. 70112
Telephone 504-588-3103



BIRTHPLACE: Shreveport, La.

BIRTH DATE: July 28, 1930

EDUCATION: B.S. degree, Centenary College, 1951

M.D. degree, Louisiana State University School of Medicine, 1955

SPECIALTY: Pathology

WIFE: Connie

JOINED SMA: 1963, Life Member

OFFICES HELD IN SMA:

Secretary, Section on Pathology, 1963-1965
Vice-Chairman, Section on Pathology, 1965-1966
Chairman, Section on Pathology, 1966-1967
General Chairman of Arrangements, New Orleans Meeting, 1968
Second Vice-President, 1968-1969
Associate Councilor from Louisiana, 1970-1973
Councilor from Louisiana, 1973-1978
Member of the Executive Committee of the Council, 1973-1977
Vice-Chairman of the Council, 1976-1977

COMMITTEE APPOINTMENTS, 1976-1977

Committee on Finance
Committee on Insurance, ex officio member
Committee on Journal Advertising
Committee on Public Relations, Chairman
Committee on Publications
Committee on Scientific Work, ex officio member
Committee on Selections

Associate Councilors

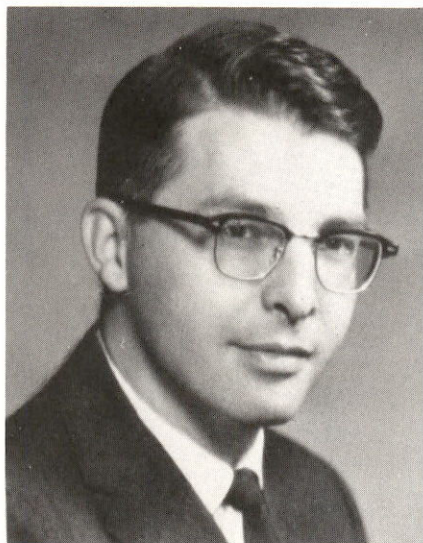
MARIO A. CALONJE, East Jefferson General Hospital, 4200 Houma Boulevard, Metairie (70002)

CARLTON L. CARPENTER, JR., 1415 Main Street, Baton Rouge (70802)

GEORGE S. ELLIS, 812 Maison Blanche Building, New Orleans (70112)

GEORGE L. LEONARD, Department of Pathology, Ochsner Clinic, 1514 Jefferson Highway, New Orleans (70121)

ANDREW RANIER, St. Patrick Hospital, 524 South Ryan Street, Lake Charles (70601)



Maryland

RICHARD D. RICHARDS
Councilor

HOME ADDRESS

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Telephone 301-821-7310

OFFICE ADDRESS

Department of Ophthalmology
University of Maryland Hospital
Baltimore, Md. 21201
Telephone 301-528-5929

BIRTHPLACE: Grand Haven, Mich.

BIRTH DATE: March 10, 1927

EDUCATION: A.B. degree, University of Michigan, 1948

M.D. degree, University of Michigan, 1951

M.Sc. degree, State University of Iowa (Ophthalmology), 1958

SPECIALTY: Ophthalmology

WIFE: Alice

JOINED SMA: August 1963

OFFICES HELD IN SMA:

Vice-Chairman, Section on Ophthalmology, 1972-1973

Chairman-Elect, Section on Ophthalmology, 1973-1974

Chairman, Section on Ophthalmology, 1974-1975

Councilor from Maryland, 1976-1981

COMMITTEE APPOINTMENTS, 1976-1977

Committee on Journal Advertising

Committee on Scientific Work

Associate Councilors

WALTER N. HIMMLER, The Memorial Medical Building, Cumberland (21502)

FREDERICK M. JOHNSON, Box 460, La Plata (20646)

JOHN F. STRAHAN, 7401 Osler Drive, Suite 107, Baltimore (21204)

KYLE Y. SWISHER, JR., 3350 Wilkens Avenue, Baltimore (21229)

NEVINS W. TODD, JR., Medical Center, Suite 7, Salisbury (21801)

Mississippi

EVERETT CRAWFORD

Councilor

HOME ADDRESS

P. O. Box 271
Tylertown, Miss. 39667
Telephone 601-876-3605

OFFICE ADDRESS

Doctors' Clinic
P. O. Box 271
Tylertown, Miss. 39667
Telephone 601-876-3466

Photo Not
Available

BIRTHPLACE: Tylertown, Miss.

BIRTH DATE: July 10, 1912

EDUCATION: B.S. degree, Mississippi College, 1932

M.D. degree, University of Tennessee College of Medicine, 1936

SPECIALTY: General Surgery

WIFE: Frances

JOINED SMA: 1939; became a Life Member October 1968

OFFICES HELD IN SMA:

Associate Councilor, 1975-1976

Councilor from Mississippi, 1976-1978

COMMITTEE APPOINTMENTS, 1976-1977

Committee on History

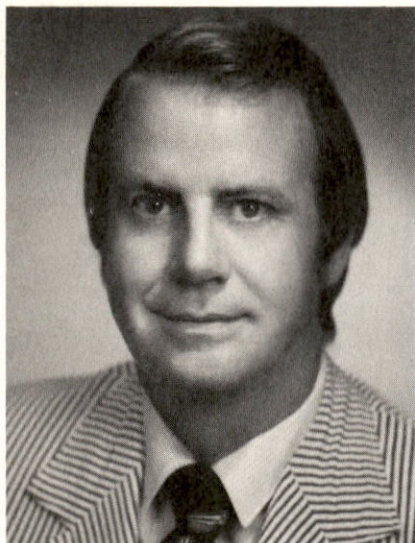
Associate Councilors

THOMAS A. BAINES, 820 North State Street, Jackson (39201)

JESSE T. DAVIS, 815 Childs Street, Corinth (38834)

J. GORDON DEES, 775 North State Street, Jackson (39201)

T. SCOTT McCAY, Department of Radiology, St. Dominic Hospital, Jackson (39216)



Missouri

ROBERT K. DORTON
Councilor

HOME ADDRESS

12065 Heatherdane
St. Louis, Mo. 63131
Telephone 314-567-1245

OFFICE ADDRESS

911 South Brentwood Boulevard
St. Louis, Mo. 63105
Telephone 314-862-5252

BIRTHPLACE: Weyland, Ky.

BIRTH DATE: November 11, 1933

EDUCATION: A.B. degree, Berea College, Berea, Kentucky, 1955
M.D. degree, Vanderbilt University School of Medicine, 1959

SPECIALTY: Internal Medicine

WIFE: Ingrid

JOINED SMA: April 1968

OFFICES HELD IN SMA:

Associate Councilor from Missouri, 1970-1975
Councilor from Missouri, 1976-1981
Member of the Executive Committee of the Council, 1976-1977

COMMITTEE APPOINTMENTS, 1976-1977

Committee on Finance
Committee on Medical Students
Committee on Meeting Places

Associate Councilors

CHARLES F. BAHN, 14 Doctors' Park, 801 South Mt. Auburn Road, Cape Girardeau (63701)
HJALMAR E. CARLSON, 2929 Baltimore Avenue, Suite 525, Kansas City (64108)
GEORGE J. FUCHS, JR., 1504 East Broadway, Columbia (65201)
ROGER L. MELL, 35 North Central, St. Louis (63105)
HUGH STEPHENSON, Professor of Surgery, University of Missouri School of Medicine,
Columbia (65201)

North Carolina

GEORGE W. LILES

Councilor

HOME ADDRESS

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Concord, N.C. 28025
Telephone 704-782-2816

OFFICE ADDRESS

Cabarrus Surgical Clinic, P.A.
48 Ardsley Avenue, N.E.
Concord, N.C. 28025
Telephone 704-786-1108



BIRTHPLACE: McColl, S.C.

BIRTH DATE: July 20, 1920

EDUCATION: B.S.M. degree, Duke University, 1942
M.D. degree, Duke Medical School, 1944

SPECIALTY: General Surgery

WIFE: Jane

JOINED SMA: November 1970

OFFICES HELD IN SMA:

Associate Councilor from North Carolina, 1971-1975
Councilor from North Carolina, 1976-1981

COMMITTEE APPOINTMENTS, 1976-1977

Committee on Constitution and Bylaws
Committee on Public Relations
Committee on Selections

Associate Councilors

JOHN ELLIOTT DIXON, 215 East Second Street, Ayden (28513)

JAMES E. GIBSON, Sanford Surgical Clinic, Sanford (27330)

EUGENE B. LINTON, 2927 Lynhurst Avenue, Winston-Salem (27103)

DONALD E. MCCOLLUM, Department of Orthopedic Surgery, Duke University Medical Center, Durham (27710)

JOHN T. SESSIONS, JR., Department of Medicine, University of North Carolina School of Medicine, Chapel Hill (27514)



Oklahoma

JAMES E. WHITE

Councilor

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Telephone 918-742-4061

OFFICE ADDRESS

6565 South Yale Avenue
Suite 1212
Tulsa, Okla. 74136
Telephone 918-492-5454

BIRTHPLACE: Okmulgee, Okla.

BIRTH DATE: March 28, 1929

EDUCATION: B.S. degree, University of Oklahoma, 1950

M.D. degree, University of Oklahoma School of Medicine, 1954

SPECIALTY: Orthopedic Surgery

WIFE: Jeanne

JOINED SMA: 1963, Life Member

OFFICES HELD IN SMA:

Associate Councilor from Oklahoma, 1968-1973

Councilor from Oklahoma, 1973-1978

COMMITTEE APPOINTMENTS, 1976-1977

Committee on Constitution and Bylaws, Chairman

Associate Councilors

OLLIE W. DEHART, 122 West Delaware, Vinita (74301)

BENJAMIN H. GASTON, 1601 West Okmulgee, Muskogee (74401)

JOE B. JARMAN, JR., 330 South Fifth Street, Enid (73701)

RALPH E. PAYNE, 3301 N.W. 50th, Oklahoma City (73112)

South Carolina

WILLIAM W. VALLOTTON

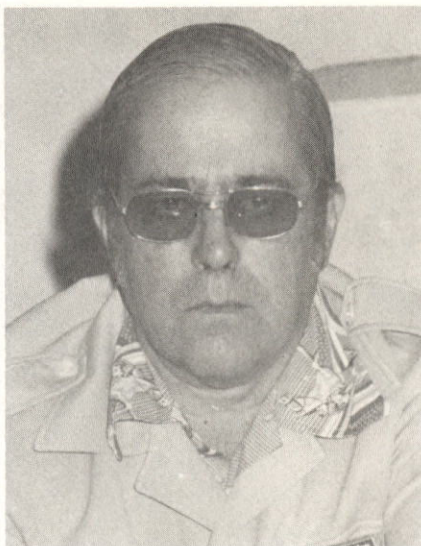
Councilor

HOME ADDRESS

15 Broughton Road
Charleston, S. C. 29407
Telephone 803-766-0483

OFFICE ADDRESS

Storm Eye Institute
Medical University of
South Carolina
80 Barre Street
Charleston, S.C. 29401
Telephone 803-792-2492



BIRTHPLACE: Valdosta, Ga.

BIRTH DATE: November 26, 1927

EDUCATION: A.B. degree, Duke University, 1947
M.D. degree, Medical College of Georgia, 1952

SPECIALTY: Ophthalmology

WIFE: Hulda

• JOINED SMA: April 1966

OFFICES HELD IN SMA:

Associate Councilor from South Carolina, 1972-1975
Councilor from South Carolina, 1975-1980

COMMITTEE APPOINTMENTS, 1976-1977

Committee on Constitution and Bylaws
Committee on Selections

Associate Councilors

DAVID W. BAXLEY, JR., 3428 Meeting Street Road, Charleston Heights (29405)
HENRY G. KELLEY, JR., 711 North Church Street, Spartanburg (29303)
M. TUCKER LAFITTE, JR., 1333 Taylor Street, Suite 4-C, Columbia (29201)
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NEIL S. WILLIAMS, 126 South Ribaut Road, Beaufort (29902)



Tennessee

G. BAKER HUBBARD, SR.

Councilor

HOME ADDRESS

1681 Humboldt Highway
Jackson, Tenn. 38301
Telephone 901-422-3328

OFFICE ADDRESS

616 West Forest Avenue
Jackson, Tenn. 38301
Telephone 901-424-2345

BIRTHPLACE: Princeton, Ky.

BIRTH DATE: September 3, 1912

EDUCATION: B.S. degree, Western Kentucky State College, 1933

M.D. degree, Vanderbilt University School of Medicine, 1937

SPECIALTY: General Surgery

WIFE: Elizabeth

JOINED SMA: February 1968

OFFICES HELD IN SMA:

Associate Councilor from Tennessee, 1967-1972

Councilor from Tennessee, 1972-1977

Member of the Executive Committee of the Council, 1972-1977

Vice-Chairman of the Council, 1975-1976

Chairman of the Council, 1976-1977

COMMITTEE APPOINTMENTS, 1976-1977

Committee on Finance, Chairman

Committee on Public Relations

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JOHN B. LYNCH, Professor of Plastic Surgery, Vanderbilt University School of Medicine,
Nashville (37232)

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L. S. THOMPSON, JR.

Councilor

HOME ADDRESS

3620 Princeton
Dallas, Texas 75205
Telephone 214-521-7636

OFFICE ADDRESS

P. O. Box 2220
Southland Center
Dallas, Texas 75221
Telephone 214-653-3121



BIRTHPLACE: Dallas, Texas

BIRTH DATE: July 4, 1924

EDUCATION: University of Texas, 1944
M.D. degree, Baylor College of Medicine, 1948

SPECIALTY: Surgery

WIFE: Liz

JOINED SMA: January 1955

OFFICES HELD IN SMA:

Second Vice-President, 1970-1971
Associate Councilor from Texas, 1971-1975
Councilor from Texas, 1975-1980

COMMITTEE APPOINTMENTS, 1976-1977

Committee on Insurance
Committee on Public Relations, Vice-Chairman

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M. PINSON NEAL, JR.
Councilor

HOME ADDRESS

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Richmond, Va. 23225
Telephone 804-272-0754

OFFICE ADDRESS

Medical College of Virginia
Virginia Commonwealth
University
Box 295, MCV Station
Richmond, Va. 23298
Telephone 804-770-5150

BIRTHPLACE: Columbia, Mo.

BIRTH DATE: April 22, 1927

EDUCATION: A.B. degree, University of Missouri, 1949

B. S. degree, University of Missouri, 1951

M.D. degree, University of Tennessee College of Medicine, 1953

SPECIALTY: Radiology

WIFE: Gail

JOINED SMA: November 1963

OFFICES HELD IN SMA:

Chairman-Elect, Section on Radiology, 1967-1968

Chairman, Section on Radiology, 1968-1969

Associate Councilor from Virginia, 1972-1973

Councilor from Virginia, 1973-1980

Member of the Executive Committee of the Council, 1975-1977

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M. BRUCE MARTIN

Councilor

HOME ADDRESS

236 Ninth Avenue
Huntington, W. Va. 25701
Telephone 304-522-2987

OFFICE ADDRESS

508 Tenth Street
Huntington, W. Va. 25701
Telephone 304-525-7471



BIRTHPLACE: Lanexa, Va.

BIRTH DATE: January 15, 1924

EDUCATION: M.S. degree, University of Richmond, 1944
M.D. degree, Medical College of Virginia, 1947

SPECIALTY: Pediatrics

WIFE: Eileen

JOINED SMA: August 1960

OFFICES HELD IN SMA:

Chairman, Section on Pediatrics, 1970-1972
Councilor from West Virginia, 1972-1977

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Committee on History
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- W. Reams Perkins (1979), 825 New Hampshire Avenue, N.W., Washington, D.C. 20037 (Specialty: Obstetrics-Gynecology; Wife: Andrea)
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- Richard D. Richards (1981), Department of Ophthalmology, University of Maryland Hospital, Baltimore, Md. 21201 (Specialty: Ophthalmology; Wife: Alice)
- Everett Crawford (1978), P. O. Box 271, Tylertown, Miss. 39667 (Specialty: General Surgery; Wife: Frances)
- Robert K. Dorton (1981), 911 South Brentwood Boulevard., St. Louis, Mo. 63105 (Specialty: Internal Medicine; Wife: Ingrid)
- George W. Liles (1981), 48 Ardsley Avenue, N.E., Concord, N.C. 28025 (Specialty: General Surgery; Wife: Jane)
- James E. White (1978), 6565 South Yale Avenue, Suite 1212, Tulsa, Okla. 74136 (Specialty: Orthopedic Surgery; Wife: Jeanne)
- William W. Vallotton (1980), Storm Eye Institute, Medical University of South Carolina, 80 Barre Street, Charleston, S.C. 29401 (Specialty: Ophthalmology; Wife: Hulda)
- L. S. Thompson, Jr. (1980), P.O. Box 2220, Southland Center, Dallas, Texas 75221 (Specialty: Surgery; Wife: Liz)
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- M. Bruce Martin (1977), 508 Tenth Street, Huntington, W.Va. 25701 (Specialty: Pediatrics; Wife: Eileen)

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West Virginia—

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(Year term expires follows name)

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(Year term expires follows name)

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* of the Southern Medical Association. See pages 35-38.)*

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Appointed by the President*

Coleman Jacobson

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First Vice-President; members unpublicized

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(Year served follows name)

Walter C. Jones (1952-53), 427 Biltmore Way, Apartment 102, Coral Gables, Fla. 33134
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Daniel L. Sexton (1962-63), 911 South Brentwood Boulevard, St. Louis, Mo. 63105
Robert D. Moreton (1963-64), 6723 Bertner Street, Houston, Texas 77025
R. H. Kampmeier (1964-65), Vanderbilt University School of Medicine, Station 17,
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J. Hoyle Carlock (1971-72), 301 Ardmoreite Building, P. O. Box 1604, Ardmore, Okla. 73401
Joe T. Nelson (1972-73), 601 Baylor, Weatherford, Texas 76086
George J. Carroll (1973-74), Louise Obici Memorial Hospital, Suffolk, Va. 23434
Andrew M. Moore (1974-75), 108 East Maxwell Street, Lexington, Ky. 40508
G. Gordon McHardy (1975-76), 3638 St. Charles Avenue, New Orleans, La. 70115

Living Past Councilors

(Years served follow name)

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J. Garber Galbraith (1957-62), 1919 Seventh Avenue, South, Birmingham (35294)
John A. Martin (1962-67), 1800 Hillwood Drive, Montgomery (36106)

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1115 Somerville Road, Decatur (35601)

Arkansas

Thomas G. Johnston (1962-64—filled unexpired term of Smith who left Ark.),
P. O. Box 7067, Pulaski Heights Station, Little Rock (72205)
George F. Wynne (1964-69), 113 West Cypress, Warren (71671)
G. Thomas Jansen (1969-74), Department of Dermatology, University of Arkansas
Medical Center, 4301 West Markham, Little Rock (72205)

District of Columbia

Arnold McNitt (1944-49), 3640 Everett Street, N.W., Washington (20015)
Oscar B. Hunter, Jr. (1959-64), 915 Nineteenth Street, N.W., Washington (20006)
George P. Blundell (1964-69), 915 Nineteenth Street, N.W., Washington (20006)
Charles Wilson Jones (1969-73), 916 Nineteenth Street, N.W., Washington (20006)
William H. Cooper (1973-74—filled unexpired term of Jones, who resigned), 825
New Hampshire Avenue, N.W., Washington (20037)

Florida

Edward Jelks (1929-35), 2244 St. John's Avenue, Jacksonville (32204)
Walter C. Jones (1940-45), 427 Biltmore Way, Apartment 102, Coral Gables (33134)
Donald F. Marion (1960-65), 1394 Coral Way, Miami (33145)
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Louisville (40202)
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office), 4240 Magnolia at General Pershing, New Orleans (70115)
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G. Gordon McHardy (1968-73), 3638 St. Charles Avenue, New Orleans (70115)

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J. Morris Reese (1951-56), 305 Morris Avenue, Lutherville (21093)
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George H. Yeager (1966-71), University of Maryland Hospital, Room 10-412, Baltimore
(21201)
Robert T. Singleton (1971-76), University of Maryland Hospital, Baltimore, Md. 21201

Mississippi

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James T. Thompson (1973-75), 633 Park Street, Moss Point (39563)

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Daniel L. Sexton (1946-51), 911 South Brentwood Boulevard, St. Louis (63105)
Grayson Carroll (1951-56) 1035 Bellevue, St. Louis (63117)
Clinton W. Lane (1961-66), 950 Francis Place, St. Louis (63105)
James Y. Griggs (1971-76), 7820 Carondelet Avenue, St. Louis, Mo. 63105

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- Arthur H. London, Jr. (1946-49), 306 South Gregson Street, Durham (27701)
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J. Leonard Goldner (1961-66), Duke University Medical Center, Durham (27710)
F. Wayne Lee (1966-71), 225 Hawthorne Lane, Charlotte (28204)
Thomas B. Dameron, Jr. (1971-76), P. O. Box 10707, Raleigh, N.C. (27605)

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Samuel R. Turner (1968-73), 4815 South Harvard, Room 403, Tulsa (74135)

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J. Howard Stokes (1960-65), 161 West Cheves Street, Florence (29501)
George C. Smith (1965-70), 311 West Palmetto Street, Florence (29501)
Edward J. Dennis (1970-75), Department of Obstetrics-Gynecology, Richland Memorial Hospital, Columbia (29202)

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- Kate Savage Zerfoss (1942-47), 167 Eighth Avenue, North, Nashville (37203)
A. H. Lancaster (1957-62), 608 West Main Street, Knoxville (37902)
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M I N U T E S

70th ANNUAL MEETING

of the

SOUTHERN MEDICAL ASSOCIATION

NEW ORLEANS, LOUISIANA

NOVEMBER 7-10, 1976

**(Includes all meetings held between November 20, 1975,
and November 10, 1976)**

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PROCEEDINGS OF THE EXECUTIVE COMMITTEE OF THE COUNCIL

Point Aquarius Country Club, Alpine, Ala., January 25, 1976, 8:00 a.m.

CALL TO ORDER AND ROLL CALL

The Southern Medical Association's Executive Committee of the Council held its Midwinter Meeting at Point Aquarius Hotel & Country Club, Alpine, Ala., January 25, 1976. The meeting was called to order at 8:00 a.m. by Thomas B. Dameron, Jr., Chairman.

Members of the Executive Committee of the Council present: Thomas B. Dameron, Jr., Chairman, Raleigh, N.C.; Edwin C. Evans, Atlanta, Ga.; J. Ralph Meier, New Orleans, La.; M. Pinson Neal, Jr., Richmond, Va.; G. Gordon McHardy, New Orleans, La.; G. Thomas Jansen, Little Rock, Ark.; Andrew F. Giesen, Jr., Fort Walton Beach, Fla.

Members of the Executive Committee of the Council absent: G. Baker Hubbard, Sr., Vice-Chairman, Jackson, Tenn.

Others present: Loren Williams, Ph.D., Richmond, Va.; and the following SMA staff members from Birmingham, Ala.: Mr. Robert F. Butts, Executive Director; Mr. Roy B. Evans, Jr., Assistant Executive Director; Mr. Michael E. Haworth, III, Administrative Assistant; Pamela K. Galbaugh, Administrative Assistant.

MINUTES OF PREVIOUS MEETING

Copies of the Minutes of the Executive Committee of the Council meeting held November 19, 1975, Miami Beach, Fla., were given to each member of the Executive Committee prior to the meeting.

ACTION:—Dr. Evans moved that the Minutes of the meeting of the Executive Committee of the Council held on November 19, 1975, be approved, as printed. Dr. Meier seconded the motion and it carried.

SOUTHERN REGIONAL EDUCATION BOARD MANPOWER STUDY

At the meeting of the SMA Study Committee held the previous two days, the Committee members considered exploring the possibility of the Association participating in a study on medical manpower. At that meeting, the following resolution was made by Dr. Galambos: "The SMA co-sponsor, with a grant from the Southern Regional Education Board, a study on manpower with the S.R.E.B. staff compiling the data. The Association would be willing to cooperate with the S.R.E.B. staff, through its Sections, to check the national data applicability to different parts of the SMA territory. The resolution was amended by stating that there would be a necessity of control by the SMA." The motion was seconded; however, after a vote was taken by a show of hands, the resolution did not pass after a vote of five—yes and seven—no.

The Committee recommended that there be no further exploration of the relationship with the S.R.E.B. in the project of the medical manpower study.

ACTION:—Dr. Jansen moved that the Study Committee's decision be approved. Dr. Neal seconded the motion and it carried.

DIAL ACCESS PROGRAM

After a brief discussion on the Dial Access Program, the following action was taken.

ACTION:—Dr. McHardy moved that \$7,000/year for the next two years be appropriated for the printing and mailing of the Dial Access brochures. The motion was seconded by Dr. Giesen and carried.

ACTION:—Motion was made by Dr. Giesen, seconded, and carried that the SMA request a two-year extension of the grant with NCI.

Dr. Dameron stated that he would communicate with Dr. Robert Hickey, M. D. Anderson Hospital & Tumor Institute, regarding the establishment of an Editorial Board for reviewing and up-dating these tapes.

RECOMMENDATIONS TO THE EXECUTIVE COMMITTEE OF THE COUNCIL BY THE COMMITTEE ON SCIENTIFIC WORK

Recommendation No. 1

The Committee on Scientific Work recommends to the Executive Committee of the Council that computerized registration be approved and implemented with the New Orleans Meeting in 1976. The initial cost for implementing computerized registration, using the facilities of the SMA Insurance Program in Fort Worth, Texas, would be approximately \$7,000.

ACTION:—Dr. Jansen made the motion that computerized registration be approved and implemented for the New Orleans Meeting in 1976. The motion was seconded and carried.

Recommendation No. 2

The Committee on Scientific Work recommends to the Executive Committee of the Council that it explore the possibility of Physicians' Resources, Inc. producing telecourses on various subjects for the SMA, as received by Dr. McHardy in a proposal from Physicians' Resources, Inc. This would be predicated upon PRI obtaining funds from pharmaceutical companies. The Committee also recommends that this program be supervised by the Committee on Scientific Work or a specially appointed committee. (Physicians' Resources, Inc. was encouraged, after the November 20, 1975 meeting, to begin attempting to solicit funds with the understanding that final approval of this program must come from the Executive Committee of the Council at its midwinter meeting.)

It was brought to the attention of the Executive Committee that although detailed information had been requested from Physicians' Resources, Inc., no communication had been received from that company by the date of this meeting.

ACTION:—Dr. Jansen moved that the Executive Committee of the Council instruct the President to write Physicians' Resources, Inc. explaining that due to lack of response to Dr. McHardy's questions, the Executive Committee had decided not to accept PRI's proposal. The motion was seconded by Dr. Giesen and carried. The SMA staff was instructed to proceed with the same concept through another company.

OLD BUSINESS

Item No. 1

Tours

The Executive Committee of the Council reviewed the SMA's Tour Program for 1976. Dr. Dameron called upon Pamela Galbaugh, who told the members of the Executive Committee that plans were proceeding for announcing the Alaskan Discovery which is scheduled for July 10-17, 1976.

Item No. 2

Meeting Format Atlanta 1978

Dr. Evans stated that he would work with the Medical Association of Georgia to see if he could persuade them to meet simultaneously with the SMA in 1978.

New Orleans 1976

ACTION:—Dr. McHardy moved that two luncheons be held during the New Orleans Meeting (one on Tuesday and one on Wednesday). He also recommended that the Woman's Auxiliary incorporate their Doctors' Day Awards Luncheon in with the SMA President's Luncheon on Wednesday. The motion was seconded by Dr. Evans and carried.

Dr. Dameron indicated that he would appoint a Liaison Committee, consisting of Drs. Martin, Neal, and Hubbard, to work with the Auxiliary.

NEW BUSINESS

Item No. 1

1981 Meeting Dates

Roy Evans explained that he had received a request from the New Orleans Tourist and Convention Bureau to move the SMA meeting dates in 1981 from November 15-18 to November 8-11. The Convention Bureau in New Orleans had respectfully requested this change in order that they could book another large convention following the SMA annual meeting.

ACTION:—Motion was made by Dr. Giesen, seconded by Dr. McHardy, and carried, that the meeting dates in 1981 in New Orleans be changed from November 15-18 to November 8-11.

Item No. 2

Southern Medical Journal

Roy Evans reported that the Association had hired outside copy-editing services, and although there was more turn-over in the Journal Department, some progress was being made. Samples of the new Journal style were distributed for inspection.

Committee members were also informed that three papers dealing with the same topic, by the same author, either had been published or were in the process of being published. It was decided that Dr. Evans, as Chairman of the Committee on Publications, should write to Dr. Riley, explaining the matter to him.

Item No. 3

Financial Statements

Mr. Butts reviewed the Financial Statements for the periods October-December 1975, and reported financial affairs to be in good condition.

Item No. 4

Report of the Committee on Public Relations

Dr. Meier, as Chairman of the Committee on Public Relations, briefly discussed his report and stated that there were several recommendations that needed to be acted upon by the Executive Committee of the Council.

RECOMMENDATIONS TO THE EXECUTIVE COMMITTEE OF THE COUNCIL BY THE COMMITTEE ON PUBLIC RELATIONS

Recommendation No. 1

The Committee on Public Relations recommends to the Executive Committee of the Council the extension of Mr. J. Morgan Smith's employment as public relations consultant by the Southern Medical Association.

ACTION:—Motion was made, seconded, and carried that Recommendation No. 1 be approved.

Recommendation No. 2

The Committee on Public Relations recommends to the Executive Committee that proposed paid advertising in county medical society bulletins be explored as a possible additional means of communicating with southern physicians.

ACTION:—None taken.

Recommendation No. 3

The Committee on Public Relations recommends that the Executive Committee of the Council explore the possibility of Physicians' Resources, Inc. producing telecourses on various subjects for the SMA. This would all be predicated upon Physicians' Resources, Inc. obtaining funds from pharmaceutical companies. The Committee also recommends that this program be supervised by the Committee on Scientific Work or a specially appointed committee. (Physicians' Resources, Inc. was encouraged, after the November 20, 1975 meeting, to begin attempting to solicit funds with the understanding that the final approval of this program must come from the Executive Committee of the Council at its midwinter meeting.)

ACTION:—Previously taken (refer to Recommendations to the Executive Committee of the Council by the Committee on Scientific Work, Recommendation No. 2, ACTION).

Item No. 5

Review of Resolutions from SMA Study Committee Woman's Auxiliary

The possibility of placing a membership card to the Woman's Auxiliary in with the physician's membership card was discussed. The headquarters office staff was instructed to devise a means of notifying wives of physician-members of the SMA that they were automatically a member of the Woman's Auxiliary to the SMA.

President's Reception

The question of who should be invited to the President's Reception at the New Orleans Meeting was raised.

ACTION:—Dr. Meier moved that all persons attending the New Orleans Meeting, including exhibitors, be invited to attend the President's Reception. Dr. Giesen seconded the motion, and it carried.

SMA Sections

The possibility of the SMA holding conjoint meetings, as part of Section activities, with national organizations, was discussed.

Resolution from SMA Study Committee: Dr. Meier recommended that a steering committee be appointed within each Section to guide the Section in achieving its goals and to help the Section work with a national organization in the formulation of a conjoint meeting. Resolution was seconded and carried.

ACTION:—(by the Executive Committee of the Council)—Dr. Meier moved that the resolution from the SMA Study Committee be approved. Dr. Evans seconded the motion and it carried.

Postgraduate Courses

Resolution from the SMA Study Committee: The following resolution was approved by the SMA Study Committee: "(1) that the SMA should continue to offer postgraduate courses at the annual meeting; (2) that there should be only a single point of registration, through the Association; (3) courses should be conducted and structured in a manner that would assure Category I credit."

ACTION BY THE EXECUTIVE COMMITTEE OF THE COUNCIL:—Dr. Meier moved the approval of the SMA Study Committee's resolution relating to postgraduate courses. Dr. Evans seconded the motion; motion passed.

Meeting Conflict in 1978

It was duly recorded that the members of the Executive Committee of the Council again discussed the meeting conflict between the Southern Medical Association and the Medical Association of Georgia in Atlanta in 1978. Dr. Evans indicated that he believed the problem could be resolved between himself, as a member of the SMA, and a member of the Education Committee for the Medical Association of Georgia.

Mini-Courses

The possibility of funding various mini-courses throughout small towns in the SMA territory was reviewed.

ACTION BY THE EXECUTIVE COMMITTEE OF THE COUNCIL:—Motion was made, seconded, and carried, that the SMA investigate the possibility of sponsoring postgraduate or mini-courses in smaller towns throughout the territory of the Association in which we do not have an annual meeting.

Relationship with State Medical Societies In Regard to Publications

Resolution from SMA Study Committee: It was resolved that the SMA continue discussion with a state medical society (Louisiana, at present) to offer a state signature (16 pages) in the *Southern Medical Journal* and authorize the staff to proceed with one state on a break-even basis.

ACTION BY THE EXECUTIVE COMMITTEE OF THE COUNCIL:—Dr. Jansen moved the acceptance of this resolution. Motion was seconded by Dr. McHardy and passed.

Utilization of Section Guest Speaker

In order that a better scientific program be formulated, the SMA Study Committee, resolved that Section Secretaries be instructed to forward Dr. Hightower the name and curriculum vitae of the Section's Guest Speaker prior to the Section Secretaries Conference.

ACTION:—(by the Executive Committee of the Council)—Dr. McHardy moved the approval of this recommendation. Dr. Jansen seconded the motion and it carried.

American Academy of Family Physicians Credit

The desirability of receiving AAFP credit in addition to the American Medical Association's Physician's Recognition Award, Category I, was discussed by the Study Committee. It was resolved that when Dr. Thomas Stern, Director of Continuing Education, AAFP, visited Birmingham the latter part of February, that Dr. Judge be authorized to talk with him. It was also recommended that someone from the headquarters office staff be present at the meeting with Dr. Stern.

ACTION BY THE EXECUTIVE COMMITTEE:—Dr. Jansen moved that Dr. Judge and Mr. Butts be authorized to meet with Dr. Stern upon his visit to Birmingham to discuss the possibility of future AAFP credit for the Association. Dr. Neal seconded the motion and it carried.

Future Sections

Resolution: The Study Committee resolved that the Committee on Constitution and Bylaws review and submit suggestions for the following: (1) formation of Sections; (2) responsibilities of Sections; and (3) discontinuation of Sections.

ACTION BY THE EXECUTIVE COMMITTEE:—Motion was made, seconded and carried, that this resolution be adopted.

Resolution: That the Committee on Constitution and Bylaws investigate and act to create a steering committee for the guidance of Section officers in their activities.

ACTION BY THE EXECUTIVE COMMITTEE:—The Executive Committee of the Council voted to approve this resolution by the SMA Study Committee. It was also recommended that the Secretaries' "tenure" be for a minimum of two years (recommended three years), and that a secretary-elect be elected for the secretary's last year.

Director of Education

Recommendation from the Study Committee: It was recommended that Margaret Klapper, M.D., Birmingham, Ala., be approached to come to the SMA on the basis of a Consultant to the Committee on Scientific Work.

ACTION BY THE EXECUTIVE COMMITTEE:—Dr. McHardy moved that Dr. Klapper be retained as a

Consultant to the Committee on Scientific Work. Dr. Neal seconded the motion and it carried.

Dr. Klapper's fees would be decided upon by the Committee on Finance following her meeting with Dr. Judge and Mr. Butts.

August as a Possible Meeting Date

It was recommended by the Study Committee that the headquarters office design a questionnaire regarding changing the annual meeting month to August and poll the membership regarding this change.

ACTION BY THE EXECUTIVE COMMITTEE OF THE COUNCIL:—Dr. Jansen moved that this recommendation be approved. Dr. Neal seconded the motion and it passed.

Dr. McHardy briefly reviewed some of his plans for the New Orleans Meeting. He stated that he hoped that Congresswoman Lindy Boggs would be available for the combined President's Luncheon and Woman's Auxiliary Doctors' Day Awards Luncheon. He told the members that he had obtained Pete Fountain and Rene Louapre for entertainment at the President's Night Dinner Dance, and that he would engage a small combo for the President's Reception.

Resolution was made by Dr. Meier that Roy Evans be commended and congratulated for his service to the Professional Convention Management Association as its President in 1975. He stated that Mr. Evans was a credit to the SMA and that the Association was very fortunate to have him as Assistant Executive Director.

The Executive Committee of the Council also extended sincere thanks to Loren Williams, Ph.D., for his help and suggestions.

An Executive Session was called.

ADJOURNMENT

There being no further business to come before the Executive Committee at this time, Dr. Dameron adjourned the meeting at 11:15 a.m.

PROCEEDINGS OF THE EXECUTIVE COMMITTEE OF THE COUNCIL

Atlanta Airport, Atlanta, Ga., June 12, 1976, 10:30 a.m.

CALL TO ORDER AND ROLL CALL

The Executive Committee of the Council of the Southern Medical Association met in the Delta Airlines Crown Room, Atlanta Airport, Atlanta, Ga., June 12, 1976. The meeting was called to order at 10:30 a.m. by the presiding officer, Dr. Dameron.

Members of the Executive Committee of the Council present: Thomas B. Dameron, Jr., *Chairman*, Raleigh, N.C.; G. Baker Hubbard, Sr., *Vice-Chairman*, Jackson, Tenn.; Edwin C. Evans, Atlanta, Ga.; J. Ralph Meier, New Orleans, La.; M. Pinson Neal, Jr., Richmond, Va.; G. Gordon McHardy, New Orleans, La.; Andrew F. Giesen, Jr., Fort Walton Beach, Fla.

Members of the Executive Committee of the Council absent: G. Thomas Jansen, Little Rock, Ark.

Others present: Margaret Klapper, M.D., Birmingham, Ala.; and the following SMA staff members from Birmingham, Ala.: Mr. Robert F. Butts, Executive Director; Mr. Roy B. Evans, Jr., Assistant Executive Director; Pamela K. Galbaugh, Administrative Assistant.

MINUTES OF PREVIOUS MEETING

Dr. Dameron announced that the Minutes of the previous meeting of the Executive Committee of the Council held at Point Aquarius, Alpine, Ala., January 25, 1976, needed to be approved. Dr. Dameron told members of the Executive Committee that these Minutes had been revised, slightly.

ACTION:—Dr. Meier moved that the Minutes of the January 25, 1976, meeting of the Executive Committee of the Council be approved, as revised. The motion was seconded by Dr. Hubbard and carried.

PRESENT STATUS OF DIAL ACCESS PROGRAM

The Dial Access Program, in conjunction with the M. D. Anderson Hospital, Houston, Texas, has been funded for another year. Dr. R. H. Kampmeier, Chairman of the Dial Access Editorial Committee, indicated in a telephone conversation with Mr. Evans that he anticipated having a meeting of the Editorial Committee in Houston within the next month.

PILOT STUDY — EXPANSION OF DIAL ACCESS PROGRAM

The possibility of the expansion of the Dial Access Program through a pilot study in the state of Texas, utilizing 400 tapes donated by Dr. Margaret Klapper, was discussed. This study would be coordinated through the SMA Insurance facilities in Fort Worth, Texas, and would cost approximately \$90,000-\$100,000. Included in the cost would be the purchase of computer equipment which would retain the information on the tapes and automatically play the requested tape for the physician; also included in this cost would be the purchase of four WATS lines.

Mr. Evans indicated that he and Mr. Dick Ballard, Hoechst-Roussel Pharmaceuticals, would meet in Birmingham on July 5, 1976, to put together a proposal to be submitted to Mr. Ballard's company in September. He expressed hope that this pilot study could be operational by the first of next year.

STATUS OF TOURS

Dr. Dameron called upon Pam Galbaugh to give a brief status of the summer tours sponsored by the SMA.

Ms. Galbaugh advised the Executive Committee of the Council that the Alaskan Discovery, July 10-17, 1976, had 185 confirmed members; the Rhine Discovery, August 1-14, 1976, had 123 confirmed members. She further stated that the medical seminars held in conjunction with the tours were being well received.

REVIEW OF FINANCIAL STATEMENT

Mr. Butts distributed and reviewed the Association's Financial Statements for the six-month period, October 1, 1975-April 30, 1976. According to these figures, the Association is financially stable and in good shape.

PROPOSED CHANGES IN BYLAWS

The report of the Committee on Constitution and Bylaws to be submitted by the Chairman, James E. White, to be reviewed at this time by the Executive Committee was not available. Therefore, no action was taken.

SMA COMMITTEE ON SCIENTIFIC WORK

The Executive Committee members discussed the Committee on Scientific Work and financial arrangements for this Committee.

ACTION:—Motion was made by Dr. Hubbard, seconded by Dr. Giesen, that the stipend, as previously paid from the Dial Access Funds, for Dr. N. C. Hightower, Jr., Chairman of the Committee on Scientific Work, be continued. The motion carried.

Dr. Dameron told the members of the Executive Committee that he would correspond with Dr. Hightower and advise him of their decision.

INTERIM PROGRESS REPORT

Margaret Klapper, M.D.

Margaret Klapper, M.D., Birmingham, Ala., special consultant to the Committee on Scientific Work, appeared before the Executive Committee of the Council and gave an in depth review of the progress she had made to date in reviewing the activities of the Association and Committee on Scientific Work.

Dr. Klapper advised the Executive Committee that she had talked with Drs. Aldrete and Dismukes, Section Secretaries from Birmingham. She had also had conversations with SMA members, Drs. Riley, Kampmeier, Galbraith, and Judge.

Dr. Klapper also indicated that she had listened to several Dial Access tapes.

Annual Meeting:

Dr. Klapper feels that the SMA annual meeting is moving toward postgraduate courses (a more highly structured program), rather than solicited papers for regular Section programs. She indicated that this was in keeping with the trend in postgraduate education.

She further indicated that the strength of the SMA meeting lies in the interdisciplinary relationship of all specialists.

Dr. Klapper expressed a strong feeling that the SMA would need a medical educator on its staff, as it continued to expand its continuing medical education program. It is not known at this time whether or not such an educator would need to be an M.D. This decision could be made following a more thorough review of the educational activities of the Association.

Journal:

Dr. Klapper expressed the feeling that the Editorial Board of the *Journal* should be called upon more often and work more closely with the Editor.

She stated that in its present form the *Journal* is doing what it should. It is a general journal, which is good because it is one of the few general journals still available.

Dr. Klapper did mention that *Journal* articles should be kept brief.

SMA Purpose:

The primary purpose for which the SMA exists—"to develop and foster scientific medicine"—is believed by Dr. Klapper to be extremely worthwhile. She indicated that the Southern Medical Association is wise not to get involved in politics; it should keep as its goal the education of physicians.

Southern Medicine:

It was brought to the attention of the members of the Executive Committee that *Southern Medicine* might be a good way to enlighten physicians on general issues, such as P.S.R.O., Manpower, etc.

Medical Student Program:

After reviewing this Program, Dr. Klapper suggested that there might be other ways to get more mileage out of the money spent on this Program. For example, involve faculty, students, and house staff officers of medical schools in the host city of an annual meeting in the program.

Lectureship Program:

The SMA's identity is completely lost in this Program. It was suggested that the Program be made more competitive, possibly involving state medical societies.

In summary Dr. Klapper stated that the SMA should support and work with the *Journal* and *Southern Medicine* toward their continued and constant improvement. The Association should act as a liaison with medical schools to help them do things that they could not do by themselves. She also pointed out that the Association should recognize, evaluate, and accept competition. She further stated that whatever the Association does, it should be competitive, and it will cost money.

SMA RETIREMENT PROGRAM

Mr. Butts told the members of the Executive Committee of the Council that the Committee on Insurance recently held a conference call regarding the establishment of a Retirement Equity Fund. He indicated that the action of the Committee on Insurance in establishing this Fund needed to be approved by the Executive Committee.

ACTION:—Dr. Hubbard moved that the action of the SMA Committee on Insurance in establishing a Retirement Equity Fund be approved. Dr. McHardy seconded the motion and it carried.

SOUTHERN MEDICAL JOURNAL

The Committee reviewed a letter received from Harris D. Riley, Jr., Editor, *Southern Medical Journal*, requesting additional funds for his Editorial Assistance Fund.

ACTION:—Motion was made by Dr. Hubbard, seconded by Dr. Meier, and carried, that Dr. Riley's request for additional funds be approved. However, Dr. Riley would be instructed to submit a receipted accounting to

the SMA headquarters office of how all monies are expended. The Association would continue to pay for telephone, stationery, and postage expenses.

Journal Backlog:

Mr. Evans reported that in January 1976 there were 317 manuscripts in the headquarters office. After the style change and additional signature, this backlog has been cut almost in half. If the *Journal* continues to be published on a nine-signature basis, within a year there may not be enough manuscripts on hand to fill a *Journal*. Therefore, Mr. Evans requested that the *Journal* be cut back to eight signatures. He commented that the new type style adopted in January 1976 actually represents an increase of more than 33% in editorial content.

The Committee on Publications was instructed to contact Dr. Riley regarding his approval of this action.

MINI-MEETINGS

Dr. Dameron called upon Dr. Meier to give any "feedback" he had received on the mini-meetings. Dr. Meier indicated that he had received no input in this area. Dr. Dameron mentioned that the few people he had approached with this concept had responded very "coolly" to the idea.

MEDICAL STUDENT SURVEY

The members of the Executive Committee of the Council had received a survey of the membership status of every official medical student representative who had attended an annual meeting of the Association, as its guest. The number of students who have actually become members of the SMA is very low.

The headquarters office staff was instructed to forward a copy of this survey to the Committee on Medical Students for its review.

NEW ORLEANS MEETING

Accreditation:

Mr. Evans informed the members of the Executive Committee of the Council that this was the year that the SMA should be visited by the American Medical Association to determine its accreditation status. However, the AMA is running a year behind schedule, and it is doubtful that they will visit the New Orleans Meeting.

Bicentennial Lectures:

Dr. McHardy told the members of the Executive Committee of the Council that Dr. Hightower, Chairman of the Committee on Scientific Work, had secured two outstanding speakers for the Bicentennial Lectures. It was decided that the policy of reimbursement of these speakers would be as follows: first-class, roundtrip air transportation; \$60 per diem; and \$500.00 honorarium.

Symposium on "Life-Death Decision- ing":

Dr. McHardy announced that an excellent Symposium on "Life and Death, Who Decides?" had been arranged for Wednesday afternoon, November 10, 2:30-4:30 p.m. The Association will provide the following financial arrangements for the panelists of this Symposium: first-class, roundtrip air transportation; and housing; no honorarium.

Auxiliary Program:

Dr. McHardy indicated that the Woman's Auxiliary was arranging an excellent program for the New Orleans Meeting, and they are making every effort to coordinate their activities with those of the SMA.

Breakfast at Brennan's

Dr. McHardy stated that he had met with the personnel at Brennan's and arranged for breakfasts to be held on

Monday, Tuesday, and Wednesday mornings, 7:00-8:30 a.m. A seating arrangement of six tables with 16 persons at each table could be accommodated each day. Dr. McHardy requested permission to seek funding from the pharmaceutical industry to help subsidize this project.

ACTION:—Dr. Meier moved that Dr. McHardy's request to seek outside funding for this project be approved. Motion was seconded by Dr. Neal and carried.

Medical Student Activities:

In addition to the regular program of activities scheduled for the Medical Student Representatives, Dr. McHardy told those present that he had invited Congressman Dr. Tim Lee Carter to address the students on Monday evening prior to their "Tavern Time."

Per Diem Allowances for Section Secretaries, Councilors, Officers, etc.:

The per diem allowances for the above mentioned officers of the SMA were reviewed.

ACTION:—Dr. Evans moved that Section Secretaries, General Officers, Councilors, etc., be given a per diem of \$60. Dr. Neal seconded the motion and it carried.

"Executive Lifestyle '76":

Dr. Meier told the members of the Executive Committee of the Council that Mr. J. Morgan Smith, of the Association's Public Relations Firm, had arranged an excellent program for the New Orleans' businessman to be held Tuesday, November 9, 1976, 2:30-4:30 p.m., Marriott Motor Hotel. This program had received approval from both the New Orleans Chamber of Commerce and the Orleans Parish Medical Society.

FUTURE MEETINGS SITES

Roy Evans reviewed for the members of the Executive Committee a survey on future meeting sites that had been conducted with approximately 5,000 physicians. A nine percent response was received. The physicians received a card with their annual dues billing notice. The physicians were requested to write in their choice of meeting sites and months. Results of this survey are as follows: the spring and fall were the favorite times for a meeting, and the top three meeting sites were New Orleans, Atlanta, and Miami Beach.

REPORT OF THE COMMITTEE ON GRANTS AND LOANS

Dr. Neal gave a brief report of the actions taken by the Committee on Grants and Loans during its meeting held May 23, 1976.

Dr. Neal reported that 13 applications were received for the Residency Training Loan Fund. Of these applications, 11 were determined to fulfill the guidelines governing the Program and received money—three grants and eight loans.

One hundred and six applications were received for Research Project Grants, from 30 medical schools located within the SMA territory. The Committee awarded money to 25 schools.

ADJOURNMENT

There being no further business to come before the Executive Committee of the Council at this time, the meeting was adjourned by Dr. Dameron at 3:00 p.m.

PROCEEDINGS OF THE EXECUTIVE COMMITTEE OF THE COUNCIL

New Orleans, Louisiana, November 6, 1976, 8:55 a.m.

CALL TO ORDER AND ROLL CALL

The Southern Medical Association's Executive Committee of the Council met in the Galvez Room, Marriott Motor Hotel, November 6, 1976. The meeting was called to order at 8:55 a.m. by the presiding officer, Dr. Dameron.

Members of the Executive Committee of the Council present: Thomas B. Dameron, Jr., Chairman, Raleigh, N.C.; G. Baker Hubbard, Vice-Chairman, Jackson, Tenn.; Edwin C. Evans, Atlanta, Ga.; J. Ralph Meier, New Orleans, La.; M. Pinson Neal, Jr., Richmond, Va.; G. Gordon McHardy, New Orleans, La.; G. Thomas Jansen, Little Rock, Ark.; Andrew F. Giesen, Jr., Fort Walton Beach, Fla.

Members of the Executive Committee of the Council absent: none.

Others present: Mr. Pat Willingham and Mr. Tom Walters, representatives of Arthur Young & Company, the firm which audits the accounts of the Association, annually, and the following SMA staff members from Birmingham, Ala.: Mr. Robert F. Butts, Executive Director; Mr. Roy B. Evans, Jr., Assistant Executive Director; Ms. Pamela Galbraugh, Administrative Assistant.

MINUTES OF PREVIOUS MEETINGS

Copies of the Minutes of the Executive Committee meetings held January 25, 1976, Alpine, Ala., and June 12, 1976, Atlanta, Ga., were given to each member of the Executive Committee of the Council prior to the meeting.

ACTION:—Dr. Meier moved that the Minutes of the meeting of the Executive Committee of the Council held on January 25, 1976, Alpine, Ala., be approved as printed. Dr. Neal seconded the motion and it carried.

The minutes of the meeting of the Executive Committee of the Council held on June 12, 1976, Atlanta, Ga., were briefly reviewed by Dr. Dameron.

Roy Evans was called upon to discuss the progress between the SMA and Mr. Richard E. Ballard, Hoechst-Roussel Pharmaceuticals, regarding the expansion of the Dial Access System. Mr. Evans stated that Mr. Ballard had requested that the Chairman of the Council, President, and Mr. Jim Fulkerson of World Service Life Insurance Company, visit Somerville, N.J. on December 15, 1976, to make the formal presentation for funding to the Executive Committee of Hoechst-Roussel.

ACTION:—Following the above discussion, motion was made by Dr. Jansen, seconded by Dr. Evans, that the Minutes of the meeting of the Executive Committee of the Council held on June 12, 1976, be approved as printed. Motion passed.

REPORT OF OFFICERS

REPORT OF THE EXECUTIVE DIRECTOR

Mr. Robert F. Butts

Mr. Butts reviewed his report as Executive Director, including the annual Financial Statement and proposed Budget for 1976-77. A complete copy of this report may be found under PROCEEDINGS OF THE COUNCIL, November 6, 1976, REPORTS OF OFFICERS, Report of the Executive Director.

Mr. Butts called upon Roy Evans to discuss the changing of computer services to World Service Life and computerized registration at the New Orleans Meeting. Mr. Evans indicated that thanks to Anne Crouch and her capable staff in the SMA headquarters office, the conversion was handled "without a hitch." He further stated that a considerable savings had been noted by using the facilities at Fort Worth.

The registration procedure was explained, and it was announced that 2,109 physicians had pre-registered for the New Orleans Meeting which was a considerable increase over the number pre-registered for the 1975 Miami Beach Meeting.

Mr. Pat Willingham and Mr. Tom Walters, both of Birmingham, Ala., representing Arthur Young & Company, distributed to the members of the Executive Committee of the Council a booklet containing complete information on the financial structure of the Association, including graphs, charts, and appropriate summaries.

After a complete review of the financial matters of the Association, the auditors recommended that the SMA consider a dues increase from \$30.00 to \$50.00 beginning January 1, 1977.

ACTION:—Dr. Jansen moved that the Association's dues be increased to \$50.00 annually, effective January 1, 1977. Dr. Meier seconded the motion and it carried.

Following Mr. Willingham's in depth discussion of the financial structure of the SMA, Mr. Butts compared the 1975-76 Budget with the 1976-77 projected Budget.

ACTION:—Dr. Meier moved that the 1976-77 Budget be approved as presented. Dr. McHardy seconded the motion and it carried.

ACTION:—Motion was made, seconded, and carried that Arthur Young & Company be approved as independent auditor for the fiscal year 1976-77.

ACTION:—Dr. Hubbard moved the approval of the Report of the Executive Director, including all recommendations contained therein and the annual Financial Statement. The motion was seconded by Dr. Neal and passed.

OLD BUSINESS

ITEM NO. 1

Dr. McHardy summarized activities planned for the New Orleans Meeting. He stated that the "Breakfast at Brennan's" sessions promised to be very successful. He further stated that registration figures for postgraduate courses looked very good; however, the Committee on Scientific Work had deemed it necessary to cancel two courses—Course #2 "Evaluation of Blood Transfusion Complications;" and Course #8 "Renovascular High Blood Pressure Disease." Dr. McHardy advised those present that one of the Bicentennial Speakers had created a conflict with the SMA Section on Radiology.

Dr. Meier was called upon to briefly discuss the Executive Forum '76. He stated that excellent cooperation had been received from the New Orleans Chamber of Commerce and that it looked like this would be a very successful aspect of the New Orleans Meeting.

ITEM NO. 2

Dr. Dameron brought up the fact that there had been some negative feedback regarding Las Vegas as the 1979 meeting site, such as the distance involved, no local hosts for the meeting, and no medical school located in Las Vegas.

He stated that Miami Beach had agreed to give the Association its original dates in 1979 — November 11-14.

Dr. Meier read to the members of the Executive Committee several letters Roy Evans had received from directors of national organizations who had held meetings in Las Vegas. Of the letters read, only one had any negative comments to make regarding Las Vegas as a meeting site. This letter did, however, contain some favorable comments on the city.

The following ten-year meeting schedule was placed on the blackboard for consideration:

November 12-15, 1978	Atlanta, Ga.
November 4-7, 1979	Las Vegas, Nev.
November 16-19, 1980	San Antonio, Texas
November 15-18, 1981	New Orleans, La.
November 14-17, 1982	Atlanta, Ga.
October 31-	
November 3, 1983	Kansas City, Mo.
November 4-7, 1984	New Orleans, La.
November 11-14, 1985	San Antonio, Texas
November 2-5, 1986	Atlanta, Ga.

ACTION:—Dr. Neal moved that the SMA keep Las Vegas as the 1979 meeting site. Dr. Meier seconded the motion and it carried.

ACTION:—Dr. Meier made the motion that the ten year meeting schedule be approved; Dr. Evans seconded the motion and it carried.

Roy Evans was given permission to tentatively book meeting dates through 1990 due to the increasing popularity of some meeting sites, such as Atlanta.

ITEM NO. 3

The salary for Dr. N. C. Hightower, Jr., as Chairman of the SMA Committee on Scientific Work, was discussed.

ACTION:—Motion was made by Dr. Hubbard, seconded by Dr. Jansen, and carried, that Dr. Hightower's salary as Chairman of the Committee on Scientific Work be continued for another year.

ITEM NO. 4

At its meeting in Miami Beach, Fla., November 15, 1975, the Council decided that all future monies received for the Insurance Fund be placed in the Grant and Loan Fund (Refer to PROCEEDINGS OF THE COUNCIL, Miami Beach, Fla., November 15, 1975, REPORTS OF OFFICERS, Report of the Executive Director, ACTION).

ACTION:—Following a discussion, motion was made by Dr. Jansen that the Insurance Fund be eliminated. Dr. Neal seconded the motion and it carried.

NEW BUSINESS

ITEM NO. 1

Dr. Dameron explained that Claude Frazier, M.D., a member-physician of the SMA, had requested that the SMA send a letter to the President of the International Olympic Committee and to the Executive Director of the U. S. Olympic Committee suggesting restoration of the gold medal taken from Rick DeMott in 1972 for having taken epinephrine-like medications for his asthma.

It was decided that Dr. Dameron would respond to Dr. Frazier's request, stating that the SMA could not take any action on the matter.

ITEM NO. 2

Dr. McHardy reviewed a letter he had received from Francis S. Morrison, M.D., regarding the possibility of the SMA establishing a Section on Hematology and Oncology.

ACTION:—Dr. Meier moved that the request for the development of a Section on Hematology and Oncology be given to the SMA Section on Medicine for consideration. The motion was seconded by Dr. Evans and carried.

Dr. Evans was requested to take this matter up with the Section on Medicine. Dr. Dameron indicated that he would write Dr. Morrison as a spokesman for the SMA Executive Committee of the Council.

ITEM NO. 3

The possibility of the SMA Section on Industrial Medicine and Surgery meeting conjointly with the Southeastern Occupational Health Conference was brought up for discussion.

ACTION:—Motion was made by Dr. McHardy, seconded by Dr. Giesen, and passed, that the SMA Executive Committee of the Council endorse the SMA Section on Industrial Medicine and Surgery and the Southeastern Occupational Health Conference meeting conjointly.

ITEM NO. 4

Dr. Meier mentioned that he had received a letter from an ophthalmologist in Maryland requesting the SMA's position on recertification. Dr. Meier stated that he would advise Dr. Hilliard Haik, Chairman of the SMA Section on Ophthalmology, that the matter was brought up before the Executive Committee of the Council, and that it could take no position on the issue.

ITEM NO. 5 Tour Proposals

The Executive Committee of the Council reviewed a proposal received from Naaja-L. Jussila, Sales Representative of Finnair, for sponsoring a tour to the U.S.S.R.

ACTION:—Dr. Giesen moved that Finnair be notified of the Association's appreciation of their interest in sponsoring a tour to the U.S.S.R.; however, such a trip is not anticipated at this time. The motion was seconded by Dr. Meier and carried.

International Travel Advisors, Inc. (INTRAV) submitted two proposals for consideration by the SMA Executive Committee — the Classical Adventure (Istanbul, Athens, & Rome) for the summer of 1977; and the Orient Adventure for the fall of 1977.

ACTION:—Dr. Jansen moved that INTRAV's Classical Adventure be accepted, with the stipulation that Mike Lupfer personally be in attendance on the trip. Dr. Meier seconded the motion and it passed.

It was also requested that INTRAV advise the SMA in advance of any groups being placed with our physicians in the event the trip was not a sell-out.

RECOMMENDATIONS TO THE COUNCIL BY THE EXECUTIVE COMMITTEE OF THE COUNCIL

Recommendation No. 1

The Executive Committee of the Council recommends to the Council that the Budget for 1976-77 be approved.

Recommendation No. 2

The Executive Committee of the Council recommends to the Council that Arthur Young & Company be approved as independent auditor for the fiscal year 1976-77.

Recommendation No. 3

The Executive Committee of the Council recommends to the Council that the Report of the Executive Director be approved, including all recommendations contained therein and the annual Financial Statement.

Recommendation No. 4

The Executive Committee recommends to the Council that membership dues be increased from \$30.00 to \$50.00, annually, effective January 1, 1977.

Recommendation No. 5

The Executive Committee of the Council recommends to the Council that the tour proposal received from INTRAV for the Classical Adventure (Istanbul, Athens, and Rome) be accepted with the stipulation that Mike Lupfer personally be in attendance during the trip.

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An Executive Session was called.

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ADJOURNMENT

There being no further business to come before the Executive Committee of the Council at this time, Dr. Dameron adjourned the meeting at 12:10 p.m.

PROCEEDINGS OF THE COUNCIL

New Orleans, La., November 6, 1976, 1:15 p.m.

CALL TO ORDER AND ROLL CALL

The Council of the Southern Medical Association met in the Regent Room, Marriott Motor Hotel, following a luncheon in the Bonaparte Room. The meeting was called to order at 1:15 p.m. by the presiding officer, Dr. Dameron.

Members of the Council present: Thomas B. Dameron, Jr., Chairman, Raleigh, N.C.; G. Baker Hubbard, Sr., Vice-Chairman, Jackson, Tenn.; D. Joseph Judge, Anniston, Ala.; David L. Barclay, Little Rock, Ark.; W. Reams Perkins, Washington, D.C.; Walter C. Jones, III, Coral Gables, Fla.; Edwin C. Evans, Atlanta, Ga.; Hiram C. Polk, Jr., Louisville, Ky.; J. Ralph Meier, New Orleans, La.; Robert T. Singleton, Baltimore, Md.; James T. Thompson, Moss Point, Miss.; James Y. Griggs, St. Louis, Mo.; James E. White, Tulsa, Okla.; William W. Vallotton, Columbia, S.C.; M. Pinson Neal, Jr., Richmond, Va.; M. Bruce Martin, Huntington, W. Va.

Members of the Council absent: L. S. Thompson, Jr., Dallas, Texas.

Councilors-Elect present: Richard D. Richards, Baltimore, Md.; Robert K. Dorton, St. Louis, Mo.

Councilors-Elect absent: George W. Liles, Concord, N.C.

Others present: G. Gordon McHardy, President, New Orleans, La.; G. Thomas Jansen, President-Elect, Little Rock, Ark.; Andrew F. Giesen, Jr., First Vice-President, Fort Walton Beach, Fla.; Thomas J. Zaydon, Second Vice-President, Miami, Fla.; Harris D. Riley, Jr., Editor, *Southern Medical Journal*, Oklahoma City, Okla.; R. H. Kampmeier, Editor, *Southern Medicine*, Nashville, Tenn.; John B. Lynch, Associate Councilor from Tennessee, Nashville, Tenn.; Margaret S. Klapper, Special Consultant to the Committee on Scientific Work, Birmingham, Ala.; Mr. Pat Willingham and Mr. Tom Walters, representatives of Arthur Young & Company, Birmingham, Ala.; Joe T. Nelson, Weatherford, Texas; and the following SMA staff members from Birmingham, Ala.: Mr. Robert F. Butts, Executive Director; Mr. Roy B. Evans, Jr., Assistant Executive Director; Ms. Pamela Galbaugh, Administrative Assistant.

INTRODUCTION OF COUNCILORS-ELECT AND SEATING OF ALTERNATE COUNCILOR

The Councilors-Elect were properly introduced to the Council members and included: Richard D. Richards, Baltimore, Md.; Robert K. Dorton, St. Louis, Mo.

Dr. Dameron announced that the Councilor from Texas, Dr. Thompson was attending another meeting and, in accordance with the provisions of the CONSTITUTION AND BYLAWS, had appointed Joe T. Nelson, Weatherford, Texas, to represent Dr. Thompson.

MINUTES OF PREVIOUS MEETINGS

Copies of the Minutes of the 69th Annual Meeting, Miami Beach, Fla., November 16-19, 1975, and the Minutes of the January 25, 1976, and June 12, 1976, meetings of the Executive Committee of the Council were given to each Councilor prior to the meeting.

ACTION:—Motion was made by Dr. Judge, seconded by Dr. Neal, that the reading of the Minutes be dispensed with, and that the Minutes of the 69th Annual Meeting, Miami Beach, Fla., November 16-19, 1975, and the Minutes of the January 25, 1976, and June 12, 1976, meetings of the Executive Committee of the Council be approved as printed. Motion carried.

REPORTS OF OFFICERS

REPORT OF THE EXECUTIVE DIRECTOR

Mr. Robert F. Butts

I am pleased to transmit herewith my annual report for the fiscal year October 1, 1975, through September 30, 1976. This joint report to the General Officers and Council is supplemented with an Exhibit to save reading time and yet to supply detailed information on the affairs of the Association.

From accompanying Exhibit and Financial Report and Statements, it will be noted that the fiscal year just ended has been most successful. The Association continued to grow in membership and financial stability, and provided unequalled services through its annual meeting of the *Southern Medical Journal*, *Southern Medicine*, Grant and Loan Program, SMA Insurance Program and Pension Plan, Dial Access, Lectureship Program, and Scholarship Program.

MEMBERSHIP

Membership in the Association, as of September 30, 1976, was 22,874, another all-time high. Membership by class is as follows: Active, 16,127; Life, 2,781; Emeritus, 370; Military and Disabled, 208; Associate Members: Class 1, 223; Class 2, 240; Class 3, 1,390; Class 4, 9; Class 5, 37; Class 6, 1,489. Exhibit A shows membership by state for the years 1967-1976, inclusive.

The firm from which computer time was purchased ceased commercial operations September 1. Anticipating this action, a new, more efficient program had been written and tested by World Service Life Insurance Company. Records were updated and transferred uneventfully and the EDP continued uninterrupted. Included in the new program is a computerized registration system being first used at the New Orleans Meeting. Registrants so desiring, may receive a certified computer print-out of his CME credit from the SMA meeting.

PUBLICATIONS

The largest expenditure of the Operating Fund continues to be publications expenses. With continuing inflation and increasing costs of labor, paper, postage and other related items, there appears to be no relief in sight. However, a number of cost-reducing measures have been effected which have offset some of the increasing costs. This past year the page size of the *Journal* was enlarged and redesigned, resulting in an increase in textual content of some 20%. Text matter is now printed by web offset, utilizing roll paper of a lighter weight at a reduced price, realizing lower postage charges and eliminating bindery charges for folding. Hot metal type has been replaced with computer set type, providing some reduction in costs.

The Executive Committee authorized the temporary publication of an additional signature of text in order to reduce an extremely large backlog of papers. This has necessitated extra expenditures for overtime in the Journal Department and the employment of temporary editorial assistants.

Your headquarters staff, together with Arthur Young & Company, are cognizant of IRS regulations which could adversely affect the publications of the SMA. Continuing vigilance will be maintained and appropriate steps taken as the situation develops.

EXHIBITS

The number of firms exhibiting and the amount of space utilized at medical meetings continues to decrease due to rising expenses, the lack of new products and FDA regulations governing the exhibition and merchandising of medical items and pharmaceuticals. Regulations which would have classified exhibit revenue as unrelated income have been recently amended and are not at present effective.

ANNUAL FINANCIAL REPORT

Included in this report is a copy of the Financial Report and Statements for the fiscal year ended September 30, 1976, with a Report of Independent Public Accountants prepared by Arthur Young & Company, the firm designated by the Council to audit the accounts of the Association.

Mr. Pat Willingham, of Arthur Young & Company, who has appeared before the Executive Committee of the Council (Committee on Finance) and Council at previous meetings will again be present at the New Orleans Meeting to review in detail the audit and financial statements of the Association.

The Constitution and Bylaws stipulate that the Executive Director shall secure an annual audit of the books of account by a certified public accountant approved by the Council. I recommend that Arthur Young & Company be approved as independent auditor for the fiscal year 1976-1977.

BUDGET

The proposed Budget for the fiscal year 1976-77 is herewith presented for approval. This Budget has been tentatively approved by mail ballot (September 30, 1976) by the Executive Committee of the Council (Committee on Finance), but may be revised by the Executive Committee of the Council and/or the Council.

SUMMARY

For any successes attained this past fiscal year, I would like to give credit to my associates on the headquarters staff, General Officers, Executive Committee of the Council, the Council, Board of Trustees, Editors, Section Officers, Dr. Rafael C. Sanchez, who served as General Chairman on Arrangements for the New Orleans Meeting, and the physicians of the Orleans Parish Medical Society who served as members of the various local committees. Without the assistance and cooperation of these people, accomplishments for the year would have been impossible.

READ AND APPROVED BY:

Mr. Robert F. Butts
Executive Director
Southern Medical Association
November 6, 1976

ACTION:—Dr. Neal moved that the Report of the Executive Director, including all recommendations contained therein and the annual Financial Statement, be approved. Dr. Hubbard seconded the motion and it passed.

Following Mr. Butts' report, Mr. Pat Willingham and Mr. Tom Walters, representatives of Arthur Young & Company, presented a detailed review of the financial structure of the Association. Mr. Willingham's review was accompanied by slides, graphs, and charts.

EXHIBIT A
MEMBERSHIP STATISTICS BY STATES
1967-1976 Inclusive

STATE	1967	1968	1969	1970	1971	1972	1973	1974	1975	1976
Alabama	1169	1219	1215	1205	1257	1276	1297	1295	1317	1377
Arkansas	421	462	453	455	449	461	496	497	531	521
Dist. of Columbia	476	507	486	460	448	440	419	407	422	424
Florida	2049	2316	2371	2446	2560	2671	2706	2715	2716	2885
Georgia	1428	1549	1563	1634	1659	1653	1701	1953	2275	2264
Kentucky	828	899	899	893	868	856	856	841	856	870
Louisiana	1340	1423	1440	1430	1461	1442	1494	1458	1447	1574
Maryland	862	983	1008	1024	1033	1010	1020	1012	1008	1084
Mississippi	485	522	521	527	511	519	527	538	574	589
Missouri	976	1037	1095	1108	1083	1071	1079	1046	1047	1083
North Carolina	1195	1307	1318	1361	1351	1378	1442	1412	1469	1558
Oklahoma	487	534	556	571	571	576	606	585	595	581
South Carolina	687	727	747	782	786	807	822	824	857	969
Tennessee	1156	1207	1213	1249	1233	1239	1345	1319	1362	1371
Texas	2281	2527	2576	2532	2566	2463	2514	2936	2813	2799
Virginia	1230	1331	1311	1335	1328	1330	1353	1361	1445	1521
West Virginia	409	447	445	458	460	449	445	431	439	441
Other States & Foreign	577	438	496	598	679	734	769	787	803	963
Totals	18056	19435	19713	20069	20303	20375	20871	21417	21976	22874

The Council

Southern Medical Association

We have examined the accompanying statements of assets, liabilities and fund balances of Southern Medical Association (a non-profit organization organized under the laws of the State of Alabama) at September 30, 1976 and 1975 and the related statements of changes in fund balances and changes in financial position for the years then ended. Our examinations were made in accordance with generally accepted auditing standards, and accordingly included such tests of the accounting records and such other auditing procedures as we considered necessary in the circumstances.

In our opinion, the statements mentioned above present fairly the assets, liabilities and fund balances of Southern Medical Association at September 30, 1976 and 1975 and the results of operations and changes in financial position for the years then ended in conformity with generally accepted accounting principles applied on a consistent basis during the period.

Our examinations have been made primarily for the purpose of expressing an opinion on the financial statements, taken as a whole. The accompanying supplementary information is presented for supplementary analysis purposes and is not necessary for a fair presentation of the financial information referred to in the preceding paragraph. It has been subjected to the tests and other auditing procedures applied in the examinations of the financial statements mentioned above and, in our opinion, is fairly stated in all respects material in relation to the financial statements taken as a whole.

ARTHUR YOUNG & COMPANY

October 15, 1976

BUDGET
SOUTHERN MEDICAL ASSOCIATION
OCTOBER 1, 1976 - SEPTEMBER 30, 1977

ESTIMATED RECEIPTS:

ADVERTISING & EXHIBITS		
JOURNAL	\$375,000.00	
BULLETIN	48,000.00	
EXHIBITS (MIAMI BEACH MEETING)	<u>97,200.00</u>	
TOTAL ADVERTISING & EXHIBITS		\$ 520,200.00
DUES, SUBSCRIPTIONS & SALE REPRINTS		
DUES	\$575,000.00	
JOURNAL SUBSCRIPTIONS	10,000.00	
REPRINTS	<u>10,500.00</u>	
TOTAL DUES, SUBSCRIPTIONS & SALE REPRINTS		\$ 595,500.00
INTEREST & OTHER INCOME	\$140,000.00	\$ 140,000.00
TOTAL ESTIMATED RECEIPTS		\$1,255,700.00
ESTIMATED CASH, OCTOBER 1, 1976		\$ 50,000.00
TOTAL CASH FOR THE YEAR		\$1,305,700.00
APPROPRIATIONS:		
SALARIES & BENEFITS		\$ 331,960.00
OFFICE EXPENSES		142,750.00
PUBLICATION EXPENSES		494,500.00
OCCUPANCY EXPENSES		57,050.00
ASSOCIATED ACTIVITIES		153,060.00
SPECIAL ACTIVITIES		280,000.00
PROFESSIONAL SERVICES		<u>19,200.00</u>
TOTAL APPROPRIATIONS		\$1,478,520.00
DEFICIT		\$ (172,820.00)

NOTE: It is obvious that an increase in annual dues is mandatory if current programs are continued or expanded and/or new programs instituted. Any dues increase approved would be effective January 1, 1977, affecting approximately $\frac{3}{4}$ of the membership for $\frac{3}{4}$ of the fiscal year. On this basis, assuming annual dues of \$50, estimated receipts would be \$1,593,095.00, leaving after appropriations, a contingency fund of \$114,575.00 rather than a deficit of \$172,820.00

SOUTHERN MEDICAL ASSOCIATION
STATEMENTS OF ASSETS, LIABILITIES AND FUND BALANCES

September 30, 1976 and 1975

OPERATING FUND

Assets

	1976	1975
Current assets:		
Cash	\$ 10,563	\$ 112,528
Accounts receivable	86,046	84,060
Loans receivable due within one year	—	—
Prepaid expenses and deposits	63,345	65,785
Total current assets	159,954	262,373
Investments and other assets:		
Investments	806,401	839,340
Cash value of life insurance	36,207	31,897
Loan receivable due after one year	—	—
Total investments and other assets	842,608	871,237
Net property, plant and equipment	—	—
	<u>\$1,002,562</u>	<u>\$1,133,610</u>

Liabilities and Fund Balances

Current liabilities:		
Accounts payable	\$ 95,721	\$ 111,068
Annual meeting deposits	76,250	81,450
Unearned dues	268,314	261,065
Total current liabilities	440,285	453,583
Fund balances	562,277	680,027
	<u>\$1,002,562</u>	<u>\$1,133,610</u>

LIFE MEMBERSHIP FUND

Assets

	1976	1975
Current assets:		
Cash	\$ —	\$ —
Accounts receivable	3,416	1,032
Loans receivable due within one year	—	—
Prepaid expenses and deposits	—	—
Total current assets	3,416	1,032
Investments and other assets:		
Investments	199,582	201,276
Cash value of life insurance	—	—
Loans receivable due after one year	—	—
Total investments and other assets	199,582	201,276
Net property, plant and equipment	—	—
	<u>\$202,998</u>	<u>\$202,308</u>

Liabilities and Fund Balances

Current liabilities:		
Accounts payable	\$ —	\$ —
Annual meeting deposits	—	—
Unearned dues	—	—
Total current liabilities	—	—
Fund balances	202,998	202,308
	<u>\$202,998</u>	<u>\$202,308</u>

PLANT FUND

Assets

	1976	1975
Current assets:		
Cash	\$ 92,835	\$ 44,994
Accounts receivable	—	—
Loans receivable due within one year	—	—
Prepaid expenses and deposits	—	—
Total current assets	92,835	44,994
Investments and other assets:		
Investments	218,822	236,466
Cash value of life insurance	—	—
Loans receivable due after one year	—	—
Total investments and other assets	218,822	236,466
Net property, plant and equipment	257,808	260,039
	<u>\$569,465</u>	<u>\$541,499</u>

Liabilities and Fund Balances

Current liabilities:		
Accounts payable	\$ —	\$ —
Annual meeting deposits	—	—
Unearned dues	—	—
Total current liabilities	—	—
Fund balances	569,465	541,499
	<u>\$569,465</u>	<u>\$541,499</u>

GRANTS AND LOANS FUND

Assets

	1976	1975
Current assets:		
Cash	\$139,656	\$ 36,396
Accounts receivable	—	—
Loans receivable due within one year	76,744	60,438
Prepaid expenses and deposits	—	—
Total current assets	216,400	96,834
Investments and other assets:		
Investments	318,132	106,318
Cash value of life insurance	—	—
Loans receivable due after one year	52,100	53,879
Total investments and other assets	370,232	160,197
Net property, plant and equipment	—	—
	<u>\$586,632</u>	<u>\$257,031</u>

Liabilities and Fund Balances

Current liabilities:		
Accounts payable	\$ —	\$ —
Annual meeting deposits	—	—
Unearned dues	—	—
Total current liabilities	—	—
Fund balances	586,632	257,031
	<u>\$586,632</u>	<u>\$257,031</u>

INSURANCE FUND

Assets

	1976	1975
Current assets:		
Cash	\$ —	\$ 29,303
Accounts receivable	—	—
Loans receivable due within one year	—	—
Prepaid expenses and deposits	—	—
Total current assets	—	29,303
Investments and other assets:		
Investments	—	153,810
Cash value of life insurance	—	—
Loans receivable due after one year	—	—
Total investments and other assets	—	153,810
Net property, plant and equipment	—	—
	<u>\$ —</u>	<u>\$183,113</u>

Liabilities and Fund Balances

Current liabilities:		
Accounts payable	\$ —	\$ —
Annual meeting deposits	—	—
Unearned dues	—	—
Total current liabilities	—	—
Fund balances	—	183,113
	<u>\$ —</u>	<u>\$183,113</u>

SOUTHERN MEDICAL ASSOCIATION

NOTES TO FINANCIAL STATEMENTS

September 30, 1976 and 1975

1. Accounting policies—continued

Income taxes

The Association qualifies as a tax exempt organization under Section 501 (c)(3) of the Internal Revenue Code. Accordingly, no provision for income taxes has been made.

2. Investments

The quoted market values of investments at September 30, 1976 and 1975 were as follows:

Fund	1976	1975
Operating	\$755,000	\$702,000
Life Membership	193,000	193,000
Plant	219,000	236,000
Grants and Loans	318,000	106,000
Insurance	—	154,000

3. Property, plant and equipment

Property, plant and equipment, at cost, consists of the following:

	1976	1975
Land	\$ 93,853	\$ 93,853
Building and improvements ...	191,706	191,706
Furniture and equipment	131,951	125,500
Automobiles	15,838	14,337
	<u>433,348</u>	<u>425,396</u>
Less accumulated depreciation	175,540	165,357
Net property, plant and equipment	<u>\$257,808</u>	<u>\$260,039</u>

4. Reimbursable expenditures

The Association functions as a subcontractor under a fixed cost reimbursement type contract for a program ("Dial Access") funded by the United States National Institute of Health. Also, the Association is reimbursed for certain promotional expenditures related to the insurance programs for members. The expenditures under these programs are reflected in the financial statements net of the related reimbursements of approximately \$26,000 in 1976 and \$47,000 in 1975.

5. Insurance fund

In 1976, the Association's Executive Committee of the Council provided for the annual transfer of funds in the Insurance Fund to the Grants and Loans Fund and it is the intention of management to terminate the Insurance Fund in fiscal year 1977.

REPORT OF THE EDITOR

Harris D. Riley, Jr.

Southern Medical Journal

This report covers the editorial year October 1, 1975 through September 30, 1976.

In last year's report it was pointed out that attention would be given during the 1975-76 year to house officers at hospitals in the Association's geographic region. The Editor wrote to the dean of each medical school in the Association's geographic area and requested a list of house officers at hospitals affiliated with that school of medicine, as well as a list of medical students in all four classes. The response from the deans of the several schools was highly favorable. A complimentary issue of the *Journal* accompanied by a covering letter from the Editor which included an invitation to the house officer to begin his own subscription to the *Journal* were sent to approximately 5,000 house officers at hospitals affiliated with selected medical schools. Of this number, more than 500 house officers initiated their own subscription to the *Journal*. The reports received from deans of medical schools, directors of medical education and hospital administrators about this project were generally complimentary.

Attention has continued to be focused on involvement of medical students in the activities of the *Journal*. At the 1975 annual meeting of the Association, the Editor met with student representatives, reviewed various aspects of the *Journal*, and invited student participation. Several manuscripts authored by students have been received since that time.

James W. Felch, Ph.D., Vanderbilt University School of Medicine, was elected by the student representatives to the medical student position on the Editorial Board. All of the student representatives who attended the annual meeting were sent a questionnaire by the Editor for suggestions for making the *Journal* more attractive to students; involvement was also solicited. Student representatives at several medical schools circulated or posted information for their colleagues about the *Journal*, *Southern Medicine*, and the Association.

In 1972, 1973, and 1974, complimentary issues of the *Journal* were sent to second and third year medical students at selected schools of medicine. During the 1975-76 year a different program for students was undertaken. In the above mentioned letter from the Editor to the deans, an invitation was extended to make available to students access, without charge, to the SMA Cancer Information Service. The responses from the deans to this project was also gratifying. A Dial Access brochure with a new cover specially designed for medical students was sent to approximately 8,200 students at various schools of medicine. More than 800 students used the "filler" card contained in the Dial Access brochure to start their own subscription to the *Journal*.

As mentioned above, the response of medical school and hospital administrative officials to these projects have been most complimentary. The Business Manager of the *Journal* considers these efforts as highly successful. The yield contrasts graphically with efforts made in the past to have physicians in practice initiate new subscriptions to the *Journal*.

In the 1976-77 year it is planned to further expand these activities. Medical students in all four classes in all of the schools in the Association's geographic region will be sent not only several complimentary issues of the *Journal* with an invitation to begin their own subscription but also Dial Access brochures with an invitation to participate in the Cancer Information Service without charge. In addition, all house officers in the Association's region (rather than only a selected sample as was done in 1975-76) will be sent complimentary issues of the *Journal* with an invitation to begin their own subscription.

It is hoped that during the forthcoming editorial year, after discussion with the Council and Officers, an organized effort can be made to encourage participation by faculty members, particularly those at a junior level, and by younger physicians entering practice in the activities of the *Journal* and in the Association.

Among the most significant developments concerning the *Journal* during the 1975-76 editorial year have undoubtedly been: (1) the very substantial progress made in the reduction in the backlog of accepted manuscripts on hand in the Publications Office and the diminution in delay in publication; and (2) the initiation of a new method of printing the *Journal* text including the adoption of a new page format.

Basically, the backlog and resulting delay in publication resulted from the fact that the *Journal* went from barely enough acceptable material on hand for the next and subsequent issues to an overabundance of publishable material at the Publications Office. A multifaceted approach to the problem was initiated. This included several fundamental measures: (1) reducing or eliminating certain material which had been published previously, (2) adding additional pages to the *Journal*, (3) adoption of a new page format which provides additional textual space along with better utilization of unused space, (4) increasing the capacity of the Publications Office to process manuscripts by engaging additional staff, and (5) instituting certain changes in the logistics of handling papers in the Editor's office (requesting three copies of the manuscript from authors, etc.) and between that office and the Publications Office.

The details involved in these various steps will be reviewed with the Council and with the Editorial Board. However, it is pertinent here to outline the most important features of the new *Journal* format.

The new style which was initiated partly in January 1976, and completely in February 1976, included a new page format. The size of the page was enlarged from 7.75 x 10.25 inches to 8.25 x 10.88 inches. The new format was designed to conserve space by (1) reducing the size of the type used for titles, (2) setting type in wider columns, (3) setting Abstracts in single rather than double column and (4) omitting the "running head" from the top of the page. These changes accommodate some 20% more text per page. The new method for handling manuscripts makes it possible for the author to be provided with a typescript of his paper before the article is set in type and has eliminated the need for galley proofs.

The new page format provides approximately 1,200 words to the page in contrast with the old method, which permitted less than 900 words per page. The new format has also effected substantial space savings for Abstracts, legends for tables and illustrations and other portions. All told, more than one-third additional textual material is permissible in each issue since the new format was adopted.

These various steps have been successful in achieving significant progress toward these two objectives. The period from acceptance to publication of a primary article, case report or clinical brief has been reduced to an average of approximately five months at the present (September 1976). The number of manuscripts in the Publications Office awaiting copy-editing has been reduced from almost 350 in September 1975, to 130 at the present. A substantial increase in the amount of text per page and in the number of pages in each issue has been accomplished.

Because of the backlog in accepted manuscripts as described at the November 1975 meeting of the Council, a temporary halt on solicitation of articles for the various special articles series — Review Articles, Current Concepts, Special Articles, Special Features and others — was implemented. Despite this, the *Journal* continues to receive favorable comment about articles in these categories. An interesting development has been the increasing number of manuscripts submitted by authors with the request that they be considered for one of the categories of special articles. With the reduction in backlog of accepted manuscripts, steps have been reinitiated to increase the number of articles for the special articles series. Special feature, which contains several types of articles including Eponyms, Clinical Pathologic Conferences, Radiology Page and others, continues to be popular. Dr. Bruce Schoenberg, head of the section on epidemiology of the National Institute of Neurological and Communicative Disorders and Stroke and his wife, Devera, have contributed several pieces for Eponyms.

The practice of submitting all submitted or program papers to referees has continued. All manuscripts in these categories are submitted to at least one reviewer, and the majority to more than one.

Again, a list of reviewers who evaluated manuscripts for the *Journal* during the 1974-75 editorial year was published along with an acknowledgement note from the Editor.

Members of the Editorial Board have continued to provide critical review of papers submitted to them and several have submitted editorials. During 1975-76 sixty (60) manuscripts were reviewed by the Editorial Board, Assistant Editors, or Advisory Editors. On several occasions members of the Advisory Board have been called upon to review manuscripts in their particular field. The Editor is also appreciative of the evaluation of manuscripts provided by several members of the Council and of the Publications Committee.

The Publications Committee has also been helpful to the *Journal* in several ways.

In previous reports I stated that I hoped that the "Comments From Readers" section could be expanded. I am pleased to report further progress for this section of the *Journal* and substantially more Letters to the Editor have been received. In August 1976, the title of this section was changed from "Comments from Readers" to "Letters to the Editor" and revised instructions enlarging the scope of contributions to this section published. It is pertinent to reproduce here these revised instructions:

Letters to the Editor are welcomed. They may report new clinical or laboratory observations and new developments in medical care or may contain comments on recent contents of the *Journal*. They will be published, if found suitable, as space permits. Like other material submitted for publication, Letters must be typewritten in double spacing, submitted in triplicate, and must not exceed two typed pages in length. No more than five references and one figure or table may be used. See "Information for Authors" in this issue for format of references, tables and figures. Editing, possible abridgment and acceptance remain the prerogative of the Editors.

Again, I would invite members of the Association, as well as the general readership, to submit Letters to the Editor about articles, particularly those that might be considered controversial as well as letters on other topics.

Continued progress has been made regarding "cleaning up" the lag of manuscripts which the *Journal* has received in the field of orthopedics dating back to 1970 but which had not been returned to the Editor or to the Publications Office for reasons with which the Council is aware.

On January 1, 1976, Addison B. Scoville, Jr., M.D., formerly a member of the Editorial Board, began duties as an Assistant Editor. Dr. Scoville has also been named Assistant Editor of *Southern Medicine* to assist Dr. Kampmeier with that publication. Dr. Scoville has performed excellent service as a member of the Editorial Board and during the time as Assistant Editor has been of the very greatest assistance to the *Journal*.

Two new members were added to the Editorial Board of the *Journal*. As mentioned previously, James W. Felch, Ph.D., medical student at Vanderbilt University, was elected by the medical student representatives attending the 1975 annual meeting as the medical student representative on the Board. J. Graham Smith, Jr., M.D., Professor and Chairman, Department of Dermatology, Medical College of Georgia, Augusta, Ga., was added to the Editorial Board representing the field of dermatology and replacing Robert N. Buchanan, M.D., whose term expired. Dr. Smith is well-known in his field and will bring further recognition to the *Journal*. I use this opportunity to express particular appreciation for the contributions of Dr. Buchanan. He has faithfully served many years as a member of the Editorial Board beginning with Dr. Kampmeier's tenure and has performed outstanding service to the *Journal* in countless ways. His stature in his specialty field has attracted many excellent papers and his presence on the

Editorial Board has enhanced the prestige of the *Journal*.

Editorial statistics for the 12 month period October 1, 1975, through September 30, 1976, are shown in Tables 1, 1(a), 2 and 3 & 3(a). As shown in Table 1, during the 12 month period a total of 564 manuscripts were received. This figure is comprised of 410 submitted papers, 125 program papers, and 30 "other" types of papers (Review Articles, Current Concepts, etc.). This includes only manuscripts received during the 12 month period beginning October 1, 1975, and does not include the 29 manuscripts originally received in 1972-73, the 20 manuscripts received in 1973-74, and the 166 manuscripts received in 1974-75, which were returned from the author after September 30, 1975. This total of 215 manuscripts initially received in previous editorial years represents manuscripts which could not be processed until after September 30, 1975, because they were undergoing revision by author or for other reasons.

The 564 papers received during the 12 month period of 1975-76 editorial year exceeds by 77 (16%), the number received during the 1974-75 editorial year. The number of papers received during the 1975-76 editorial year is almost twice the average number (299) of total papers received annually during the 10 year period beginning in 1962. Moreover, of the total of 564 papers received during the editorial year, 410 were of the submitted (as contrasted to program) variety. This is substantially more than the 339 received during the previous editorial year and is more than four times the average number of submitted manuscripts received annually over the 10 year period beginning 1962. The increase in number of manuscripts received is even more significant when it is realized that because of the existing publication lag only very few articles were solicited during the 1975-76 year. As noted in Table 1, only 30 articles (many of which had been solicited some time earlier) were received during the year, as compared to 33 in the previous editorial year and 103 during the 1973-74 year. However, it is important to note that an increasing number of authors are spontaneously submitting articles for the various Special Article series requesting that they be published in that category.

At the 1975 annual meeting, 289 papers were listed as being presented. Of this number 124 (43%) were actually turned in to Section Secretaries or the *Journal*. While this represents a slight increase in the number of program papers received over the previous year, additional steps should be taken to obtain manuscripts from essayists at the annual meeting. This is true because of the increased space now available in the *Journal*, the decrease in publication backlog, the enhanced capacity of handling manuscripts by the Publication Office, and for other reasons. Included in the mailing to program participants for the 1976 annual meeting was a memorandum from the Editor advising participants of the proper format for manuscripts. It is hoped that Section Secretaries will make an increased effort to have program participants turn in manuscripts for consideration of publication by the *Journal*.

The number of papers received from outside the Southern Medical Association territory continued to increase. Manuscripts were received from all states, except 11. Of the total of 564 papers received during 1975-76, 456 or 81% were received from the 17 states comprising the territory of the SMA. This compares to 87% in the previous year. In addition, 11 manuscripts were received from foreign countries as follows: 1, Iran; 1, Japan; 1, France; 2, Israel; 1, Brazil; 2, England; 1, Jamaica; and 2, Canada. This compares to six during the previous editorial year. Two papers from a panel composed of authors from several different states and countries are not included in this breakdown. Thus, of the 564 manuscripts received during the year, 108, or 19%, of the total were from states outside of the SMA territory or from foreign countries.

A total of 366 manuscripts was accepted for publication during the editorial year. This is made up of 250 submitted, 83 program and 33 papers in the "other" category. The accepted papers include 100 submitted, 14 program, and 6 "other" papers initially received prior to September 1, 1975, but on which a decision could not be made until after September 30, 1975, because of various reasons, chief of which is the delay in receipt of

authors' revisions or of additional materials (illustrations, etc.) from the author.

As shown in Table 1, 66% of the submitted and 72% of the program papers were accepted. The overall acceptance rate for program and submitted papers was 68%. The decrease in the acceptance rate from that of the previous year is due to a variety of reasons. Because of the backlog of papers on hand in the Publications Office, members of the Editorial Board and Assistant and Advisory Editors were advised during the 1975 meeting of the Editorial Board and subsequently to be more discriminating in their evaluation of papers, recommending use of scientific material only of high calibre and of greatest interest to the readership. The office of the Editor has been increasingly sensitive to this matter. Manuscripts with low priority rankings have been re-evaluated by additional referees and by members of the Editorial Board. The majority of articles in the various special articles series was solicited, were prepared by prominent workers in various fields, and, as would be expected, were acceptable for publication. Thus, solicited articles are not included in the overall acceptance statistics.

Of the 333 papers accepted (excluding those in the "other" category) the vast majority were returned to the author for one or more revisions. Only 35 authors declined to undertake revision.

During the editorial year, five papers were transferred to **Southern Medicine**. There are also several manuscripts from the 1975-76 editorial year on which a decision is being awaited from the author about transfer to **Southern Medicine**.

As of September 30, 1976, there were 257 papers in process. This includes 204 submitted, 49 program (30 from the 1975 annual meeting) and four papers in the "other" category. Of the 30 papers from the 1975 meeting, three are out to reviewer, 21 are in the authors' hands for revision, one is being re-evaluated in the Editor's office, and five are awaiting additional manuscript data from the author. Of the 174 submitted papers received initially in 1975-76, 81 are at the authors' awaiting revision, 65 are out to reviewer, and 28 are in the Editor's office pending acceptance or rejection.

During the editorial year a total of 463 manuscripts was published. This does not include the following items: 55 book reviews, special announcements classified as text, such as the SMA Cancer Information Center, residency training loans and research projects and other items of this nature. This is substantially more (130) than the 333 published in the previous editorial year. It is pertinent to point out that most of the increase in number of published manuscripts occurred after initiation of the new format of the **Journal** text beginning in January 1976.

The 463 papers published included the following: 250 Primary Articles, 95 Case Reports, 7 Clinical Briefs, 13 Review Articles, 24 Current Concepts, 3 Grand Rounds, 5 Special Articles, 10 Special Features, 24 Letters to the Editor, 26 Editorials, and 6 Commentaries. Seventeen articles which were published in the special article category were initially submitted as regular articles, but because of the nature of content were transferred to one of the Special Article categories, as follows: 7 Current Concepts, 6 Review Articles, and 4 Special Articles. The 1,671 pages of text published during the 1975-76 year was 91 more than was published during the previous year, a 6% increase over the 1,580 pages published during that year.

During the 1975-76 year a total of 26 Editorials appeared, seven of which were contributed by the Editors, and three by members of the Editorial Board. Many of the other Editorials were contributed by nationally-known leaders in their respective fields which, of course, represents a compliment for the **Journal**.

During the same period, six Commentaries, editorial-type comments dealing with an article of particular interest appearing in the same issue, were published. Of these, two were by the Editors and one by a member of the Editorial Board.

As mentioned previously, an attempt was made to stimulate interest in the Comments from Readers section which has been renamed "Letters to the Editor." During the year 24 Letters to the Editor appeared. This represents a substantial increase over the six which appeared last year.

Sixty-two book reviews, an increase of 49 over the previous year, were published during 1975-76.

Comparative statistics by years, a distribution of the **Journal** by membership, and an analysis of papers published by content are shown in Tables 1(a), 2, and 3. As pointed out in last year's Editor's Report, a different method of classifying manuscripts by content was instituted by the Editor's office. Thus, the classification given in Table 3 is not entirely comparable to that presented in years prior to 1974-75, but can be compared to the statistics presented in the 1974-75 report. Table 3(a) is provided to compare total in previous years.

OTHERS: The **Journal** was listed as one of the major journals in a recent publication concerning medical journalism in this and other countries issued by Infotoc of the University of California, Berkeley.

As pointed out in last year's report, the **Journal** has been included as one of the 100 select journals referenced in the **Abridged Index Medicus** published by the National Library of Medicine. An increasing number of inquiries come to the office of the Editor due to this particular listing.

Recognition of the **Journal** nationally and internationally has continued to expand for a variety of reasons, some of which can be quantitated and others which are abstract, which will be reviewed with the Editorial Board and the Council.

Favorable comments have been received from a number of quarters about the **Journal** generally and specifically about a variety of items which appeared. The symposium on leprosy has attracted a considerable number of commendations. Faculty members of several medical schools have requested permission to reproduce articles in the special article categories, chiefly Review Articles and Current Concepts, for use by students as basic references. Communication has been received by the Editor from various authors, several of whom are nationally recognized, pointing out the large number of requests for reprints for their articles which appeared in the **Journal** is considerably more than the number received pertaining to papers which they have had published in other journals.

In January 1976, a revision of "Information for Authors" which appears in each issue of the **Journal** was published.

The section "Comments from Readers" has been retitled "Letters to the Editor" and the scope enlarged to allow publication of brief clinical and other reports in addition to letters commenting on material which has appeared in the **Journal**.

The Editor recommends to the Council approval of the appointment of Rafael C. Sanchez, M.D., Associate Dean for Continuing Education and Professor of Family Practice, Louisiana State University School of Medicine, New Orleans, La., to the Editorial Board. Dr. Sanchez will represent the field of Family Practice and replaces Stanley Hill, M.D., whose term on the Board expired. Dr. Sanchez will bring many ideas to the Board and to the **Journal**. Let me take this opportunity to express my appreciation for the many years of service and contributions which Dr. Hill has given to the **Journal**. Many of these contributions have been "behind the scenes" rather than in print but nonetheless important to the progress of the **Journal**.

I would like to express my thanks to Officers of the Association and members of the Council for their advice and support. I also express my appreciation to Dr. Kampmeier for his advice in many different ways. I also acknowledge the assistance of Dr. Stephenson and Dr. Scoville, Assistant Editors, and of the Editorial Board, of the Committee on Publications, and of the staffs in Birmingham and in Oklahoma City. I am also grateful for the help of many reviewers who have critically evaluated manuscripts.

READ AND APPROVED BY:

Harris D. Riley, Jr., Editor
Southern Medical Journal
November 6, 1976

ACTION:—Motion was made by Dr. Jones, seconded by Dr. Martin, and carried, that the Report of the Editor, **Southern Medical Journal**, be approved, including the appointment of Drs. Sanchez and Smith to the Editorial Board.

TABLE 1*

	Submitted Papers	Program Papers	Others**	TOTAL
Number Listed as Read		298		289
Number Received (1)	410	124	30	564
Accepted (2)(3)				
Number	250	83	33	366
Percentage	66%	72%	100%	
Rejected(2)(4)(5)				
Number	124	32	0	156
Percentage	34%	28%		
Transferred to Southern Medicine	3	2	0	5
Number in Process (6)	204	49	4	257
Published: Number of papers	218	102	143***	463
Number of pages				1671

*All statistics are for period October 1, 1975—September 30, 1976

**Includes Editorials, Current Concepts, Review Articles, Special Articles, Grand Rounds, Special Features, Commentaries and other such articles.

***Does not include Book Reviews, but does include Letters to the Editor.

- Includes only manuscripts received in 1975-1976 editorial year and does not include the 29 manuscripts originally received in 1972-1973 or the 20 manuscripts received in 1973-1974 or the 166 manuscripts received in 1974-75 which were returned from author after September 30, 1975.
- Excludes papers in process, and those transferred to SOUTHERN MEDICINE (through September 30, 1976).
- The total of 366 includes the following:
 - 1 submitted, 2 program papers originally received during the 1972-73 editorial year, 4 submitted, 1 program and 2 "other" papers originally received during the 1973-74 editorial year, and 95 submitted, 11 program and 4 "other" papers originally received during the 1974-75 editorial year, but on which, because of author's revision and other reasons, a decision could not be made until after September 30, 1975.
 - 150 submitted, 69 program and 26 "other" papers for the 1975-76 editorial year.
- The total of 156 includes the following:
 - 2 submitted papers originally received during the 1972-73 editorial year, 4 submitted and 4 program papers originally received during the 1973-74 editorial year, and 25 submitted and 1 program paper originally received during the 1974-1975 editorial year but which were not returned from author until after September 30, 1975, when a decision was made.
 - 68 submitted, 17 program papers for the 1975-76 editorial year.
- This includes 35 papers returned to author for revision but author chose not to resubmit.
 - 1973-1974: 2 (1 submitted and 1 program)
 - 1974-1975: 6 (3 submitted and 3 program)
 - 1975-1976: 27 (21 submitted and 6 program)
- This includes 13 submitted and 10 program papers from the 1972-1973 year, 3 submitted and 1 program papers from 1973-1974 year, 17 submitted and 8 program papers from the 1974-75 year and 171 submitted, 30 program and 4 "other" papers from the 1975-76 editorial year.

TABLE 1 (A)
COMPARATIVE STATISTICS

	1972-73	1973-74	1974-75	1975-76
Papers Received				
Submitted	277	356	339	410
Program	159	119	115	124
Others	55	103	33	30
Total	491	578	487	564
Accepted*				
Submitted	108 (70%)	245 (80%)	249 (75%)	250 (66%)
Program	86 (83%)	105 (81%)	83 (75%)	83 (72%)
Total	194 (76%)	350 (80%)	332 (75%)	333 (68%)
Rejected*				
Submitted	45 (30%)	61 (20%)	81 (25%)	124 (34%)
Program	17 (17%)	25 (19%)	26 (25%)	32 (28%)
Total	62 (24%)	86 (20%)	107 (25%)	156 (32%)
Number in Process	191	207	197	257
Published				
Submitted	218	191	168	218
Program	65	73	85	102
Other	36	59	80	143
Total	312	323	333	463

*Includes only submitted and program papers.

**TABLE 2 — MEMBERS WHO RECEIVED THE SEPTEMBER
1976 ISSUE OF THE SOUTHERN MEDICAL JOURNAL**

Specialty	Number	Specialty	Number
Allergy	94	Pediatrics	801
Anesthesiology	556	Physical Medicine (PMR)	76
Dermatology	556	Plastic Surgery (Pl.)	205
Gastroenterology	94	Preventive Medicine (PH,OM,PM)	92
General Practice	3955	Proctology	84
Gynecology	28	Radiology	953
Industrial Medicine & Surgery	49	Surgery	2745
Internal Medicine	2752	Urology	663
Neurology & Psychiatry (PN)	176	Obstetrics & Gynecology	1740
Obstetrics	63	Psychiatry	618
Ophthalmology (EENT)	716	Neurosurgery	254
Orthopedic Surgery (ORS)	1223	Others	3169
Otolaryngology (ALR-OALR)	619		
Pathology	513	TOTAL	22,756

TABLE 3. CLASSIFICATION BY CONTENT OF PAPERS PUBLISHED IN 1975-1976

CLASSIFICATION	TOTAL	CLASSIFICATION	TOTAL
ALLERGY	3	PEDIATRICS	33
ANESTHESIOLOGY	13	PHYSICAL MEDICINE & REHABILITATION ..	1
CARDIOLOGY*	5	PLASTIC & RECONSTRUCTIVE SURGERY...	10
DERMATOLOGY	14	PREVENTIVE MEDICINE & PUBLIC HEALTH ..	23
GASTROENTEROLOGY	18	PROCTOLOGY, COLON & RECTAL	
GENERAL PRACTICE	1	SURGERY	0
GYNECOLOGY	8	PSYCHIATRY	9
IMMUNOLOGY*	6	RADIOLOGY	15
INDUSTRIAL MEDICINE & SURGERY	0	SURGERY	45
INFECTIOUS DISEASE*	18	THERAPEUTICS & CLINICAL	
INTERNAL MEDICINE	37	PHARMACOLOGY	15
MEDICAL DIAGNOSIS AND CARE	1	UROLOGY	15
MEDICAL HISTORY	2	OTHER:	
MEDICAL PRACTICE	1	ABSTRACTS	0
MEDICAL EDUCATION	2	BOOK REVIEWS	62
NEUROLOGY	7	COMMENTS FROM READERS	24
NEUROSURGERY	7	EDITOR'S NOTE	3
NUTRITION & METABOLISM	4	GRAND ROUNDS	3
OBSTETRICS	16	MISCELLANEOUS	10
ONCOLOGY	10	SPECIAL FEATURE	9
OPHTHALMOLOGY	9		
ORTHOPEDICS	33		
OTORHINOLARYNGOLOGY	13		
PATHOLOGY	20		

*New classification, 1975-76

TABLE 3 (A) — PAPERS PUBLISHED (Publication Year)*

Specialty	1964	1965	1966	1967	1968	1969	1970	1971	1972	1973	1974	1974-75	1975-76
Allergy	9	9	7	6	7	3	3	4	3	4	1	3	3
Anesthesiology	8	7	8	8	13	10	14	12	16	10	7	11	13
Dermatology	13	17	17	3	12	20	7	13	8	8	16	12	14
Gastroenterology	12	8	6	4	8	1	9	8	5	9	6	8	18
General Practice	3	9	18	4	1	6	6	4	2	3	1	0	8
Gynecology	8	19	12	10	10	14	9	9	6	6	1	1	8
Industrial Medicine and Surgery	1	3	3	4	3	3	3	3	1	0	1	0	0
Medicine	14	19	29	43	35	64	50	54	43	61	45	4	37
Neurology and Psychiatry	12	14	27	16	21	20	20	34	21	22	27	17	16
Obstetrics	8	10	6	5	6	15	15	16	8	9	8	3	16
Ophthalmology	13	28	20	12	13	15	20	16	8	7	11	10	9
Orthopedic and Traumatic Surgery	20	16	17	18	15	21	18	8	9	8	12	17	33
Otolaryngology	14	23	14	16	9	12	13	24	14	10	10	11	13
Pathology	8	15	10	12	9	10	14	8	8	23	17	9	20
Pediatrics	6	9	11	7	14	13	32	18	10	20	31	30	33
Physical Medicine and Rehabilitation	9	12	7	8	6	10	8	3	4	3	6	5	1
Plastic and Recon- structive Surgery	4	10	11	9	3	9	6	17	11	6	6	7	10
Preventive Medicine	7	11	5	4	7	1	6	5	6	0	17	9	23
Proctology	9	11	2	5	3	8	6	9	5	4	4	2	0
Radiology	10	4	11	12	10	8	15	16	17	9	17	21	15
Surgery	12	16	21	31	28	37	31	24	28	39	43	39	45
Urology	11	12	17	11	16	12	11	22	16	18	16	15	15
Grand Rounds (Medicine)	12	12	12	12	11	11	7(Med) 10(Surg)2	6	6	4	—	2	3
Miscellaneous (Ed.)	8	12	1	—	18	15	15	8	15	15	21	31	10
(Plus 7 Commentaries)													
Grand Rounds (Surgery)	—	—	—	—	—	—	—	—	1	—	2	—	—
Grand Rounds (Pediatric)	—	—	—	—	—	—	—	—	1	—	1	—	—
Totals	231	306	292	260	278	338	348	339	272	298	334	333	463

*Classification is not by Section, rather by content.

REPORT OF THE EDITOR

R. H. Kampmeier
Southern Medicine

The annual reports of the past several years, since separation of the editorship of **Southern Medicine** from that of the **Southern Medical Journal**, have pointed to the major purpose of this magazine, — to provide visibility to the SMA. Not only does it portray the Association as a scientific organization and one devoted to continuing education (now acceptable for Category I Credit) through its Annual Session and **Journal**, but also as an agency for permitting a very advantageous Insurance Program. Additionally, it is a constant reminder of the availability of Dial Access whose activities show an ever-expanding use in both the region of the SMA and other parts of the country. Thus, it is the hope that **Southern Medicine** will remind doctors of the

South every other month of the advantages of membership in the Association.

For this report, instead of describing in general terms the philosophy or thoughts which influence the selection of material to be published, it seemed you might have interest in a more tangible description of the magazine's content. This approach was prompted by a suggestion that **Southern Medicine** should include more articles directed to the business of practice and management of personal affairs, a comparison having been made with **Medical Economics**, the magazine that for years has devoted much space to these topics. Beginning with current issues of these two magazines and moving backward in order to mid-1971, I have categorized the content of all articles to obtain adequate numbers for comparison. (The numbers are disparate—**Medical Economics** (217) offering 25 issues annually, and **Southern Medicine** (147) six issues per year). The table shows the results of my categorization, applying the same subjective criteria to the articles and the nature of the classification. (I am sure, because of the breadth of the articles, two readers might classify them differently, but for this purpose it is not of moment.)

SUBJECT MATTER

	Med. Econ. (217) Percent	So. Med. (147)* Percent
1. Third party care (Federal, other)	7.37	4.75
2. Quality of Care (continuing education, relicensure, utilization, PSRO)	4.60	16.30
3. Patient-Doctor relationships (costs, malpractice)	22.11	15.60
4. Personal business (insurance, investments, IRS)	19.81	3.40
5. Societal (medicine on related to society)	12.44	21.00
6. Business of practice (in the office, legal)	15.20	8.16
7. Travel (vacation, meeting places)	5.52	2.70
8. Stories (nonmedical or historical)	12.90	24.40
9. Biographical sketches (SMA)	—	3.40

*The tabulation does not include 3 features which have been discontinued by limited pages—Lambert Award and Medicolegal Abstracts from **Citations**, which would fall into categories 1, 3 and 6, as well as the "25 to 50 years ago" abstracts.

The comparisons were anticipated and are quite satisfying to me. To be sure **Southern Medicine** is not a competitor with **Medical Economics** or **Physician's Management**, two throw-aways widely distributed, in the area of business,—personal or of practice. Nor does it anticipate an attempt to match **Division**, the throw-away on travel, nor **MD Medical News Magazine** with its excellent historical pieces. On the other hand, professionals are a very special segment of the nation's population in terms of understanding and interpretation of many of the national and international problems facing society. They make a very tangible contribution at community, city and country levels, and to members and committees of state legislatures. Thus, **Southern Medicine** is seen to 'weigh in' more heavily in topics on the quality of medical care and of a societal nature, nontechnical and thus not appropriate to, let us say, the **SMJ**. Such subject matter actually should expand under the pressures of coming developments in national health insurance and quality of medical care.

I regret that there has been a need to reduce the pages of **Southern Medicine** in the past year. Thereby we have lost what I had considered a most valuable PR asset, namely the abstracts from the **Journal** with the reproduction of its cover. Additionally, we have lost the '25 and 50 Years Ago' section, the latter reflecting the many active years of the Association and the "big names" of those appearing at its Annual Sessions and contributing to the **Journal**. Too, we have lost the two or three medicolegal reviews in each number selected from the **AMA Citation** because of their unusual implications.

Each year I have urged upon the Council that the pages of **Southern Medicine** be used by chairmen of committees to publicize their activities for the readers of the magazine. The lights have been kept under the proverbial bushel basket during the whole of last year. Not one report has been submitted. (Minimum of 60 days of lead time is necessary for any one issue.) We should publicize more, the annual session, postgraduate activities, aid to trainees and the Insurance Program.

In the discussion of my Report I have, for several years, spoken to a point included in last year's Report. This refers to the desirability of having **Southern Medicine** delivered to the doctors' home rather than office. More and more I am attracted by comments of doctors' wives, at social gatherings, concerning articles in **Southern Medicine** which have been of interest to them. It has been documented that women of some education are avid readers of news articles on science. (Attached my editorial, **SMJ** 1959.) If we consider the doctors' wives from among health professional, — nurses, social workers and technologists, the documented interest of 78% would be multiplied. The positive advantages of mailing **Southern Medicine** to the home seem to be several: — (1) It would eliminate the probable many copies that office personnel consign to the 'round file' along with other 'throw-away' mail as they separate "the wheat from the chaff" for their employer; (2) Doctors' wives, many as health professionals, enjoy the nontechnical articles of the book; (3) Wives do influence their husbands in society memberships; (4) Wives do influence attendance at meetings (Miami, New Orleans, etc.); (5) It is very probable that doctors find more leisurely time to thumb through **Southern Medicine** at home than during busy office hours. I wish the Council would consider this suggestion seriously, in spite of the expense and difficulties in setting up a mailing list. (Mailing lists might be assembled from Ladies Auxiliary lists of the state medical societies of the southern states.)

You may have noticed that the name of Dr. Addison B. Scoville, Jr., appears on the masthead. The biographical sketch in the October issue tells you of his attributes. His name was submitted to the Committee on Publications for approval early in the year, to meet the suggestion you of the Council made last year that I should have a 'backstop!' Though Dr. Scoville is still a busy internist, Dr. Riley can vouch for his ability to meet his obligations as Assistant Editor of the **SMJ**. His appointment will not require any of his time other than as a consultant to me

and the assurance to you of a "stand-by" editor to meet an emergency situation. I discussed this with Dr. Scoville, and he is in complete agreement with these circumstances.

Finally, I acknowledge the help Dr. Riley, as Editor of the *Journal*, has offered in referring to me papers not appropriate to the *Journal* as a scientific publication. Mr. Butts and Mr. Evans have continued to support my efforts. The ones to receive the greatest thanks are Ms. Vicki Hughes and her hand-maidens who get *Southern Medicine* into the mail six times each year.

I end with the fervid hope that the advertising famine will improve to permit a better nourished book by the re-establishment of certain PR features.

READ AND APPROVED BY:

R. H. Kampmeier, Editor

Southern Medicine

November 6, 1976

ACTION:—Motion was made, seconded, and passed, that the Report of the Editor of *Southern Medicine* be approved.

SUMMARY TABLE

Southern Medicine (last 12 numbers)

Month/Year	Total Pages	Ad Pages	SMJ Abst.
October 1974	77	7	+
December 1974	69	8	+
February 1975	77	4	+
April 1975	71	5	+
June 1975	71	8	+
August 1975	55	8	—
October 1975	47	8	—
December 1975	39	4	—
February 1976	38	4	—
April 1976	39	5	—
June 1976	38	4	—
August 1976	36	4	—

SCIENCE NEWS

We of the medical profession, who have lived as a doctor for at least 20 years or more, have been keenly aware of a loss of prestige when measured in terms of unquestioned authority, implicit faith and as a reservoir of knowledge of all things medical. From the era of the frock coat, the high hat and gold headed cane to a matter of a couple of decades ago the doctor's word usually was accepted as gospel, not only in things medical but also in many fields, scientific and educational. In the smaller communities he often was the epitome of the educated and the cultured person.

Many events have conspired to tumble the physician from this pedestal. We are well aware of the socio-economic factors as well as the political, as are pointed up so well by our activities in so-called organized medicine. There is another factor which is a natural one, not calculated on economic or political grounds. This item is the growing knowledge among the population of things scientific and medical. It is only natural, as mystery is replaced by understanding, that the intelligent person or patient becomes more objective, or at least, the emotional tie between doctor and patient becomes tinged by some degree of objectivity. The doctor is more carefully scrutinized by his patient in terms of newer knowledge, reaction to scientific progress, and its application in practice. Here may be some of the reasons why the patient changes doctors or goes to the neighboring city to consult a self-chosen "specialist."

A most instructive study has appeared as a Report of the National Association of Science Writers, Inc., which throws light on the interests of our population in science news. The survey was made under the financial support of the Rockefeller Foundation, with administrative aid by New York University. The Survey Research Center of the University of Michigan did the work. The technic used was "probability sampling." Roughly 2,000 American adults were interviewed, each for more than an hour. Science was defined in terms of discoveries in nature, whether in astronomy, atoms, the human body, or in a

motor. These topics were divided into "science news" and "medical news."

Picked on percentages, "the 'science reader' is at least a high school graduate. He is in his middle years. He lives in a Western or Middle Western community with a population of between 2,500 and 50,000, or in metropolitan suburbs. He is a white collar worker and earns approximately \$5,000 a year." He belongs to several organizations, reads two newspapers daily, subscribes to two or three magazines, listens to the radio an hour or more a day, watches television for a longer time, depending upon the latter media for entertainment and upon his paper and magazines for intellectual fare.

The survey indicated the source from which Americans get their science news. Of the total surveyed, 326 or 17% could recall nothing about science from whatever source during the previous year. Of the remainder, it appeared that the newspapers were the main source of science news, being the primary medium in 41 per cent. Television and magazines came next with 27 and 25% respectively. Radio was the source of news items recalled in only 4 per cent.

It was apparent from this survey that the more knowledge the respondent had on science items, the more media he used in obtaining information. Thus he probably used in addition to the newspapers and magazines the television and/or radio programs.

Women, concerned with the health of the family, read more of the medical news than men who were more interested in the non-medical science news. Of those who had attended high school, 30% of all males read the medical news and 55% of the women read these items. This degree of interest was less in those who did not go beyond the grade school. Having taken science courses in high school influenced the capacity to remember science news items. With no science courses in high school, 48% of high school graduates could answer three or four questions on science from reading; with exposure to science courses in high school this rose to 62%; and for those with both high school and college science courses recollection rose to 78 per cent.

There was shown to be a greater interest in science news and medical news in the West and Middle West, with less in the South and Northeast. The self-employed and those of better income levels, as might be anticipated from probable educational levels, showed greater interest in "medical" and "science" news.

The reading interest in 1957, the time of the study, revealed itself in knowledge of the Salk vaccine, heart disease, cancer, and somewhat in radioactivity as related to health. Many knew of the fluoridation of water supplies.

There is much more in the report of this survey which is interesting and instructive to the scientist and the doctor. It reveals certain facts with which we must reckon. A large segment of our population reads with interest science or medical news items in the newspapers and magazines, and watches programs on television which deal with such subject matter. Many are asking for more of such news at the expense of certain other items in the newspapers. Women particularly wish more medical news. Those with a high school education or more indicate in a goodly proportion a desire for more details in the science or medical news items.

The propaganda value of the newspaper has never been overlooked in the countries of dictatorship. Its impact in science and medical news is apparently very potent. The present-day patient has a nodding acquaintance with things medical. He will therefore look at this doctor more objectively, be more analytical of his methods and practice and will think less of him in terms of a seer or even an authority. Undoubtedly this reading knowledge of things medical is at least one factor influencing the patient-doctor relationship. No matter how much truth there may be in Alexander Pope's line that, "A little learning is a dang'rous thing, . . .," the intelligent reader patient in 1959 may well be a more questioning soul than the same intelligent patient, but less well read in things medical, of 1929.

This Article retyped from the April issue of the 1959 *Southern Medical Journal*.

1. Science, The News and the Public. New York, New York University Press, 1958

REPORTS OF STANDING COMMITTEES

COMMITTEE ON PUBLICATIONS

Edwin C. Evans, *Chairman*

Terry D. Allen

Mr. Robert F. Butts

George S. Ellis

Johnnie L. Gallemore, Jr.

R. H. Kampmeier

John B. Lynch

J. Ralph Meier

Ex Officio

Thomas B. Dameron, Jr.

G. Gordon McHardy

The **Southern Medical Journal** continues to be recognized as one of the superior general medical journals in the country.

Several changes in the **Journal**, as recommended by the Editor, have been accomplished. These include: (1) an additional sixteen pages per issue; (2) a new page format; (3) placing general news in previously unused space; and (4) elimination of publication of state news, etc. The publishing of the Preliminary Program of the annual meeting in the October issue of the **Journal** will also be eliminated this year in order to release more space for scientific publications. Implementation of measures such as these has diminished considerably the backlog of scientific papers which were causing a major problem because of long delays in publication.

It is presently projected that the number of pages in the **Journal** may be decreased by the end of this year by eliminating the previously added sixteen pages in each issue.

At the suggestion of Dr. Kampmeier, Dr. Addison Scoville of Nashville was appointed Assistant Editor of **Southern Medicine** in the spring of 1976.

The cost of both publications continues to increase. The size of **Southern Medicine** has been diminished to offset some of the publication costs.

The Committee continues to work closely with the Chairman of the Council, with the Editors and with the Executive staff to maintain the high standards of our excellent publications and to make improvements wherever possible within the limits of reasonable cost.

INTERIM REPORT OF THE COMMITTEE ON PUBLICATIONS

The Committee on Publications of the Southern Medical Association met on Friday, November 5, 1976, Marriott Motor Hotel, Galvez Room. The meeting was called to order at 2:15 p.m. by the Chairman, Dr. Evans.

Members of the Committee present: Edwin C. Evans, Chairman, Atlanta, Ga.; R. H. Kampmeier, Nashville, Tenn.; John B. Lynch, Nashville, Tenn.; J. Ralph Meier, New Orleans, La.; Harris D. Riley, Jr., Oklahoma City, Okla.; Thomas B. Dameron, Jr., ex officio, Raleigh, N.C.; and the following SMA staff member from Birmingham, Ala.: Mr. Roy B. Evans, Jr., Assistant Executive Director.

Members of the Committee absent: Terry D. Allen, Dallas, Texas; Mr. Robert F. Butts, Birmingham, Ala.; George S. Ellis, New Orleans, La.; Johnnie L. Gallemore, Jr., Washington, D.C.; M. Pinson Neal, Jr., Richmond, Va.; Sam E. Stephenson, Jr., Jacksonville, Fla.

REPORT OF THE EDITOR, SMJ

Harris D. Riley, Jr.

Dr. Riley reviewed his report as Editor of the **Southern Medical Journal**, and financial considerations connected with the **Journal**. It was generally agreed in discussing the financial considerations that the number of signatures would depend upon the financial stability of the Association.

BUDGET OF THE EDITOR

Dr. Evans requested that Dr. Riley give the Committee on Publications a Budget. Dr. Riley explained that he needed six months' experience before he could submit a budget. However, Dr. Riley proposed to have a budget to submit to the Executive Committee of the Council at its Midwinter Meeting.

REPORT OF THE EDITOR

Southern Medicine

R. H. Kampmeier

Dr. Kampmeier briefly reviewed his report, as Editor of **Southern Medicine**. He stated that **Southern Medicine** was not being used to the fullest to publicize the activities of the SMA. He expressed a desire to institute a "President's Page." He also discussed the possibility of sending **Southern Medicine** to the physician's home.

ACTION:—Dr. Meier moved that the SMA headquarters office cooperate with Dr. Kampmeier in exploring ways of securing a listing of physician's home addresses. Dr. Lynch seconded the motion and it carried.

RECOMMENDATIONS TO THE COUNCIL BY THE COMMITTEE ON PUBLICATIONS

Recommendation No. 1

The Committee on Publications recommends to the Council that Dr. Riley be commended on his excellent job as Editor of **Southern Medical Journal**.

READ AND APPROVED BY:

Edwin C. Evans, Chairman

Committee on Publications

November 6, 1976

Following the presentation of the Interim Report of the Committee on Publications, the subject of the backlog of pages was brought up for discussion. Dr. Evans pointed out that even with the new format of the **Journal** and omission of various items, such as "white spaces," there is still a considerable backlog. The Council and Editor considered whether or not the **Journal** should continue to publish nine signatures, as authorized by the Executive Committee of the Council (Refer to PROCEEDINGS OF THE EXECUTIVE COMMITTEE OF THE COUNCIL, Birmingham, Ala., January 25, 1975, NEW BUSINESS, Item No. 2, REPORT OF THE EDITOR, ACTION), or return to the original eight signatures. Even if the **SMJ** returns to its original eight signatures, there will be a need to add additional personnel to the SMA staff. With eight signatures at the present format, there is actually 33% more text published than at the old format.

ACTION:—Dr. Evans moved the publication of eight signatures in the **Southern Medical Journal**, beginning whenever feasible. Dr. Polk seconded the motion and it carried.

ACTION:—Motion was made by Dr. Judge, seconded by Dr. Neal, and passed, that the SMA add additional personnel to the Journal Department to more efficiently handle the increased work load.

RECOMMENDATION TO THE COUNCIL BY THE COMMITTEE ON PUBLICATIONS

Recommendation No. 1

The Committee on Publications recommends to the Council that Dr. Riley be commended on his excellent job as Editor of the **Southern Medical Journal**.

ACTION:—It was moved, seconded, and carried that Recommendation No. 1 from the Committee on Publications to the Council be approved.

COMMITTEE ON CONSTITUTION AND BYLAWS

James E. White, *Chairman*
James Y. Griggs
D. Joseph Judge
W. Reams Perkins
William W. Vallotton

Ex Officio

Thomas B. Dameron, Jr.
G. Gordon McHardy

The Committee on Constitution and Bylaws met on Saturday, November 6, 1976, Marriott Motor Hotel, Chartres Room. It was after that meeting that the following report was submitted to the Council for review and action.

PROBLEMS:

Section Secretaries are having some difficulty in general organization and annual program evaluation and development. It is felt that some of this problem is due to the inability in a one-year term of office to become adequately acquainted with the goals and organizational development. One other frequently occurring problem is that the Section Secretaries are frequently not receiving names of Guest Speakers from the Section Chairman early enough for consideration in the Section Secretaries Conference and correlation with other Sections.

There is no formal provision in the Constitution and Bylaws for the scientific Section's Steering or Executive Committee to aid in formulation of goals and development of Section activities.

There is some problem with long-term inactive scientific Sections, as well as the absence of any instrument or method of establishing new scientific Sections in either the Constitution or the Bylaws.

The Section on Otolaryngology has requested that their name be changed to Otolaryngology and Maxillofacial Surgery.

CONSIDERATIONS:

The Bylaws are more easily amended, added to, or changed than is the Constitution.

The Constitution provides that scientific Section officers shall be elected annually, and the specified officers are Chairman, Vice-Chairman, and Secretary. There is also provision for a Chairman-Elect at the individual Section's discretion.

The Bylaws specify the responsibilities of Section officers and in Section 10 of the Bylaws specifies a Chairman, Vice-Chairman, and Secretary. The Vice-Chairman actually has very little duties to perform and it would be relatively easy to utilize this office for organizational purposes such as an executive type secretary with previous experience.

The term of office of the Section officers cannot be changed without a Constitutional amendment; however, the duties of each officer can be prescribed by a change in the Bylaws.

RECOMMENDATIONS:

It could be established that a prerequisite for nomination and election to the office of Vice-Chairman be that this person had previously served as a Section Secretary. The duties of that office could be enlarged to provide that the Vice-Chairman would be responsible for arranging the scientific program in cooperation with the Chairman and the Section Secretary. He also could be responsible for selection of the official Guest Speaker and invitation, after consultation with the Chairman.

The Section Secretaries duties could be changed to reduce the amount of responsibilities and as far as the annual program is concerned, be assigned to directly

aid the Vice-Chairman. The Vice-Chairman, of course, would be the stipulated officer to attend the Section Secretaries Conference.

An entirely new paragraph could be added to Section 10 of the Bylaws establishing a formal Steering Committee with the specification of its personnel and duties.

Although the specific scientific Sections are named in the Constitution under Section 2 A, the establishment of new scientific Sections, as well as deactivation of Sections, could be provided for in the Bylaws by adding a paragraph in Chapter 4—Scientific Activities under Section 2. This would be legal since under Article V, Section 2 of the Constitution, the make-up of the scientific Sections could be altered "as the Association may from time to time create or provide for."

METHODS:

The Bylaws, Section 10, Section Officers, should be amended as follows:

CHAIRMAN—The Chairman shall preside at the meetings of the Section and shall perform such duties as may be provided by the rules of the Section. He shall be the presiding Chairman of the Steering Committee. He shall cooperate and consult with the Vice-Chairman in selection of a Guest Speaker for the Section program at the annual meeting.

VICE-CHAIRMAN—The Vice-Chairman shall have previously served as a Secretary of the Section. He shall assist the Chairman in his duties and preside over the Section meetings in the absence of the Chairman. He shall serve as the program Secretary. He shall arrange the program for the annual meeting in cooperation with the Chairman and shall correspond with reference to the program with the headquarters office. He shall attend the Annual Scientific Program Conference to be held each winter, near February 1, for the purpose of formulating a general schedule of scientific Sections for the annual meeting in cooperation with the Committee on Scientific Work. He shall be responsible for the selection and inviting of the Section's official Guest Speaker after consultation with the Section Chairman.

SECRETARY—The Secretary shall maintain the Section's official record, consult with the Executive Director to determine if the prospective nominees for Section officers are eligible to hold office prior to their nomination and shall be responsible for collecting papers presented at the annual meeting and forwarding them along with the list of newly elected Section officers to the headquarters office. He shall aid the Vice-Chairman by performing duties assigned him regarding the annual scientific program.

STEERING COMMITTEE—Each scientific Section shall have a formal Steering Committee made up of the current Chairman, Vice-Chairman, Secretary, the Chairman-Elect, if this office is utilized by the Section, and the three immediate past Chairmen. The duties of the Section Steering Committee shall include: aid in planning the work of the Section; evaluation of papers read before the Section for possible publication; serve as a section Nominating Committee; fill vacancies that occur among Section officers; and perform such other duties from time to time as they appear necessary.

Chapter 4, Section 2 of the Bylaws could be amended as follows:

SECTION 2, SCIENTIFIC SECTIONS

SCIENTIFIC SECTION REPRESENTATION—New Sections may be created by vote of the Council after receiving petition from 30 active members of the Association representing that specialty or sub-specialty and representing 12 of the states or District of Columbia in the Southern Medical Association territory. Recommendations to terminate or abolish a scientific Section may be made by the Council when that Section's participation, interest, and attendance has become ineffectual over a period of two years. A letter to this effect will be addressed to the current or most recent Chairman representing that Section to the effect that this recommendation has been made. If there is no response from that Section or if the response is considered inadequate, the Section involved may then be abolished or terminated by vote of the Council at the next annual meeting.

ANNUAL MEETINGS, SCIENTIFIC SECTION SESSIONS—Following this would be the instructions as outlined in the present Bylaws under Chapter 4, Section 2, but eliminating the final three sentences beginning with "Each Section is encouraged to designate an Executive or Advisory Committee" and ending with "A Nominating Committee for the Section should be selected."

Amendments to the Constitution and the Bylaws:

CONSTITUTION:

Article IV, Section 1.

That officer description "Executive Director" be changed to read "Executive Vice-President."

CONSTITUTION:

Article IV, Section 3.

Term "Executive Director" be changed to read "Executive Vice-President"

BYLAWS:

Term "Executive Director" be changed to read "Executive Vice-President" everywhere occurring.

Present to the entire Council for consideration the request that Article V, Section 2, of the Constitution be amended.

READ AND APPROVED BY:

James E. White, Chairman
Committee on Constitution and Bylaws
November 6, 1976

Dr. White was instructed by members of the Council to revise his Committee's recommendations regarding the Bylaws, Section 10, Section Officers, according to actions already taken. This matter would be brought up again before the Second Session of the Council scheduled to be held Sunday morning, November 7.

BYLAWS:

Chapter 4, Section 2 Scientific Sections

Scientific Section Representation—New Sections may be created by vote of the Council after receiving petition from 30 active members of the Association representing that specialty or sub-specialty and representing 12 of the states or District of Columbia in the Southern Medical Association. Recommendation to terminate or abolish a scientific Section may be made by the Council when that Section's participation, interest, and attendance has become ineffectual over a period of two consecutive years. A letter to this effect will be addressed to the membership of that Section to the effect that this recommendation has been made. If there is no response from that Section or if the response is considered inadequate, the Section involved may then be abolished or terminated by vote of the Council at the next annual meeting.

ACTION:—Motion was made by Dr. Polk, seconded by Dr. Barclay, that the above amended Bylaws change be approved. Motion carried.

BYLAWS:

Chapter 4, Section Scientific Sections

Annual Meetings, Scientific Section Sessions—Following this would be the instructions as outlined in the present Bylaws under Chapter 4, Section 2, but eliminating the final three sentences beginning with "Each Section is encouraged to designate an Executive or Advisory Committee" and ending with "A Nominating Committee for the Section should be selected."

ACTION:—Motion was made, seconded, and passed, that the above Bylaws change be approved.

CONSTITUTION:

Article IV, Section 1

That officer description "Executive Director" be changed to read "Executive Vice-President."

CONSTITUTION:

Article IV, Section 3

Term "Executive Director" be changed to read "Executive Vice-President."

BYLAWS:

Term "Executive Director" be changed to read "Executive Vice-President" everywhere occurring.

ACTION:—Dr. Neal moved that the aforementioned changes to the Constitution and Bylaws be adopted. Motion was seconded by Dr. Evans and carried.

The request from the Section on Otolaryngology to change its name to the Section on Otolaryngology and Maxillofacial Surgery was considered.

ACTION:—Motion was made by Dr. Neal that the request from the Section on Otolaryngology to change its name to the Section on Otolaryngology and Maxillofacial Surgery be tabled. Dr. Meier seconded the motion and suggested that the request be referred back to the Section. Motion carried.

COMMITTEE ON EMPLOYEES' PENSION TRUST

J. Garber Galbraith, *Chairman*
E. B. Robinson, Jr., *Vice-Chairman*
Mr. Robert F. Butts
D. Joseph Judge

The First National Bank of Birmingham, as Trustee, renders a statement for the fiscal year ending November 30. The statement for the fiscal year ended November 30, 1975, gave the value of the irrevocable trust as \$356,514.12.

BALANCE SHEET VALUED AT COST

ASSETS	
Cash	\$ 9,170.94
Short Term Obligations	21,000.00
Non-Government Bonds	34,977.92
Preferred Stock	9,541.70
Common Stock	271,045.70
Promissory Notes	10,777.86
TOTAL ASSETS	\$356,514.12

LIABILITIES	
Reserve for Benefits	\$356,514.12
TOTAL LIABILITIES	\$356,514.12

The Employees' Pension Plan has been reviewed and amended by the Association's General Counsel and Corey & Wakely, Consultants, to bring the plan in compliance with ERISA of 1974. The Committee on Employees' Pension Trust recommends the adoption of the Amended Trust Agreement and its execution by the Board of Trustees.

The Committee recommends that the following Resolution be adopted:

"RESOLVED, that Southern Medical Association enter into an agreement to amend and completely restate the Pension Trust known as the Southern Medical Association Employees' Pension Trust, for the purpose of complying with the Employee Retirement Income Security Act of 1974, in substantially the same form and with the Trustee identified in the copy of the Second Amendment to the Southern Medical Association Employees' Pension Trust annexed to these minutes.

"BE IT FURTHER RESOLVED, that the Board of Trustees, be and hereby is directed to execute the Amendment Agreement on behalf of the Association.

"BE IT FURTHER RESOLVED, that A. Brand Walton, and Paul O. Woodall are hereby authorized to file and process said Plan and Trust with the Internal Revenue Service.

"BE IT FURTHER RESOLVED, that a copy of said Amendment Agreement be attached to the minutes of this meeting as Exhibit 'A' hereto.

"BE IT FURTHER RESOLVED, that J. Garber Galbraith, D. Joseph Judge, and Robert F. Butts be and

hereby are designated and appointed as members of the Administrative Committee to exercise those responsibilities and duties described in Article IX of the said Plan and Trust.

"BE IT FURTHER RESOLVED, that the plan year commencing on December 1 and ending on November 30 be used for purposes of determining the limitation on benefits contained in Section 6.8, Article VI of the Plan.

"BE IT FURTHER RESOLVED, that the Executive Director be and hereby is authorized and directed to do any and all other things as may be found necessary, proper and desirable for the amendment of said Plan and Trust."

The Committee on Employees' Pension Trust will receive from the Trustee a financial statement for the fiscal year ending November 30, 1976, secure an actuarial evaluation of the plan, and submit recommendations to the Executive Committee of the Council at its Midwinter Meeting. The Committee recommends that the Executive Committee be empowered to act on any recommendation submitted.

READ AND APPROVED BY:

J. Garber Galbraith, Chairman
Committee on Employees' Pension Trust
November 6, 1976

ACTION:—Dr. Neal moved the approval of the report, including the recommendations contained therein. The motion was seconded by Dr. Hubbard and carried.

COMMITTEE ON FINANCE

Thomas B. Dameron, Jr., *Chairman*
G. Baker Hubbard, Sr., *Vice-Chairman*
Edwin C. Evans
J. Ralph Meier
M. Pinson Neal, Jr.
G. Gordon McHardy, *President*
G. Thomas Jansen, *President-Elect*
Andrew F. Giesen, Jr.,
First Vice-President

The report of the Committee on Finance is shown as the Financial Statement attached to the Report of the Executive Director.

READ AND APPROVED BY:

Thomas B. Dameron, Jr., Chairman
Committee on Finance
November 6, 1976

COMMITTEE ON SCIENTIFIC WORK

N. C. Hightower, Jr., *Chairman*
Rafael C. Sanchez, *Vice-Chairman*
Mr. Roy B. Evans, Jr., *Secretary*
Herbert W. Birch
John T. Galambos
D. Joseph Judge
M. Pinson Neal, Jr.
John L. Sawyers
Robert T. Singleton
C. Rex Teeslink
Ex Officio
G. Baker Hubbard, Sr.
Harris D. Riley, Jr.
Thomas B. Dameron, Jr.
G. Gordon McHardy

During the 1975-76 year the Committee on Scientific Work met a total of seven times. The Committee met on

November 16, 17, and 20 in Miami Beach, 1975. The meeting on November 17 was with the Section Secretaries. The Committee next met January 23 and January 24 with a number of the Officers of the Association at Point Aquarius. On March 6, 1976, the Committee met in New Orleans from 8:00 a.m. until 12:00 noon. At noon the Section Secretaries joined the Committee for lunch. The Committee then met with the Secretaries from 1:00-5:00 p.m. to structure the program of the annual meeting. The last meeting of 1975-76 was held in Dallas on June 27, 1976, during the annual meeting of the American Medical Association. The number of meetings held during the past year is more than any previous year. The need for more meetings of the Committee is due to the expanding responsibilities of the Committee.

1. **Meeting of the Committee on Scientific Work, November 16, 1975, Champagne Room, Hotel Fontainebleau, Miami Beach, Fla.** The primary purpose of the meeting was to preview the format of the scientific program of the Miami Beach Meeting and to prepare for the meeting to be held with the Section Secretaries on November 17, 1975.

a. **Business and Economic Seminar for Physicians**—Byron Chew, Ph.D., Director of the Norton Center, Birmingham, Ala., made a presentation to the Committee regarding a business and economic seminar for physicians to be held at the Norton Conference Center.

b. **Postgraduate Courses**—Dr. Galambos and Mr. Roy Evans reviewed the scheduled postgraduate courses for the Miami Beach Meeting. They indicated that three courses were cancelled due to the fact that there was less than five registrants for each of these three courses.

c. **Reimbursement of Section Guest Speakers**—The Committee again reviewed the Association's policy of reimbursement of official Section Guest Speakers. Dr. Giesen informed the Committee that the Council had voted to increase the honorarium of Section Guest Speakers to \$200.00. In addition, the Guest Speaker would receive roundtrip, first class air fare and \$60.00 per diem for days actually on the program.

d. **Scientific Sections of SMA**—The Committee again considered the potential of establishing new Sections in Nuclear Medicine and Emergency Medicine. Although there was considerable interest in both areas, the Committee has received no formal proposal to establish such Sections.

e. **Committee Assignments**—The Chairman appointed sub-committees in the following areas:

- (1) Executive Committee
- (2) Postgraduate Courses
- (3) Scientific Exhibits, Selection
- (4) Scientific Exhibits, Awards
- (5) Technical Exhibits, Awards
- (6) Teaching Exhibits
- (7) Program Evaluation
- (8) Dial Access Program
- (9) Special Programs

f. **Meeting of the Medical Association of Georgia**—The Committee again considered the conflict in meeting dates of the SMA and the Medical Association of Georgia, and will attempt to propose a plan whereby the two Associations might meet jointly.

2. **Meeting of the Committee on Scientific Work with Section Secretaries, November 17, 1975, Champagne Room, Hotel Fontainebleau, Miami Beach, Fla.** The primary purpose of this meeting was to initiate plans for the annual meeting to be held in New Orleans in November 1976.

a. **Evaluation of Section Programs**—Dr. Rafael Sanchez informed the Committee and Secretaries that evaluation forms had been distributed and would provide data from a sample of the attendance at the Miami Beach Meeting.

b. **The Section Guest Speakers**—Dr. McHardy reviewed for the Secretaries the new policy regarding honoraria for Guest Speakers, as well as other reimbursements of air fare and per diem.

c. **New Orleans Meeting**—The Chairman asked the Secretaries to urge their Chairman to invite the Section Guest Speakers early, and

also those Sections that wish to sponsor postgraduate courses should send in as soon as possible the proposed director of the course.

3. **Meeting of the Committee on Scientific Work, November 20, 1975, Champagne Room, Hotel Fontainebleau, Miami Beach, Fla.** The primary purpose of this meeting was to review the Miami Beach Meeting.
 - a. Attendance and expense of postgraduate courses were reviewed. Although the quality of the courses was unusually good, the attendance was lower than anticipated.
 - b. **Norton Center Seminar**—The Committee considered the proposal of Byron Chew, Ph.D., and decided against a business and economic seminar for physicians.
 - c. **Computerized Registration**—The Committee considered the possibility of computerized registration at the New Orleans Meeting and made a recommendation that this be considered by the Council.
 - d. **Proposal from Physician's Resources, Inc.**—The Committee considered a proposal from Physician's Resources, Inc. which offered to provide postgraduate educational programs on T. V. tape and would include pre- and post-testing along with a syllabus for the course. The Committee endorsed the proposal in principal. (At a subsequent meeting, Point Aquarius, January 23-24, 1976, the Committee reconsidered the proposal and rejected it as it had received no additional information or details concerning the proposed television programs.)
4. **Meeting of the Committee on Scientific Work with Officers of the Association, January 23-24, 1976, Point Aquarius, Ala.** The primary purpose of this meeting was to provide the Committee and the Officers of the Association a "Retreat" in order that the various activities of the Association could be considered in depth and that plans could be laid for future activities for the Association.

Some 20 items were discussed at the retreat. For organizational purposes and economy of time, the various items were grouped into "clusters" and sub-clusters. The main "clusters" included the following:

- a. Annual Meeting
 - b. Cooperative Ventures with Other Societies and State Associations
 - c. Special Programs, as Dial Access
 - d. Other forms of Continuing Education, Accreditation and Certification
5. **Meeting of the Committee on Scientific Work, March 6, 1976, St. Louis Room, Royal Orleans Hotel, New Orleans, La.** The primary purpose of meeting was to again review the results of the Miami Beach Meeting and to prepare for the annual meeting with the Secretaries to be held later in the day.
 - a. **Attendance Data:** Attendance data was reviewed which indicated that 684 physicians took postgraduate courses in Miami Beach, as compared to 783 in Atlanta.
 - b. **Fiscal Data:** Mr. Evans reviewed the fiscal data from the Miami Beach Meeting which showed a net dollar loss of \$10,362.39, as compared to \$15,437.94 in Atlanta.
 - c. **Analysis of Evaluation Forms:** Dr. Sanchez reviewed for the Committee results of his analysis of the questionnaires completed by attendees at the Miami Beach Meeting. Thirty-four percent (34%) of the physicians returned the questionnaires regarding Section meetings, and 52% returned the questionnaires regarding the postgraduate courses. The data indicated that the average SMA physician attending the meeting is in primary care, is an SMA member from a community of 100,000 or larger, is 45-55 years of age, and graduated from medical school 15-25 years ago, and is in solo practice.
 - d. **Future meetings in Miami Beach:** Dr. McHardy informed the Committee that due to the poor attendance at the Miami Beach Meeting, the Executive Committee of the

Council had decided to change the 1979 meeting site from Miami Beach to Las Vegas, Nevada.

e. Plans for the New Orleans Meeting:

- (1) Facilities—Mr. Evans reviewed facilities available, indicating they would be more adequate than those available in Miami Beach or Atlanta.
 - (2) Postgraduate Courses—Dr. Galambos reviewed the proposed postgraduate courses.
 - (3) General Sessions—Dr. McHardy indicated that the First and Second General Sessions would be in the form of luncheons. He had invited Congressman Dr. Tim Lee Carter to be the principal speaker for the First General Session, and the Honorable Lindy (Mrs. Hale) Boggs, to be the principal speaker for the Second General Session. The Ladies Auxiliary will meet with the members at the Second General Session.
 - (4) Special Features of the New Orleans Meeting—The Chairman suggested for special features at the New Orleans Meeting that two new activities be considered. One would be "Breakfast at Brennan's" sessions, and the other would be special Bicentennial Lectures. The Committee approved both suggestions.
6. **Meeting of the Committee on Scientific Work and the Annual Conference of the Section Secretaries.** The primary purpose of this meeting was to complete the detail plans for the New Orleans Meeting. Dr. McHardy reviewed the new format for the general sessions to the Secretaries. The Secretaries were informed that the 1979 meeting site had been changed from Miami Beach to Las Vegas, Nevada. The Secretaries were urged to contact their national or regional organizations regarding the possibility of the organizations meeting conjointly with SMA Sections. Dr. Galambos reviewed the guidelines for postgraduate courses, and the Secretaries were urged to use local physicians as much as possible for faculty for the postgraduate courses. Dr. Dameron reviewed the actions taken at Point Aquarius regarding Scientific Sections of the SMA. The Chairman announced that Dr. Margaret Klapper had graciously accepted the offer to serve as a Consultant to the Committee on Scientific Work.
 7. **Meeting of the Committee on Scientific Work, June 27, 1976, Patio Room, Fairmont Hotel, Dallas, Texas.** The primary purpose of this meeting was to complete some of the details regarding the annual meeting in New Orleans.
 - a. **Breakfast at Brennan's Sessions:** The cost of the Breakfast at Brennan's was much more than originally anticipated by the Committee. It was agreed that if Dr. McHardy was unable to solicit outside support to partially pay for these Sessions, they would be deleted from the program.
 - b. **Bicentennial Lectures:** The Chairman announced that Dr. Peter N. Herbert, National Institutes of Health, and Dr. Ross E. Brown, of Oklahoma City, Okla., had accepted to give one Bicentennial Lecture each.
 - c. **Symposium, "Life and Death—Who Decides?":** Will be another special feature for the New Orleans Meeting.
 - d. **AAFP Credit:** Dr. Judge volunteered to contact each of the Section Secretaries regarding making their program eligible for AAFP credit.

READ AND APPROVED BY:
N. C. Hightower, Jr., Chairman
Committee on Scientific Work
November 6, 1976

ACTION:—Dr. Meier moved that the report of the Committee on Scientific Work be approved. Dr. Jones seconded the motion and it carried.

COMMITTEE ON GRANTS AND LOANS

M. Pinson Neal, Jr., *Chairman*

M. Bruce Martin

W. Reams Perkins

Hiram C. Polk, Jr.

Robert T. Singleton

Ex Officio

Thomas B. Dameron, Jr.

G. Gordon McHardy

As provided in the Constitution and Bylaws, the Committee on Grants and Loans is privileged to submit its annual report to the Council of the Southern Medical Association. The Committee undertook the challenge in reviewing the various applications and determining the recipients of the Research Project Grants and the Residency Training Grants and Loans. This Committee also has the responsibility to monitor the Medical Student Scholarship Program and the Southern Medical Association Lectureship Program. This report will be divided under each of the major categories of this Committee's activities and will represent a composite of the year's financial allocations. Specific recommendations to the Council are included under each major heading as appropriate.

RESIDENCY TRAINING GRANT AND LOAN PROGRAM

The Committee on Grants and Loans held a meeting on Sunday, May 23, 1976, Atlanta Airport, Eastern Airlines Conference Room, Atlanta, Georgia.

Members of the Committee present: M. Pinson Neal, Jr., *Chairman*, Richmond, Va.; M. Bruce Martin, Huntington, W. Va.; W. Reams Perkins, Washington, D. C.; Robert T. Singleton, Baltimore, Md.; Thomas B. Dameron, Jr., *ex officio*, Raleigh, N. C.

Members of the Committee absent: Hiram C. Polk, Jr., Louisville, Ky.; G. Gordon McHardy, *ex officio*, New Orleans, La.

Others present: The following SMA staff members from Birmingham, Ala.: Mr. Robert F. Butts, Executive Director; Pamela K. Galbaugh, Administrative Assistant.

Thirteen applications were received for residency training loans. For comparison, the number of applications received in previous years were: 1967: 57; 1968: 40; 1969: 12; 1970: 44; 1971: 35; 1972: 25; 1973: 23; 1974: 12; 1975: 25.

The total amount available to the Committee for use for the year 1976-77 was \$56,000 (\$16,000—grants; \$40,000—loans).

Of the 13 applications received for loans, 11 were determined to fulfill the guidelines of the Grant and Loan Program and received Association-budgeted funds. Of the budgeted money, \$56,000, \$26,400 was awarded: (\$7,200—grants; \$19,200—loans).

Pursuant to provisions of authorization to the Committee by the Council, \$15,000 was transferred from the Grant and Loan Fund to the Research Project Fund.

RECOMMENDATIONS: (1) The Committee on Grants and Loans requests that \$40,000 be budgeted for the Grant and Loan Program for the period 1977-78 (\$10,000—grants; \$30,000—loans).

RESEARCH PROJECT FUND

At its meeting on May 23, the Committee reviewed 106 applications received for Research Project Grants. There was significant competition within the 30 schools from which the applications were received. According to the rules governing the Research Project Fund, only one grant (maximum of \$1,000) may be given per school. A

total of \$24,000 was budgeted for this Program. However, the Committee on Finance gave the Committee on Grants and Loans the option of transferring \$15,000 from the Grant and Loan Fund to the Research Project Fund. The Committee took advantage of this option and awarded grants to 23 schools, for a total appropriation of \$23,000.

RECOMMENDATIONS: (1) That each fully operational medical school within the region of the Southern Medical Association be eligible to receive \$1,000 for a research project grant (42 medical schools). (2) That there be budgeted \$40,000 specifically for the Research Project Fund. (3) The Committee again requests authorization to utilize consultants to determine the scientific merit, when indicated, to achieve a fair appropriate evaluation of the Research Project Grant applications. (4) That Research Project Grant forms be revised to: (a) Improve on clarity for fund usage, and (b) to ask the proposed researcher to identify the benefits their project might produce.

LECTURESHIP PROGRAM

A total of 11 medical schools in the Southern Medical Association's territory participated in the Lectureship Program during 1975-76. A total of \$10,000 was budgeted for the Lectureship Program for the period September 1975 to August 1976. Of this amount, \$5,500 was utilized. A number of schools indicated a desire to participate in this program; however, they failed to utilize requested funds.

RECOMMENDATIONS: (1) The Committee requests that \$10,000 be budgeted for the Lectureship Program 1976-77, (\$500.00 per medical school in the Association's territory) for disbursement on a first come basis until the funds are expended (42 medical schools at the present time).

MEDICAL STUDENT SCHOLARSHIP PROGRAM

The Medical Student Scholarship Program continues to be well received by the deans of the schools of medicine within the Southern Medical Association's territory. This program provides a \$750.00 scholarship annually, September 1-August 31, to each of the operating medical schools in the Association's territory. A recipient(s) is selected by the dean, and the dean makes application to the Association on behalf of the student(s). The dean is given the privilege of dividing the scholarship among two or more students.

The amount available to the Committee for use during the period 1975-76 was \$20,000, \$750.00 per school. A total of 27 schools took advantage of the scholarships available (26 @ \$750.00; 1 @ \$500).

RECOMMENDATIONS: (1) The Committee requests that \$30,000 be budgeted for the Medical Student Scholarship Program for 1976-77. This would provide a \$750.00 base scholarship to each medical school in the Association's territory. The Committee again wishes to alert the Council to the fact that additional funds will be requested in the future to serve an increasing number of fully operational medical schools in the Association's territory.

READ AND APPROVED BY:

Mr. Pinson Neal, Jr., Chairman
Committee on Grants and Loans
November 6, 1976

ACTION:—Dr. Hubbard moved that the report of the Committee on Grants and Loans be approved, including all recommendations contained therein. Dr. Evans seconded the motion and it carried.

Dr. Polk requested that the headquarters office forward members of the Committee on Grants and Loans progress reports all at one time, rather than sending them as they were received.

EXHIBIT A **RESIDENCY TRAINING GRANT** **RECIPIENTS, 1976-1977**

Name	School Affiliation	Amount of Grant
Richard P. Greenberg, M.D. Richmond, Va.	Medical College of Virginia, Virginia Commonwealth University, Richmond, Va.	\$2,400.00
John M. Hiebert, M.D. Charlottesville, Va.	University of Virginia School of Medicine, Charlottesville, Va.	\$2,400.00
Michael J. Rosner, M.D. Richmond, Va.	Medical College of Virginia, Virginia Commonwealth University, Richmond, Va.	\$2,400.00
TOTAL GRANTS		\$7,200.00

RESIDENCY TRAINING LOAN **RECIPIENTS, 1976-1977**

Name	Amount of Loan Approved	Due Date of Loan
Douglas G. Burnette, Jr., M.D. Birmingham, Ala.	\$2,400.00	July 1, 1980
William H. Gorman, M.D. San Antonio, Texas	\$2,400.00	July 1, 1982
Kent W. Jones, M.D. Durham, N. C.	\$2,400.00	July 1, 1979
Gary M. McWilliams, M.D. San Antonio, Texas	\$2,400.00	July 1, 1976
Norman D. Radtke, M.D. Gainesville, Fla.	\$2,400.00	July 1, 1980
James R. Schwartz, M.D. Durham, N. C.	\$2,400.00	July 1, 1979
Walter R. Warren, M.D. Morgantown, W. Va.	\$2,400.00	July 1, 1979
Ronald E. Woosley, M.D. Durham, N. C.	\$2,400.00	July 1, 1981
TOTAL LOANS	\$19,200.00	

SUMMARY

TOTAL GRANTS	\$ 7,200.00
TOTAL LOANS	\$19,200.00
TOTAL GRANTS AND LOANS	\$26,400.00

EXHIBIT B

RESEARCH PROJECT FUND RECIPIENTS, 1976-1977

Recipient	Title of Project	Amount of Grant
Thomas F. Knight, M.D., and Baylor College of Medicine	The Renal Tubular Handling of 2-Deoxy-D-Glucose	\$1,000.00
Kenneth R. Gallup, M.D., and Bowman Gray School of Medicine	The Relationship of Dose, Serum Level, and Bronchodilator Response with Oral Dyphylline in Asthmatic Subjects	\$1,000.00
Arthur F. Haney, M.D., and Duke University School of Medicine	Regulation of Steroid Secretion and Gonadotropin Binding in Ovarian Cell Cultures	\$1,000.00
*Edward P. Rigel, M.D., and Emory University School of Medicine	Effect of Cardiopulmonary Bypass for Open Heart Surgery on Pro- pranolol Concentrations in Plasma and Propranolol Blockage of Cardiac Responses to Isoproterenol	\$1,000.00
John J. Ricotta, M.D., and Johns Hopkins University School of Medicine	Effect of an Artificial Ileocecal Valve in Extensive Small Bowel Resection	\$1,000.00
*Francis A. D'Anzi, M.D., Ph.D., and Louisiana State University School of Medicine, New Orleans	Cytochemical and Autoradiographic Localization of Tricyclic Anti- depressant Drug in Certain Dopa- minergic Pathways	\$1,000.00
William P. Lawrence, M.D., and Medical College of Georgia	Experimental Induction of Radiation Myelitis	\$1,000.00
Carol R. Archer, M.D., and St. Louis University School of Medicine	The Effect of Gradual Occlusion of the Basilar Artery on the Penetrating Pontine Arteries and the Development of Collateral Flow in the Rhesus Monkey	\$1,000.00
Abraham N. Flemenbaum, M.D., and Texas Tech University Medical School	The Effects of Lithium on Dopamine and Norepinephrine Receptors	\$1,000.00
Edward H. Laughlin, M.D., and University of Alabama School of Primary Care	Development of an Arterio-Venous Shunt, Utilizing Vitreous Carbon and Silicone Rubber for Use in Dialysis Patients	\$1,000.00
David E. Yokum, M.D., and University of Florida College of Medicine	Macrophage Phagocytosis Index as a Measure of Cellular Immunity in Childhood Leukemia	\$1,000.00
Charles W. McGill, M.D., and University of Louisville School of Medicine	Evaluation of Specific Cellular Immunity in Children with Malignant Solid Tumors	\$1,000.00
David I. Bromberg, M.D., and University of Maryland School of Medicine	Study of IgE Concentration and Specific IgE Antibodies in the Sera and Ear Aspirate of Children with Serous Otitis Media	\$1,000.00
Jeanne A. McCarthy, M.D., and University of Miami School of Medicine	Prenatal Sensitization of Rh Negative Infants Born to Rh Positive Mothers	\$1,000.00
John F. Wolfe, M.D., and University of Missouri School of Medicine, Columbia	Distinct Specificity of an Antinuclear Antibody in Polymyositis	\$1,000.00
Everette J. Walton, Jr., M.D., and University of North Carolina School of Medicine	Role of 3', 5' Cyclic Monophos- phate in Vitamin D- Stimulated Intestinal Calcium Absorption	\$1,000.00
*Alan Rashkin, M.D., and University of Oklahoma School of Medicine	Oklahoma City Y.M.C.A. Baseball "Prep" and "Civic" League Elbow Study	\$1,000.00
John I. Malone, M.D., and University of South Florida	The Incidence and Natural History of Diabetic Retinopathy in Children	\$1,000.00
Harry L. Hawkins, Jr., M.D., and University of Tennessee College of Medicine	Pathogenesis of Alcoholic Hyperlipidemia	\$1,000.00

Recipient	Title of Project	Amount of Grant
Ned Snyder, III, M.D., and University of Texas Medical Branch	Incidence and Pathogenesis of Metabolic Bone Disease in Cirrhosis	\$1,000.00
*John D. Oswalt, M.D., and University of Texas Medical School, San Antonio	Pathophysiology of Pit Viper Envenomation	\$1,000.00
Landon B. Anderson, M.D., and University of Virginia School of Medicine	Effects of Salicylates on the Development of Osteoarthritis, An Experimental Model	\$1,000.00
Bruce B. Dan, M.D., and Vanderbilt University School of Medicine	Interactive Conversational Computer Assisted Information for Medical Student Education in Diabetes	\$1,000.00
Jordan H. Ginsberg, M.D., and Washington University School of Medicine	Enhancement of Fracture Healing by Primary Bone Grafting	\$1,000.00

*Approval of funds pending receipt of detailed budget.

NOTE FOR COMMITTEE ON GRANTS AND LOANS & COUNCIL:

Drs. Rigel and Rashkin submitted detailed budgets, as requested, and were awarded funds in the amount of \$1,000.00 each. However, no budgets were received from Drs. D'Anzi and Oswalt; therefore, funds were not awarded.

EXHIBIT C

SMA LECTURESHIP PROGRAMS 1975-76

School	Lecturer	Reimbursement
Howard University School of Medicine	Phillip Gordon, M.D.	\$500.00
University of Florida College of Medicine	David P. Green, M.D.	\$500.00
University of Kentucky College of Medicine	Nicholas Kouchoukos, M.D.	\$500.00
University of Maryland School of Medicine	Mark Tso, M.D.	\$250.00
	David Hamburg, M.D.	\$250.00
St. Louis University School of Medicine	Jacqueline A. Noonan, M.D.	\$500.00
University of Missouri School of Medicine/Columbia	Samuel L. Katz, M.D.	\$500.00
Meharry Medical College	Charles F. Christian, M.D.	\$250.00
	William J. Harrington, M.D.	\$250.00
University of Tennessee College of Medicine	Dante Scarpelli, M.D.	\$500.00
University of Texas Medical Branch	Alvan R. Feinstein, M.D.	\$500.00
University of Texas School of Medicine/ San Antonio	Pietro Castelnuevo-Tedesco, M.D.	\$500.00
West Virginia University School of Medicine	Michael Douglas, M.D.	\$500.00
TOTAL FUNDS UTILIZED		\$5,500.00

EXHIBIT D

SMA MEDICAL STUDENT SCHOLARSHIP RECIPIENTS, 1976

School	Scholarship Recipient	Amount of Scholarship
Baylor College of Medicine	Mr. James M. Barry, Jr.	\$750.00
Duke University School of Medicine	Mr. C. Edward Coffey	\$750.00
Eastern Virginia Medical School	Mr. Clarke B. Andrews	\$250.00
	Mr. Keith K. Brosius	\$250.00
	Mr. William L. Donley, Jr.	\$250.00
	Mr. Noel T. R. Rivers-Bulkeley	\$750.00
Emory University School of Medicine	Miss Verdelle D. Hamilton	\$750.00
Howard University College of Medicine	Mr. Leslie M. Brunt	\$750.00
Johns Hopkins University School of Medicine	Ms. Alison McClure	\$750.00
Louisiana State University School of Medicine, Shreveport	Mr. Joseph M. Evans	\$750.00
Medical College of Georgia	Mr. Alvin K. Schergen	\$750.00
St. Louis University School of Medicine	Miss Cheryl White	\$250.00
Texas Tech University School of Medicine	Ms. Helen L. Hudris	\$250.00
	Ms. Darlene G. Pavlovic	\$250.00
	Mr. George L. Blundell, Jr.	\$750.00
Tulane University School of Medicine	Mr. John Alan Wages	\$750.00
University of Alabama School of Medicine, Birmingham	Mr. Bill Byrd, Jr.	\$250.00
University of Florida College of Medicine	Mr. Alvin E. Cheatham	\$250.00
	Mr. Joshua Macon	\$250.00
	Mr. Wayne Douglas Back	\$750.00
University of Kentucky College of Medicine	Mr. Danny Ray Penick	\$750.00
University of Louisville School of Medicine	Mr. Phuong Trinh	\$750.00
University of Maryland School of Medicine	Mr. Michael J. Gandour	\$750.00
University of Miami School of Medicine	Mr. James P. Holland	\$750.00
University of North Carolina School of Medicine	Mr. Gerard James Ferris	\$750.00
University of South Alabama College of Medicine	Mr. Ralph Joseph Raffa	\$750.00
University of South Florida College of Medicine	Mr. Charles Richard Cummings	\$750.00
University of Tennessee College of Medicine	Mr. Ervin S. Woodle	\$375.00
University of Texas Medical Branch	Mrs. Myrlene A. Exon	\$375.00
	Mr. Cecil R. George	\$750.00
University of Texas Medical School, San Antonio	Mr. Scott Pavy	\$750.00
University of Texas Southwestern Medical School	Ms. Jana Leigh	\$500.00
Vanderbilt University School of Medicine	Mr. Ray L. Watts	\$750.00
Washington University School of Medicine	Mr. Glenn R. Snider, Jr.	\$750.00
West Virginia University School of Medicine		

COMMITTEE ON HISTORY

R. H. Kampmeier, *Chairman*

M. Bruce Martin

W. Reams Perkins

James T. Thompson

Ex Officio

Thomas B. Dameron, Jr.

G. Gordon McHardy

The Committee on History continues pretty much as a 'stand-by' Committee. Nevertheless, the Chairman reports that he has continued on the "trail" of what is probably the only source material extant upon the beginnings of the Southern Medical Association.

Tennessee physicians were prime movers in the founding of the organization. Dr. J. B. Gowan, of Tullahoma, Chief Surgeon to General Nathan Bedford Forrest, founded the Tri-State Medical Association in about 1888 (Alabama, Georgia, Tennessee). In 1906, Dr. G. C. Savage, President of the Tennessee Medical Association believed there should be a wider association of southern doctors. Dr. A. B. Cooke, of Nashville and President of the Tri-State Medical Association, joined Dr. Savage in a called meeting to establish such an organization. They were joined by Dr. Jere Crook of Jackson, Tennessee.

Last year I reported verbally that Dr. Kate Zerfoss, daughter of Dr. Savage, has historical material of interest to us. I spoke last with her on October 12, 1976. She had closed her office this past summer and now has more time to pursue matters of history. She told me she has material Jere Crook gave her before his death. Too, Dr. Zerfoss is searching the files of her father. She knew Dr. Cowan's widow very well, who had promised her his correspondence, but this never came about. Dr. Cowan's son, a Nashville attorney, is attempting to locate such material upon Kate Zerfoss' request.

Dr. Zerfoss has promised me that by a year hence she will have gathered together whatever is available in these sources for deposit in the archives in Birmingham.

READ AND APPROVED BY:

R. H. Kampmeier, Chairman

Committee on History

November 6, 1976

ACTION:—Report received.

COMMITTEE ON INSURANCE

Phillip W. Voltz, Jr., *Chairman*

William W. Moore, Jr., *Vice-Chairman*

David L. Barclay

J. Hoyle Carlock

Andrew F. Giesen, Jr.

James Y. Griggs

G. Baker Hubbard, Sr.

G. Thomas Jansen

Walter C. Jones, III

D. Joseph Judge

M. Bruce Martin

L. S. Thompson, Jr.

Ex Officio

Thomas B. Dameron, Jr.

G. Gordon McHardy

MINUTES—CONFERENCE CALL, May 12, 1976, 2:30 p.m.

A Conference Call was held on the above date and time with the following members of the Committee on Insurance and others as listed:

Phillip W. Voltz, Jr., *Chairman*; William W. Moore, Jr., *Vice-Chairman*; David L. Barclay; J. Hoyle Carlock; Andrew F. Giesen, Jr.; G. Baker Hubbard, Sr.; Walter C. Jones, III; M. Bruce Martin; L. S. Thompson, Jr.; G. Gordon McHardy; Mr. Sydney Lavender, Counselor for the SMA; Mr. Robert F. Butts, Executive Director, SMA;

and Dr. Larry Miller, representing World Service Life Insurance Company. A quorum of the Committee was present.

The Committee on Insurance was appraised by Dr. Miller that the Equity Fund which was approved by the Committee on Insurance and Council in November had been delayed due to various problems, including administrative, legal, and many with Keystone Custodian Funds of Boston. At this time, World Service Life Insurance Company is ready to proceed to make an Equity Fund available through Keystone for those who belong to the SMA Retirement Program and desire to do so.

Dr. Miller, Mr. Lavender, and the Chairman of the Committee on Insurance and others who have studied the many problems involved, recommended that we do not open a Bond Fund as an alternative to the Equity Fund for the SMA Retirement Program members at this time.

The members of the Committee, along with Mr. Lavender, discussed the recommendations and proposals. After the discussion, it was seconded and voted by the Committee on Insurance: (1) Approval of an Equity Program with Keystone Management Corporation at this time using Keystone S-3 funds. (2) That no Bond Fund as an alternative be approved at this time. (3) That Mr. Lavender and the Chairman of the Committee on Insurance approve all drafts of letters and information to our members to insure that nothing is said or implied that this Committee of the SMA recommend conversion from the guaranteed interest fund to the equities funds.

There being no further business, the meeting was adjourned approximately 15 minutes later.

Minutes approved at the Meeting of the Committee on Insurance, June 26, 1976.

MEETING—June 26, 1976, World Service Life Insurance Company Home Office, Fort Worth, Texas.

The meeting was called to order at 10:00 a.m. by the presiding officer, Dr. Voltz.

Members of the Committee on Insurance present: Phillip W. Voltz, Jr., *Chairman*; William W. Moore, Jr., *Vice-Chairman*; James Y. Griggs; G. Baker Hubbard, Sr.; G. Thomas Jansen; D. Joseph Judge; M. Bruce Martin; Andrew F. Giesen, Jr.; Walter C. Jones, III; J. Hoyle Carlock; and G. Gordon McHardy, *ex officio*.

Representing Connecticut General Life Insurance Company were Mr. Bob Batterson, Mr. Bill Tiedtke, and Mr. David Johnson.

Representing World Service Life Insurance Company, Fort Worth, Texas, were Mr. Jim Fulkerson, Mr. Karl Singer, Mr. Jim Goldsmith, Mr. Bob Miller, Dr. Larry Miller, and Mr. Jim Gallagher.

Others present: Joe T. Nelson, Special Consultant to the Committee on Insurance, Weatherford, Texas; Mr. Sydney Lavender and Mr. Al Naff, Birmingham, Ala., Legal Counsel for the SMA's Group Insurance Programs; and Mr. Roy B. Evans, Jr., Assistant Executive Director, Birmingham, Ala.

MINUTES OF PREVIOUS MEETING

The minutes of the meeting of the Committee on Insurance held on November 14, 1975, Miami Beach, Fla., were approved as written and distributed to the Council November 15, 1975. The minutes of a Conference Call which took place at 2:30 p.m., May 12, 1976, concerning the Equity Fund were approved.

REPORTS

A. (1) Mr. Bob Batterson gave the experience reports from Connecticut General. The report showed that while the SMA Insurance Program continues to reflect strong premium growth on all coverages, there was reflected an experience deficit of \$191,220.00 for the policy year of April 1, 1975, to April 1, 1976. The deficit resulted from less favorable experience on the Life coverage with a large influx of total and permanent disability claims. Despite this deficit for the policy year, the Committee feels the program remains in sound financial condition with the total reserve balance as of April 1, 1976, being \$966,012.00. Based upon the financial data submitted, Mr. Batterson feels that the premium rate structures appear to be appropriate for the immediate future.

Connecticut General was requested to report on the adequacy of our reserves at the next meeting. The Major Medical coverage showed improvement as a result of the rate increase which became effective in October 1975; however, this particular coverage will continue to warrant close scrutiny in light of the fact that hospital costs continue to escalate at a rate well in advance of the general inflationary index. The Disability Income experience has improved as was anticipated. The experience on the Office Overhead has also improved. The combined loss ratio for the year was 92.4%. SMA received a check in the amount of \$28,616.00, representing interest on the reserves for a total of \$72,118.00 for the fiscal year.

Connecticut General agreed that subsequent reports be in the form of a two-year comparative statement.

SMA headquarters is to be furnished monthly with all Life and AD & D claims showing names and sufficient details to identify the claimant and if he is a first-year coverage.

(2) Mr. Bob Miller reported for World Service Life Insurance Company. The SMA Insurance Program continued to grow at approximately 16% during the past year; the annualized premium as of March 31, 1976, was \$5,690,155.35. Mr. Miller stated that since January 1, 1976, we have received 1,983 applications for coverage and that World Service Life will continue to concentrate on marketing to doctors under age 50, especially Life Insurance, Office Overhead and Long-Term Disability. Mr. Miller further stated that the marketing activity will continue to follow-up with individual state-by-state mailings.

B. Comments from Connecticut General—There have been no problems in the claims division.

C. Comments from World Service Life Insurance Company—Mr. Karl Singer presented the case plan for analysis of the marketing activity for the year. An active marketing program has been accomplished and is being planned for the rest of the year.

D. Dr. Larry Miller reported on the Southern Medical Association's Retirement Program. The Fund was reported to have reached \$5,776,731.00 as of June 24. It was reported that all tax forms had been filed as of the required dates. A comparison was made of the SMA Retirement Program and other programs showing a significant cost differential in the favor of the SMA. It was pointed out that World Service Life accepts the responsibility as Plan Administrator, therefore assuming the "lion's share" of fiduciary responsibility and conducts itself accordingly. To date we have had no withdrawals from the Program.

The schedule of future activities was discussed. The Committee on Insurance moved, seconded, and approved that Dr. Miller have the attorneys proceed for the preparation and filing of a defined benefit plan.

The next general mailing for the Pension Program, including the announcement of the availability of the Equity Fund Account, is to take place on approximately August 1.

E. Mr. Lavender had no report.

OLD BUSINESS

Mr. Bob Miller reported to the Committee, that the carriers have analyzed the Daily Hospital Indemnity Benefit that is presently being offered by the SMA Insurance Program and have determined that the benefits and rates are not competitive and it was the carrier's recommendation that a new Daily Hospital Indemnity Benefit be proposed. The proposed plan would maintain a seven (7) day waiting period and the same daily benefit offered in the present plan. The benefit period would be extended to age 65 with an inclusion of a convalescent care benefit. In addition, a special double benefit would be provided for intensive care, cancer and coronary care. The rates per \$10 daily benefit would be reduced significantly; for example, under age 40 the rate would be reduced to \$2.70 from \$4.32. Upon analysis of the proposed plan, together with the new rate structure, the Committee on Insurance moved, seconded, and voted to approve the proposed Hospital Indemnity Plan which will be marketed effective October 1, 1976. At that time, all doctors who presently have the plan, will receive the new benefits and rates.

NEW BUSINESS

1. Mr. Bob Miller and Mr. Karl Singer presented a review and analysis of the Life Insurance Rates under age 30. The Committee was advised that at this age group, the SMA Life Insurance Program could become more competitive by extending the RIMS Life Insurance rate to age 30. It was moved and seconded by the Committee that the new rates under age 30 be adopted. Subsequently, a discussion ensued whereby it was recommended that these rates be extended to age 35. An amended motion was made whereby the net cost for an individual under age 30 for \$100,000 Life Insurance would be \$100 on an annual basis and \$150 for an individual between the ages of 30 and 34. In order to more effectively enhance the marketing of the new rates, it was suggested that the ten percent (10%) discount be eliminated and that net rates would be marketed. It was pointed out, however, by Mr. Jim Fulkerson that the elimination of the ten percent (10%) reduction may have serious consequences for the premium administration system; it was suggested that the carriers study the elimination of the discount. The Committee voted to approve the marketing of new rates to individuals under age 35, effective October 1, 1976. The 10% discount should not apply but the Package Discount of 10% will still apply.

2. Disability Income Program—Mr. Bob Miller recommended approval by the Committee of raising the Short-Term Disability and Long-Term Disability maximum benefit to \$2,000.00. It was moved, seconded, and approved that the maximum benefit for Short-Term Disability and Long-Term Disability be raised to \$2,000.00 with evidence of insurability.

3. Survivor Income Program—Mr. Karl Singer presented a number of preliminary considerations in order to enhance the marketability of the Survivor Income Product; however, it was decided to postpone any specific recommendations until the carriers have had an opportunity to study this product and submit their proposals at the next meeting. The Committee voted and approved a motion that the Survivor Income Plan not be reported on the experience report submitted by Connecticut General at future meetings and that this program be left in the pool held by Connecticut General until there is further action by the Committee on Insurance.

There being no further business, the meeting was adjourned. The next meeting is scheduled for New Orleans, La., Friday, November 5, 1976, 2:00 p.m., New Orleans Marriott Motor Hotel, Jackson Room.

A copy of the minutes and any recommendations from this meeting will be furnished to the Council as a supplemental report.

SUPPLEMENTAL REPORT OF THE COMMITTEE ON INSURANCE

MEETING—November 5, 1976, Marriott Motor Hotel, New Orleans, La. The meeting was called to order at 2:00 p.m. by the presiding officer, Dr. Voltz.

Members of the Committee on Insurance present: Phillip W. Voltz, Jr., Chairman, San Antonio, Texas; William W. Moore, Jr., Vice-Chairman, Atlanta, Ga.; J. Hoyle Carlock, Ardmore, Okla.; Andrew F. Giesen, Jr., Fort Walton Beach, Fla.; James Y. Griggs, St. Louis, Mo.; G. Baker Hubbard, Sr., Jackson, Tenn.; G. Thomas Jansen, Little Rock, Ark.; M. Bruce Martin, Huntington, W. Va.; G. Gordon McHardy, ex officio, New Orleans, La.; Joe T. Nelson, Weatherford, Texas; Mr. Sydney Lavender, legal counsel for the SMA Insurance Program, Birmingham, Ala.; and the following SMA staff member from Birmingham, Ala.: Mr. Robert F. Butts, Executive Director.

Members of the Committee absent: David L. Barclay, Little Rock, Ark.; Walter C. Jones, III, Coral Gables, Fla.; D. Joseph Judge, Anniston, Ala.; L. S. Thompson, Jr., Dallas, Texas; Thomas B. Dameron, Jr., ex officio, Raleigh, N.C.

Representing Connecticut General Life Insurance Company, Hartford, Conn. were: Mr. Bill Tiedtke; Mr. Bob Batterson; and Mr. Dave Johnson.

Representing World Service Life Insurance Company, Fort Worth, Texas were: Mr. Carl Singer; Mr. Jim Goldsmith; Dr. Larry Miller; Mr. Jim Gallagher; Mr. Jim Fulkerson; Mr. Bob Miller.

MINUTES OF PREVIOUS MEETING

Motion was made, seconded, and passed that the minutes of the previous meetings be approved, as printed.

Mr. Bob Batterson presented the total experience report for the period April 1, 1976—October 1, 1976. While there was a reduction in the Reserves for the period, it is felt that the reduction is due to an unusual variation and the rates are actually sound. It was pointed out that the contingency reserves are actually used as a rate-stabilization fund and it would be appropriate to maintain a balance in this fund of approximately one million dollars. The Committee will evaluate the experience at the next meeting.

A list of the LTD reserve claims with existing disabilities was reviewed by the Committee. Mr. Batterson recommended that because of inflation, the rates of the Major Medical Plan be increased. Motion was made, seconded, and passed that these rates be increased 20%, effective with the next billing.

Mr. Bob Miller reviewed the marketing plans and reported excellent results in reaching the younger physicians and sizable increases in premium billing.

Mr. Fulkerson reported on the administrators' work with the SMA staff in developing computerized registration, CME reporting, and membership solicitation and servicing.

Mr. Singer reported on new marketing plans.

Mr. Dave Johnson reported on claims.

Dr. Larry Miller reported that the SMA Retirement Program now has over seven million dollars practically all in the guaranteed income fund. Over 500 replies have been received as a result of an October 22 mailing. There is a large increase in the number of corporate cases. The Program now has a Master Plan for every type of IRS approved plan.

The following changes were requested:

1. Increase the initial enrollment fee from \$250.00 to \$500.00 on all corporate plans, since the services of an attorney will be required to file each individual plan effective January 1.

2. The limit of ten participants charged will be lifted so that each participant in the plan will be charged \$15.00. These changes were approved by the Committee.

The Committee was informed by World Service Life that the guaranteed rate for 1977 will be 7½%.

Mr. Sid Lavender and Mr. Al Naff were commended by the Chairman and the Committee for the excellent services they had rendered on behalf of the SMA Insurance Program.

Old Business—none.

New Business:

1. There was a discussion of the possibility of selling "group permanent life" insurance. World Service would like permission from the Committee to study this and bring thoughts and any recommendation to the next meeting. This proposal was approved by the Committee.

2. It was moved, seconded, and passed that a suicide clause be incorporated in all new life contracts.

3. The Committee considered raising limits on Major Hospital from \$100,000 to \$1,000,000.

The Committee voted to defer raising the limits of \$100,000 on the Major Hospital Plan at this time and to consider it at the next meeting when any rate changes could be considered at the same time.

4. There was a discussion of World Service Life and its relationships to other professional groups.

Mr. Singer, speaking for World Service Life, agreed that it will (1) confer with SMA prior to taking any group program that might have any effect upon the SMA Program (2) it will offer SMA first refusal with respect to any proposed innovations in the marketing of insurance programs.

There being no further business, the meeting was adjourned, to meet at a time and place to be announced—about June 1977.

APPROVED BY:

Phillip W. Voltz, Jr., Chairman
Committee on Insurance
November 6, 1976

ACTION:—Motion was made, seconded, and carried, that the report of the Committee on Insurance be approved, including any recommendations contained therein.

COMMITTEE ON JOURNAL ADVERTISING

Edwin C. Evans, *Chairman*
Mr. Robert F. Butts
J. Ralph Meier
Harris D. Riley, Jr.
Sam E. Stephenson, Jr.
Ex Officio
Mr. Roy B. Evans, Jr.
Thomas B. Dameron, Jr.
G. Gordon McHardy

The Committee is continually on the alert for advertising items which might not be appropriate for SMA publications.

In spite of the recent national trend of diminished demand for advertising in medical journals, the staff has been able to maintain a stable advertising status.

READ AND APPROVED BY:

Edwin C. Evans, Chairman
Committee on Journal Advertising
November 6, 1976

ACTION:—Motion was made, seconded, and carried that the report be accepted.

COMMITTEE ON MEDICAL STUDENTS

James Y. Griggs, *Chairman*
David L. Barclay
Johnnie L. Gallemore, Jr.
Walter C. Jones, III
Taylor H. Kirby, Jr.
Hiram C. Polk, Jr.
Harris D. Riley, Jr.
C. Rex Teeslink
Ex Officio
Thomas B. Dameron, Jr.
G. Gordon McHardy

The Committee on Medical Students submits this report with the opinion that this Program is accomplishing its purpose, has been successful thus far and should be continued. The first part of the report relates to the meeting in 1975 with criticisms, recommendations and plans, and the second part relates to the present status and possible future of the Medical Students' Program.

On November 19, 1975 at the Miami Beach Meeting, a discussion critique was held between medical student representatives from the Junior Class of 39 medical schools in the Southern Medical Association territory, and representatives of the Executive Committee of the Council and the Committee on Medical Students.

The meeting was informative and those present were pleased with the enthusiastic discussion, comments and recommendations from the students. The student representatives were eager and were obviously attempting to gain perspective relative to the S.M.A. and organized medical meetings. Most had not previously

attended a meeting of organized medicine, and they were not hesitant to make comments. All students expressed appreciation of the friendship and hospitality shown to them and all expressed appreciation for the opportunity to attend the meeting. Many students subsequently submitted letters of appreciation.

Comments from Medical Students and recommendations and actions of the Committee on Medical Students follows:

I. Preliminary Letters and Information:

- a) An information sheet containing names and addresses of other student representatives will be distributed at the Orientation Session.
- b) A pamphlet of information explaining the functions of the S.M.A. and explanation that Associate Membership is available will be presented at the Orientation Session.
- c) Life Insurance Information: A brief reference and discussion of the Life Insurance Plan will be made at the Orientation Session, followed by more specific comments at the student critique after the annual meeting. The Committee holds the opinion that a preliminary letter to student representatives prior to the meeting would be inappropriate.
- d) Continuation of the practice of inviting students from the local medical schools is recommended. A student's suggestion of calling some of the local medical students to orient visiting student representatives to the city seems logical and this will be pursued.

Dr. G. Gordon McHardy has forwarded a letter to all of the student representatives informing that he has selected Dr. Tim Lee Carter, a physician—Congressman from Kentucky, as his guest speaker for the New Orleans Meeting. Dr. McHardy has extended an invitation to the medical student representatives to meet Dr. Carter on Monday evening, November 8, 1976, after the "Tavern Time" in an informal open session, to enter into active discussion of the many problems in medicine that at present are under consideration, particularly with reference to governmental actions in the field of medicine. Dr. Carter has served 12 years in the House of Representatives and is the ranking Republican member of the House Commerce Committee on Health. A letter of invitation and familiarization has been prepared for the 630 students at Louisiana State University and to the Tulane student body to stimulate attention and activity by the students from the two medical schools.

The Committee is most appreciative and indebted to Dr. McHardy for selecting Dr. Carter to attend an open session with the medical student representatives and also for the letters of invitation to the students of Tulane and Louisiana State University. This type of invitation to students from the local medical schools can provide a very important addition and impetus to student activities at the annual meetings.

II. Housing:

Housing for students in one area in order to facilitate better acquaintance and exchanging of ideas will be arranged insofar as possible. A student lounge will also be provided as a central area for meeting and exchanging ideas.

III. Orientation Session:

A recommendation was made by some of the students to provide a pamphlet presenting synopsis of papers to be presented at the sessions. The Committee is of the opinion that this additional work should only be considered if it seemed desirable for presentation to all attending physicians present at the annual meetings rather than solely for the medical students.

More complete information as to the types of sessions available will be presented at the Orientation Session, as requested by students. Students again stated a preference for freedom of choice in attending sessions. The Committee concurs. Much favorable comment has been received at the critique and by subsequent letters relative to the "Dial Access" septern. This pamphlet will again be distributed at the Orientation Session. Following the Orientation Session, and as a result of requests for some other activity after the Orientation Session, the Committee plans this year to have a break with beverages and sandwiches followed by a "Show and Tell" session which will be supervised by Dr. Rex Teeslink. The concept of Show and Tell as

presented by Dr. Teeslink will be presentation of several cases of basically related to Anatomy, Physiology, and Pathology. The students will be encouraged to discuss the cases and it is felt that this will provide a good opportunity to "break the ice" and get acquainted.

Several students suggested the idea of a "Big Brother—Big Sister" relationship. This seemingly indicates desire to establish friendship with officers of the Association. The Committee encourages the Councilor from each state to voluntarily assume a liaison with the student representatives from his own state.

IV. Student Discussion Meetings

Although the television program will not be presented this year, due to various technical, economic, and time conflict problems, it is felt that the "Show and Tell" session after the Orientation Session, and the open session after the "Tavern Time" will provide excellent opportunities for student discussion.

V. Tavern Time:

This has always been well received and will be continued, then followed by the open session with Dr. Tim Lee Carter on Monday, November 8, 1976.

VI. S.M.A. Learn Sessions and Postgraduate Courses:

The students endorsed these with enthusiasm and accepted gracefully the concept that they be allowed to attend those sessions on a "space available" basis.

VII. Scientific Programs:

Various students directed criticism about the lack of presentations on Family Practice and Pediatrics. Many of the students at the last two annual meetings seemed oriented toward family practice.

VIII. President's Reception, First General Session Luncheon, and Presidents' Luncheon:

Student representatives will be extended invitation to these functions which provide an excellent opportunity to become acquainted with officers of the Association.

IX. Student Participation in the Southern Medical Association:

The concept of student participation in the S.M.A. activities while still at the student level has been previously discussed. The Committee at present holds the opinion that at the student level the S.M.A. serves the function of orienting them toward organized medicine and its role in the process of continuing education. Active participation in the S.M.A. while at the student level is an ambitious thought which should not necessarily be prevented but this concept will require considerable future discussion before an action is taken. A student alumni association has been suggested. No definite action has been taken although the Committee endorses the idea.

X. Student Follow-Up:

Follow-up letters of inquiry from the central office to student representatives requesting what they did about the program after arrival back at school and what they think they contributed is recommended by the Committee. The Committee has a list of every medical student representative who attended the annual meeting of the S.M.A. as guests of the Association.

In an effort to obtain long-term follow-up on these students, a letter is to be mailed to all former students who can be located with inquiry as to their current membership status, their specialty, if members, when did they join relative to medical school days; if not members, why not; where practicing; how they regard their visit to the S.M.A. from current perspective, and an invitation to become a member if not presently a member of the Association. The deans of each medical school in the Southern Medical Association area are to be contacted by letter requesting their views on the Program and as to whether the schools and students seem to benefit.

The second portion of this report is relative to the present and possible future of the Medical Students' Program.

At the Student Committee meeting of the Southern Medical Association held at Alpine, Alabama, January

23, 1976, various feelings were expressed about the students' program. Some members felt that the program was not serving a purpose and should be discontinued. The primary question seemed related to the cost-effectiveness of the Program, and recommended that a study be made in this area, plus some statement defining the goals and objectives of the Program in order to decide a continuance or discontinuance of the Program.

One primary question was as to whether it was worthwhile as an expenditure of an estimated \$25,000.00 annually for the Program. Inquiry with the office in Birmingham, reveals that whereas \$25,000.00 has been budgeted for the Program, the expenditure each year has been much less than had been thought.

Expenditures 1971-1975 are as follows:

1971 Miami Beach	\$ 9,542.66
1972 New Orleans	\$10,593.61
1973 San Antonio	\$12,628.14
1974 Atlanta	\$11,398.83
1975 Miami Beach	\$13,180.38

Research on past MSR's for the nine years 1965-1973 relative to subscribing to the **Journal** has been done by Roy Evans and has revealed that of the 407 who attended the meetings, some 53% are still active in Southern in some capacity and 68% of these are active financially. (Table 1)

TABLE 1
MEDICAL STUDENT REPRESENTATIVES
(1965-1973)

CODE	NUMBER
10	19
11	1
22	1
23	69
26	126
99	85
Not listed in Roster	106
TOTAL	407
10 Dues Paying Member	
11 Life Member	
22 Dues Paying Member Living Out of Territory	
23 Medical Student, Intern, or Resident Not Receiving SMJ	
26 Medical Student, Intern, or Resident Receiving SMJ	
99 Non-Member	

NOTES: (A) 53% still active in Southern in some capacity

(B) 68% of those (A) are active financially

Of the Class of 1973, 78% subscribed to the **Journal** for this coming year, and the Class of 1972 decreased in subscriptions to 41%.

Fifty-nine of the medical student representatives 1965-1973 currently live outside the S.M.A. territory and 64% of those are still active in Southern. (Table 2)

TABLE 2
MEDICAL STUDENT REPRESENTATIVES
CURRENTLY LIVING OUTSIDE
TERRITORY (1965-1973)

CODE	NUMBER
22	1
23	15
26	22
99	21
TOTAL	59

22 Dues Paying Member Living Outside Territory
23 Medical Student, Intern, or Resident Not Receiving **SMJ**
26 Medical Student, Intern, or Resident Receiving **SMJ**
99 Non-Member

NOTE: 64% of those living outside territory are still active in Southern.

The Committee has sought opinions relative to the Medical Students' Program from members of the Committee and also from others who have worked with or have been closely associated with the Program. Excerpts of letters of some of the physicians who have been closely associated with the Program and their opinions are herewith stated for consideration by the Executive Committee.

Dr. Gallemore stated in a communication to Dr. Dameron on February 8, 1976, that he had heard the notion that the value of the investment should be measured in considerable part in terms of active, current memberships from all of the students who have attended annual meetings in the past. He expressed the thought that through his observations at Duke that "due to the remoteness of the Junior year of medical school to the first years of established practice—that it may not be fair to measure the depth of the interest in becoming active S.M.A. members until six to eight years after they visit us."

He further suggested that the value of the Medical Students' program also include such other considerations as: a tangible continuing link with all medical schools in the S.M.A. area, with obvious goodwill; a gauge of the thinking concerns, and activities of medical students for current S.M.A. members; a unique model among medical societies for lifelong professional association.

In a communication of March 17, 1976, from Dr. Joe T. Nelson certain views were expressed as follows:

"... **If Southern is to survive**, it must be heavily involved in two activities: one is the young doctor whom we must get as quickly as possible, by any means possible, even if it includes some small amount of insurance—since we do have the money to buy premium for them. Secondly, there has to be some way to strengthen our Continuing Educational Program... From a national viewpoint, I see the young doctors taking a much more active interest in Continuing Education because they may be more realistic than older doctors, in that some form of certification or re-certification or license is going to be mandated by the Federal Government... as long as I am able and capable, you know you have my support in attempting to improve our relations with the young doctors, not only of our territory, but of the nation.

In a letter to Dr. Andrew Moore on February 3, 1976, he stated, "The objectives of this Program, as I have viewed it is to: (1) Afford to outstanding young people of the various medical schools of the South an opportunity to meet with our prestigious Association and have a unique exposure to an ongoing postgraduate medical educational experience. (2) To hopefully generate interest in this young group in membership in the Insurance Program—the tangible effects that may accrue to the Southern Medical Association would be very difficult to measure—I feel that the Program is unique and offers something to my knowledge that no other group does. It is another aspect of the educational experience of physicians—to be in the South. Though costly, I feel it should be continued as an important facet of the Southern Educational Effort."

A letter from Dr. Dameron on January 29, 1976, stated: "if we can substantiate a significant portion of our investment in the medical students visiting our meeting, I think we should continue. The program has improved yearly... If, however, we feel that the students are using this as a "lark" and are not being impressed enough to help the Southern Medical with their schoolmates to become involved when they come out into practice, it is going to be difficult to keep from investing—into a more rewarding program." Dr. Dameron stated that the question had been raised as to whether a program of invitation to senior residents might be more fruitful than the Program of Medical Students. This decision must ultimately be made by the Executive Committee.

Dr. Rex Teeslink has expressed certain concepts relative to the Medical Students' Program which are worthy of consideration and are as follows: Most of the medical student representatives who have attended the S.M.A. annual meetings have been leaders of their class and that many of those will be leaders in medicine in the future. It seems important that those student leaders have an opportunity to rub shoulders with leaders of the

S.M.A. and see that there are people in organized medicine "who do care." It seems important that the S.M.A. have a direct effect on molding the younger mind—that most of the students change their mind many times—that when the young physician has become a resident that the "dye is cast" insofar as the future is concerned. It appears the S.M.A. is offering a unique opportunity of molding the young mind in the right direction by our own examples.

With follow-up letters of inquiry to previous medical student representatives, letters of inquiry to the deans of the various medical schools in the S.M.A. territory, invitations to all students at each annual meeting as has been done by Dr. McHardy for the New Orleans Meeting, the Show and Tell sessions, the open sessions between students and a prominent speaker as is planned at the New Orleans Meeting, and some form of an Alumni Association composed of former student representatives will, in the opinion of the Committee, provide active student participation at meetings and a more effective follow-up program.

It is the hope of this Committee that the Medical Students' Program will not be prematurely dismantled at a time when the average age of physicians is dropping, the numbers of new physicians is increasing, and all members of the profession are perceiving the necessity of working together more closely.

READ AND APPROVED BY:
James Y. Griggs, Chairman
Committee on Medical Students
November 6, 1976

ACTION:—Motion was made by Dr. Meier, that the Committee's recommendation that the Medical Student Representatives' Program be continued be approved. The motion was seconded by Dr. Hubbard and carried.

COMMITTEE ON MEETING ARRANGEMENTS

Rafael C. Sanchez
General Chairman

The Committee on Meeting Arrangements for the 70th Annual Scientific Assembly of the Southern Medical Association to be held in New Orleans, Louisiana, November 7-10, 1976, was appointed in February 1976 with Dr. Rafael C. Sanchez as General Chairman. Dr. Matko Milicic was appointed as Chairman of the Tennis Committee, and Dr. E. P. Rivas, III, was appointed as Chairman of the Golf Committee. Members of the Executive Host Committee include Drs. Woodard D. Beacham, Robert F. Sharp, Sr., and J. Kelly Stone, all past Councilors of SMA; Dr. Thomas Y. Gladney, President, and Dr. H. Ashton Thomas, Secretary-Treasurer of the Louisiana State Medical Society; Dr. Paul F. Naccari, Jr., President of the Orleans Parish Medical Society; Dr. John I. Cranmer, President of the Jefferson Parish Medical Society; Dr. Allen A. Copping, Chancellor of the L.S.U. Medical Center; Dr. John J. Walsh, Chancellor of the Tulane University Medical Center; Dr. Silas E. O'Quinn, Dean of the L.S.U. School of Medicine; and Dr. James T. Hamlin, III, Dean of the Tulane University School of Medicine. Local Section Hosts were appointed in coordination with the various Section Officers.

Headquarters Hotel for the annual meeting in New Orleans is the New Orleans Marriott Motor Hotel. Scientific activities will be held in The Rivergate Convention Center.

The Councilors' Party is scheduled for Saturday evening, November 6, 1976, 7:00-10:00 p.m., New Orleans Country Club.

Invocations at the various luncheons and dinners sponsored by the Association will be given as follows: **First General Session Luncheon**, Tuesday, November 9—Reverend Lee Zimmerman, C. M., Chaplain, Hotel Dieu Hospital; **President's Night Dinner**, Tuesday evening, November 9—Father Peter V. Rogers, O.M.I., Chaplain for the Fire and Police Departments of the City of New Orleans; **Second General Session, Presidents' Luncheon**, Wednesday, November 10—Father John

Curley, S. J., Church of the Immaculate Conception.

It has been a pleasure and a privilege to work with the Officers and Local Committees of the Association on what promises to be a most outstanding and successful annual meeting.

APPROVED BY:
Rafael C. Sanchez, Chairman
Committee on Meeting Arrangements
November 6, 1976

ACTION:—None taken. Report received.

COMMITTEE ON PERSONNEL

D. Joseph Judge, *Chairman*
Andrew F. Giesen, Jr.
G. Thomas Jansen
James T. Thompson
Ex Officio
Thomas B. Dameron, Jr.
G. Gordon McHardy

The Committee on Personnel met by Conference Telephone Call in August of 1976. The personnel status is excellent. The recommendation was made to have the Chairman continue personal and frequent contact with the Birmingham office, a procedure that has proved helpful. There was no other new business.

READ AND APPROVED BY:
D. Joseph Judge, Chairman
Committee on Personnel
November 6, 1976

ACTION:—Motion was made by Dr. Perkins, seconded by Dr. Barclay, and carried that the report of the Committee on Personnel be accepted.

COMMITTEE ON PUBLIC RELATIONS

J. Ralph Meier, *Chairman*
L. S. Thompson, Jr., *Vice-Chairman*
William M. Center
Thomas B. Dameron, Jr.
G. Baker Hubbard, Sr.
Andrew M. Moore
C. Rex Teeslink
James E. White
Ex Officio
G. Gordon McHardy

The Committee on Public Relations of the Southern Medical Association met on Wednesday, November 19, 1975, at the Hotel Fontainebleau, Miami Beach, Fla. The meeting was called to order by Dr. Meier following breakfast; and Committee members in attendance were J. Ralph Meier, Chairman; James E. White; William M. Center; Thomas B. Dameron, Jr.; Walter C. Jones, III; and Mr. J. Morgan Smith, Public Relations Consultant.

Dr. Meier introduced Mr. J. Morgan Smith who presented his annual public relations report summarizing his activities for the Southern Medical Association during 1975. The recommendations of Mr. Smith were agreed upon in principle by the Committee.

Dr. Meier stated that he and Mr. Smith had discussed a proposed program for the New Orleans Meeting which would be a first for the SMA. This program would concern itself with "PERSONAL MEDICAL REPORT FOR THE EXECUTIVE." Mr. Smith envisioned working through the Chamber of Commerce in New Orleans and inviting at least a hundred top executives to either an all day or half-day session which would concern itself with medical problems facing employers and perhaps their families. The Committee approved the concept unanimously and asked that Dr. Meier and Mr. Smith present this to the Executive Committee for their approval.

Dr. Center brought up the idea of utilizing county medical society bulletins for either paid advertising or free publicizing of SMA activities and meetings. Dr. Center moved and Dr. Jones seconded a motion that the county medical society bulletins be contacted concerning this matter.

Dr. Meier and Mr. Evans next brought up a proposal from Physicians' Resources, Inc. concerning the proposed production of telecourses produced under the auspices of SMA and sponsored by grants from pharmaceutical companies. After a period of discussion, it was the Committee's recommendation that, pending approval by the Executive Committee of the Council at its Midwinter Meeting, that Physicians' Resources, Inc. be allowed to attempt to solicit financial support. The Committee realized the ability of PRI and their past experience with other medical organizations, but also felt that perhaps other organizations might like to submit proposals on this matter.

The Committee by unanimous vote approved the extension of Mr. J. Morgan Smith's employment as Public Relations Consultant for the year 1976.

General discussion followed concerning the various public relations programs of the SMA. The meeting was adjourned at 10:45 a.m.

RECOMMENDATIONS TO THE EXECUTIVE COMMITTEE OF THE COUNCIL BY THE COMMITTEE ON PUBLIC RELATIONS

Recommendation No. 1

The Committee on Public Relations recommends the extension of Mr. J. Morgan Smith's employment as Public Relations Consultant by the Southern Medical Association.

Recommendation No. 2

The Committee on Public Relations recommends that proposed paid advertising in county medical society bulletins be explored as a possible additional means of communicating with southern physicians.

Recommendation No. 3

The Committee on Public Relations recommends that the Executive Committee of the Council explore the possibility of Physicians' Resources, Inc. producing telecourses on various subjects for the SMA. This would all be predicated upon PRI obtaining funds from pharmaceutical companies. The Committee also recommends that this program be supervised by either the Committee on Scientific Work or a specially appointed Committee. (Physicians' Resources, Inc. was encouraged after the meeting to begin attempting to solicit funds with the understanding that the final approval of this program must come from the Executive Committee of the Council at its Midwinter Meeting in Birmingham.)

For action taken on the above recommendations, please refer to PROCEEDINGS OF THE EXECUTIVE COMMITTEE OF THE COUNCIL, Point Aquarius Country Club, Alpine, Ala., January 25, 1976, Report of the Committee on Public Relations, RECOMMENDATIONS TO THE EXECUTIVE COMMITTEE OF THE COUNCIL, BY THE COMMITTEE ON PUBLIC RELATIONS, Recommendations No. 1, No. 2, and No. 3, ACTION.

READ AND APPROVED BY:

J. Ralph Meier, Chairman
Committee on Public Relations
November 6, 1976

ACTION:—Motion was made, seconded, and passed that the report of the Committee on Public Relations be approved.

COMMITTEE ON SPECIAL AWARDS

Andrew F. Giesen, Jr., *Chairman*
(members unpublicized)

The Chairman of the Committee on Special Awards,

Dr. Giesen, advised the headquarters office that the Committee had reviewed all nominations for the various awards of the Association and made the following awards:

DISTINGUISHED SERVICE AWARD—J. Garber Galbraith, M.D., Birmingham, Ala.

SEALE HARRIS MEDAL—John S. Fordtran, M.D., Dallas, Texas

READ AND APPROVED BY:

Andrew F. Giesen, Jr., Chairman
Committee on Special Awards
November 6, 1976

ACTION:—Dr. Judge moved the acceptance of the report of the Committee on Special Awards. Dr. White seconded the motion and it carried.

ADVISORY COMMITTEE TO THE BOARD OF TRUSTEES

(Known as the
Long-Range Planning Committee)

G. Thomas Jansen, *Chairman*
G. Baker Hubbard, Sr., *Vice-Chairman*
David L. Barclay
Andrew F. Giesen, Jr.
N. C. Hightower, Jr.
D. Joseph Judge
J. Ralph Meier
M. Pinson Neal, Jr.
Rafael C. Sanchez
C. Rex Teeslink
Ex officio
Thomas B. Dameron, Jr.
G. Gordon McHardy

The work of the Long-Range Planning Committee was, in essence, conducted at the SMA Study Committee at Alpine, Alabama, on January 23 and 24, 1976. Virtually all members of the Long-Range Planning Committee were present, in addition to other representatives of the Southern Medical Association and Loren Williams, Ph.D., the Education and Planning and Development Program, Director of the Virginia Commonwealth University. The Proceedings of this Study Committee are the personification of this year's Long-Range Planning Committee Report.

For action taken on recommendations made by the SMA Study Committee, refer to PROCEEDINGS OF THE EXECUTIVE COMMITTEE OF THE COUNCIL, Point Aquarius Country Club, Alpine, Ala., January 25, 1976.

READ AND APPROVED BY:

G. Thomas Jansen, Chairman
Long-Range Planning Committee
November 6, 1976

ACTION:—Dr. Hubbard moved the acceptance of the report of the Long-Range Planning Committee. Dr. Meier seconded the motion and it carried.

ANNOUNCEMENTS AND ADJOURNMENT

Dr. Dameron announced that the Second Session of the Council would begin with breakfast with the Associate Councilors on Sunday, November 7, 1976, 8:00 a.m. in the Bonaparte Room, Marriott Motor Hotel. The Section Session of the Council would follow in Mardi Gras Balconies M & N.

Dr. Dameron adjourned the meeting at 5:15 p.m.

PROCEEDINGS OF THE COUNCIL

New Orleans, La., November 7, 1976, 9:00 a.m.

CALL TO ORDER AND ROLL CALL

The Council of the Southern Medical Association met in the Mardi Gras Balcony, Sections M & N, Marriott Motor Hotel, following a breakfast with the Associate Councilors in the Bonaparte Room. The meeting was called to order at 9:00 a.m. by the Chairman, Dr. Dameron.

Members of the Council present: Thomas B. Dameron, Jr., *Chairman*, Raleigh, N.C.; G. Baker Hubbard, Sr., *Vice-Chairman*, Jackson, Tenn.; D. Joseph Judge, Anniston, Ala.; W. Reams Perkins, Washington, D.C.; Walter C. Jones, III, Coral Gables, Fla.; Edwin C. Evans, Atlanta, Ga.; Hiram C. Polk, Jr., Louisville, Ky.; J. Ralph Meier, New Orleans, La.; Robert T. Singleton, Baltimore, Md.; James Y. Griggs, St. Louis, Mo.; James E. White, Tulsa, Okla.; William W. Vallotton, Columbia, S.C.; M. Pinson Neal, Jr., Richmond, Va.; M. Bruce Martin, Huntington, W. Va.

Members of the Council absent: David L. Barclay, Little Rock, Ark.; James E. Thompson, Moss Point, Miss.; L. S. Thompson, Jr., Dallas, Texas.

Councilors-Elect present: R. D. Richards, Baltimore, Md.; Robert K. Dorton, St. Louis, Mo.; George W. Liles, Concord, N. C.

Councilors-Elect absent: none.

Associate Councilors present: Maxine Schurter, Washington, D. C.; George S. Ellis, New Orleans, La.; Henry G. Kelley, Jr., Spartanburg, S. C.; John B. Lynch, Nashville, Tenn.; N. C. Hightower, Jr., Temple, Texas; W. Nash Thompson, Stuart, Va.

Others present: G. Gordon McHardy, President, New Orleans, La.; G. Thomas Jansen, President-Elect, Little Rock, Ark.; Andrew F. Giesen, Jr., Fort Walton Beach, Fla.; Thomas J. Zaydon, Second Vice-President, Miami, Fla.; R. H. Kampmeier, Editor, *Southern Medicine*, Nashville, Tenn.; Margaret S. Klapper, Special Consultant to the Committee on Scientific Work, Birmingham, Ala.; Donald E. McCollum, Durham, N. C.; and the following SMA staff members from Birmingham, Ala.: Mr. Robert F. Butts, Executive Director; Mr. Roy B. Evans, Jr., Assistant Executive Director; Ms. Pamela Galbaugh, Administrative Assistant.

REPORTS OF STANDING COMMITTEES NOT PREVIOUSLY PRESENTED

COMMITTEE ON CONSTITUTION AND BYLAWS

James E. White, *Chairman*
James Y. Griggs
D. Joseph Judge
W. Reams Perkins
William W. Vallotton
Ex Officio
Thomas B. Dameron, Jr.
G. Gordon McHardy

As instructed by the Council the previous day, the members of the Committee on Constitution and Bylaws

reviewed the proposed changes to the Constitution and Bylaws, and submitted the following amended changes to the Council for consideration:

CONSTITUTION, Article IV, Section 2, (c)

SECTION OFFICERS: Section officers shall be elected by the members of the respective Sections at a regular session of the Section during the annual meeting. Section officers assume office at the end of the annual meeting during which they were elected and shall be members of the Association. The officers of each Section shall consist of a Chairman, Vice-Chairman, and, when so desired by the members of the Section, a Chairman-Elect as an additional officer or in place of the Vice-Chairman, elected annually. The Secretary shall be elected for a minimum of a two-year term. A Secretary-Elect shall be elected at the beginning of the last year of office of the Secretary.

BYLAWS, Chapter 2, Section 10

(A) **Chairman.** The Chairman shall preside at the meetings of the Section and shall perform such duties as may be provided by the rules of the Section. He shall be responsible for selecting and inviting the Section's official guest speaker and shall cooperate with the Secretary in arranging the Section program for the annual meeting.

(B) **Vice-Chairman.** The Vice-Chairman shall assist the Chairman in his duties and preside over the Section meetings in the absence of the Chairman.

(C) **Secretary.** The Secretary shall arrange the Section program for the annual meeting in cooperation with the Chairman and in accordance with rules and regulations set forth in the Association's CONSTITUTION AND BYLAWS. He shall be the official correspondent with reference to the program with the headquarters office, maintain the Section's official records, consult with the Executive Director to determine if the prospective nominees for Section officers are eligible to hold office prior to their nomination, and shall be responsible for collecting papers presented at the annual meeting and forwarding them, along with the list of newly elected Section officers, to the headquarters office. He shall attend the annual Section Secretaries Conference to be held each winter, near February 1, for the purpose of formulating the general schedule of scientific sessions for the annual meeting in cooperation with the Committee on Scientific Work. The Association shall reimburse the Section Secretaries for expenses incurred in attending the Section Secretaries' Conference. The Chairmen and Secretaries of the Sections may be invited to meet with the President and the Committee on Scientific Work immediately preceding or during each annual meeting.

(D) **Secretary-Elect.** The Secretary-Elect shall make himself acquainted with the duties of the Secretary and attend the Section Secretaries' Conference.

(E) **Steering Committee.** Each scientific Section shall have a formal Steering Committee made up of the current Chairman, Vice-Chairman, Secretary, the Chairman-Elect, if this office is utilized by the Section, and the three immediate past Chairmen. The duties of the Section Steering Committee shall include: aid in planning the work of the Section; evaluation of papers read before the Section for possible publication; serve as a Section nominating committee; fill vacancies that occur among Section officers and perform such other duties from time to time as they appear necessary.

ACTION:—It was moved and seconded that the amended changes in the Constitution and Bylaws, as recommended by the Committee on Constitution and Bylaws, be accepted. Motion carried.

**Report of the Committee
on Dial Access**
(Subcommittee of the
Committee on Scientific Work)

In the spring of this year, Dr. Dameron, Chairman of the Council, invited me to assume the duty of Chairman of this Committee. I accepted this assignment to become effective in the summer of this year.

Since my information with respect to Dial Access was peripheral, Drs. Robert C. Hickey and Charles K. Tashima, as well as Dr. Robert Moreton agreed with me that I should visit M.D. Anderson Hospital to learn of this activity first hand. My visit in mid-August was most fruitful. Not only was I briefed with regard to the program but sat at the "business end" where requests came in for tape readings and learned how questions are "fielded" when no tape is available on a given topic.

The M.D. Anderson representative and I have exchanged a couple of letters in follow up discussions. We propose the following plan of action.

(1)—That a Committee on Editorial Policy be established to consist of two representatives from M.D. Anderson Hospital, two from the SMA along with representatives from administration, i.e., Mr. Hostetter and Mr. Evans. Dr. John Murray, of Houston, appointed to the Committee by the Chairman of the Council would be representing both the SMA and M.D. Anderson. In addition, it is agreed that there should be a representative from the American Cancer Society and the American Association of Cancer Instructors. This committee will have as its objectives the following:

- (1)—Nationwide expansion of Dial Access.
- (2)—Since three years of "seed money" is the limit which one may expect in Federal support these days, the Committee will need to search for support by: (a) State Chapters of the ACS, (b) state medical associations and (c) Regional Comprehensive Cancer Centers. (The Houston group has been active in recent months in inviting organizations to participate in the program with favorable answers so far by six).
- (3)—The commitments such groups would need to make to enroll in the Dial Access program: such as those of financial support for a stated time, the distribution of informational literature, advertisement, and the implementation of questionnaires.
- (4)—Application for Category 1 or 4 credit in continuing education under the sponsorship of SMA. I am exploring this subject with the AMA Division in Continuing Education. The evaluation questionnaire now includes a question as to interest in this regard.

If the Council approves this plan of action, we plan a meeting of this Committee before the end of the year so a further Report may be made to the Executive Committee of the Council in early 1977.

I am enthusiastic about this educational program by SMA and the M.D. Anderson Hospital. Nationwide expansion of Dial Access will present the face of SMA in areas where little is known concerning it and its objectives. As you know, the June issue of Southern Medicine carried an excellent summary of the activities of Dial Access to date.

READ AND APPROVED BY:
R. H. Kampmeier, Chairman
Dial Access Committee
November 7, 1976

ACTION:—Motion was made by Dr. Meier, seconded by Dr. White, and carried that this report be accepted.

**THE SOUTHERN MEDICAL
ASSOCIATION AND
ITS EDUCATIONAL PROGRAMS**

*A Report
Submitted By*

Margaret S. Klapper, M.D.

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Medicine
Assistant to the Vice President for Health Affairs
Director of the Office of Health Extension, Public
Service and Research

University of Alabama Medical Center
University of Alabama in Birmingham

FOREWORD

I would like to express appreciation to those within the Southern Medical Association who have paid me the compliment of asking my opinion as a medical educator and consultant. The staff has been of invaluable assistance in providing historical documents, records and other data. The individuals interviewed were all interested in the SMA and my endeavors. They all gave generously of their time, provided me food for thought and a forum to test my ideas.

The report then is not mine alone, and I am grateful to all who contributed in any way to it.

**THE SOUTHERN MEDICAL
ASSOCIATION**

"The exclusive purpose of the Southern Medical Association shall be to develop and foster scientific medicine. It shall have no direct connection with or control over any other society or organization, nor shall it at any time be controlled by any other society or organization. All meetings of the Association shall be for the purpose of reading and discussing papers pertaining to the science of medicine, to public health and to medical education. The Association shall not at any time take active part in any economic, political sectarian questions or concerted movements for securing legislative enactments."

This statement of purpose of the Southern Medical Association (SMA) expresses the educational mission of the Association established in 1906. Now during its 70th year, the leadership has elected to examine itself to determine how effectively it is meeting this mission and what might be its role for the future. My responsibility as consultant is to assist in this endeavor through a study of the educational programs of the Association and to provide a report including recommendations to the Association at the meeting of the Executive Board and Council in November, 1976. The study was conducted during the interval between March and October, 1976 and was provided through the Office of Health Extension, Public Service and Research of The University of Alabama in Birmingham Medical Center.

In the publication prepared for the Golden Anniversary of the SMA in 1965, C. P. Loran, then former Secretary-Manager, stated in his introductory comments, "To foresee the future with intelligence requires a knowledge of the past." My first step was to expand upon the knowledge of the SMA which I already had as a life member and former secretary and chairman of one of the sections (1960-65), as well as a scientific exhibitor and contributor of manuscripts for publication in the **Journal**.

When the SMA was organized in October of 1906, the feeling had grown among physicians in the South that there was a real need for an organization of physicians in the South where there would be a closer relationship than in the national organization, the American Medical Association (AMA), and where the problems and interests of Southern medicine could be specifically

studied. The difficulties of travel prior to air transportation, the height of feelings and sensitivities between north and south, the limited number of medical schools and scientific societies in medicine all apparently were considered by the "founding fathers." These factors tended to draw physicians of the South into a close relationship of comradeship and mutual interest.

When the Association was organized, a council as governing body was established. This body consists of a physician appointed by the president from each of the states comprising the Association. In 1938, provision was made for an executive committee of the council with power to act for the council between regular and called meetings of the council. The executive committee is composed of five members elected by the council, the president, president-elect, and first vice-president. Present structure includes the usual organization of officers, a council, an executive committee of the council, a board of trustees, and an editorial board. There are a number of standing committees with specific responsibilities for Association business and officers for each of the sections. At the organizational meeting in 1906 three sections were named representing major areas of medicine. By 1942 18 additional sections had been added. Presently there are 22 active sections representing the various areas or specialties of medicine, and the territory includes 16 states and the District of Columbia.

In reviewing the history of the SMA, interviewing the staff, meeting and talking with various officers, past officers and members, one is impressed by the depth of thought which went into the early planning and organizational structure and the cohesiveness which was apparent from the outset. One is impressed by the stature of the names which appear and reappear in the history of the Association as well as by the individuals listed in current and recent yearbooks. Many are well known throughout the academic or scientific worlds of medicine, and their fame extends beyond the southern region into national and international recognition.

During and following the November, 1975 meeting of the SMA concern was expressed as to whether the SMA was adequately meeting its mission, whether it was assuming its rightful place in the growing number of scientific societies, annual meetings and continuing education courses. A study committee was appointed to take an in-depth look at the programs of the Association. This committee met at the Point Aquarius Hotel, Alpine, Alabama on January 23 and 24, 1976. Dr. Thomas B. Dameron, Jr., Chairman of the council, presided; and Dr. Loren Williams served as moderator for the program.

Members of the Study Committee:

Present

David L. Barclay, M.D.
Herbert W. Birch, M.D.
Thomas B. Dameron, Jr., M.D.
Edwin C. Evans, M.D.
John T. Galambos, M.D.
Andrew F. Giesen, Jr., M.D.
G. Thomas Jansen, M.D.
D. Joseph Judge, M.D.
G. Gordon McHardy, M.D.
J. Ralph Meier, M.D.
M. Pinson Neal, Jr., M.D.
Robert T. Singleton, M.D.
C. Rex Teeslink, M.D.

Absent

G. Baker Hubbard, Sr., M.D.
Rafael C. Sanchez, M.D.

Guests

Loren Williams, Ph.D., Professor and Director of Educational Plans and Development, Medical College of Virginia
Richard E. Ballard, Hoechst-Roussel Pharmaceutical Company

Staff

Robert F. Butts
Roy B. Evans, Jr.
Michael E. Haworth, III
Pamela K. Galbaugh

Much thought went into the preparation of the agenda and the various activities of the SMA which have an education component were addressed in detail. Agenda material available for review identified areas of concern and weaknesses. Many pertinent recommendations were made at this time, and some were implemented in the program planning for the 1976 scientific assembly.

The question as to whether the SMA should have a director of education was raised. Dr. Williams suggested that the Association should first know exactly what its commitment toward continuing education was before making such a decision. Following this meeting I was asked to serve as an educational consultant to the SMA, and to submit an advisory report to the Association including suggestions and recommendations. The following questions raised by Dr. Loren Williams were provided for consideration in the report:

1. Should there be a full-time or part-time director of continuing education for SMA?

2. If there should be a need for such a director (either part-time or full-time) what characteristics should the director possess—M.D.—Ph.D.—specialized training—specialized experience, etc.?

3. If there should be such a director, what are major activities for which he or she should have some degree of responsibility?

Answer to the first three questions should derive, at least in part, from the questions asked below.

4. What are the current activities now sponsored by SMA that might be classified under the subject of continuing education and

- What are the cost of these activities?
- What are the characteristics of the audience?
- What is the evidence that these activities are based on audience needs?
- What is the evidence that these activities are worthwhile?

5. What are the continuing education activities now undertaken by SMA but perhaps appropriate for future development?

- How much would these activities cost?
- What audience would they address?
- How would audience needs be determined?
- How would effectiveness of activities be determined?

6. What continuing education activities, now sponsored by SMA are available now and what overlap is there in SMA region between these activities and those noted in four and five above?

Although not addressed in this order, these points are covered in this report.

In reviewing the history and educational programs of the SMA along with the evolutionary changes of medicine, medical education including continuing education, specialization, and the concomitant number of programs, societies and annual meetings, the question which first arises is "Is there a need for the SMA?" Founded at a time when there was little cohesiveness, communication and resources in medicine in the South, but Southern physicians sharing the same intense pride of Southern people in general, the SMA has served a useful purpose in the past. Now the question arises "Does it have a role in the future?" Medical education has expanded tremendously throughout the entire country, there are 41 medical schools within the SMA territory and at least three more under development. There are well-developed functional medical societies in each of the states as well as the AMA, and societies for each of the specialties and many of the sub-specialties. In the years since World War II graduate and post-graduate medical education has moved rapidly forward, specialties and specialty societies have become functional each with a strong responsibility toward continuing professional competence. The number of continuing education courses has burgeoned (5,800 courses by 1,182 institutions and organizations for the period of September 1, 1976 to August 31, 1977 according to Journal of American Medical Association, August 9, 1976). An additional large number are planned too late for inclusion, so this figure of 5,800 is less than fully indicative. Every medical school within the Southern territory accepts some responsibility toward continuing education and state societies, in increasing numbers, are requiring continuing education for membership. So again, one must ask, "Is there a continued need for the SMA?" when at

the beginning of each of its publications and programs it states "The exclusive purpose of this Association shall be to develop and foster scientific medicine."

But the SMA has a vigor and vitality of its own—a vitality which would be hard to annihilate. It is this very vitality which prompted this study to determine the future role of the SMA, and the directions it may take to remain in step with scientific medicine, and assume an appropriate position in the medical arena of the future. The prime importance the SMA enjoyed in its earlier years must now be shared with many other organizations, yet it continues to occupy a position of prominence in medicine. The strengths of the organization are such that it still has the potential for providing quality programs in the competitive field of medicine.

Yes, there is a need, a continuing need for the SMA, in my opinion. Geographic, regionalized pride of accomplishment and of service in a country as large as the United States provide a stimulus for individuals of common heritage, customs and traditions to come together in an atmosphere of friendship to address common goals—in this instance, the goal of the SMA "to develop and foster scientific medicine." **The SMA can and should do so with continued pride, in an atmosphere of comradeship and dedication complimented now by the tremendous medical resources of the South.**

The next step then in reviewing the SMA is to look at its strengths and weaknesses so that its future role may be built upon a foundation of its strengths, and weaknesses may be eliminated or strengthened. The major strengths of the Association are the resources which exist within the region. The membership itself of the SMA is its major resource comprised of practicing physicians, scientists, and academicians. Of these the practicing physicians, themselves, are the major resource, 35% of the physicians of the region are members of the SMA and the majority of these are primary care physicians. Since 1968 this percentage has remained almost constant (18,997 of 55,017, 35%, in 1975). This resource is representative of all areas of medicine and those physicians who are not members of the Association are a resource to be called upon as necessary or desirable for contributions to the Association programs. They likewise constitute the pool of potential members. There are a few national or regional associations which include membership of all types of physicians and which addresses all areas of medicine. The SMA is one of these and the number of sections has increased from the original three to the present number of 22. The potential for cross disciplinary programming and interfacing of programs is an area of particular strength worthy of further emphasis.

The governing body of the Association is a vigorous and major strength. The organizational base and committee structure are so constituted as to provide representative participation, checks and balances to the functions of the society. One has only to work within the Association or converse singly with these individuals to recognize their forcefulness and dedication. Ancillary services of the Association must also be examined for their contribution to the strengths of the Association, the size of membership, for instance, provides a pool of sufficient size to make available various insurance programs to the advantage of the membership.

The medical schools and teaching hospitals of the region are a resource both within themselves and through the academicians serving as individual members. Medical students, residents and fellows are resources for the future, and programs of involvement or assistance for them are recognized by the leadership. The Medical Student Program and the Program on Grants and Loans encourage educational development of younger physicians and introduces them to the SMA.

The SMA has the reputation of being a friendly organization, one in which there is a mingling of social and medical interrelationships, one in which the climate of meetings tends to be relaxed and there are social events to foster the further development of ties of friendship, hospitality and the closeness of Southern people.

Each of the strengths, however, has a potential for weakness or modification through competition with other associations. The membership has become more specialized and specialty meetings compete with the

SMA for attendance. There tends to be less continuity of participation in SMA by individual members, posing a threat to development of leadership in the Association and the development of interpersonal relationships.

Most physicians now expect to belong to their respective specialty societies and join as soon as eligible. SMA must compete with these societies for the young physician's membership which is so necessary for the regeneration and continuity of an association. Unless the SMA is successful in its efforts to encourage membership on the part of young physicians and their active involvement in SMA activities, it will suffer.

The organizational structure of the Association provides for involvement of many individuals. However, as in many such situations, the potential for the responsibilities of the Association to be borne by a few exists. This seems to be so in the SMA at the present time; the power structure of the Association rests within only a few individuals.

The specific programs or activities of the SMA which are largely educational number six, the Official Publications of the SMA, the Dial Access System, the Visiting Professorship Program, the Medical Student Program, the Program on Grants and Loans and the Annual Scientific Meeting. In order to study these programs in depth, documents and data from the files of SMA were utilized and discussions held with individuals of educational and editorial experience as well as many of those currently engaged in these activities of the SMA, e.g., section secretaries, committee chairmen or members of committees of the SMA. The persons who have contributed to this report through discussions, or providing information are:

- Aldrete, Joaquin S., M.D. Secretary, Section on Surgery, SMA. Professor of Surgery, University of Alabama, UAB, Birmingham, Alabama.
- Child, Jim. Vice President, Williamson, Merrill, Taylor and Darling Marketing and Management Services, Birmingham, Alabama.
- Dameron, Thomas B., Jr., M.D. Chairman of the Council, SMA, Raleigh, North Carolina.
- D'Angelo, Joseph. Director, Continuing Education, Tulane University School of Medicine, New Orleans, Louisiana.
- Dismukes, William E., M.D. Secretary, Section on Medicine, SMA. Associate Professor of Medicine, University of Alabama School of Medicine, UAB, Birmingham, Alabama.
- Finley, Wayne, Ph.D., M.D. Professor of Pediatrics, University of Alabama School of Medicine, UAB, Birmingham, Alabama.
- Frommeyer, Walter B., M.D. Distinguished Professor of Medicine, University of Alabama School of Medicine, UAB, Birmingham, Alabama.
- Galbraith, J. Garber, M.D., Past President, SMA. Professor of Surgery, University of Alabama School of Medicine, UAB, Birmingham, Alabama.
- Garrison, Glen E., M.D. Director, Division of Continuing Education, Medical College of Georgia, Augusta, Georgia.
- Gehringer, Gerald, M.D. Secretary, Section on Family Practice, SMA. Chairman, Department of Family Practice, Louisiana State University School of Medicine, New Orleans, Louisiana.
- Griggs, James Y., M.D. Councilor, SMA; Chairman, Committee on Medical Students, St. Louis, Missouri.
- Hickey, Robert, M.D. Medical Director, M.D. Anderson Hospital and Tumor Institute; Director of the Dial Access System, Houston, Texas.
- Hightower, N. C., Jr., M.D. Chairman, Committee on Scientific Work, Temple, Texas.
- Hill, S. Richardson, Jr., M.D. Vice President for Health Affairs, UAB, Birmingham, Alabama.
- Hostetter, Stuart. Dial Access System. Houston, Texas.
- Holley, Howard L., M.D. Professor of Medicine, University of Alabama School of Medicine, UAB, Birmingham, Alabama.
- Hubbard, G. Baker, Sr., M.D. Vice-Chairman, Executive Committee of the Council, Jackson, Tennessee.
- Hurst, David C., Ph.D. Professor, Chairman, Department of Biostatistics, University of Alabama School of Medicine, UAB, Birmingham, Alabama.
- Judge, D. Joseph, M.D. Councilor, SMA, Anniston, Alabama.

Kampmeier, Rudolph H., M.D. Past President, SMA. Editor, **Southern Medicine**. Professor, Emeritus, Vanderbilt University School of Medicine, Nashville, Tennessee.

Kirkpatrick, Donald B. Bonzo and Associates, Birmingham, Alabama.

Meador, Clifton K., M.D. Editorial Board, **SMJ**. Chief of Medicine, St. Thomas Hospital, Nashville, Tennessee.

Meier, J. Ralph, M.D. Councilor, New Orleans, Louisiana.

Neal, M. Pinson, Jr., M.D. Councilor, SMA. Provost, Medical College of Virginia, Virginia Commonwealth University, Richmond, Virginia.

Riley, Harris D., Jr., M.D. Editor, **SMJ**. University of Oklahoma Health Sciences Center, Oklahoma City, Oklahoma.

Sanchez, Rafael C., M.D. Associate Dean, Continuing Education, Louisiana State University School of Medicine, New Orleans, Louisiana.

Sherrill, Robert, M.D. Professor, Chairman, Department of Family Medicine, University of Alabama School of Medicine, UAB, Birmingham, Alabama.

Suydam, Felicity. Dial Access System, Houston, Texas.

Teeslink, C. Rex, M.D. Augusta, Georgia.

Tharp, Ralph, M.D. Assistant Professor, Department of Family Practice, University of Alabama School of Medicine, UAB, Birmingham, Alabama.

Tyndal, Charles, M.D. Secretary, Section on Gynecology, SMA, Birmingham, Alabama.

Wells, Benjamin B., M.D. Associate Dean, Director of Continuing Medical Education, University of Alabama School of Medicine, UAB, Birmingham, Alabama.

Wolff, Albert E., Ph.D. Professor, Biostatistics, University of Alabama School of Medicine, UAB, Birmingham, Alabama.

Solicitation of a response from the membership of the SMA in regard to their interests and needs in continuing education was explored with two biostatisticians from the Department of Information Sciences at The University of Alabama in Birmingham. This discussion was initiated to gain relevant information as to the values of surveys and questionnaires in the assessment of the needs, attitudes, and interests of physician practitioner groups in scientific meetings and other continuing education activities. In an association as large as the SMA, and as diverse, a stratified type of sampling would be required. The numbers of individuals contacted would be relatively small, but the cost per individual sample member would be correspondingly large. This would be necessary to gain meaningful information which would be unbiased and unskewed, as are the results from so many questionnaires sent to large samples with a small percent of returns. The axiom "No information is better than misinformation" was repeatedly stated, and it was emphasized that many other statistics could be made available to the SMA from such a study.

The Department of Informational Sciences at UAB is a well-staffed department with experience in designing and implementing such studies on a contract basis. Such a study was discussed and to be meaningful would require a full-time individual assigned to the program and would take six months to a year to conduct. It would, however, provide a pool of individual sample members which could be used for other purposes as well. Such a resource as that of UAB undoubtedly exists in other schools within the region.

Although educational needs can be expressed by the learner participants, and their input is important to program planning, their participation is probably best secured at a time of individual program planning. Objectively determined educational needs to utilize in the planning process and the decision making process can arise from recognized new procedures and knowledge in medicine and preventive medicine. Procedures and epidemiological studies showing recognized preventive or therapeutic measures are not being fully utilized in program planning. Chart audit, committees such as tissue committees, utilization review, mortality/morbidity studies, etc., are all alternate methods of determining educational needs.

A detailed study of attitudes, perception of educational needs, and resources within the membership, conducted in a valid way, might provide meaningful information which would be helpful to the overall

program planning of the SMA. Such a study is worthy of consideration at some later date, but would be premature at this time.

Recommendation: PRESENT DECISIONS CONCERNING THE DIRECTION WHICH THE SMA WILL TAKE IN REGARD TO ITS EDUCATIONAL PROGRAMS SHOULD BE MADE BY THE GOVERNING BODIES OF THE ASSOCIATION.

OFFICIAL PUBLICATIONS OF THE SMA, THE SOUTHERN MEDICAL JOURNAL

It was not until 1921 that the SMA owned its journal. Between 1906 and 1910, various publications were named the official publication of the Association. In 1910, the **Southern Medical Journal** (Volume 3, number 11) of Nashville was purchased by an Alabama physician (Seale Harris) and was consolidated with the **Gulf States Journal of Medicine and Surgery**, retaining the name **Southern Medical Journal (SMJ)**. It became the official journal of the SMA as of December, 1910. A report of the council at the general session of that meeting contained the following: "The council further congratulates the journal of this Association upon the merger whereby it unites forces with the **SMJ** of this city, which from its inception has been one of the cleanest and best edited medical journals in the United States, and of which every doctor in the South is justly proud." In 1921, the SMA with a membership of 6,328 purchased the **SMJ**. The list of its editors, associate and assistant editors includes names of national and international renown.

Today the **SMJ** is one of the few remaining journals other than state society journals which addresses all areas of medicine. It shares this distinction in this country with the **Journal of the American Medical Association**, the **Journal of the National Medical Association**, and the **New England Journal of Medicine**. It is provided all members of the SMA as part of the membership and is available on subscription to others. It presently has a circulation of 22,785 to members and 717 to libraries and subscribers throughout the world. It is available at \$4.00 per subscription to students, residents and fellows, and these account for an additional 1,467 subscribers. The **SMJ** is served by an editor and editorial board, and appropriate individuals throughout the country are called upon to assist the board by reviewing manuscripts, preparing editorials, etc.

For many years (1954-1972) Dr. R. H. Kampmeier served as editor and was responsible for a journal which played a large role in promoting the SMA and medicine in the South. He still serves as an advisory editor. The present editor, Dr. Harris D. Riley, Jr., has served since January of 1972. He has attempted to stimulate manuscript submissions and has initiated sections on Current Concepts in Therapeutics and in Diagnosis. He also emphasizes review articles and editorials. There is an annual meeting of the editorial board, and he asks each member to be responsible for writing or soliciting two editorials per year.

Journals for the past year were reviewed in detail. Most individuals interviewed were asked to make comments about the **Journal** and at least six of these have had editorial experience or serve on the editorial board. Comment from an editorial board member was that the editor is a hard taskmaster, calling upon him to review 15-30 articles per year. The editor does tend to utilize his editorial board, and pressures them for submissions of editorials. The rejection rate for manuscripts is approximately 30-40%.

In the June, 1976 issue of the **SMJ**, the editor expressed appreciation to the many who have assisted the editorial board in reviewing articles. This list was impressive, consisting of more than 400 names, many of whom are well known throughout the country.

With few exceptions, the **Journal** was considered satisfactory to excellent by all interviewed. Several commented that it alone was worth the cost of membership. For those in the practice of medicine, practically every issue offers something of interest. Generally speaking, the articles are short, to the point, and written with a practitioner in mind. A few commented that it might be worth considering an easier narrative style in line with some of the present trends. There had been some consideration of adopting some of

the free style or multiple choice questions of the "throw-away journals," but the editorial board did not find this acceptable.

Satisfaction was expressed concerning the size of the print and the caliber of the paper. A few expressed concern over the *Journal* becoming "too big," that thick journals tend to discourage prompt reading and are "put aside for the 'extra time' which is never found!" There was concern expressed about the time interval required for publication, 18 months between the time of presentation at an annual meeting being not unusual. Recently, additional pages have permitted "catching up" of most of the backlog, but delays in publication remain a problem.

The number of manuscripts, the distance between SMA offices and that of the editor coupled with the limited time for development of interpersonal relationships between the staffs of the two offices has posed some difficulties in communications. The staff of SMA are dedicated individuals experienced in publishing a journal, and the caliber of the *Journal* is indicative of the editor's and his predecessor's commitment as editors. The working relationships between the two offices (SMA and Dr. Riley's) requires attention to foster healthy working relationships, and to avoid costly duplication of both time and expenditures. At times there is evidence of considerable strain in these relationships.

In summary, the *SMA* is an excellent *Journal* providing coverage of all areas of medicine. It is educational in content and is serving needs and interests of the membership.

Recommendations: 1) CONTINUE TO KEEP ABREAST OF PROGRESS IN MEDICINE THROUGH THE MANUSCRIPTS, EDITORIALS, AND CURRENT CONCEPTS OF DIAGNOSIS AND TREATMENT.

2) CONTINUOUS ATTENTION TO THE DETAILS OF REVIEW, EDITING, AND PUBLICATION TO AVOID DUPLICATION OF EFFORT, COST, AND PERSONAL CONFLICTS. GUIDELINES AND POLICY SPECIFICALLY UNDERSTOOD AND ACCEPTABLE TO BOTH OFFICES WOULD BE HELPFUL.

3) FURTHER INCREASE IN SIZE OF *JOURNAL* IS NOT RECOMMENDED, BUT RATHER GREATER SELECTIVITY IN MANUSCRIPT ACCEPTANCE.

4) EFFORTS TO ACHIEVE PUBLICATION WITHIN 12 MONTHS OR LESS FOR MANUSCRIPTS AND SIX MONTHS OR LESS FOR EDITORIALS AND CURRENT CONCEPTS.

SOUTHERN MEDICINE

Southern Medicine, the second official publication of the SMA is published bi-monthly and evolved from the *Bulletin*. It is distributed to all physicians of the states served by the SMA, whether members of the SMA or not. R. H. Kampmeier, M.D., serves as editor. Its purpose is three-fold: 1) Promotional for membership in the SMA; 2) To address general topics of current importance; and 3) To address general issues related to medicine. The SMA has consistently avoided involvement in the politics of medicine, and all interviewed felt that this policy should be maintained. However, this publication does provide an avenue through which general topics related to medicine or those already politically determined may be addressed. These include socioeconomic aspects of medicine; and currently, utilization review, PSRO, health systems agencies, etc.

Efforts are made to avoid competition between this publication and the *SMJ*. Advertising is not actively solicited for it, and it is not self-supporting.

Generally speaking, those interviewed had mixed feelings about the publication. Most considered it to have limited value from the educational standpoint, but were unprepared to assess its value as a promotional measure.

Recommendation: THE EDUCATIONAL AND INFORMATIONAL VALUE OF *SOUTHERN MEDICINE* SHOULD BE CAREFULLY ASSESSED AND COMPARED TO OTHER METHODS OF PROVIDING SIMILAR INFORMATION AND EQUAL OR GREATER PROMOTIONAL ADVANTAGES TO THE SMA AT A LESSER COST.

THE DIAL ACCESS SYSTEM

The Dial Access System (DAS) is a joint endeavor between the SMA and the University of Texas System Cancer Center, M. D. Anderson Hospital and Tumor Institute (MDAH & TI). The SMA is principally responsible for the promotional aspects of the system and the latter for the educational materials and consultative service. The library is housed at MDAH & TI, and the program directed by Dr. R. C. Hickey, Director of MDAH & TI and Dr. Charles K. Tashima. Staff includes Mr. Stuart Hostetter and Mrs. Felicity Suydam (Flick) who has "mothered" the program from the outset.

During the period of Regional Medical Programs (RMP) agency Dial Access Systems utilizing the telephone as a communications system for medical education and informational services received particular emphasis. Initially this DAS in Cancer was made possible through RMP support in Texas and later extended to Louisiana through such support.

In 1973 a grant was awarded MDAH & TI by the Cancer Control Branch of the National Cancer Institute (NCI) with SMA as a subcontractor, and additional financial support was provided by SMA and MDAH & TI. Briefly this telephone service on cancer permits physicians, other health professionals and students to have immediate access to tape-recorded information on specific problems related to cancer. Each six-to-eight minute message was written by an authority on the subject and includes three references. Provision for post-call conversation with physician staff at the center or the author if located elsewhere is included.

The SMA participation has been through a co-director and provision of the promotional efforts in the region of the SMA. Under the renewal contract with NCI the library will be expanded from 350 to 500 tapes and SMA participation will be through an editorial committee chaired by Dr. Kampmeier.

The System includes detailed record keeping, and elaborate evaluative attempts with excellent return of questionnaires (70% response from 3,400 questionnaires). Inquiries from other states and contractual agreements with the American Cancer Society Divisions of other states, and the number of calls from beyond the SMA area are additional measures of its progress and success.

By July of 1976 more than 34,500 calls had been received. An increase in number follows each promotional effort. The educational and patient-care impact of post-call conversations does not lend itself to ready analysis nor does the public relations aspects of the program.

Looked at from the "raw" cost per call, the cost of the system might be considered high, but the full potential for Dial Access in continuing education and patient care is far from being fully developed. Expansion of the DAS to include structured self-instruction in continuing education for family physicians is under way.

The geographic distance between SMA staff, the co-director and MDAH & TI staff has predisposed to communication gaps and difficulties. Discussions with SMA staff, a site visit to the program in Houston, and discussions at the executive committee meeting indicate that difficulties and gaps in communication have occurred and are still present. These are remedial with extra effort, particularly on the part of the SMA, and corrective measures are under way. The appointment of an editorial committee from the SMA is expected to alleviate some of the problems.

In summary this is a highly successful program which demonstrates how the SMA can affiliate with a resource within the area to produce and promote a continuing education program of high quality. Since this is still an experimental program, establishing an educational model, the cost may appear disproportionately high.

Recommendations: 1) CONTINUE ACTIVE PARTICIPATION IN THE PROGRAM THROUGH PROMOTION AND MORE DIRECT INPUT.

2) ENCOURAGE AND PARTICIPATE IN EFFORTS TO HAVE SUCH PROGRAMS REACH THEIR FULL POTENTIAL.

3) A MORE ACTIVE PART BY THE SMA COMMITTEE TO THE PROGRAM IN STIMULATING PREPARATION AND UPDATING OF TAPES THROUGH IDENTIFICATION OF RESOURCE

PERSONS WITHIN ITS MEMBERSHIP AND TERRITORY.

4) AN ACTIVE PART BY THE SMA COMMITTEE IN STIMULATING AND IDENTIFYING RESOURCE PERSONS FOR THE PREPARATION OF TAPES FOR THE NON-PHYSICIAN MEMBERS OF THE HEALTH CARE TEAM.

5) SPECIAL EFFORTS BY SMA STAFF AND COMMITTEE TO IMPROVE COMMUNICATIONS AND ELIMINATE COMMUNICATION GAPS.

THE LECTURESHIP PROGRAM

The SMA's Lectureship Program was established in 1968 as one more step of the Association "to develop and foster scientific medicine." The Lectureship Program is budgeted at \$500 for each school of the territory on a first-come basis until the budgeted funds are dispensed. The program is under the direction of the Committee on Grants and Loans. In 1974-1975 only \$9,500 of a budgeted \$20,000 were utilized through participation of 19 of the 40 eligible schools, \$10,000 was budgeted for 1975-76.

Schools are notified of the program once each year by letter. The letter is sent by staff with an accompanying flyer describing the program. It has been interpreted by some schools as a ploy to stimulate membership, by others as a means of supplementary funding for its continuing education program. Generally these funds seem to lose their identity as they become enmeshed in the educational offerings of the schools and the SMA reaps little benefit in either recognition or increased membership.

Most of those from the schools engaged in continuing education felt that these funds might be used to greater advantage by the SMA in fostering continuing education in some ongoing manner. The SMA serving as a convener and facilitator for loose consortia of schools in joint programs of continuing education was thought to have merit by some. Individual cosponsorship of programs between the SMA and the schools was considered generally to have greater potential. All agreed that such cosponsorship should be by full involvement of the SMA in program planning, promotion, evaluations and financial support. The DAS is illustrative of how the SMA and a medical institution can affiliate to draw upon the strengths of each in an education program.

Mini-meetings sponsored by the SMA were proposed for discussion at the study committee meeting in January, 1976. The concept of the three- to four-hour meeting in cities and towns of small size, indeed has merit. Such programs are presently being provided through many state medical associations, as part of community hospital offerings and by many of the medical schools. The state medical associations in increasing numbers now have AMA approval to accredit the continuing education programs of hospitals and institutions within the states which do not qualify for review by the AMA for accreditation. A liaison committee in continuing education (LCCME) has now been formed comparable to the liaison committees for the accreditation of undergraduate and postgraduate medical education. As a result of these trends and pressures the number of educational programs within community hospitals and communities is rapidly increasing. These draw upon the community physicians as well as the schools as resources. The SMA through liaison and cosponsorship with the medical schools well might become engaged in some of these programs. Direct cosponsorship with community hospitals is a possibility although the resource pool would still be the practicing physicians and the faculties of the schools. I do not believe the potential for SMA involvement at community level is very great.

A closer liaison of SMA with the state societies both through the Lectureship Program and the Journal was suggested by some, and was considered. Provision of a Lectureship Program to state medical societies or affiliations with state journals has the potential for conflicts of interest. In the statement of purpose of the SMA it is clearly stated "The Association shall not at any time take active part in any economic, political or sectarian questions or concerted movements for securing legislative enactments." State societies and state journals must address the above issues, hence any

cooperative endeavors between SMA and state societies must be clearly of an educational nature and not subject to misinterpretation.

Since the SMA membership comprises a large number of family physicians cooperative or complementary ventures with the American Academy of Family Physicians (AAFP) were explored. Medical schools have been requested over past years to provide Review Courses for family physicians. The SMA might serve as convener and facilitator for several schools to work together in sponsoring such courses or affiliate with schools in cosponsorship of programs. The AAFP was also queried as to how the SMA might compliment or expand the educational efforts of the AAFP in the SMA region. It was generally felt by active AAFP members that the AAFP was too involved in fostering the establishment of Departments of Family Medicine in medical schools and the establishment of residency programs in family medicine to venture into a cooperative endeavor with the SMA at the present time. The number of Review Courses in Family Medicine has also burgeoned as schools establish Departments of Family Medicine. A similar potential for conflicts of interest exists in relationships with AAFP as with state societies.

In summary: The Lectureship Program of the SMA provides little recognition and identification for the Association in its present format and how it functions. Alternatives for cosponsorship with the schools, the AAFP, state medical societies, and community hospitals were considered.

Recommendations: 1) ALTERNATIVE OPTIONS FOR PARTICIPATING IN THE CONTINUING EDUCATION ACTIVITIES OF MEDICAL SCHOOLS AND POSSIBLY COMMUNITY HOSPITALS BE FURTHER EXPLORED.

2) ANY PARTICIPATION BY THE SMA IN SUCH ENDEAVORS SHOULD BE ACTIVELY PARTICIPATIVE AND IDENTIFIABLE.

3) AFFILIATIVE AGREEMENTS WITH THE MEDICAL SCHOOLS OR SPECIALTY SOCIETIES OF THE REGION FOR THE DEVELOPMENT OF JOINT EDUCATIONAL ENDEAVORS.

4) CAUTION TO AVOID CONFLICTS OF INTEREST OR ANY SEMBLANCE THEREOF IN ANY COOPERATIVE ENDEAVORS WITH STATE SOCIETIES OR OTHER ASSOCIATIONS WITH MISSIONS OTHER THAN PURELY EDUCATIONAL.

PROGRAMS FOR STUDENTS, RESIDENTS AND FELLOWS

The SMA sponsors four programs for medical students, residents and fellows. These are further expressions of the Association's commitment to medical education and its interest in the developing physician.

THE MEDICAL STUDENT PROGRAM

This program was initiated in 1955 as an expression of the great interest the SMA has in medical education, and by 1963 all schools in the territory were being invited to send a representative to the annual meeting. The program is administered by the Committee on Medical Students. Initially senior students were invited, but in 1971 a change to junior students was made. Deans are notified by a single mailing from staff which includes a flyer describing the program. Most schools do participate.

The objectives of the program are:

1) To provide students an opportunity to participate in a full-scale medical meeting;

2) To demonstrate to students that study does not cease with formal education and point out the value of continuing medical education after graduation;

3) To make students aware that medical organizations are engaged in a continuous effort to promote research and present results to practicing physicians, and that through the scientific sessions "post-graduate" courses in medicine are offered;

4) To urge the students to share their experience with classmates upon returning to school.

Experience indicates that the program has little visibility in the schools, there is little sharing of the student's experience with classmates, and few of the attendees ultimately become members of the SMA. However, the students selected are almost without exception leaders within their schools, and constitute a group of potential leaders in medicine of the future.

Programs to provide students a glimpse into the future and to indoctrinate them into the continuing education aspects of practice are highly desirable. Whether this program justifies its cost is open to question. The committee is addressing this matter and exploring ways to keep these students involved in the SMA.

Recommendations: 1) CONTINUE CRITICAL REVIEW OF THE PROGRAM TO DETERMINE WHETHER IT IS MEETING ITS OBJECTIVES IN A COST-EFFECTIVE WAY.

2) MODIFY THE PROGRAM TO INCLUDE A GREATER NUMBER OF PARTICIPATING STUDENTS THROUGH INVOLVEMENT OF THE STUDENT BODIES OF THE SCHOOL OR SCHOOLS IN THE LOCATION OF THE ANNUAL MEETING.

3) DEVISE SOME MECHANISM TO DEVELOP AN ALLEGIANCE OF THESE STUDENTS TO THE SMA.

The other three programs for student, residents, etc., are financial aid programs administered by the Committee on Grants and Loans. Information on each is transmitted to the deans through a single letter including a description of the program. The programs are:

1) MEDICAL STUDENT SCHOLARSHIP FUND

This Program established in 1969 provides assistance to first year medical students, particularly those of superior abilities. The fund, presently of \$20,000 annually consists of scholarships of \$750 per school year awarded upon application by the dean on behalf of the student.

2) RESIDENCY TRAINING GRANT AND LOAN FUND

The SMA Residency Training Grant Fund was established in 1962. Recipients of grants assume only a moral obligation of repayment through this same mechanism.

In 1968 a loan component was added to the program and the name changed to the present one. In 1975-76, \$56,000 (\$16,000 in grants, \$40,000 in loans) was dispensed. Recipients are selected on the basis of need and potential. Grants and loans are in the amount of \$2,400 for a twelve month period, and a recipient may reapply for additional loans or grants in subsequent years. Grants carry only a moral commitment for repayment. Interest on loans is very small (one percent) beginning two years after completion of residency training or five years after graduation, whichever comes first. Applicants apply directly to the SMA and selections are made by the Committee on Grants and Loans.

3) RESEARCH PROJECT FUND

In 1969 the Research Project Fund was established. Funds in the amount of \$24,000 annually for investigative projects are available and information is dispensed through notification of deans and department chairmen of the medical schools. The maximum grant is \$1,000 per year and they are intended primarily for house-staff rather than established faculty investigators.

In summary these are well worthwhile programs of financial aid for prospective physicians and those still in formal training. Many do not learn of these programs, and there are no specific measures to keep the recipients active within the Association in subsequent years. The information is transmitted to the schools in an unobtrusive fashion, and not infrequently may be overlooked. In the Visiting Professorship Program and the student programs the SMA is "hiding its light under a bushel."

Recommendations: 1) DEVELOP GREATER VISIBILITY FOR THE PROGRAMS IN THE SCHOOLS AND TEACHING HOSPITALS THROUGH WIDER NOTIFICATIONS WITH GREATER IMPACT.

2) DEVELOP MEASURES TO MAKE RECIPIENTS AN ACTIVE PART OF THE SMA AS AWARDEES AND DURING SUBSEQUENT YEARS. TREAT AS PROTEGES AND CULTIVATE FOR FUTURE MEMBERSHIP AND LEADERSHIP WITHIN THE SMA.

THE ANNUAL MEETING

The annual meeting along with the journal comprise the two major educational endeavors of the Association. Traditionally the meeting is held in November in a city located within the SMA territory. The meeting itself consists of two parts, the scientific sessions and the exhibits both scientific and technical.

The sections' concept was manifest at the Association's first annual meeting in 1907 with sections in medicine, surgery and ophthalmology. As specialization developed, the need for a forum for the discussion of problems and progress in these new fields developed also. As these needs were sensed, sections were added, the SMA often being the first general medical organization to create sections for the evolving specialties. Sectional structure remains dynamic and responsive to need resulting in an everchanging list of sections.

Currently the scientific assembly is comprised of the following scientific sections: Allergy; Anesthesiology; Chest Diseases; Colon and Rectal Surgery; Dermatology; Family Practice; Gastroenterology; Gynecology; Industrial Medicine and Surgery; Medicine; Neurology; Neurosurgery and Psychiatry; Obstetrics; Ophthalmology; Orthopedic and Traumatic Surgery; Otolaryngology; Pathology; Pediatrics; Physical Medicine and Rehabilitation; Plastic and Reconstructive Surgery; Radiology; Surgery; and Urology.

Each section elects its own officers which include a chairman, vice chairman and secretary. The secretary has primary responsibility for the program planning of his section. The constitution also provides for not less than two general sessions, one of which may be devoted to the business of the Association.

The Committee on Scientific Work bears the responsibility for the formulation and content of the scientific activities of the Association. Its scope of activities include:

1) The format and content of the scientific sessions of the annual meeting and such other scientific sessions as may be held.

2) The development and assignment of a scientific theme or themes for the annual meeting in cooperation with the section secretaries.

The scientific sections of the Association hold such sessions as are arranged by the section secretaries with the approval of the Committee on Scientific Work. Each section is encouraged to designate an executive or advisory committee, preferably made up of current officers and immediate past chairman, to aid in planning the program for the section and in evaluating papers for possible publication. The Committee of Scientific Work meets at least three times annually; once at the annual sessions, once with the section secretaries in the spring and additionally as necessary for program planning.

The observations which follow are the result of my attendance at the annual meeting of the section secretaries, the meeting of the executive committee in June, 1976, review of committee reports, SMA records and historical data, numerous conversations and discussions with staff and individuals listed and my experience as a section secretary and section chairman (1960-65). I have followed the evolution of the upcoming annual meeting in detail.

These observations cover the period through September 15, 1976:

1) The organizational and committee structure of SMA follows closely the traditional pattern of most such scientific societies. Its uniqueness lies in its singleness of purpose, to foster scientific medicine in its geographic region. The annual scientific meeting is its major activity.

2) The staff outline of the calendar of action regarding notices of committee meetings, information to the section secretaries, program notices, printing, etc., have been carefully formulated. These have evolved over the years and

permit meeting essential details of program planning, printing, mailing, etc. Putting the program together, technically, is a monumental task largely the responsibility of an efficient administrative assistant.

3) Section secretaries and section planning:

a) Secretaries are for the most part younger individuals, some of academic background;

b) Executive committees for sections are encouraged but seldom exist;

c) The secretary has the responsibility for the section program, and no planning committee is required or evident although the committee (b) suggested was intended to function in this capacity;

d) Sectional programs are often well along in planning at the time of the secretaries' meeting;

e) Secretaries regard their annual meeting as a pleasant occasion, an opportunity to meet the SMA leadership in a relaxed fashion, but not of particular value in their planning nor in capitalizing upon the strengths of other sections, the interfacing of disciplines or forming liaisons with other sections;

f) Some secretaries regard their SMA experience as part of their own self-development in their specialties, a place to gain leadership experience and present and publish papers before they are recognized or experienced enough to meet the competition within their national specialty societies;

g) Secretaries have a genuine interest in medical education and quality medicine, and believe they have something to offer the SMA;

h) Secretaries do not feel pressured or controlled in any way in the program planning for their own sections;

i) Secretaries believe that general sessions, speakers for other portions of the program, etc., are decided upon without any real input from them. Even when asked for an opinion, it is frequently ignored;

j) Discontent and frustration is felt by secretaries when section time is invaded or when there is enough duplication of topics in general sessions to weaken or otherwise threaten their sectional meetings. They tend to take offense when speakers from their discipline are invited for general sessions without their knowledge or input;

k) Matters such as mentioned above (i and j) have occurred during the evolution of the upcoming annual meeting and have resulted in anger, frustration and ill feelings;

l) Secretaries do not believe the full potential of the interdisciplinary strength of the Association is utilized in program planning;

m) Secretaries believe better communication between sections and throughout the year would be helpful;

n) Secretaries tend to regard their own section meeting as the limits of their responsibility and input to the annual meeting;

o) Secretaries do not tend to feel a strong responsibility toward the development of post-graduate courses, but for the most part are cooperative toward these endeavors;

p) A long "turn around" time between submission and publication of manuscripts from the annual meeting is discouraging to section secretaries in soliciting such submissions;

q) Following the secretaries' meeting in March, there is little or no communication between the chairman and other members of the Committee of Scientific Work and the secretaries;

r) There is little or no planned continuity of involvement of section officers in SMA after their tenure of office;

4) Other observations of the annual scientific session:

a) In recent years the SMA has followed the trend of other such associations in presenting post-graduate courses. These are short courses designed to meet defined educational objectives and standards and to qualify for the "required

hours" in the various continuing education requirements of the AMA or specialty groups (AAFP);

b) Sectional meetings are leaning toward greater structuring and away from the heterogeneous program derived from selections from submitted papers;

c) Some of the sectional meetings already meet, or with minimal restructuring could meet, defined standards of continuing education for accreditation;

d) The technical and scientific exhibits add dimension to the annual meeting and are worthwhile aspects of the meeting;

e) Technical exhibits range from the demonstrative or informative to highly structured learning exercises;

f) Scientific exhibits are summary presentations of recent or developing aspects in medicine, and have an educational value commensurate with the individual physicians interest and the quality of the presentation;

g) Peak attendance at an annual meeting occurred in 1958 in New Orleans (3,487 total physicians). Meetings in New Orleans consistently attract the greatest number of physicians;

h) In 1975 at Miami attendance was the lowest since 1950 (1,979 total physicians);

i) Regional meetings of specialty societies along with the annual meeting tend to strengthen section meetings and section leadership;

j) Many practitioners do not identify with the SMA as a leader in scientific programming. They identify with it for comradeship; "socializing;" and the holiday aspects;

k) The geographic separation of committee members, president and staff creates difficulties in communication and predisposes to unilateral decisions;

l) Such unilateral decisions create complications and conflicts within the program plans and result in anger and frustration within the committee, the staff and the SMA leadership;

m) Specific guidelines, statements of policy and adherence to them in regard to planning, honoraria and expenses are either lacking or disregarded;

n) An atmosphere of the annual meeting belonging to the president is apparent;

o) No particular policies are defined or stated for the president regarding his privileges, input or responsibilities to the program other than as a member of the Committee on Scientific Work.

p) The president of the Association has considerable influence, and impact upon the program of the annual meeting;

q) Unilateral decisions or decisions interpreted as contrary to committee decision have been made during the evolution of the current program;

r) Such decisions have created frustration within staff which has no recourse but to follow directions;

s) The Councilor from Alabama, a member of the Committee on Personnel and also a member of the Committee on Scientific Work has functioned as an arbitrator and coordinator during the planning of this current program. He has followed through on committee decisions when appropriate individuals have failed to do so. He has devoted much time and energy toward this program, and on a number of occasions smoothed "ruffled feathers" and "calmed rough waters;"

t) At this point in time the program is just about finalized;

u) Pertinent to completion of this report are continued observations of this annual meeting at the time it is held in November.

Summary and conclusions:
The Annual meeting is the activity of the SMA which brings the membership together for an education experience in an atmosphere of fraternalism and conviviality. It represents the investment of much time and effort on the part of many whose only reward is the satisfaction of playing a part in fostering scientific medicine.

The awards created by the SMA and presented at the annual meeting lend stature to the Association, and provide well-deserved recognition for outstanding contributions from within the membership.

The annual sessions is a meeting of good quality, the leadership does keep abreast of changing trends in format of scientific meetings and is shaping the program accordingly but not as rapidly as many specialty societies.

In the specifics of program planning, there is fragmentation. Sectional secretaries do not interact optimally. The chairman of the committee and president make decisions without committee knowledge or input. The geographic distances predispose to such actions, but steps to overcome such occurrences are indicated. The staff is highly reliable, hard working and dedicated, but are not in a position to act or counteract without direction. Personalities and personality conflicts emerged along with the detailed planning. These were corrected or arbitrated by individuals who served as "buffers."

The annual meeting tends to "belong" to the president and to be identified with him. This is not to be criticized but rather to be recognized and supported. He has input into the annual session through his ex-officio membership on the Committee on Scientific Work, and is apparently provided considerable latitude in program plans. There is not a specific policy statement nor guidelines for him to follow and his program decisions have the potential for exceeding perceived limits.

Assembling a scientific program of this magnitude is a monumental task involving many diverse individuals. The program for 1976 in New Orleans promises to be a good one, and the difficulties which have occurred during its planning and assemblage will not be apparent to the attendees.

Recommendations: 1) PLANNING COMMITTEES FOR SECTIONS WITH THE SECRETARY SERVING AS CHAIRMAN.

2) THE SECTION PLANNING COMMITTEES ALSO HAVE DEFINED RESPONSIBILITIES FOR THE POST-GRADUATE COURSES.

3) CONTINUING EDUCATION STANDARDS AND EDUCATIONAL OBJECTIVES BE UTILIZED IN PLANNING SECTION PROGRAMS AND GENERAL SESSIONS.

4) DEVELOP MECHANISMS AND PROCEDURES FOR GREATER INTERACTION BETWEEN SECRETARIES AND FOR BETTER INTERFACING OF PROGRAMS.

5) ELIMINATE COMMUNICATION GAPS BETWEEN ALL INVOLVED IN PROGRAM PLANNING.

6) OBSERVE, NURTURE AND PROVIDE AVENUES FOR FURTHER DEVELOPMENT AND INVOLVEMENT OF SECRETARIES IN SMA AFFAIRS. THEY CONSTITUTE MUCH OF THE RESOURCE FOR THE FUTURE LEADERSHIP OF THE ASSOCIATION.

7) DEVELOP GUIDELINES AND/OR POLICY STATEMENTS FOR THE COMMITTEE ON SCIENTIFIC WORK, THUS PROVIDING GUIDANCE, LIMITATIONS, CHECKS AND BALANCE ON DECISION MAKING.

8) ENCOURAGE REGIONAL MEETINGS OF SPECIALTY SOCIETIES ALONG WITH THE SMA ANNUAL MEETING.

9) A PROGRAM COORDINATOR GEOGRAPHICALLY CLOSE TO HEADQUARTERS TO SERVE AS "BACK-UP" TO THE CHAIRMAN AND TO PROVIDE LIAISON BETWEEN STAFF AND THE MANY INVOLVED IN PLANNING THE PROGRAM.

Concluding Comments:

Certain characteristics of the membership, and of medicine as a whole must be taken into consideration in making judgmental decisions about the program and the future educational potential of the Association since these are influencing factors.

1) The number of physicians in the territory of the SMA is increasing as is the membership (a total of 36,020 physicians, and 18,997 SMA members in 1968 as compared to 38,752 physicians and 21,976 members in 1975).

2) Most physicians belong to a number of medical organizations, each with an annual meeting, and all are likely to belong to specialty and frequently sub-specialty societies also. Physicians then, must be highly selective in the meetings they attend. Therefore, continuity of attendance at the SMA annual meeting becomes less apt to occur and the SMA can no longer claim to be the society of prime importance to Southern physicians. However, attendance at meetings has been maintained in spite of the increased number of other meetings.

The meeting in Miami was in competition with one in Hawaii resulting in an unusual influence upon attendance in 1975. Considerable anxiety in the leadership and staff of SMA occurred, prompting self-study and reconsideration of meeting sites. March, April, October and November are the favorite months for the national meetings and conflicts are inevitable. However, attempts to avoid conflicts of meeting dates with those most competitive for attendance are indicated.

3) There are now 41 medical schools in the territory and additional ones under development. Their faculties serve as the major resource pool for local, state, regional and national meetings aside from their own individual professional development efforts, their primary responsibility for undergraduate, formal post-graduate teaching and the continuing education in their respective schools. Most medical schools are of the opinion that their continuing education efforts have only a limited measure of success.

These facts place the SMA in competition for attendance and the resources for program development, a competition which it is meeting with considerable success. However, it poses problems in maintaining the membership, identification and development of leadership within the organization, and the development of the strong fraternal and social relationships which have been inherent within the organization. Functions and decisions which could be accomplished informally between individuals who knew each other well now require specific definitions, policy statements or guidelines.

This self-study is evidence of the dynamic nature of the Association. The retreat in January, 1976 served to identify many of the same areas of concern which this report identifies. Corrective measures or additional efforts to strengthen areas have been ongoing throughout the period of my consultancy.

Without exception those individuals from the medical schools who were questioned were receptive to the establishment of mutually acceptable relationships with the SMA for cosponsorship of programs with each playing an active part in planning. Cosponsorship in Family Practice Programs was voiced as particularly appropriate.

Promotion or marketing of programs is an essential ingredient and one which is often neglected in continuing education programs. I am not proficient enough in this area to do more than point out that the SMA does often "hide its light under a bushel," and it might be appropriate for the SMA to explore techniques of promotion for the Association as a whole and its individual components.

Recommendations throughout this report are directed toward improving what the SMA is already doing. **The decision of the SMA as to whether to maintain its present role or to expand its educational role determines the final recommendations.**

If it is the decision of the SMA to expand its role in education I recommend:

1) ESTABLISH AFFILIATIONS WITH ONGOING PROGRAMS OF CONTINUING EDUCATION RATHER THAN PROVIDING MORE OF WHAT IS NOW AVAILABLE.

2) ESTABLISH A POSITION WITHIN THE STAFF FOR AN EDUCATION COORDINATOR.

The position should be supportive to all programs with an educational component. The individual selected should be well qualified in medical education, and should function more as "Indian" than as "Chief." Qualifications and experience in education methodology and administration are essential. A minimum of a Master's Degree and three-to-five years experience in medical education should be requisite.

The position will have a large public relations component and further qualifications are the personality, manners and other characteristics for such a role. He should not only be knowledgeable in his field, but able to serve as a facilitator, catalyst and diplomat.

Major responsibilities:

1) PROVIDE LIAISON AND SUPPORTIVE ASSISTANCE AMONG THE SECTIONS;
2) TAKE ACTIVE PART IN THE PROGRAM PLANNING OF THE ANNUAL SESSION, PROVIDE ASSISTANCE IN CONVERTING IDEAS AND PROGRAM THEMES INTO EDUCATIONAL OBJECTIVES, ETC.;

3) PROVIDE ASSISTANCE IN STRUCTURING PROGRAMS TO MEET EDUCATIONAL STANDARDS AND SECURING THE APPROPRIATE ACCREDITATION;

4) INTRODUCE EVALUATION AND NEEDS ASSESSMENT TECHNIQUES INTO PROGRAM PLANNING;

5) EXPAND RELATIONSHIPS WITH THE MEDICAL SCHOOLS IN THE STUDENT PROGRAMS, AND THE ANNUAL MEETING;

6) SERVE AS A LIAISON OFFICER OF SMA IN THE DIAL ACCESS SYSTEM;

7) PARTICIPATE IN THE PROMOTION OF SMA EDUCATION ACTIVITIES, AND EXPLORE ADDITIONAL MEANS OF PROMOTION;

8) EXPAND THE ROLE OF SMA IN MEDICAL EDUCATION THROUGH:

a) RELATIONSHIPS WITH MEDICAL SCHOOLS AND/OR COMMUNITY HOSPITALS IN CONTINUING EDUCATION PROGRAMS;

b) STIMULATE CONSORTIA ARRANGEMENT OF SCHOOLS FOR COSPONSORSHIP OF SOME CONTINUING EDUCATION COURSES;

c) FOSTER AFFILIATIONS WITH MEDICAL SCHOOLS OR SPECIALTY SOCIETIES FOR PROMOTION OR OTHER ACTIVE PARTICIPATION IN PROGRAMS WHICH ARE SELF-INSTRUCTURAL, SELF ASSESSMENT, ETC., (THE DAS IS AN EXAMPLE OF SUCH A RELATIONSHIP AND PROGRAM).

The resource pool for the position is to be found in continuing education departments and educational resource development areas of medical schools and other health schools, teaching hospitals, state medical associations, specialty societies, boards of education and graduate schools.

READ AND APPROVED BY:

Margaret S. Klapper, Special Consultant to the Committee on Scientific Work
November 7, 1976

ACTION:—Dr. Neal moved the acceptance of Dr. Klapper's report, with commendation to Dr. Klapper for the tremendous amount of work and time given on this project, to her husband, Ted, for his patience and understanding in allowing Dr. Klapper to undertake this monumental task, and finally, to Dr. S. Richardson Hill, Jr., Vice-President for Health Affairs, University of Alabama Medical Center in Birmingham, for encouraging Dr. Klapper to assist the Association in studying its educational programs, thereby making this report possible. Dr. Evans seconded the motion and it carried unanimously.

ACTION:—Dr. Polk moved that this document be circulated to all Committees, Section Officers, Associate Councilors, etc., with the request that the report be reviewed and additional recommendations submitted to the Council for consideration. Dr. Evans seconded the motion and it carried.

COMMITTEE ON SELECTIONS

Robert T. Singleton, *Chairman*
Edwin C. Evans
J. Clyde Hart, Jr.
G. Baker Hubbard, Sr.
J. Ralph Meier
Harry M. Robinson, Jr.
William W. Vallotton
Ex Officio
Thomas B. Dameron, Jr.
G. Gordon McHardy

The members of the Committee on Selections have been contacted by the Chairman, Dr. Singleton, requesting nominations for the elective offices of the Association for 1976-77. The headquarters office in Birmingham has been instructed to inform the Chairman of any nominations that might arrive, following appropriate announcement of the Chairmanship of this Committee 30 days prior to the first annual meeting of the Council. The Committee will present its recommendations for the elective offices of the Association for 1976-77 to the Council at its second session on Sunday, November 7.

READ AND APPROVED BY:

Robert T. Singleton, Chairman
Committee on Selections
November 7, 1976

ACTION:—Motion was made by Dr. Hubbard, seconded by Dr. Griggs, and carried that the report of the Committee on Selections be accepted.

The Committee on Selections submitted the following nominations for the elective offices of the Association:
President-Elect: Andrew F. Giesen, Jr., Fort Walton Beach, Fla.

First Vice-President: Thomas B. Dameron, Jr., Raleigh, N. C.

Second Vice-President: Rafael C. Sanchez, New Orleans, La.

ACTION:—Dr. Meier moved the approval of the nominations for the elective offices and moved the report of the Committee be filed and the candidates be approved by acclamation and presented to the membership for vote at the First General Session, November 9, 1976. The motion was seconded by Dr. Hubbard and carried.

COMMITTEE ON MEETING PLACES

Rafael C. Sanchez, *Chairman*
James Y. Griggs
Coleman Jacobson
Thomas J. Zaydon
Ex Officio
Mr. Robert F. Butts
Mr. Roy B. Evans, Jr.
Thomas B. Dameron, Jr.
G. Gordon McHardy

The following ten-year meeting schedule was submitted to the Council for approval:

November 12-15, 1978	Atlanta, Ga.
November 4-7, 1979	Las Vegas, Nev.
November 16-19, 1980	San Antonio, Texas
November 15-18, 1981	New Orleans, La.
November 14-17, 1982	Atlanta, Ga.
October 31-November 3, 1983	Kansas City, Mo.
November 4-7, 1984	New Orleans, La.
November 11-14, 1985	San Antonio, Texas
November 2-5, 1986	Atlanta, Ga.

ACTION:—Motion was made, seconded, and carried that the ten-year meeting schedule submitted by the Committee on Meeting Places be approved.

ELECTIONS BY THE COUNCIL

CHAIRMAN OF THE COUNCIL (one year term): G. Baker Hubbard, Sr., Jackson, Tenn.

VICE-CHAIRMAN OF THE COUNCIL (one year term): J. Ralph Meier, New Orleans, La.

THREE MEMBERS OF THE EXECUTIVE COMMITTEE OF THE COUNCIL (one year terms): Robert K. Dorton, St. Louis, Mo.; Edwin C. Evans, Atlanta, Ga.; M. Pinson Neal, Jr., Richmond, Va.

ONE MEMBER OF THE BOARD OF TRUSTEES (Six year term): G. Gordon McHardy, New Orleans, La.

RECOMMENDATIONS TO THE COUNCIL BY THE EXECUTIVE COMMITTEE OF THE COUNCIL

Recommendation No. 1

The Executive Committee of the Council recommends to the Council that the Budget for 1976-77 be approved.

ACTION:—Motion was made by Dr. Polk, seconded by Dr. Hubbard, that the Budget for 1976-77 be approved. Motion carried.

Recommendation No. 2

The Executive Committee of the Council recommends to the Council that Arthur Young & Company be approved as independent auditor for the fiscal year 1976-77.

ACTION:—Motion was made, seconded, and passed, that Recommendation No. 2 be approved.

Recommendation No. 3

The Executive Committee of the Council recommends to the Council that the Report of the Executive Director be approved, including all recommendations contained therein and the annual Financial Statement.

ACTION:—Dr. Hubbard moved that Recommendation No. 3 be approved. Dr. Meier seconded the motion and it carried.

Recommendation No. 4

The Executive Committee recommends to the Council that membership dues be increased from \$30.00 to \$50.00, annually, effective January 1, 1977.

ACTION:—It was moved by Dr. Meier that the Association's annual membership dues be increased from \$30.00 to \$50.00, effective January 1, 1977. The motion was seconded by Dr. Neal and carried.

Recommendation No. 5

The Executive Committee of the Council recommends to the Council that the tour proposal received from INTRAV for the Classical Adventure (Istanbul, Athens, and Rome) be accepted with the stipulation that Mike Lupfer personally be in attendance during the trip.

ACTION:—Dr. Neal moved that Recommendation No. 5 be approved, including the stipulation that Mike Lupfer personally be in attendance during the trip. Dr. Meier seconded the motion and it carried.

CERTIFICATES OF APPRECIATION

Certificates of Appreciation and Councilor Keys were presented by Dr. McHardy to retiring Councilors: Robert T. Singleton, Baltimore, Md.; James Y. Griggs, St. Louis, Mo.; and Thomas B. Dameron, Jr., Raleigh, N. C.

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An Executive Session was called.

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ADJOURNMENT

There being no further business to come before the Council at this time, Dr. Dameron adjourned the meeting at 11:10 a.m.

READ AND APPROVED BY:

Thomas B. Dameron, Jr., Chairman
SMA Council
December 6, 1976

PROCEEDINGS OF THE BOARD OF TRUSTEES

New Orleans, La., November 9, 1976, 9:00 a.m.

The Board of Trustees of the Southern Medical Association met in the Jackson Room, Marriott Motor Hotel, Tuesday, November 9, 1976, immediately following the Past Councilors' Breakfast. The meeting was called to order by Dr. Esposito, in the absence of the Chairman, Dr. Goldner.

The members of the Board of Trustees reviewed with Mr. Butts, Executive Director of the Southern Medical

Association, the Financial Statements.

The Trustees executed the Trust Agreement of the Employees' Pension Trust, as directed by the Council.

The only other action taken by the Board of Trustees was the approval of the report of the Long-Range Planning Committee, and all recommendations contained therein.

PROCEEDINGS OF THE EDITORIAL BOARD

New Orleans, Louisiana, November 9, 1976

The Editorial Board of the Southern Medical Association met in the Beauregard Room of the Marriott Motor Hotel, immediately after a breakfast in the Audubon Room at 7:30 a.m.

Members of the Editorial Board present: Harris D. Riley, Jr., Editor, Oklahoma City, Okla.; R. H. Kampmeier, Advisory Editor, Nashville, Tenn.; Addison B. Scoville, Jr., Assistant Editor, Nashville, Tenn.; Sam E. Stephenson, Jr., Assistant Editor, Jacksonville, Fla.; Byron E. Green, Jr., Mobile, Ala.; John W. Records, Oklahoma City, Okla.; M. Madison Slusher, Winston-Salem, N.C.; J. Graham Smith, Jr., Augusta, Ga.

Members of the Editorial Board absent: Terry D. Allen, Dallas, Tex.; Thomas M. Blake, Jackson, Miss.; Cyrus C. Erickson, Memphis, Tenn.; Clifton K. Meador, Nashville, Tenn.; Rafael C. Sanchez, New Orleans, La.

The following SMA staff members from Birmingham, Ala. were also present: Mr. Roy B. Evans, Jr., Executive Director, and Ms. Rose Marie Hughes, Editorial Assistant.

tion in that journal, so that when Dr. Smith sees the abstract of an article of particular interest, he solicits an editorial on that subject for *JAMA*. Dr. Kampmeier commented that the *New England Journal of Medicine* frequently publishes editorials directed to articles appearing in that same issue. With regard to this mechanism of soliciting editorials pertinent to specific articles scheduled to appear in the *Southern Medical Journal*, Dr. Riley reminded the group about Commentaries he also plans to research the subject from the standpoint of manpower to identify and distribute abstracts of papers in various specialties to the respective members of the Editorial Board, and the amount of time that might be required of members for review and action.

ITEM NO. 3

OLD BUSINESS

ITEM NO. 1

Copies of the Editor's Report to the Council for 1976 were distributed for discussion (refer to PROCEEDINGS OF THE COUNCIL, New Orleans, La., Nov. 6, 1976, Reports of Officers, Report of the Editor). Dr. Riley reviewed various statistics contained in his report, such as the numbers of manuscripts received and published during the past editorial year. The number of manuscripts received continues to increase, and the continued increase in submitted papers is particularly healthy.

NEW BUSINESS

ITEM NO. 1

Dr. Riley spoke on the "Letters to the Editor" section (formerly "Comments From the Readers") of the *Journal*, which has been enlarged to allow publication of brief clinical and other reports in addition to letters commenting on material which has appeared in the *Journal*.

ITEM NO. 2

Dr. Smith explained that he receives from the editor of the *Archives of Dermatology* copies of the titles, authors, and abstracts of articles accepted for publica-

A discussion followed regarding the significant progress during the past year toward reducing the backlog of accepted manuscripts and reducing the delay in publication of articles. This was accomplished primarily by (1) eliminating certain material previously published, (2) publishing an additional 16-page signature of text (beginning with the April 1976 issue), and (3) increasing the size of the *Journal* page, as well as adopting a new page format which allowed a 33% increase in text per issue, and (4) changing the format of certain sections to afford better use of space. Ms. Hughes cited the following statistics: (1) the number of unprocessed manuscripts on hand in the Publications Office has been reduced from 317 in January 1976 to the present total of 96 (as of November 1); (2) in the first ten issues of the current volume year (January to October 1976), the *Journal* has published a total of 403 manuscripts—113 more than during the same period last year; and (3) all papers received from the Editor through June 1976 have been published or are in process, showing a reduction in "lag time" from one year to less than five months.

Dr. Riley informed the members of the Editorial Board that the Association is concerned about finances, and that the publications of the SMA represent its largest expense. When the Council originally appropriated funds to publish an additional 16-page signature (for a total of nine signatures per issue), it did so on a temporary basis, making it implicit that when the backlog was caught up the *Journal* should return to its former size (eight signatures). After its detailed review of finances, the recent report on the improved status of the backlog, and the additional text being accommodated by the new format, the Committee on Publications has recommended to the Council that the *Journal* return to eight signatures, which will result in an annual saving of some \$33,000 in printing and mailing costs. By discontinuing the ninth signature, however, Dr. Riley projected that (in view of the number of accepted manuscripts already on hand and out to authors for revision) if the progressive increase in the number of

manuscripts submitted continues as it has over the past few years, the **Journal** might soon have another significant backlog. Considering the large amount of material received, Dr. Riley stated that, while he takes no pride in a high rejection rate, he believes members of the Editorial Board must be vigilant in recommending acceptance of only the most appropriate papers. This is more easily accomplished in a specialty journal because there is more even standard of material submitted. In a general journal, the papers related to various disciplines are not of standard quality. Dr. Kampmeier pointed to the different problems facing highly specialized journals and a general journal, stating that one cannot judge the rejection rate of the **Southern Medical Journal** in the same way because it covers a whole spectrum of disciplines.

ITEM NO. 4

Referring to a possible method of "rechanneling" certain brief articles rather than having to reject them to conserve space, Dr. Slusher explained that the **New England Journal of Medicine** (as an inducement for authors to allow their articles to be reduced to Letters to the Editor) informs authors that their Letters will be indexed. He suggested this might be an excellent way of achieving brevity and conserving space in the **Journal** while assuring authors of receiving credit in the literature for their contributions. Dr. Kampmeier observed that Letters do appear in the index of that particular journal, though this does not guarantee their appearance in the world literature (ie, **Index Medicus**). Dr. Riley has learned from the director of the National Library of Medicine that their indexers selectively index Letters from various journals, and he will make further efforts to learn whether Letters can be routinely indexed. If so, he can include this information in his future correspondence to authors, since he frequently returns manuscripts to authors with the suggestion that such papers be condensed and revised as Letters to the Editor. He encouraged members of the Board to keep in mind this mechanism.

ITEM NO. 5

Dr. Riley expressed his desire for an additional member of the Editorial Board with expertise in the field of psychiatry because of the various types of psychiatric papers received for evaluation. He asked the members to forward to him their suggestions of individuals who might serve in this area.

ITEM NO. 6

In previous discussion among members of the Editorial Board regarding the possibility of including in the **Journal** an insert dealing with new and timely items in medicine, it was the consensus that the need for such a feature was being met by other journals and many "throwaways," and that logistically it would be difficult to publish in a monthly journal. Dr. Riley reiterated his interest in such a section, perhaps by picking up from the various medical schools new ideas that might be translated into clinical application and summarized into different disciplines; however, it was agreed that such a project still would be logistically difficult.

ITEM NO. 7

The members discussed the General Announcements section of the **Journal**, which lists in whitespace a number of postgraduate courses and meetings to be held within the SMA's territory. They agreed that the **Journal** should continue to publish these as a service in continuing medical education, even though most other journals publish such lists. Dr. Stephenson agreed the announcements should be continued in the **Journal** as long as they could be kept limited enough to appear in whitespace rather than reducing the space available for articles and thereby increasing the backlog, especially since there is enough combined material on hand (in the

Editor's office and the Publications Office in Birmingham) for the next nine or ten issues. Dr. Riley suggested that the **Journal** could publish a brief announcement referring readers to **Southern Medicine** for a more complete listing (which might be called a "CME Calendar"), part of which might be supplied to Dr. Kampmeier, Editor of **Southern Medicine**, by the **Journal** staff of the Publications Office. The announcement regarding **Southern Medicine's** CME Calendar would also be referred to in the Contents on the cover of the **Journal**.

ITEM NO. 8

Dr. Riley called the members' attention to the Android ad appearing in current issues of the **Journal**. Having received some critical comments about the ad (stating that although it contains nothing scientifically false, only about 1% of cases of male impotence are caused by testosterone deficiency and, further, that the ad is in poor taste), Dr. Riley related these to the Committee on Journal Advertising. Dr. Kampmeier observed that in past years the **Southern Medical Journal** and many others had adopted the AMA's criteria for acceptability of ads. Dr. Scoville commented that **JAMA's** rules are very lax. It was the consensus that, since the package insert (duplicated in the ad) apparently meets FDA requirements, the contents of the ad can hardly be questioned, and the ad therefore is acceptable for publication in the **Journal**.

ITEM NO. 9

Also introduced for discussion was the suggestion made to Dr. Riley that the **Journal** publish its table of contents on an inside page, with other material appearing on the cover. Both Dr. Scoville and Dr. Kampmeier cited comments from colleagues regarding the ease of reviewing the contents of the **Journal**; they believe the printing of the contents on the cover has long been considered a strong point for both the **Journal** and the **New England Journal of Medicine**. No one present wished changes in the format of the **Journal's** table of contents.

ITEM NO. 10

In previous correspondence with both Dr. Riley and Dr. Kampmeier, Dr. Scoville had suggested a feature on drug interactions to appear in each issue or every other issue of the **Journal**. Members agreed that most physicians face problems related to drug interactions, and that brief statements on the subject (eg, how certain drugs interact and which drugs can vitiate results of various laboratory tests) would be a valuable contribution to the **Journal's** readers. Thus it was suggested that Dr. Scoville approach one of his colleagues (with the clinical pharmacology program at Vanderbilt) who might accept responsibility for preparing a number of "fillers" on the subject which can be published in whitespace.

ITEM NO. 11

Dr. Riley thanked all members of the Editorial Board for their excellent assistance during the past year. He also pointed out the need for editorials and asked them to submit editorials at their earliest convenience. Dr. Riley again emphasized the need to be increasingly discriminating in recommendations about acceptance of articles and to be vigilant about suggestions for condensing acceptable manuscripts whenever possible. He reminded members to encourage submission of Letters to the Editor and to call to his attention articles appropriate for an accompanying Commentary.

ADJOURNMENT

There being no further business to come before the Editorial Board at this time, Dr. Riley adjourned the meeting.

GOLF TOURNAMENT

New Orleans, Louisiana November 8, 1976

The 53rd Annual Golf Tournament for members of the Southern Medical Association and their guests was held Monday, November 8, 1976, Lakewood Country Club, New Orleans, La. Approximately 33 persons participated in the tournament.

Participants paid a fee of \$30 which covered the cost of the greens fee, complete locker room facilities, cart rental, reception, prizes, and trophies.

Following the tournament, a reception was held at the Lakewood Country Club for those who participated in the day's activities.

Low Gross Winner (junior class): David L. Barclay
Low Gross Winner (senior class): William Gardner
Low Net Winner (junior class): Donald Matheson
Low Net Winner (senior class): William Gardner

Arrangements for the tournament were made by the Chairman for the Golf Committee, E. P. Rivas, III, New Orleans, La.

TENNIS TOURNAMENT

New Orleans, Louisiana November 8-9, 1976

A Tennis Tournament for the members of the Southern Medical Association and their guests was held Monday, November 8, and Tuesday, November 9, 1976, at the New Orleans City Park, New Orleans, La. Twenty-six persons participated in the tournament.

Listed below are the winners of the Tournament:

MEN'S SINGLES:

First Place: Dick Bultman, Orange Park, Fla.
Second Place: Edward Gibson, Lakeland, Fla.

WOMEN'S SINGLES:

First Place: Bonnie Hunter, New Orleans, La.
Second Place: Pat Blanchard, Monroe, La.

MEN'S DOUBLES:

First Place: Edward Gibson and Erwin Jones
Second Place: Fred Hunter and Jerry Bucannon

WOMEN'S DOUBLES:

First Place: Pat DeMouy and Bonnie Hunter
Second Place: Pat Blanchard and Jan Bucannon

MIXED DOUBLES:

First Place: Louise and Dick Bultman
Second Place: Judy and Edward Gibson

Following the tournament, the winners were presented with their trophies.

Arrangements for the tournament were made by the Chairman of the Tennis Committee, Matko Milicic, New Orleans, La.

FIRST GENERAL SESSION

New Orleans, La., November 9, 1976, 12:15 p.m.

CALL TO ORDER

The First General Session of the 70th Annual Scientific Assembly of the Southern Medical Association was held during a luncheon in The Rivergate Convention Center, North Hall, with approximately 200 persons in attendance. Dr. G. Gordon McHardy, President, called the meeting to order at 12:15 p.m.

Dr. McHardy welcomed physicians and guests to the New Orleans Meeting, and briefly accounted for his year as President of the Southern Medical Association.

REPORT OF THE COUNCIL

Dr. Thomas B. Dameron, Jr., Chairman of the Council, Raleigh, N.C., gave a brief summary of actions taken by the Council from the 69th Annual Meeting through the 70th Annual Meeting. Dr. Dameron reviewed the proposed changes to the Constitution and Bylaws (Refer to PROCEEDINGS OF THE COUNCIL, New Orleans, La., November 6-7, 1976, Reports of Standing Committees, Committee on Constitution and Bylaws). All proposed changes were voted upon by the membership and subsequently approved.

REPORT OF THE NOMINATING COMMITTEE AND ELECTION OF OFFICERS

Dr. McHardy announced that the Council constitutes the Nominating Committee of the Southern Medical Association and, in accordance with the provisions of the Constitution and Bylaws, stated that the Nominating Committee desired to place in nomination the following persons for the elective offices of the Association:

PRESIDENT-ELECT: Andrew F. Giesen, Jr., Fort Walton Beach, Fla.

FIRST VICE-PRESIDENT: Thomas B. Dameron, Jr., Raleigh, N.C.

SECOND VICE-PRESIDENT: Rafael C. Sanchez, New Orleans, La.

Since the Constitution and Bylaws also provides for nominations from the floor, Dr. McHardy called for nominations; however, none were received.

It was moved and seconded that the nominations close and a ballot was cast for each of the nominees presented by the Nominating Committee. The nominees were approved as presented.

INSTALLATION OF THE PRESIDENT

Dr. McHardy installed G. Thomas Jansen, Little Rock, Ark., as President of the Southern Medical Association, 1976-77. Dr. Jansen accepted the gavel and duties of the Presidency, and expressed sincere appreciation to the membership for their support and confidence.

ADDRESS BY GUEST SPEAKER

Dr. McHardy introduced Congressman Dr. Tim Lee Carter, who spoke on "The Outlook for Health Legislation as Seen by the Physician-Congressman."

ADJOURNMENT

There being no further business to come before the membership at that time, Dr. McHardy adjourned the First General Session of the 70th Annual Scientific Assembly of the Southern Medical Association at 1:45 p.m.

READ AND APPROVED BY:

G. Gordon McHardy, President, 1975-76
Southern Medical Association
December 6, 1976

PRESIDENT'S NIGHT

New Orleans, La., November 9, 1976, 6:30 p.m.

The annual President's Night festivities began with a Hospitality Hour at 6:30 p.m., Marriott Motor Hotel, La Galerie.

At 7:30 p.m., the 703 members and guests were seated in the Mardi Gras Ballroom for the dinner dance. Rafael C. Sanchez, New Orleans, La., General Chairman on Arrangements, presided.

The invocation was delivered by Father Peter V. Rogers, O.M.I., Chaplain for the Fire and Police Departments of the City of New Orleans, New Orleans, La.

Dr. Sanchez introduced the officers and guests at the head table, who, in addition to Father Rogers, included the following officers of the Southern Medical Association: G. Gordon McHardy, President, 1975-76, and Mrs. McHardy, New Orleans, La.; G. Thomas Jansen, President-Elect, 1975-76, and President, 1976-77, and Mrs. Jansen, Little Rock, Ark.; Thomas B. Dameron, Jr., Chairman of the Council, 1975-76, and First Vice-President, 1976-77, and Mrs. Dameron, Raleigh, N.C.; G.

Baker Hubbard, Sr., Chairman of the Council, 1976-77, and Mrs. Hubbard, Jackson, Tenn.; Thomas J. Zaydon, Second Vice-President, 1975-76, and Mrs. Zaydon, Miami, Fla.; Mrs. J. Gordon Dees, President of the Woman's Auxiliary to the Southern Medical Association, 1975-76, and Dr. Dees, Jackson, Miss.; Mrs. Linus W. Hewit, President of the Woman's Auxiliary to the Southern Medical Association, 1976-77, and Dr. Hewit, Tampa, Fla. Others at the head table included: Paul F. Naccari, Jr., President, Orleans Parish Medical Society, and Mrs. Naccari, New Orleans, La.; Donald Palmisano, representing the Louisiana State Medical Society, and Mrs. Palmisano, New Orleans, La.

Dr. Sanchez recognized the Medical Student Representatives who were attending the meeting as special guests of the Southern Medical Association.

At 9:30 p.m. Rene Louapre took over for show time, which included music for dancing, as well as listening, provided by the talented Pete Fountain. Following Mr. Fountain's performance, the Rene Louapre Orchestra provided music for dancing until 12:00 midnight.

SECOND GENERAL SESSION PRESIDENTS' LUNCHEON

New Orleans, La., November 10, 1976, 12:15 p.m.

The Second General Session of the 70th Annual Scientific Assembly of the Southern Medical Association was held in conjunction with the Woman's Auxiliary (previously Doctors' Day Awards Luncheon). The Rivergate Convention Center, North Hall, with approximately 300 members and guests in attendance. G. Gordon McHardy, New Orleans, La., presided.

The invocation was delivered by the Reverend John Curley, S. J., Church of the Immaculate Conception, New Orleans, La.

Rafael C. Sanchez, General Chairman on Arrangements, New Orleans, La., welcomed the SMA to New Orleans.

The President introduced his guests at the head table, who, in addition to Reverend Curley and Dr. Sanchez included Southern Medical Association officers: G. Thomas Jansen, President-Elect, Little Rock, Ark.; Andrew F. Giesen, Jr., First Vice-President, Fort Walton Beach, Fla.; Thomas J. Zaydon, Second Vice-President, Miami, Fla.; Thomas B. Dameron, Jr., Chairman of the Council, Raleigh, N.C.; G. Baker Hubbard, Sr., Vice-Chairman of the Council, Jackson, Tenn.; Mrs. J. Gordon Dees, President of the Woman's Auxiliary to the SMA, Paul F. Naccari, Jr., President of the Orleans Parish Medical Society, New Orleans, La.; and the Presidents' Guest Speaker for the occasion, The Honorable Lindy Boggs, were also seated at the head table.

Dr. McHardy recognized the Medical Student Representatives who were attending the meeting as special guests of the Association and other special guests who were in the audience.

SCIENTIFIC EXHIBIT AWARDS

FIRST AWARD: PATHOPHYSIOLOGY AND TREATMENT OF THE FAT EMBOLISM SYNDROME. James H. Herndon, Grand Rapids, Mich.; Edward Risenborough, and Joseph E. Fischer, Boston, Mass.

SECOND AWARD: SCREENING FOR ABNORMAL HEMOGLOBINS. Roland B. Scott, Ms. Diana Taylor, and Ms. Sheryl Jones, Washington, D.C.

THIRD AWARD: WHAT NUCLEAR MEDICINE CAN DO FOR YOU AND YOUR PATIENTS. Thomas D. Verdon, Jr., and Frederick R. Gydesen, Penrose Hospital, Colorado Springs, Colo.

HONORABLE MENTION: GASTROESOPHAGEAL (GE) SCINTISCANNING TO EVALUATE GE REFLUX AND ITS TREATMENT. Robert S. Fisher and Leon S. Maimud, Temple University Health Science Center, Philadelphia, Pa.; **PRENATAL DIAGNOSIS OF FETAL CHROMOSOMAL ABNORMALITIES BY AMNIOCENTESIS.** William H. Sternberg, Maria Varela, and Hiram Batson, Tulane University Medical Center, New Orleans, La.; **PERCUTANEOUS COAGULATION OF THE GASTRIC ANGIOMATOSIS (PCGG).** Phillip Earle Williams, Jr., Dallas, Texas; **PERMANENT CARDIAC PACING.** Richard E. Wood and Robert E. Rawitscher, Dallas, Texas.

TECHNICAL EXHIBIT AWARD

Dr. McHardy announced that Merck Sharp & Dohme received the C. P. Loran Award for the most outstanding technical exhibit. The award was accepted by Dr. Ralph Snyder.

SPECIAL AWARDS

The Chairman of the Committee on Special Awards, Andrew F. Giesen, Jr., Fort Walton Beach, Fla., awarded the 1976 Seale Harris Medal to John S. Fordtran, Dallas, Texas. The 1976 Distinguished Service Award was presented to J. Garber Galbraith, Birmingham, Ala.

DOCTORS' DAY AWARDS— WOMAN'S AUXILIARY

Mrs. J. Gordon Dees, President of the Woman's Auxiliary to the SMA, presented the following Doctors' Day Awards: **GEORGE D. FELDNER TROPHY** (best overall observance of Doctors' Day, regardless of size of county) — Hillsborough County, Florida; **GUY SMITH TROPHY** (second best observance) — Tift County, Georgia; **MILFORD O. ROUSE TROPHY** (most outstanding exhibit to state or county auxiliary) — Woman's Auxiliary to the Mississippi State Medical Association.

CERTIFICATE OF APPRECIATION

A Certificate of Appreciation was presented by Dr. McHardy to Mrs. Dees for her services as President of the Woman's Auxiliary to the Southern Medical Association, 1975-76.

PAST PRESIDENT'S MEDAL AND PLAQUE

Dr. Jansen's first official duty as President of the SMA was to present the Past President's Medal and Plaque to Dr. McHardy, as a token of the members' esteem and appreciation for the outstanding manner in which he served the Association as President, 1975-76, and for his excellence in performing the duties of office.

ADDRESS BY GUEST SPEAKER

Dr. McHardy introduced the special guest of the Presidents' Luncheon, The Honorable Lindy Boggs, who addressed the audience on "Congress and the Health Care Problems of the Present and Immediate Future."

ADJOURNMENT

Following a few brief announcements, the Second General Session of the 70th Annual Scientific Assembly of the Southern Medical Association was adjourned at 1:45 p.m.

READ AND APPROVED BY:

G. Gordon McHardy, President, 1975-76
Southern Medical Association
December 6, 1976.

PROCEEDINGS OF THE EXECUTIVE COMMITTEE OF THE COUNCIL

New Orleans, La., November 10, 1976, 11:00 a.m.

CALL TO ORDER AND ROLL CALL

The Executive Committee of the Council of the Southern Medical Association met in the Mardi Gras Balcony, Sections J & K, Marriott Motor Hotel, following a breakfast at 8:30 a.m. with the Medical Student Representatives and the Committee on Medical Students.

Members of the Executive Committee of the Council present: G. Baker Hubbard, Sr., **Chairman**, Jackson, Tenn.; J. Ralph Meier, **Vice-Chairman**, New Orleans, La.; M. Pinson Neal, Jr., Richmond, Va.; G. Thomas Jansen, Little Rock, Ark.; Andrew F. Giesen, Jr., Fort Walton Beach, Fla.; Thomas B. Dameron, Jr., Raleigh, N.C.

Members of the Executive Committee absent: Robert K. Dorton, St. Louis, Mo.; Edwin C. Evans, Atlanta, Ga.

Others present: the following SMA staff members from Birmingham, Ala.: Mr. Roy B. Evans, Executive Director; Ms. Pamela Galbaugh, Administrative Assistant.

OLD BUSINESS

ITEM NO. 1

Mr. Evans stated that the President, Chairman of the Council, and Mr. Jim Fulkerson would meet with Mr. Richard E. Ballard, Hoechst-Roussel Pharmaceutical Company, Somerville, N.J., on December 15, 1976, to make the formal presentation for funding the Dial Access Program.

ITEM NO. 2

Dr. Meier briefly discussed a breakfast/meeting he had attended with representatives of the pharmaceutical industry. He further stated that the exhibitors were much happier with the New Orleans Meeting than they had been with the Miami Beach Meeting in 1975.

ACTION:—Dr. Meier moved that the SMA's policy of "grading" exhibitors be reinstated. Dr. Jansen seconded the motion and it carried.

ITEM NO. 3

The members of the Executive Committee of the Council discussed the fact that no budget had been received from the Editor of the *Journal*, Dr. Riley. The Executive Committee was advised that Dr. Riley had indicated that he would try to have a budget ready to submit to the Executive Committee at the time of the Midwinter Meeting.

As requested by the Executive Committee of the Council (Refer to PROCEEDINGS OF THE EXECUTIVE COMMITTEE OF THE COUNCIL, Atlanta, Ga., June 12, 1976, *Southern Medical Journal*, ACTION), a detailed accounting, with receipts, was to be submitted to the headquarters office.

Mr. Evans stated that Mr. Butts had received a letter from Arthur Young & Company recommending that their company in Oklahoma City audit Dr. Riley's books since the inception of his receiving SMA funds.

ACTION:—Dr. Neal moved that the recommendation received from Arthur Young & Company regarding the auditing of Dr. Riley's books be accepted. Dr. Meier seconded the motion and it carried.

NEW BUSINESS

ITEM NO. 1

The dates for the Midwinter Meeting of the Executive Committee of the Council and Committee on Scientific Work meeting were discussed. Roy Evans indicated that the dates of February 5-6, 1977, Dallas, Texas, had been secured for the meeting of the Committee on Scientific Work. It was agreed upon that the Executive Committee of the Council and Council would meet in Birmingham, Ala., February 11-13, 1977, for the Midwinter Meeting.

ITEM NO. 2

Dr. Hubbard inquired how the members of the Executive Committee would feel about asking immediate past Councilors to attend the Councilors' Party held the Saturday evening preceding the opening of the annual meeting. It was decided that the headquarters office would invite ex-Council members from four previous years to attend the Councilors' Party.

ITEM NO. 3

Dr. Neal discussed the need for a computer model to avoid scheduling conflicts at annual meetings.

ITEM NO. 4

Dr. Meier informed members of the Executive Committee of the Council that Mr. J. Morgan Smith, Public Relations Consultant to the SMA, had resigned. He further stated that Mr. Don Kirkpatrick, of Bonzo & Associates, had put in a bid to replace Mr. Smith.

ADJOURNMENT

There being no further business to come before the Executive Committee of the Council at this time, Dr. Hubbard adjourned the meeting at 11:30 a.m.

READ AND APPROVED BY:

G. Baker Hubbard, Sr., Chairman
Executive Committee of the Council
December 10, 1976

WOMAN'S AUXILIARY TO THE SOUTHERN MEDICAL ASSOCIATION PRECONVENTION EXECUTIVE BOARD MEETING

New Orleans, Louisiana, November 8, 1976, 8:30 a.m.

On Monday, November 8, 1976 at 8:30 a.m. in the Acadia Suite of the Royal Sonesta Hotel, New Orleans, Louisiana, the President, Mrs. J. Gordon Dees, Jackson, Mississippi, presided at the "Southern Plantations Breakfast" and the 52nd Annual Preconvention Meeting of the Woman's Auxiliary to the Southern Medical Association.

The order of the program was altered for the convenience of the SMA officers who were present.

In her amicable way, Mrs. Dees introduced the Special Guests. At the head table were: Dr. G. Gordon McHardy, New Orleans, Louisiana, President of the SMA, who brought greetings from the Association and high praise for the Auxiliary's cooperative efforts with them. He urged all to attend the Presidents' Luncheon on Wednesday, at which the Honorable Lindy (Mrs. Hale) Boggs will be the guest speaker. He also expressed the regrets of Dr. and Mrs. Milford O. Rouse, Dallas, Texas, at having to miss this Convention due to their cardiologist's orders; Dr. Thomas B. Dameron, Raleigh, North Carolina, Chairman of the SMA Advisory Council, expressed great appreciation of the Council for the success of the women with the Dial Access Program; Dr. James T. Thompson, SMA Councilor from Mississippi, added his thanks to the Auxiliary and Mrs. Dees, and issued an "early welcome home" to Mrs. Dees. Also at the head table were Mrs. Erle E. Wilkinson, Nashville, Tennessee, Parliamentarian and Past President of the AMA and SMA Auxiliaries; Mrs. Chester Young, Kansas, President-Elect of the AMA Auxiliary; Mrs. James Manning, Marietta, Georgia, immediate Past President of the SMA Auxiliary and Mrs. Linus Hewitt, Tampa, Florida, President-Elect of the SMA Auxiliary. Other Special Guests included Mrs. G. Gordon McHardy, Mrs. Thomas B. Dameron, Mrs. James T. Thompson, Dr. James Manning, Dr. Linus W. Hewitt, Mrs. Burr Curtis, Dr. and Mrs. M. Bruce Martin, Mrs. George Welch, Mrs. Simon V. Ward, Mrs. B. Holly Grimm and Dr. J. Gordon Dees, Associate Councilor from Mississippi.

Mrs. James Manning, Marietta, Georgia, gave a very meaningful invocation which was followed by the Pledge of Allegiance to the Flag led by Mrs. Edward Hill, Hollandale, Mississippi, immediate Past President of the Mississippi State Medical Auxiliary.

A lovely warm welcome to New Orleans was given by Mrs. George Welch, President of the Orleans Parish Auxiliary and Mrs. Wayne C. Brady, Greenville, South Carolina, SMA Auxiliary Councilor, graciously responded for the Board.

Mrs. B. Holly Grimm, New Orleans, Louisiana, Convention Co-Chairman, announced a total registration of 328 with 177 pre-registered. She urged all to buy their tickets for the Presidents' Luncheon as soon as possible. Mrs. Dees said that she would appreciate a written evaluation of this combined Doctors Day Awards Luncheon and Presidents' Luncheon, noting both the pros and cons.

Mrs. George D. Feldner, Metairie, Louisiana, Past President of the SMA Auxiliary, brought greetings and added her welcome to New Orleans to Southern.

Mrs. Dees recognized the elected Officers who served during their term of office (1975-1976), thanking each one as she introduced them.

Mrs. Linus W. Hewitt, Tampa, Florida, President-Elect
Mrs. M. Bruce Martin, Huntington, West Virginia, First Vice-President

Mrs. Baxter S. Troutman, Lenoir, North Carolina, Second Vice-President

Mrs. Frank J. Jones, Baton Rouge, Louisiana, Third Vice-President

Mrs. Andrew G. Goeel, Texarkana, Texas, Recording Secretary

Mrs. M. Pinson Neal, Jr., Richmond, Virginia, Treasurer

Mrs. J. Ray Ivester, Charleston, South Carolina, Historian

Mrs. Curtis Caine, Jackson, Mississippi

Mrs. Erle E. Wilkinson, Nashville, Tennessee, Parliamentarian

Mrs. Andrew G. Goeel, Recording Secretary, attempted to call the Roll, but as her voice failed due to laryngitis, Mrs. James Manning graciously filled in for her. We had 55 members plus 13 Past Presidents of the SMA Auxiliary and the following State President/Presidents-Elect present:

Arkansas: Mrs. Carl L. Wilson, Fort Smith

Alabama: Mrs. William D. Hughes, Montgomery

District of Columbia: Mrs. Donald F. Fletcher, Atlantic

Virginia—Mrs. Seamus Noonan, Kensington, Maryland

Florida: Mrs. R. B. Moore, West Palm Beach

Georgia: Mrs. Phil Astin, Carrollton

Louisiana: Mrs. A. M. Alexander, Alexandria

Maryland: Mrs. Leonard Warren, Baltimore

Mississippi: Mrs. Edward Hill, Hollandale — Mrs. W. A. Brown, Mathiston

Texas: Mrs. Brad Oxford, San Antonio — Mrs. Horace

Trippett, Waco

West Virginia: Mrs. J. T. Mallamo

The minutes of the 1975 Post-Convention meeting

having been approved by the Reading Committee, the

motion was made by Mrs. Erle E. Wilkinson to dispense

with their reading. Mrs. C. Tolbert Wilkinson, Wake

Forest, North Carolina, seconded this motion which was

passed by the body.

Mrs. Nash Thompson, Stuart, Virginia, Past President

of the SMA Auxiliary, introduced the Past Presidents

and gave the year of each administration as follows:

1949—Mrs. Joseph W. Kelso, Oklahoma City, Okla-

homa

1952—Mrs. V. Eugene Holcombe, Charleston, West

Virginia

1954—Mrs. George Feldner, Metairie, Louisiana

1955—Mrs. Louis K. Hundley, Little Rock, Arkansas

1960—Mrs. John M. Chenault, Decatur, Alabama

1963—Mrs. Elias Margo, Oklahoma City, Oklahoma

1967—Mrs. C. Tolbert Wilkinson, Wake Forest, North

Carolina

1968—Mrs. Louie H. Griffin, Claxton, Georgia

1970—Mrs. Gordon Peek, Baton Rouge, Louisiana

1971—Mrs. Ramsay H. Moore, Dallas, Texas

1973—Mrs. Erle E. Wilkinson, Nashville, Tennessee

1974—Mrs. W. Nash Thompson, Stuart, Virginia

1975—Mrs. James H. Manning, Marietta, Georgia

The Councilors (12 present) and Vice-Councilors (11

present) were introduced. All were urged to SPEAK UP

FOR SOUTHERN and that NOW IS THE TIME.

An opportunity was given for addendums to the

printed reports. Mrs. Bruce Martin, Huntington, West

Virginia, Chairman of the Membership Committee noted

that we have a total membership of 23,000 with four

states showing increases.

The Treasurer, Mrs. M. Pinson Neal, Jr., Richmond,

Virginia, distributed copies of the 1975-1976 budget

showing a budgeted total of \$7,960.00 with disburse-

ments to date of \$6,778.77. She emphasized that any

outstanding vouchers must be turned in promptly for

payment assured.

Historian, Mrs. Ray Ivester, Charleston, South

Carolina, requested reports from Councilors in triplicate

— one copy for her files, plus two copies for the

President.

Chairman of the Judges for Doctors' Day exhibits,

Mrs. Raymond Yow, Salisbury, Maryland, called atten-

tion to needed information on exhibits before judging

could be completed.

Following the September resignation of Mrs. A. S.

Koenig, Ft. Smith, Arkansas, as Coordinator of the

Romance & Research of Medicine Committee, Mrs. Charles A. Prater, Jellico, Tennessee was named Coordinator. She has requested information concerning the size of the Auxiliaries submitting exhibits. Mrs. Pinson Neal, Jr., Richmond, Virginia, added the information that the brochures which have been updated, will be printed very soon. They will have greater clarity for the many changes made in them.

Mrs. Gordon Dees explained the Dial Access Program assigned to us in February, 1976 by the SMA. Auxiliary members manned booths at State Medical Society meetings with much success and for this service, Dr. McHardy and SMA expressed great appreciation.

Mrs. Ramsay H. Moore, Dallas, Texas, a Past President of the SMA Auxiliary, extended an invitation to attend the 1977 SMA meeting in Dallas, November 6-9, 1977 and promised them a warm Texas welcome.

Regrets were read from Dr. and Mrs. Milford O. Rouse whose cardiologist forbade travel at this time. Messages also were received from Mrs. Edwin McCoy, North Carolina, Mrs. Virgil Forester, Oklahoma, Mrs. Walker Curtis, Georgia, Mrs. George Owen, Mississippi, Mrs. Kalford Howard, Virginia, Mrs. Jordan Kelling, Missouri, Mrs. Paul Gray, Arkansas, Mrs. William G. Thuss, Alabama.

The Finance Chairman, Mrs. Eugene H. Countiss, New Orleans, Louisiana, reported that the Proposed Budget for 1976-1977 would be the same as for 1975-76 and moved that it be accepted. Mrs. Louie Griffin, Claxton, Georgia, seconded the motion which passed. Mrs. Joseph Kelso, Oklahoma, spoke to the motion, noting how the budget as well as our need had grown through the years.

Mrs. Dees announced that the General Session, Tuesday, November 9, 1976, would start at 8:30 a.m., instead of 9:00 a.m., as printed in the Program.

There being no further business, Mrs. C. Tolbert Wilkinson moved for recess until Tuesday morning. The motion was seconded by Mrs. Elias Margo, Oklahoma, and approved by the body at 10:30 a.m.

Recording Secretary, Mrs. Andrew G. Goest,
Texarkana, Texas
Reading Committee:

Chairman: Mrs. C. Tolbert Wilkinson, Wake
Forest, N.C.; Mrs. Henson Coon, Monroe,
Louisiana; Mrs. James H. Manning, Marietta,
Ga.

WOMAN'S AUXILIARY TO THE SOUTHERN MEDICAL ASSOCIATION GENERAL SESSION

New Orleans, Louisiana, November 9, 1976, 8:40 a.m.

The General Session of the 52nd Annual Meeting of the Woman's Auxiliary to the Southern Medical Association was called to order at 8:40 a.m. by the President, Mrs. J. Gordon Dees, Jackson, Mississippi, in the Acadia Suite of the Royal Sonesta Hotel, New Orleans, Louisiana.

A very lovely invocation was given by Mrs. Donald F. Fletcher, Councilor from Virginia.

Mrs. Charles Prater, Councilor from Tennessee presented a most interesting "Bicentennial Reflections" on men who made personal contributions early in our history. Mrs. Ramsay Moore, Dallas, Texas requested that a copy be placed in the files of the Research and Romance Committee in the SMA office in Birmingham, Alabama.

The Pledge of Allegiance to the Flag was led by Mrs. T. E. Ross, Councilor from Mississippi assisted by Mrs. Prater. Both women were attired in colonial costumes.

Mrs. Dees then introduced the Special Guests: Dr. and Mrs. G. Gordon McHardy, Dr. and Mrs. Thomas Jansen, Dr. and Mrs. M. Bruce Martin, and Dr. Linus Hewit.

Dr. Thomas Jansen, SMA President-Elect brought greetings from the Association and Council and extended an invitation to attend the meeting to be held in Dallas, Texas in November, 1977. He mentioned the probability of the meeting being held in Las Vegas, Nevada the following year and asked the Auxiliary for their thoughts on this matter.

Dr. Bruce Martin, Member Council SMA and Liaison said that he wanted to work more closely with the women in the Dial Access Program for even greater success. He suggested that to bolster membership in the SMA Auxiliary, the Councilors should constantly remind their Auxiliary members that wives are automatically members of the SMA Auxiliary when their husbands are members of or join the Southern Medical Association. He said that it is appalling how many do not know this, even some at this very meeting.

A note of regret at having to miss this meeting due to their doctors' orders was received from Dr. and Mrs. Milford O. Rouse, and a letter will be sent to them expressing our appreciation for their continued interest and best wishes.

Punctuated by the phrase, "Le bon ton role" (let the good times roll), warm and hearty words of welcome were extended by Mrs. A. M. Alexander, Jr., the President of the Louisiana State Medical Auxiliary and Mrs. Henson Coon, Monroe, Louisiana, the Councilor from Louisiana. In response, Mrs. Seamus Noonan, Washington, D.C. voiced the sincere appreciation of all the members attending this 52nd Annual Meeting.

Meeting plans were presented by Mrs. Simon V. Ward who also introduced her Convention Co-chairman, Mrs. B. Holly Grimm. Both made pleas for pre-registration to ease the headaches of future chairmen. Total registration now is 471 with only 177 pre-registered.

Mrs. Erle E. Wilkinson introduced the guest speaker, Mrs. Chester Young, President-Elect of the AMA Auxiliary not only as a representative of the AMA Auxiliary, but also as a very warm and close personal friend. She and her late husband have been such good friends of Southern that some time ago we adopted her as our "ornery member". In her greetings, she reminded us that as doctors' wives, we are special because of our influence, whether good or bad, and frequently unwittingly.

Mrs. Dees asked the Mississippi delegation to stand as she introduced them, thanking each for their support and love throughout the year, and also for the Mississippi Quilt which her own county auxiliary had made for her. It is on display in the hospitality room.

Mrs. Ramsay H. Moore, Dallas, Texas, introduced the Past Presidents in attendance — 11 of them: Mrs. Joseph W. Kelso, Oklahoma City, Oklahoma; Mrs. V. Eugene

Holcombe, Charleston, West Virginia; Mrs. John Chenault, Decatur, Alabama; Mrs. Elias Margo, Oklahoma City, Oklahoma; Mrs. C. Tolbert Wilkinson, Wake Forest, North Carolina; Mrs. Louie H. Griffin, Claxton, Georgia; Mrs. Gordon Peek, Baton Rouge, Louisiana; Mrs. Erle E. Wilkinson, Nashville, Tennessee; Mrs. W. Nash Thompson, Stuart, Virginia; Mrs. James H. Manning, Marietta, Georgia.

Mrs. Moore then invited the members to attend the 1977 Annual Meeting to be held in Dallas, Texas, November 6-9, 1977, promising them a warm welcome and a good time.

Mrs. Dees recognized the State Presidents/Presidents-Elect, and Councilors/Vice-Councilors who were present.

Mrs. Linus W. Hewit, Tampa, Florida, substituting for the Recording Secretary, Mrs. Andrew G. Goels, who still was unable to speak, called the Roll. There were 68 members present. She also recommended that the minutes of the 1975 General Session, having been approved by the Reading Committee and printed, not be read. The reading was omitted.

Mrs. C. Tolbert Wilkinson, Wake Forest, North Carolina, made the motion to dispense with the reading of the Meeting Rules of Order since they were printed in the Program of the ladies' activities. Mrs. Bruce Martin, Huntington, West Virginia, seconded this motion which was passed.

Mrs. C. Tolbert Wilkinson moved that the printed agenda be accepted; this was seconded by Mrs. T. A. Baines, Jackson, Mississippi and passed by the body.

Members of the Reading Committee were appointed as follows: Mrs. C. Tolbert Wilkinson, Wake Forest, North Carolina, Chairman; Mrs. Henson Coon, Monroe, Louisiana; Mrs. James H. Manning, Marietta, Georgia.

A very lovely Memorial Service was planned and conducted by Mrs. William Noble, Ft. Payne, Alabama, using a white flower arrangement with white candles, she paid a poetic tribute to 111 deceased members from 10 states and extended sympathy to their families. Dr. James H. Manning's solo, "Beyond the Sunset" added a very poignant touch to the memorial. Mrs. Louie H. Griffin, Claxton, Georgia, accompanied him at the piano.

The Annual Reports have been printed and copies are available, hence Mrs. Dees asked for any addendum reports of the officers and committee chairmen.

The Treasurer, Mrs. M. Pinson Neal, Jr., Virginia, reported that of the budgeted amount for the year 1975-1976, \$7,960.00, to date the disbursements totaled \$6,778.77. She requested that any outstanding vouchers be submitted at once for payment.

Mrs. Linus W. Hewit, President-Elect, Florida, noted that she had spoken up for Southern at every opportunity and emphasized the need for promoting membership, participation, and good-will. She added that with a dash of pep and spice, we will be LOOKING AHEAD FOR SOUTHERN in 1976-1977.

First Vice-President and Chairman of the Membership Committee, Mrs. Bruce Martin, announced that there had been a gain in membership — from 21,976 in 1975 to 22,894 in 1976. Dr. McHardy, President of the SMA had said he believed that the membership now was 23,000, plus. Alabama showed the greatest increase with 400 new members.

Finance Chairman, Mrs. Eugene Countiss, New Orleans, Louisiana, presented the budget for 1976-1977. The budget will be the same for 1976-1977, with the exception of an added \$400.00 allotted for the President-Elect's travel expense when she is substituting for the President. This brings the budgeted total to \$8,360.00. Mrs. Countiss recommended that this budget be accepted and so moved. Mrs. Pinson Neal seconded this motion, which was accepted.

Mrs. Raymond Yow, Salisbury, Maryland, Chairman of Doctors Day Judges, introduced the others who judged with her, Mrs. Brad Oxford, San Antonio, Texas and Mrs. Howard Johnson, Sheffield, Alabama. The following were announced as winners in the Doctors Day exhibits:

1. Best state-wide observance — Louisiana
 2. County over 50 members
 - a. Best observance — Lafayette Parish, Louisiana
 - b. Honorable mention — Greene County, Tennessee
 3. County under 50 members
 - a. Best observance — Tift County, Georgia
 - b. Honorable mention — Northampton County, Virginia
 4. Best Exhibit — North Carolina
- Winners of the Feldner Trophy and the Guy Smith Kirby Trophy will be announced at the Presidents' Luncheon on Wednesday.

Mrs. Charles A. Prater, Jellico, Tennessee, Coordinator of the Research and Romance Committee introduced her regional chairmen, Mrs. Robert A. Reiter, Baltimore, Maryland and Mrs. William H. Preston, Booneville, Mississippi.

Awards were presented to the following:

1. Best State-wide Exhibit — Mississippi
 - a. Honorable mention — Maryland
2. County over 150 members
 - a. Best County exhibit — East Baton Rouge, Louisiana
 - b. Honorable mention — Fairfax County, Virginia
3. County under 150 members (75-150)
 - a. Best County exhibit — Lafayette Parish, Louisiana
 - b. Honorable mention — Spartanburg County, South Carolina
4. County under 75 members
 - a. Best County exhibit — Hidalgo-Starr Counties, Texas
 - b. Honorable mention — Floyd County, Georgia
5. Best Exhibit at Annual Meeting of SMA Auxiliary — Mississippi

The Dr. and Mrs. Milford O. Rouse Trophy for the most outstanding exhibit will be presented at the Doctors' Day Awards Luncheon/Presidents' Luncheon on Wednesday, November 10, 1976.

In her President's Message, Mrs. Dees referred to her printed report and added a few personal reflections of her term of office, thanking everyone who is some small way made her path smoother and contributed so much to the great success of the Auxiliary.

Mrs. Erle E. Wilkinson, Parliamentarian, read Article X, Section 14 of the Bylaws concerning the election of the Nominating Committee. The President asked for nominations for the Nominating Committee for 1976-1977. The following were nominated from the Executive Board: Mrs. J. Gordon Dees, Jackson, Mississippi; Mrs. David Barclay, Little Rock, Arkansas; Mrs. Louie H. Griffin, Claxton, Georgia; Mrs. Earle Mitchell, Punta Gorda, Florida; Mrs. Gordon Peek, Baton Rouge, Louisiana; Mrs. M. Pinson Neal, Jr., Richmond, Virginia, moved that the nominations be closed, was seconded and passed. The following were nominated from the general membership: Mrs. John Owens, Missouri; Mrs. Robert A. Reiter, Baltimore, Maryland; Mrs. Doyle B. Smith, Mississippi; Mrs. Donald F. Fletcher, Atlantic, Virginia, moved the nominations be closed, was seconded and carried.

Mrs. Dees appointed the following to serve as tellers: Mrs. William D. Hughes, Montgomery, Alabama; Mrs. Frank J. Jones, Baton Rouge, Louisiana; Mrs. George Scofield, Birmingham, Alabama; Mrs. C. Tolbert Wilkinson, Wake Forest, North Carolina, Chairman. Following the tally by the tellers, the following were declared elected to serve on the Nominating Committee:

From the Board: Mrs. J. Gordon Dees, Mrs. David Barclay, Mrs. Louie H. Griffin. From the General Membership: Mrs. Robert A. Reiter and Mrs. Doyle Smith.

Mrs. James H. Manning, Marietta, Georgia, Chairman of the 1975-1976 Nominating Committee made a suggestion in the form of a motion, that in the interest of reducing this Committee's expenses, the Nominating Committee should have a working session at the Annual Meeting in an attempt to secure a preliminary slate of officers for the following year. The motion was seconded by Mrs. Bruce Martin, West Virginia, and accepted.

Mrs. James H. Manning presented the following slate of officers for 1976-1977: President-Elect, Mrs. Bruce Martin, Huntington, West Virginia; First Vice-President, Mrs. Baxter S. Troutman, Lenoir, North Carolina; Second Vice-President, Mrs. Keith Jones, Warrenton, Missouri; Third Vice-President, Mrs. Andrew G. Goessl, Texarkana, Texas; Recording Secretary, Mrs. Howard Johnson, Sheffield, Alabama; Treasurer, Mrs. Donald F. Fletcher, Jr., Atlantic, Virginia; Historian, Mrs. Charles A. Prater, Jellico, Tennessee.

The two officers appointed by the President, Mrs. Linus Hewit will be: Corresponding Secretary, Mrs. Frank J. Jones, Baton Rouge, Louisiana; Parliamentarian, Mrs. William J. Reardon, McLean, Virginia.

The floor was opened for nominations for each office, but there being none, Mrs. Manning moved the adoption of the slate as presented. The motion carried.

Mrs. Dees introduced Mrs. John Chenaault, Past President, Decatur, Alabama, who conducted the installation of officers. Mrs. Chenaault used as her theme "Birds of our Southland" and as she installed each officer, she related an interesting and original bit of history on "state birds" and presented each officer with a very lovely hand painted and signed Art-Optic pendant of her state bird.

Following the installation, Mrs. J. Gordon Dees presented the President's Pin and Gavel to Mrs. Linus W. Hewit, President, Tampa, Florida with love and best wishes for a most successful and wonderful year.

Mrs. Hewit, incoming President, said that the theme for this year would be LOOKING AHEAD FOR SOUTHERN, adding that "you can't know it unless you sell it". She hopes to implement the Dial Access Program for even greater success and benefits. Mrs. Hewit also remarked that equal rights carry equal responsibility and urged that we should give the gift of life (blood) for Doctors Day; "it would be indeed an expression of love and deep appreciation and is desperately needed."

A standing vote of thanks and deep appreciation was given to Mrs. J. Gordon Dees, Immediate Past President for her year of devotion and hard work for Southern.

Mrs. Dees then recognized the Florida delegation, relatives and friends of our new President, who presented her with bouquets of roses, messages and a number of treasured mementoes. The Mississippi delegation were then recognized and they sent significant mementoes to both Mrs. Dees and Mrs. Hewit in honor of and appreciation for being our Presidents.

Mrs. Bruce Martin thanked the West Virginia women for her orchid corsage and Mrs. Joseph Mallamo, West Virginia, State President-Elect and first year member of the SMA Auxiliary, expressed her great pleasure and appreciation for the Auxiliary.

Mrs. Hewit reminded the members of the Post Convention "Dejeuner Piquant" and Meeting to be held Wednesday, November 10, 8:30 a.m. in the Acadia Suite. She also reminded the Executive Committee that they would meet at the Marriott Hotel at 3:30 p.m. following the Presidents' Luncheon.

There being no further business, the meeting was adjourned at 11:35 a.m.

Recording Secretary—Mrs. Andrew G. Goessl, Texarkana, Texas
Reading Committee:

Chairman: Mrs. C. T. Wilkinson, Wake Forest, North Carolina
Mrs. Henson Coon, Monroe, Louisiana
Mrs. James Manning, Marietta, Georgia

WOMAN'S AUXILIARY TO THE SOUTHERN MEDICAL ASSOCIATION POST CONVENTION BOARD MEETING

New Orleans, Louisiana, November 10, 1976, 9:35 a.m.

The Post Convention Executive Board "Dejeuner Piquant" breakfast and meeting of the Woman's Auxiliary to the Southern Medical Association was held in the Acadia Suite, Royal Sonesta Hotel, New Orleans, Louisiana, November 10, 1976. Mrs. Linus Hewit, President, Tampa, Florida, presided. The local convention committee used unusual decorations with the centerpieces and sauce being given to those with the appropriate marks beneath their plates.

The invocation, given by Mrs. J. Gordon Dees, Jackson, Mississippi, was one of dedication and thankfulness.

Mrs. Hewit welcomed everyone, and introduced the members and honored guest at the speakers' table who were: Dr. G. Thomas Jansen, President, SMA and Mrs. Jansen, Little Rock, Arkansas; Mrs. J. Gordon Dees, Jackson, Mississippi, immediate Past President of SMA Auxiliary; Dr. M. Bruce Martin, Chairman of Advisory Committee, and Mrs. Martin, President-Elect, SMA Auxiliary, Huntington, West Virginia; Dr. Andrew F. Giesen, Jr., President-Elect, SMA, and Mrs. Giesen, Fort Walton Beach, Florida; Mrs. Chester Young, AMA Auxiliary President-Elect, Kansas City, Kansas; Dr. Linus Hewit; Mrs. William Harrison, Jr., President of FMA Auxiliary, Daytona Beach, Florida.

Mrs. Hewit continued with introductions of special guests — Dr. M. Pinson Neal, Jr., member of the Council, and Mrs. Neal, Richmond, Virginia, and Dr. and Mrs. Robert Wilson, Aliceville, Alabama. The new Auxiliary officers were also introduced: President-Elect, Mrs. M. Bruce Martin, Huntington, West Virginia; First Vice-President, Mrs. Baxter Troutman, Lenoir, North Carolina; Second Vice-President, Mrs. Keith Jones, Warrenburg, Missouri; Third Vice-President, Mrs. Andrew Goessl, Texarkana, Texas; Recording Secretary, Mrs. Howard C. Johnson, Sheffield, Alabama; Treasurer, Mrs. Donald Fletcher, Atlantic, Virginia; Corresponding Secretary, Mrs. Frank Jones, Baton Rouge, Louisiana; Parliamentarian, Mrs. William Reardon, McLean, Virginia; Historian, Mrs. Charles Prater, Jellico, Tennessee. Mrs. R. B. Moore, President-Elect of the Florida Medical Association Auxiliary, was also recognized.

Mrs. C. Tolbert Wilkinson, Past President of the SMA Auxiliary, Wake Forest, North Carolina, presented the Past Presidents of SMA Auxiliary who were in attendance: Mrs. John Chenault, Decatur, Alabama; Mrs. Joseph Kelso, Oklahoma City, Oklahoma; Mrs. Elias Margo, Oklahoma City, Oklahoma; Mrs. Gordon Peek, Baton Rouge, Louisiana; Mrs. Nash Thompson, Stuart, Virginia; Mrs. V. Eugene Holcombe, Charleston, West Virginia; Mrs. James Manning, Marietta, Georgia; Mrs. Erle Wilkinson, Nashville, Tennessee; Mrs. J. Gordon Dees, Jackson, Mississippi; Mrs. Louis K. Hundley, Pine Bluff, Arkansas.

Dr. Thomas Jansen, President, SMA, brought greetings from SMA, and asked for opinions on the Luncheon which supplanted the Doctors' Day Awards Luncheon. He thanked the Auxiliary for its participation in the Dial Access Program.

Dr. Andrew Giesen, Jr., President-Elect, SMA, expressed his appreciation and admiration of the Auxiliary and its work. He used Mrs. Hewit's theme for the year, "Looking Ahead for Southern", when he concluded by saying, "We are all looking ahead to the Convention in Dallas next year."

Mrs. Hewit introduced the local Convention Chairman and Co-Chairman, Mrs. Simon Ward and Mrs. Holly Grimm, and thanked them and their committees for the splendid work they had done. Mrs. Ward announced the registration as 457 out-of-town members, and 33 local, making a total of 490, an all time high.

The meeting was called to order by Mrs. Hewit at 9:35 a.m.

The welcome was given by Mrs. Ward; the response by Mrs. James Manning.

The pledge of allegiance was led by Mrs. R. B. Moore, President-Elect to the Auxiliary of the Florida Medical Association, West Palm Beach, Florida. Dr. Linus Hewit was flag bearer.

A Reading Committee composed of Mrs. James Manning, Chairman, Mrs. William Noble, and Mrs. C. Tolbert Wilkinson, was appointed by the President.

Mrs. John Hopper, Baton Rouge, Louisiana, President-Elect of the Louisiana Auxiliary brought greetings from her Auxiliary. The song, "Look to the Rainbow", was beautifully sung by Mrs. William Harrison, Daytona Beach, Florida. She was accompanied by Mrs. Louie Griffin.

The roll was called by the Recording Secretary, Mrs. Howard C. Johnson. Mrs. Johnson stated the minutes of the Preconvention Board Meeting and General Session were being read by the 1975-76 Reading Committee — Mrs. C. Tolbert Wilkinson, Mrs. Henson Coon, and Mrs. James Manning.

Treasurer's Report — Mrs. Donald Fletcher stated the 1976-77 budget had been approved at the General Session.

Mrs. Hewit explained materials in the folders given each member. She stressed using the materials, and using the folder as a file for mail from WASMA, and other correspondence to be passed on to her successor. Mrs. Louie Griffin was thanked for having the Handbook printed. Time was allotted for any corrections.

The State Presidents and Presidents-Elect in attendance were recognized.

The Bylaws state — Article VI, Section 1 — that two Board members shall be elected to serve as members of the Executive Committee for the ensuing year. Those elected were Mrs. Baxter Troutman and Mrs. Howard C. Johnson. Members of the 1976-77 Executive Committee are: Mrs. Linus Hewit, President; Mrs. Bruce Martin, President-Elect; Mrs. Donald Fletcher, Treasurer; Mrs. J. Gordon Dees, Immediate Past President and Mrs. Baxter Troutman, Lenoir, North Carolina, and Mrs. Howard C. Johnson, Sheffield, Alabama, Board members.

It was announced that Mrs. J. Gordon Dees had been elected chairman of the Nominating Committee. Other members of the committee are: Mrs. David Barclay, Little Rock, Arkansas; Mrs. Louie Griffin, Claxton, Georgia; Mrs. Doyle P. Smith, Jackson, Mississippi; Mrs. Robert Reiter, Maryland.

Mrs. Ramsay Moore extended an invitation to the Convention in Dallas, November 6-9, 1977.

Mrs. John Chenault, Past WASMA President, speaking for all Past Presidents, asked that the black ribbon for Past Presidents be changed to another color — perhaps purple for royal service. This suggestion met with resounding applause.

Mrs. Robert H. Mitchell, Punta Gorda, Florida, requested that Vice-Councilors receive all data sent to Councilors. Agreed.

Mrs. Erle Wilkinson moved that a telegram be sent to Dr. and Mrs. Milford Rouse expressing the Auxiliary's regret they were unable to attend. The motion was seconded and carried.

On behalf of the Past Presidents, Mrs. Joseph Kelso thanked Mrs. Hewit for all gifts and courtesies extended them.

Mrs. Hewit stated the winners of the Doctors' Day Awards and the Research and Romance of Medicine Awards would be listed in her first Newsletter, as the final trophies would not be awarded until the Luncheon at the Rivergate later on this day.

The President recognized the Florida members, thanking them for all their courtesies and support.

The meeting closed with Mrs. Harrison's singing, "Til

We Meet Again". The motion to adjourn was seconded and carried. Adjournment 10:35 a.m.

Mrs. Linus Hewit, President

Mrs. Howard C. Johnson, Recording Secretary

WOMAN'S AUXILIARY COURTESY RESOLUTIONS

WHEREAS the 52nd Annual Meeting of the Woman's Auxiliary to the Southern Medical Association been convened at the Royal Sonesta Hotel in New Orleans, La.—November 7-10, 1976, with Mrs. J. Gordon Dees, President, and Mrs. Simon Ward and Mrs. Holly Grimm Convention Chairman and Co-Chairman.

THEREFORE, be it resolved that this assembly express deep appreciation to these ladies, and

TO ALL Officers and Chairmen who have worked diligently throughout the year.

TO ALL Committee Chairmen and Co-Chairmen and members of the Orleans Parish Medical Auxiliary who have planned, worked, and coordinated efforts to make this convention so pleasurable and successful.

TO Mr. Eric Reiter, his staff and all personnel of the Royal Sonesta Hotel who have graciously endeavored through good service to have our stay here comfortable and convenient.

TO ALL the Officers and staff of Southern Medical Association who have helpfully contributed to the planning and staging of this convention.

TO OUR past Presidents and all members who have registered and participated in the various activities, both business and social.

TO GOD our Father for His divine guidance and protection and for the perfect weather we enjoyed during our stay.

TO ANY UNKNOWN or otherwise unacknowledged benefactors of this most successful and productive convention.

THEREFORE, BE IT FURTHER RESOLVED that this expression of our gratitude be included in the Minutes of this 52nd Annual Convention.

Respectfully submitted,
Mrs. Henry Kirby
Mrs. T. E. Ross, III
Mrs. Hugh P. Adkins
Mrs. T. A. Baines, Chairman

ANNUAL MEETING REGISTRATION RECORD

Date	Location	Host Physicians	Other Physicians	Total Physicians	Students	Para- medical Personnel	Technical Exhibitors	Guests	Total
1906-1915	No Record of Attendance								
1916-Nov. 13-16	Atlanta	299	1,247	1,476	55	—	103	233	1,867
1917-Nov. 12-15	Memphis	143	1,025	1,168	46	—	78	184	1,476
1918-	No Meeting—Influenza Pandemic								
1919-Nov. 10-13	Asheville	71	912	983	—	54	85	148	1,270
1920-Nov. 15-18	Louisville	230	872	1,102	114	40	149	171	1,576
1921-Nov. 14-17	Hot Springs	81	993	1,074	—	39	90	241	1,444
1922-Nov. 13-16	Chattanooga	107	1,230	1,337	—	26	129	289	1,781
1923-Nov. 12-15	Washington	333	1,363	1,696	214	26	143	495	2,574
1924-Nov. 24-27	New Orleans	352	1,559	1,911	169	15	120	510	2,725
1925-Nov. 9-12	Dallas	310	1,732	2,042	144	19	151	513	2,869
1926-Nov. 15-18	Atlanta	327	1,557	1,884	139	27	174	445	2,669
1927-Nov. 14-17	Memphis	275	1,728	2,003	251	24	212	438	2,928
1928-Nov. 12-15	Asheville	70	1,221	1,291	—	20	154	379	1,844
1929-Nov. 19-22	Miami	163	1,180	1,343	—	19	84	572	2,018
1930-Nov. 11-15	Louisville	258	1,232	1,490	224	21	144	356	2,235
1931-Nov. 18-20	New Orleans	423	1,266	1,689	231	33	154	462	2,569
1932-Nov. 15-18	Birmingham	276	971	1,247	—	32	104	239	1,622
1933-Nov. 14-17	Richmond	264	1,319	1,583	279	61	141	407	2,471
1934-Nov. 13-16	San Antonio	304	1,641	1,945	—	27	141	739	2,852
1935-Nov. 19-22	St. Louis	695	1,999	2,694	690	18	279	614	4,295
1936-Nov. 17-20	Baltimore	847	2,365	3,212	660	51	375	581	4,879
1937-Nov. 30-Dec. 3	New Orleans	573	2,238	2,811	736	177	370	1,328	5,422
1938-Nov. 15-18	Oklahoma City	353	1,914	2,267	262	389	342	778	4,038
1939-Nov. 21-24	Memphis	385	1,837	2,222	412	595	300	734	4,263
1940-Nov. 12-15	Louisville	436	1,639	2,075	412	667	361	629	4,144
1941-Nov. 10-13	St. Louis	762	1,944	2,706	683	378	498	774	5,039
1942-Nov. 10-12	Richmond	253	1,130	1,383	337	136	187	392	2,435
1943-Nov. 16-18	Cincinnati	305	1,410	1,715	94	176	255	520	2,760
1944-Nov. 13-16	St. Louis	559	1,557	2,116	441	461	431	762	4,211
1945-Nov. 12-15	Cincinnati	207	1,270	1,477	88	52	269	545	2,431

Date	Location	Host Physicians	Other Physicians	Total Physicians	Students	Para- medical Personnel	Technical Exhibitors	Guests	Total
1946-Nov. 4-7	Miami	443	1,648	2,091	—	135	241	1,074	3,541
1947-Nov. 24-26	Baltimore	949	1,718	2,667	332	407	445	674	4,525
1948-Nov. 25-28	Miami	508	1,087	1,595	27	115	308	629	2,674
1949-Nov. 14-17	Cincinnati	248	1,235	1,483	32	143	264	490	2,412
1950-Nov. 13-17	St. Louis	726	1,391	2,117	472	92	323	644	3,648
1951-Nov. 5-8	Dallas	478	1,575	2,053	160	—	190	850	3,253
1952-Nov. 10-13	Miami	582	1,591	2,173	34	177	246	1,107	3,737
1953-Oct. 26-29	Atlanta	566	1,781	2,347	266	195	325	900	4,033
1954-Nov. 8-11	St. Louis	687	1,614	2,201	614	336	391	772	4,314
1955-Nov. 14-17	Houston	807	1,579	2,386	*	*	676	951	4,013
1956-Nov. 12-15	Washington	1,083	2,090	3,173	314	*	982	969	5,438
1957-Nov. 11-14	Miami Beach	1,061	2,174	3,235	177	*	721	1,870	6,003
1958-Nov. 3-6	New Orleans	1,256	2,331	3,587	454	*	753	1,327	6,121
1959-Nov. 16-19	Atlanta	685	1,972	2,657	205	*	554	799	4,215
1960-Oct. 31-Nov. 3	St. Louis	628	1,400	2,028	305	*	636	735	3,964
1961-Nov. 6-9	Dallas	854	1,868	2,722	121	*	603	939	4,385
1962-Nov. 12-15	Miami Beach	768	2,255	3,023	99	115	620	1,231	5,088
1963-Nov. 18-21	New Orleans	793	2,712	3,505	545	112	593	1,875	6,630
1964-Nov. 16-19	Memphis	612	1,564	2,176	204	83	418	816	3,697
1965-Nov. 1-4	Houston	564	1,649	2,213	47	68	626	825	3,779
1966-Nov. 14-17	Washington	855	1,570	2,425	65	96	666	669	3,921
1967-Nov. 13-16	Miami Beach	**	**	2,487	55	78	555	607	3,782
1968-Nov. 18-21	New Orleans	672	2,390	3,062	440	177	726	1,314	5,719
1969-Nov. 10-13	Atlanta	452	2,339	2,791	187	78	753	1,224	5,033
1970-Nov. 16-19	Dallas	474	1,819	2,293	82	82	622	1,066	4,145
1971-Nov. 1-4	Miami Beach	526	1,606	2,132	57	119	658	1,256	4,222
1972-Nov. 13-16	New Orleans	785	2,514	3,299	448	178	667	1,387	5,979
1973-Nov. 11-14	San Antonio	**	**	2,347	97	183	628	1,842	4,097
1974-Nov. 17-20	Atlanta	388	2,372	2,760	78	140	451	690	4,119
1975-Nov. 16-19	Miami Beach	**	**	1,979	55	116	466	709	3,325
1976-Nov. 7-10	New Orleans	**	**	2,364	468	154	293	910	4,189

*Breakdown not available; included in figure under "Technical Exhibitors."

**Breakdown not available; see "Total Physicians."

ATTENDANCE AT SECTION SESSIONS

Section	1972		1973		1974		1975		1976	
	Meeting	Social	Meeting	Social	Meeting	Social	Meeting	Social	Meeting	Social
Allergy	80	45	106	60	60	30	28	30	30	—
Anesthesiology	75	100	125	75	42	125	27	—	65	60
Chest Diseases	—	—	150	—	90	40	45	—	30	25
Colon and Rectal Surgery	250	75	100	56	—	—	55	—	50	45
Dermatology	202	170	144	400	150	450	102	250	275	300
Family Practice	115	—	—	—	66	—	35	—	85	—
Gastroenterology	320	—	—	—	150	—	67	30	130	12
Gynecology	175	250	125	—	92	175	101	—	140	—
Industrial Medicine and Surgery	—	—	105	—	—	—	*	*	*	*
Medicine	240	—	130	50	163	—	61	—	250	—
Neurology and Psychiatry	100	—	35	—	60	15	31	—	40	—
Obstetrics	200	100	80	—	140	—	82	—	80	—
Ophthalmology	150	250	175	—	120	—	50	—	75	—
Orthopedic and Traumatic Surgery	175	100	100	150	150	200	64	—	120	50
Otolaryngology	52	75	35	—	52	60	43	20	35	—
Pathology	200	—	—	—	30	—	55	—	40	—
Pediatrics	110	—	—	—	45	—	19	—	85	190
Physical Medicine and Rehabilitation	100	40	35	48	—	—	*	*	*	*
Plastic and Reconstructive Surgery	67	65	200	150	150	40	41	50	95	70
Radiology	100	—	60	100	—	—	32	60	55	—
Surgery	144	70	125	—	120	62	82	43	65	—
Urology	90	80	100	—	78	—	38	—	70	—

These attendance figures are turned in by the Section Secretaries at the conclusion of an annual meeting. The figures represent the Section's largest attendance. If the figure given for a Section seems unusually high, it may be due to the fact that the count was taken during a joint meeting of two or more Sections.

*These Sections did not meet.

CONSTITUTION
and
BYLAWS

SOUTHERN MEDICAL ASSOCIATION

NOVEMBER 9, 1976

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CONSTITUTION

ARTICLE I—NAME

The name and title of this organization shall be the SOUTHERN MEDICAL ASSOCIATION (a nonprofit organization) chartered under the laws of the State of Alabama, and its domicile shall be in Birmingham, Alabama.

ARTICLE II—PURPOSE

The exclusive purpose of this Association shall be to develop and foster scientific medicine. It shall have no direct connection with or control over any other society or organization, nor shall it at any time be controlled by any other society or organization. All meetings of the Association shall be for the sole purpose of reading and discussing papers pertaining to the science of medicine, to public health, and to medical education. The Association shall not at any time take active part in any economic, political or sectarian questions, or concerted movements for securing legislative enactments.

ARTICLE III—MEMBERSHIP

SECTION 1. Active Members. The membership of this Association shall be by invitation to physicians who are eligible to be members of the following state medical societies: Alabama, Arkansas, District of Columbia, Florida, Georgia, Kentucky, Louisiana, Maryland, Mississippi, Missouri, North Carolina, Oklahoma, South Carolina, Tennessee, Texas, Virginia, West Virginia, who are sponsored by the respective state Councilor, to invited medical officers of the United States Army, Navy, Air Force, Public Health Service and Veterans Administration on active duty, and to invited members of the Canal Zone Medical Association and the Puerto Rico Medical Association who are citizens of the United States of America.

SECTION 2. Associate and Emeritus Members. This Association may have such classes of associate and emeritus membership as may be provided for in the BYLAWS of this CONSTITUTION.

ARTICLE IV—OFFICERS

SECTION 1. Officers of the Association. The officers of the Association shall be a President, President-Elect, First Vice-President, Second Vice-President, Trustees, Councilors, an Executive Director, a Treasurer, an Editor of the SOUTHERN MEDICAL JOURNAL, and Section Officers.

SECTION 2. Elected Officers. (A) General Officers. The President-Elect, First Vice-President, and Second Vice-President of the Association shall be elected annually at the last general session of the annual meeting. All elections shall be made by the type of ballot (secret, voice, or raising of hands) as the majority of those members present may desire. A majority of the votes shall be necessary for election. If no one receives a majority of the votes cast the member receiving the smallest number of votes shall be dropped and the balloting shall be repeated. A list of nominees for President-Elect, First Vice-President, and Second Vice-President shall be submitted to the Council by the Committee on Selections. The submission of such a list does not preclude nominations from the floor. The results of these nominations along with the report of the Council shall be submitted to the membership as the final order of business at the last general session of an annual meeting.

(B) Trustees. The Trustees shall be six in number and shall be elected by the Council, one each year, to serve for a period of six years. The oldest member in point of service shall be the Chairman.

(C) Section Officers. The officers of each Section shall consist of a Chairman, Vice-Chairman, and Secretary, and when so desired by the members of the Section, a Chairman-Elect as an additional officer or in place of the

Vice-Chairman, elected annually by the members of the respective Sections at a regular session of the Section during the annual meeting. Section Officers assume office at the end of the annual meeting during which they were elected and should be members of the Association.

SECTION 3. Appointed Officers. (A) Administrative Officers. An Executive Director, a Treasurer, and an Editor of the SOUTHERN MEDICAL JOURNAL shall be selected by the Council, with salaries, duties, and tenure of office to be determined by the Council.

(B) Councilors. The Councilors shall be appointed by the President, one from each of the states enumerated in **ARTICLE III—MEMBERSHIP, SECTION 1. Active Members**, and shall serve for five years, and shall not be eligible for reappointment, the Councilor terms expiring with the close of annual meetings. This Section shall become effective as of 1933, the Councilor terms to expire as follows: **Group 1:** (1933) Louisiana, Mississippi, Oklahoma; **Group 2:** (1934) Arkansas, District of Columbia, Georgia; **Group 3:** (1935) Florida, South Carolina, Texas, Virginia; **Group 4:** (1936) Maryland, Missouri, North Carolina; **Group 5:** (1937) Alabama, Kentucky, Tennessee, West Virginia. In the event a vacancy occurs on the Council the President in office at the time the vacancy occurs shall appoint a successor to fill the unexpired term. The successor may be eligible to be appointed to serve a full term as Councilor, succeeding himself. Collectively, the Council shall be the governing body of the Association. It shall have jurisdiction over all questions involving the rights and standings of members, whether in relation to other members or to this Association. All matters brought before the general sessions or Sections shall be referred to the Council for consideration.

ARTICLE V—SCIENTIFIC ACTIVITIES

SECTION 1. Annual Meetings. The Association shall hold an annual meeting during which there shall be not less than two general sessions, one of which may be devoted to the business of the Association and restricted exclusively to the membership when so determined by the Council or by the Executive Committee of the Council or upon a petition filed by not less than twenty-five members of the Association; there may be meetings of the Executive Committee of the Council and the Council, scientific Section sessions, technical and scientific exhibits, and such general programs as may be arranged by the Section Officers in cooperation with the Committee on Scientific Work. All expenses of the annual meeting shall be borne by the Association. The time and place for holding each annual meeting shall be fixed by the Council.

SECTION 2. Scientific Sections. The scientific Sections of this Association shall be: Section on Allergy, Section on Anesthesiology, Section on Colon and Rectal Surgery, Section on Dermatology, Section on Gastroenterology, Section on Family Practice, Section on Gynecology, Section on Industrial Medicine and

Surgery, Section on Medicine, Section on Neurology, Neurosurgery, and Psychiatry, Section on Obstetrics, Section on Ophthalmology, Section on Orthopedic and Traumatic Surgery, Section on Otolaryngology, Section on Pathology, Section on Pediatrics, Section on Physical Medicine and Rehabilitation, Section on Plastic and Reconstructive Surgery, Section on Radiology, Section on Surgery, Section on Urology, and such other Sections as the Association may from time to time create or provide for.

SECTION 3. Publications. The Association shall own and publish the SOUTHERN MEDICAL JOURNAL which shall be the official organ of the Association and other such publications which may be provided for by the Association. The Association may designate such ownerships of publications as deemed advisable.

ARTICLE VI—SEAL

The Association shall have a common seal, with power to break, change, or renew the same at pleasure.

ARTICLE VII—AMENDMENTS

The Association may at any annual meeting amend any Article of this CONSTITUTION by a two-thirds affirmative vote of the members present and voting at a general session of that meeting, provided the amendment has been presented in writing and laid on the table at the previous annual meeting.

BYLAWS

CHAPTER 1—MEMBERSHIP

SECTION 1. Active Members. Physicians who satisfy requirements as set forth in **ARTICLE III—MEMBERSHIP, SECTION 1. Active Members**, of the CONSTITUTION and who are eligible to vote and hold office in their respective state or district societies shall be active members. Also, physicians who serve as full-time faculty members of accredited medical schools located within the Association's territory as defined in **ARTICLE III—MEMBERSHIP, SECTION 1. Active Members**; of the CONSTITUTION, shall be active members. These members shall have full privileges of Association membership; including the right to hold office and vote and receive the SOUTHERN MEDICAL JOURNAL. Active members shall pay full dues to the Association, either annually or by payment of a life membership fee. Active members may be excused from the payment of Association dues for one of the following reasons: financial hardship or extended illness, post-graduate training, defined as that period during which a member participates in an organized training course within a hospital, being retired from active practice, or on temporary service as full-time commissioned medical officers in the reserve Armed Forces. Active members excused from the payment of Association dues shall have the right to vote and hold office, but shall not receive the SOUTHERN MEDICAL JOURNAL, except by personal subscription. Nothing in this or following Sections shall be construed to be retroactive to affect previously classified honorary members.

SECTION 2. Associate Members. The Association may have five classes of associate members:

Class 1. A member who has moved from the territory of the Association;

Class 2. A physician from outside the territory of the Association;

Class 3. An intern or resident not yet a member of a state medical society and medical students of the medical schools in the member states;

Class 4. An individual not holding a degree of Doctor of Medicine, but who is on the teaching staff of a medical school or engaged in research, practice or promotion of a science allied to medicine and holding a degree in a subject commonly referred to as a basic science;

Class 5. A layman who has rendered meritorious service to the profession or to humanity.

To be eligible for associate membership under Classes 2, 3, and 4, a person must satisfy the requirements as set forth in **CHAPTER 1—MEMBERSHIP, SECTION 1. Active Members**, except eligible for membership in a state or district society in the case of Classes 3 and 4, and holding the degree of Doctor of Medicine in the case of medical students. Associate members under Classes 4 and 5 shall be recommended for membership by the Council. Under Classes 1, 2, and 3 individuals may be accepted for associate membership by the Executive Vice-President their eligibility under the provisions of this Section have been determined. Associate members shall not hold office nor be entitled to vote. Associate members under Classes 1, 2, and 4 shall pay regular annual dues and shall receive the SOUTHERN MEDICAL JOURNAL. Associate members under Classes 3 and 5 shall not pay dues nor receive the SOUTHERN MEDICAL JOURNAL except by personal subscription.

SECTION 3. Emeritus Members. An active member in good standing who is over 70 years of age and who has been a member for a period of twenty-five years is eligible for emeritus membership. Emeritus members shall not pay dues but shall enjoy all privileges of the Association, but shall not hold office.

SECTION 4. Application for Membership. Application for membership in this Association shall be made in writing. The Association reserves the right to accept or reject any application for membership.

SECTION 5. Termination of Membership. Any member who is under sentence of suspension or expulsion from his state or local society shall automatically forfeit his membership in this Association. The Association may at any annual meeting on recommendation of the Council suspend or expel any member of the Association by a majority vote of those present at the last general session of that meeting.

CHAPTER 2—DUTIES OF OFFICERS

SECTION 1. President. The President shall preside, or designate who shall preside, at all general sessions of the annual meetings and all functions at which the Association is host. He shall appoint all committees not otherwise arranged for, and may deliver an annual address at the general session to be held at a time and place decided upon by the Executive Committee of the Council. In meetings of the Council he shall have cast a deciding vote in case of a tie. He shall perform such other duties as the definition of his office requires. The program for the general scientific sessions shall be formulated by the Committee on Scientific Work in consultation with the President and the Executive Committee of the Council. The President shall have authority to create commissions or committees for scientific investigations of special interest and importance to the profession and the public. He should receive and dispose of these reports in the proper channels. Any expenses incurred in such an operation must be approved by the Executive Committee of the Council. The President shall appoint, on nomination by the respective Councilor, five Associate Councilors from each state or district.

SECTION 2. President-Elect. The President-Elect shall assist the President in the discharge of his duties and keep himself informed on the affairs of the Association. In the event of the death of the President-Elect, his successor shall be elected by the vote of the Council after receiving nominations from the Committee on Selections.

SECTION 3. First Vice-President. The First Vice-President shall assist the President in the discharge of his duties and in the event of his death, resignation, or removal, shall succeed him. He shall also perform such other duties as may be assigned to him under the CONSTITUTION AND BYLAWS.

SECTION 4. Second Vice-President. The Second Vice-President shall be a member of the Committee on Meeting Places and shall keep himself informed on the CONSTITUTION AND BYLAWS of the Association. He should be ready, on call of the President, to serve on committees or serve in any other capacity as designated by the President. He shall assume the office of First Vice-President in case of vacancy of this office.

SECTION 5. Board of Trustees. The legal title to all real property of the Association shall vest in the Trustees and their successors in office. They shall execute all deeds of conveyance of real property when authorized to do so by the Council. Any action authorized to be done by the Trustees within the limitations of this Section shall be binding if done by a majority thereof. The Board of Trustees is charged with reviewing Association policies annually, with receiving topics for discussion from the Executive Committee of the Council, and to act as a long-range planning committee. They should also communicate regularly with the Executive Vice-President relative to business activities and organizational patterns.

SECTION 6. Council.

(A) **Meetings.** The Council shall hold sessions as seem necessary during or immediately preceding the annual meeting of the Association, and at such other time as necessity may require, subject to the call of the Chairman or on petition of three Councilors. In the event of any regularly appointed Councilor being unable to attend the annual meeting, the Chairman of the Council shall appoint an alternate to serve for that meeting. At each annual meeting a Chairman and Vice-Chairman for the succeeding year shall be elected. Through its Chairman, the Council shall make an annual report to the Association at the last general session of an annual meeting.

(B) **Nominating Committee.** The Council shall constitute the Nominating Committee for all elective offices except the Section Officers and shall report the results of its deliberations to the last general session. It shall include nominations for such offices as are to be filled at that annual meeting. Nothing in this Section shall be construed as preventing additional nominations being made on the floor by members of the Association.

(C) **Executive Committee.** There shall be an Executive Committee of the Council to represent the Association and Council between the annual meetings to consider special matters as would come before the Council and report its findings and conclusions to the Council. Any matters of such urgency that they should not wait over until the annual meeting may be acted upon by the Executive Committee of the Council. The Executive committee of the Council shall consist of eight members: The Chairman and Vice-Chairman of the Council, who shall serve as Chairman and Vice-Chairman of the Executive Committee of the Council, three other members of the Council representing each of the other classes of Councilors, elected annually by the Council, and the President, President-Elect, and First Vice-President of the Association. In the event of the absence of a Council member of this Executive Committee of the Council an alternate may be appointed by the Chairman to meet during the respective session, with full power of the absent member. The Executive Committee of the Council may meet as often and at such places as the Chairman or four members of the Executive Committee of the Council may decide, except that one meeting each year must be held in Birmingham. This Committee will be the Advisory Committee to the Woman's Auxiliary of the Association. Expenses of this Committee attending meetings on behalf of the Association shall be borne by the Association. The Executive Committee of the Council shall serve as a Finance Committee to work with the Executive Vice-President in budget studies, and in supervising the carrying out of the annual budget, and shall consider all unappropriated or unbudgeted expenses before such items are considered by the Council.

(D) **Associate Councilors.** Five Associate Councilors shall be appointed from each state by the President. It shall be the duty of the Associate Councilors to stimulate interest in all activities of the Southern Medical Association and assist their respective Councilor in any way requested.

SECTION 7. Executive Vice-President. The Executive Vice-President shall be the chief administrative officer of the Association. His special areas of responsibility shall be:

(A) **Supervision of Employees.** He shall employ and direct all staff personnel (full and part-time) including the assignment of duties of such employees except the employees under the direct supervision of the Editor.

(B) **Promotion and Records.** With the cooperation of the Council and all other officers, he shall seek at all times to expand the membership and interests of the Association. He shall keep or cause to be kept, the official minutes of the transactions of the Association as

the Council may direct, and not otherwise provided. He shall conduct the official correspondence and shall be the custodian of all official records and papers of the Association.

(C) **Director of Finance and Budgetary Control.** As chief finance officer of the Association, he shall receive all funds, including bequests and donations, and deposit the same to the credit of the Treasurer or to other officially designated Funds or Accounts. He shall direct the general bookkeeping and accounting system and shall render an annual financial report to the Council. He shall prepare and recommend an annual budget to the Council. Said budget, when amended and adopted by the Council, shall determine the expenditure of funds during the ensuing fiscal year, and shall not be amended without the approval of the Council. All expenses of the Association shall be paid by check signed by the Executive Vice-President. He shall secure an annual audit of the books of account by a certified public accountant, approved by the Council, which audit report shall be transmitted to the Council as a part of his financial report. He shall be bonded in favor of the Association in an amount determined by the Council, with the premium cost of such bond to be paid by the Association.

(D) **Managing Editor of the Journal.** He shall act as Managing Editor of the SOUTHERN MEDICAL JOURNAL and other publications of the Association.

(E) **Production of Revenue.** He shall plan and direct all activities related to the production of revenue for the Association, including the business management of the SOUTHERN MEDICAL JOURNAL and other publications, establishing and maintaining advertising policies, subject to the prior approval of the Editor or any committee or agency so designated by the Council, securing advertising, executing and enforcing contracts for printing, and supervising production of the SOUTHERN MEDICAL JOURNAL.

(F) **Director of Technical Exhibits.** He shall plan and direct the technical exhibits for the annual sessions in accordance with basic policy established by the Council or Executive Committee of the Council.

(G) **Director of Scientific Exhibits.** He shall plan and direct the scientific exhibits for the annual sessions. All proposed exhibits shall be approved by the Editor or such other committee or agency designated by the Council in order to secure professional and educational evaluation prior to the sessions.

(H) **Physical Facilities for Annual Sessions.** He shall secure necessary facilities for holding the annual sessions, shall execute necessary contracts and agreements for proper and adequate space, and shall advise the Executive Committee of the Council and the Council with respect to the availability of adequate facilities for the annual sessions within the territory.

(I) **Delegation of Authority.** He may designate staff employees by appropriate titles and may delegate to them any portions of the above responsibilities.

SECTION 8. Treasurer. The offices of Executive Vice-President and Treasurer may be combined and vested in the same person at the discretion of the Council. If the offices be separate, the Treasurer shall be selected by the Council which shall determine his salary, duties, and tenure of office. He shall give bond in an amount determined by the Council, with the premium of said bond to be paid by the Association. He shall receive all funds from the Executive Vice-President and deposit the same in a bank or banks located in the domicile of the Association. Such depositories shall be designated by and with the consent of the Committee on Finance and the Council. He shall sign all checks drawn on the Association for sums provided for in the annual budget.

SECTION 9. Editor. The Editor shall have the following areas of responsibility:

(A) He shall be responsible for the non-advertising portion of the SOUTHERN MEDICAL JOURNAL, and other publications of the Association, including the preparation of editorials, the selection and editing of scientific articles, and the general format with approval of the Executive Vice-President.

(B) He may appoint, or recommend the employment of, assistant or associate editors and/or an Editorial Board with the consent of the Council.

(C) He will review, or cause to be reviewed, any books which in his discretion merit the publication of a review in the SOUTHERN MEDICAL JOURNAL.

(D) With the consent of the Executive Vice-President he shall establish practical mechanics for handling manuscripts and other materials for publication.

(E) He shall review the scientific exhibit applications as Chairman of the Committee on Scientific Exhibits and shall approve the scientific exhibits for presentation at the annual meetings.

(F) He may, with the consent of the Council, employ necessary secretarial assistance.

SECTION 10. Section Officers.

(A) **Chairman.** The Chairman shall preside at the meetings of the Section and shall perform such duties as may be provided by the rules of the Section. He shall be responsible for selecting and inviting the Section's official guest speaker and shall cooperate with the Secretary in arranging the Section program for the annual meeting.

(B) **Vice-Chairman.** The Vice-Chairman shall assist the Chairman in his duties and preside over the Section meetings in the absence of the Chairman.

(C) **Secretary.** The Secretary shall arrange the Section program for the annual meeting in cooperation with the Chairman and in accordance with rules and regulations set forth in the Association's CONSTITUTION AND BYLAWS. He shall be the official correspondent with reference to the program with the headquarters office, maintain the Section's official records, consult with the Executive Vice-President to determine if the prospective nominees for Section officers are eligible to hold office prior to their nomination, and shall be responsible for collecting papers presented at the annual meeting and forwarding them, along with the list of newly elected Section officers, to the headquarters office. He shall attend the annual Section Secretaries' Conference to be held each winter, near February 1, for the purpose of formulating the general schedule of scientific sessions for the annual meeting in cooperation with the Committee on Scientific Work. The Association shall reimburse the Section Secretaries for expenses incurred in attending the Section Secretaries' Conference. The Chairman and Secretaries of the Sections may be invited to meet with the President and the Committee on Scientific Work immediately preceding or during each annual meeting.

(D) **Secretary-Elect.** The Secretary-Elect shall make himself acquainted with the duties of the Secretary and attend the Section Secretaries' Conference.

(E) **Steering Committee.** Each scientific Section shall have a formal Steering Committee made up of the current Chairman, Vice-Chairman, Secretary, the Chairman-Elect, if this office is utilized by the Section, and the three immediate past Chairmen. The duties of the Section Steering Committee shall include: aid in planning the work of the Section; evaluation of papers read before the Section for possible publication; serve as a Section nominating committee; fill vacancies that occur among Section officers and perform such other duties from time to time as they appear necessary.

CHAPTER 3—COMMITTEES

SECTION 1. Standing Committees. The President and the Chairman of the Council shall be *ex officio* members of each of the standing committees, with the exception of the Committee on the Employees' Pension Trust, and shall be notified and may attend any and all meetings of these committees. The standing committees of the Association and their duties shall be:

(A) **Committee on Constitution and Bylaws.** The Committee on Constitution and Bylaws shall be appointed by the Chairman of the Council. This Committee shall consist of five members, three of which should be active Councilors. It will be the duty of this Committee to periodically review the CONSTITUTION AND BYLAWS, to receive suggestions from members of the Association relative to any changes which should be made, and to bring the suggested changes before the Council for approval.

(B) **Committee on the Employees' Pension Trust.** The Committee on the Employees' Pension Trust shall be appointed by the Chairman of the Council. The constitution and duties of this Committee will be as described in the Employees' Pension Trust Agreement.

(C) **Committee on Finance.** The Committee on Finance shall be the Executive Committee of the Council. It will be responsible for periodically reviewing the financial structure of the Association, reviewing the annual budget, and reporting at regular intervals to the Council.

(D) **Committee on Grants and Loans.** The Committee on Grants and Loans shall be appointed by the Chairman of the Council. It shall formulate policies and criteria for awarding grants and/or loans. These policies are to be approved by the Executive Committee of the Council and the Council. The Committee on Grants and Loans shall review all applications and determine the recipients of the grants and/or loans available through the Association at a meeting to be held annually within thirty days after the deadline for receiving applications. The Committee shall be composed of five members, one of whom shall represent medicine, one obstetrics and gynecology, one surgery, and two at large. Not more than two new members may be appointed to this Committee annually except when more vacancies exist.

(E) **Committee on History.** The Committee on History of the Southern Medical Association shall be appointed by the Chairman of the Council. It will be the duty of this Committee to add to the existing history items of interest relative to the accomplishments of members of the Association or such other items of interest as it deems necessary.

(F) **Committee on Insurance.** The Committee on Insurance shall be appointed by the Chairman of the Council. A minimum of three incumbent members of the Committee shall be reappointed annually. It shall be the duty of this Committee to periodically review the insurance program of the Association and to work in liaison with the administrator and/or underwriters, to insure the success of the program, and to see that the interests of participants are adequately protected.

(G) **Committee on Journal Advertising.** The Committee on Journal Advertising shall be appointed by the Chairman of the Council. It shall consist of the Executive Vice-President of the Association, the Editor of the SOUTHERN MEDICAL JOURNAL, and three members of the Council. It shall be the duty of this Committee to review the items advertised in the SOUTHERN MEDICAL JOURNAL and to reject any items of questionable merit.

(H) **Committee on Medical Students.** The Committee on Medical Students shall be appointed by the Chairman of the Council. It shall be the duty of this Committee to issue invitations to the various medical schools selected to send medical students to the annual meetings, to make arrangements for travel and housing of these students, and to provide an interesting program for them.

(I) **Committee on Meeting Arrangements.** The Committee on Meeting Arrangements shall be appointed by the president after consultation with the president of the host society and the Executive Vice-President of the Association. Progress reports shall be given to the President and the Chairman of the Council relative to the arrangements made for the annual meeting.

(J) **Committee on Meeting Places.** The Committee on Meeting Places shall be appointed by the Chairman of the Council; the Second Vice-President shall serve as a member of this Committee. It shall be the duty of this Committee to review the invitations which have been submitted for annual meetings and to report to the Council. In liaison with the Executive Vice-President of the Association arrangements should be made for meeting places for the annual meeting at least five years in advance.

(K) **Committee on Personnel.** The Committee on Personnel shall be appointed by the Chairman of the Council. At least one member of this Committee should reside in the area of the headquarters office. It shall be the duty of this Committee to work in liaison with the Executive Vice-President in periodically reviewing any problems which arise relative to personnel employed by the Association.

(L) **Committee on Publications.** The Committee on Publications shall consist of the Editor of the SOUTHERN MEDICAL JOURNAL, the Executive Vice-President of the Association, three members appointed from the Executive Committee of the Council by the Chairman of the Council, and three members appointed from the Editorial Board by the Editor. The Editor and Executive Vice-President shall be *ex officio* members. This Committee is an advisory committee to the Editor of the SOUTHERN MEDICAL JOURNAL and should function on call of the Editor or Chairman of the Council to pass on any matters relative to publication which is deemed necessary and may meet at the time of the annual meeting. The Committee should meet at least annually and report to the annual meeting of the Council.

(M) **Committee on Public Relations.** The Committee on Public Relations shall be appointed by the President and shall include the Chairman and Vice-Chairman of the Council, the immediate Past President, and four other members, at least one of whom should reside in the community where the annual meeting will be held. The committee shall be concerned with the promotion of public relations for the Association. It shall assist in supervising the Press Room at each of the annual meetings, aiding in contacting local and national news media with respect to fulfilling the purpose of the Association. It shall assess the value of any Public Relations firm hired to promote good public relations for the Association. It shall make its report to the President, Executive Committee of the Council and or the Council sometime after each of the annual meetings, but prior to the next annual meeting.

(N) **Committee on Scientific Work.** (1) **Membership and Officers.** The Committee on Scientific Work shall be appointed by the Chairman of the Council. The Committee shall consist of nine members, at least two of whom may be Councilors. Term of membership on the Committee shall be three years with appointments staggered to permit the retirement of three members each year. Reappointment for an additional term of three years or less will be permissible. Officers of the Committee shall be a Chairman, Vice-Chairman, and Secretary. The Secretary shall be appointed from the Association's staff. (2) **Meetings:** The Committee on Scientific Work shall meet at least three times a year. One meeting shall be held with the Section Secretaries in the Spring, and one meeting at the time of the Annual Meeting of the Association. The Committee shall meet one or more additional times as necessary on call by the Chairman, to complete its work. All expenses of these meetings shall be borne by the Southern Medical Association. (3) **Work of the Committee:** In this Committee shall be vested the responsibility for the formulation and content of the scientific activities of the Association. The recommendations of the Committee shall be presented by the Chairman of the Committee to

the Council at the time of the annual meeting for approval and consultation. The Committee shall include in its scope of activities the following: (a) the format and content of the scientific sessions of the annual meeting and such other scientific sessions as may be held; (b) the development and assignment of a scientific theme or themes for the annual meeting in cooperation with the Section Secretaries; (c) the design and nature of postgraduate courses, workshops, specialty and multidisciplinary programs, and other programs of continuing education; (d) the Committee shall maintain liaison with: 1. medical school faculties and students in the site of the annual meeting; 2. specialty and subspecialty organizations; 3. allied health science organizations, and cooperate with them, in developing and design of scientific programs and continuing education activities. (e) the Committee shall be responsible for the selection and judging of scientific exhibits shown at the annual meeting; (f) the Committee shall be responsible for monitoring and evaluating scientific activities of the Association; (g) the Committee shall serve as an advisory group to the Section Secretaries in developing their Section specialty programs and coordinating and assisting the Secretaries in arranging combined Section meetings; (h) the Committee is empowered to create such sub-committees within its body as may be expedient to accomplish the stated purposes and work of the Committee.

(O) **Committees on Selections.** The Committee on Selections shall be appointed by the Chairman of the Council. The members of this Committee shall consist of Councilors and one member shall represent each class and two members at large (not necessarily Councilors), and the Committee shall elect its own chairman. The Chairman of this Committee must be made known to the general membership so that nominations for elective offices can be submitted to him at least 30 days prior to the first annual meeting of the Council. It shall be the duty of this Committee to seek, receive, and consider names for all elected officers with the exception of the Section Officers. A list of nominees shall be submitted to the Council as prescribed in the CONSTITUTION, ARTICLE IV—OFFICERS, SECTION 2. Elected Officers.

(P) **Committee on Special Awards.** A confidential Committee on Special Awards consisting of five members with the First Vice-President as Chairman, shall be appointed by the President to evaluate the contributions of the various candidates for special awards. If suitable candidates are selected by the Committee, it shall submit the names of not more than three such members to the Council for each award. The Council may elect one for each respective award and presentation of awards will take place at the last general session of that annual meeting.

SECTION 2. Ad Hoc Committees. Ad hoc committees, or such other committees as deemed necessary by the President or Chairman of the Council, may be appointed by the President or the Chairman of the Council as the necessity arises.

CHAPTER 4—SCIENTIFIC ACTIVITIES

SECTION 1. Annual Meetings—General Sessions. During each annual meeting there shall be not less than two general sessions presided over by the President, unless he designates an alternate. One of these, which may be at a luncheon on the first or second day of the annual meeting, may be utilized as a business meeting at which pertinent business affairs of the Association such as proposed amendments to the CONSTITUTION AND BYLAWS, may be presented. Another general session may be held at a time and place designated by the Executive Committee of the Council, at which time the order of business may include the President's address, the report of the Council including proposed amendments to the CONSTITUTION AND BYLAWS and the Council's report as Nominating Committee for the Association, the election of officers and installation of the new President, and the presentation of special awards.

SECTION 2. Annual Meetings — Scientific Section

Sessions. The Scientific Sections of the Association shall hold such sessions as may be arranged by the Section Secretaries with the approval of the Committee on Scientific Work. All scientific activities, meetings, and exhibits at the annual meetings are available to physicians, members and non-members of the Association, who are eligible for membership in their local and state medical societies. Residents, interns, medical students, technicians, and nurses are urged to attend. All persons attending must be properly registered before being admitted to the annual meeting. Except by special order, papers and discussions as set forth in the official program shall be followed from day to day until it has been completed, and all papers omitted will be recalled in regular order. No address or paper before the Association, or any of its Sections, except the address of the President, the official guest speakers of the Sections, and speakers on special programs, shall exceed fifteen minutes in presentation. The opening discussion shall be limited to five minutes and succeeding discussions shall not exceed three minutes each. No member or guest may discuss any paper more than one time. The closing discussion is not to exceed five minutes. An essayist, other than an official guest speaker, may not appear before the same Section two years consecutively, unless the second presentation is a continuation of the first, nor may an essayist, other than an official guest speaker, appear before more than one Section at an annual meeting. All papers read before the Association or any of its Sections shall become the property of the Association. Each paper shall be deposited with the Secretary of the Section when read.

New Sections may be created by vote of the Council after receiving petition from 30 active members of the Association representing that specialty or subspecialty and representing 12 of the states or District of Columbia in the Southern Medical Association territory. Recommendations to terminate or abolish a scientific Section may be made by the Council when that Section's participation, interest, and attendance has become ineffectual over a period of two years. A letter to this effect will be addressed to the current or most recent Chairman representing that Section to the effect that this recommendation has been made. If there is no response from that Section or if the response is considered inadequate, the Section involved may then be abolished or terminated by vote of the Council at the next annual meeting.

CHAPTER 5—AWARDS

SECTION 1. Distinguished Service Award. There shall be a Distinguished Service Award of the Association which may be awarded annually to any member of the Association in recognition of outstanding contributions to the advancement of medical science and/or the Association. Any member of the Association shall be eligible to receive the award and nominations may be made by any member of the Association.

SECTION 2. Seale Harris Medal. There shall be a Seale Harris Medal which may be awarded annually to any member of the Association as recognition for

important research accomplishment in the broad field of metabolism, endocrinology, nutrition, or for research which contributes to a better understanding of the chemical changes occurring in disease. Any member of the Association shall be eligible to receive the medal and nominations may be made by any member of the Association.

SECTION 3. Original Research Award. There shall be an Original Research Award of the Association, consisting of a medal and a cash prize of \$500, which may be awarded annually in recognition of original research in clinical medicine or the basic science as applied to medicine. Application for this award may be made by submitting an essay, curriculum vitae, and photograph to the headquarters office.

CHAPTER 6—DUES

SECTION 1. Annual Membership Dues. Effective January 1, 1977, as per action of the membership on November 9, 1976, the dues of this Association shall be \$50 per year, payable annually in advance, membership to begin on date of application. The life membership fee shall be actuarially computed and submitted to the Council for approval.

SECTION 2. Non-Payment of Dues. Any member whose dues shall remain unpaid for three months shall be automatically suspended at the end of three months, provided that on full payment of his arrearage he shall be automatically reinstated as a member in good standing from the date of suspension.

CHAPTER 7—WOMAN'S AUXILIARY

There shall be a Woman's Auxiliary to the Southern Medical Association which will function under the jurisdiction of the Council. The Executive Committee of the Council will be the Advisory Committee to the Woman's Auxiliary. Financial support to the Woman's Auxiliary may be granted at the discretion of the Council. The fiscal year will coincide with that of the Association. See **BYLAWS, CHAPTER 8—Fiscal Year.**

CHAPTER 8—FISCAL YEAR

The fiscal year shall be October 1, to September 30, but all salary provisions shall become effective December 1 of each year.

CHAPTER 9—RULES OF ORDER

The deliberations of this Association shall be governed by parliamentary usage as contained in Roberts' "Rules of Order."

CHAPTER 10—AMENDMENTS

These **BYLAWS** may be amended at any annual meeting by a two-thirds affirmative vote of the members present and voting at a general session of that meeting after the amendment has been presented to the Executive Committee of the Council prior to that meeting.

FACTS ON SMA

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WHAT IS THE SOUTHERN MEDICAL ASSOCIATION?

Even long-time members have difficulty at times recalling all the facts about SMA—so, this portion of the YEARBOOK is designed to give, in capsule form, facts which you—as an Officer—should know about your organization.

BIRTH OF A MEDICAL ASSOCIATION

NAME: Southern Medical Association

DATE OF BIRTH: October 3, 1906

PLACE OF BIRTH: The Read House, Chattanooga, Tennessee

FOUNDING FATHERS: Approximately 150 "attending physicians" were on hand for the organizational meeting and of this number some 64 have been identified (see "Golden Anniversary, Southern Medical Association, 1906-1956," page 55).

VITAL STATISTICS

1906

Membership — Approximately 200 members from a six-state territory — Alabama, Florida, Georgia, Louisiana, Mississippi, Tennessee

Annual Dues—\$2

Scientific Assembly—3 Sections

Publications—none

Assets—Just some dedicated physicians.

1977

Approximately 23,000 members from a territory comprised of Alabama, Arkansas, District of Columbia, Florida, Georgia, Kentucky, Louisiana, Maryland, Mississippi, Missouri, North Carolina, Oklahoma, South Carolina, Tennessee, Texas, Virginia, West Virginia.

\$50

22 Sections

SOUTHERN MEDICAL JOURNAL (monthly) and SOUTHERN MEDICINE (bimonthly); both owned and published by the Association

A growing roster of dedicated physicians, an annual meeting unparalleled for its scientific sessions, a debt-free headquarters building valued at \$278,000, in addition to its publications, are but a few of the Association's assets today.

PURPOSE OF THE SOUTHERN MEDICAL ASSOCIATION

The exclusive purpose of this unique organization is to develop and foster scientific medicine. Conceived as an organization which could, on a regular basis, promote the progress of scientific medicine generally and, in particular, attack problems peculiar to the South; established as a voluntary, nonprofit organization, and chartered under the laws of the State of Alabama, the Association is independent of other medical societies, but works closely with them.

Dedicated exclusively to serving the professional needs of physicians of the South, SMA strives to bring its members into closer touch and in more perfect harmony with each other, creating a society unique in its opportunity for fraternal relationships and in its personal significance.

Although the Association has grown from a membership of approximately 200 in 1906 to a membership of over 23,000 in 1977 its purpose remains the same and is so stated in its **CONSTITUTION AND BYLAWS, ARTICLE II—PURPOSE.**

ORGANIZATION AND EARLY HISTORY OF THE SOUTHERN MEDICAL ASSOCIATION

The Southern Medical Association, like the sturdy oak, from a little acorn grew; but this was no ordinary acorn. Its embryo contained the elements of need, vision, and opportunity embodied in a previously existing organization known as the Tri-State Medical Association of Alabama, Georgia, and Tennessee, which was composed of some two hundred physicians.

Representatives of the Tri-State group, along with representatives from Florida, Louisiana, and Mississippi, met in Chattanooga, Tenn., on October 2, 1906, in response to an invitation from the President of the Tennessee State Medical Association. The invitational letter stated that the members of the Nashville Academy of Medicine felt that "there was a growing feeling among doctors of the southern group of states that a Southern Medical Association should be organized."

These representatives, most of whom were presidents of their state medical associations, adopted a resolution for presentation to the Tri-State Medical Association, stating among other reasons, that "a greater opportunity for self-improvement and achievement in the realm of scientific research is required by the progressive and cultured physicians of the district (the South) than is afforded by the state societies, and which, on account of its large membership, is denied them in the American Medical Association." The resolution, presented the next day (October 3, 1906), called for the merging of the Tri-State Medical Association into this larger body, thereby becoming the nucleus of the proposed Southern Medical Association.

Anticipating favorable action on the resolution, a Committee on Constitution and Bylaws was appointed on October 2, 1906, with instructions to have a tentative draft of the CONSTITUTION AND BYLAWS for the proposed Southern Medical Association ready to present to the Tri-State group the next day. Working all night, the Committee drafted a proposed CONSTITUTION calling for the formation of a voluntary, independent organization of physicians which would eventually embrace all of the sixteen Southern states and the District of Columbia. It further called for the Tri-State Medical Association to "thaw and resolve themselves into a dew; to die in order that the baby Southern Medical Association could be born."

In an atmosphere charged with emotion, the resolution and the tentative draft of the first CONSTITUTION were debated as the first order of business of the Tri-State group. There were impassioned pleas "on behalf of the young physicians of the Southern states for a wider field to engage our talents," as well as for "a stimulus, an incentive to spur us on to worthy deeds, to more intensive study, to greater accomplishments in the field of medicine and surgery." Jere L. Crook, M.D.,

Chairman, Committee on Constitution and Bylaws, tried to make the group visualize a great Southern Medical Association whose programs would deal with diseases peculiar to the Southern states and would present to the world the results of the research, the clinical experience, at the bedside and in the operating room, of the splendid body of men composing the ranks of the medical profession of the South.

Naturally, the fine record of the Tri-State group was ardently defended, citing loyalty and accomplishments of its members. But the arguments for greater opportunities for scientific improvement and for a wider fellowship among physicians triumphed. The founder of the Tri-State group, J. B. Cowan, M.D., Tullahoma, Tenn., who was Chief Surgeon on the staff of Lieutenant General Nathan Bedford Forrest, 1861-1865, understandably loathe to see his own brainchild die, and having pledged to fight any move to that effect, was so impressed with the "pleas of these ambitious young doctors for a chance to try their wings over all Dixie Land" that he moved the adoption of the resolution and the tentative CONSTITUTION AND BYLAWS "without changing one jot or one tittle." The motion carried unanimously and thus the Southern Medical Association was born.

The work of organizing moved rapidly—a Nominating Committee was appointed, met promptly, and upon making its report, the first officers of the Southern Medical Association were elected and installed on October 3, 1906, at The Read House in Chattanooga, Tenn.

The first annual meeting was held in Birmingham, Ala., September 24-25, 1907, with a Scientific Assembly composed of three Sections: Medicine, Surgery, and Ophthalmology. At this meeting H. H. Martin, M.D., Savannah, Ga., first President of the Association, summarized the general feeling of the members of the Southern Medical Association in regard to their new organization when, in closing his President's Address, he said:

"I wish to express my entire satisfaction with the unequalled success of this, our first annual meeting, and to publicly thank the various Sections Officers for the most excellent program furnished for this meeting. I have never seen a better one in any medical association in this country. The Southern Medical Association is tonight an accomplished fact. Its future is in your hands to make of it what you will."

Thus began the growth and development of the Southern Medical Association.

OFFICERS AND GOVERNING BODIES OF THE SOUTHERN MEDICAL ASSOCIATION

Just as the individual shares the responsibility of democratic government, so the individual member of the Southern Medical Association shares the responsibility of managing its affairs. But a pure democracy is an inefficient and cumbersome form of organization, and each of the members does not wish to study and vote on every single detail of the business of the Association. Therefore, provisions have been made whereby grants of power are distributed among officers and governing bodies.

GRANTS OF POWER . . .

The membership has adopted a CONSTITUTION AND BYLAWS (which it may abolish, change, or amend) which invests power in, and describes the duties of certain bodies and officers of the Association. In addition, the CONSTITUTION AND BYLAWS (1) states the purpose of the Association; (2) establishes requirements for and classes of membership; (3) provides for the scope and mechanics of meetings; (4) describes the manner of election, power, and duties of officers; (5) provides for the election or appointment of committees; (6) establishes and defines the administrative machinery; (7) prescribes dues and fiscal procedures, and (8) provides for amendments.

OFFICERS . . .

The officers of the Association fall into two categories — the elected and the appointed officers. The group of elected officers, includes: (1) the General Officers: President, President-Elect, First Vice-President, and Second Vice-President; (2) the Trustees; and (3) the Section Officers. The group of appointed officers includes: (1) the Administrative Officers: Executive Vice-President, Treasurer, and Editor; and (2) the Councilors and Associate Councilors. A complete outline of the duties of all officers, elected and appointed, is included in the CONSTITUTION AND BYLAWS.

THE GOVERNING BODIES . . .

THE COUNCIL

Through provisions in the CONSTITUTION AND BYLAWS, the membership established the Council as the governing body of the Association, and defined its composition, duties, and powers.

The Council consists of seventeen members; one representing members in each of the sixteen states and the District of Columbia which constitute the territory of the Association. Appointed by the President, a Councilor serves a five-year term, is not eligible for reappointment, unless he was appointed to fill an unexpired term, and is not eligible for elective office during his tenure as Councilor. The Council elects a Chairman and Vice-Chairman annually.

The Council meets as often and as long as necessary during the annual meetings, and it may be called into interim session by the Chairman, or on petition of three Councilors. Much of the detail work of the Council is accomplished by efficient use of committees created for specific purposes. Through its Chairman, the Council makes a report of its findings, recommendations, and actions to the membership at the last general session of each annual meeting.

THE EXECUTIVE COMMITTEE OF THE COUNCIL

The Executive Committee of the Council acts for the Council and the membership between annual meetings. This smaller body of eight is composed of the Chairman and Vice-Chairman of the Council, who also serve as Chairman and Vice-Chairman of the Executive Committee of the Council, three Councilors elected by the Council, and the President, President-Elect, and First Vice-President of the Association.

The primary function of the Executive Committee of the Council is to consider all matters of business and report its findings and conclusions to the Council for action. Any matters of such urgency that they should not wait over until the annual meeting may be acted upon by the Executive Committee of the Council, however.

The Executive Committee of the Council meets as often and at such places as its Chairman or four of its members may decide, except that one meeting each year must be held in Birmingham, Ala.

THE BOARD OF TRUSTEES

The title of all property owned by the Association is vested in the Board of Trustees and their successors in office. The Board reviews annually the financial structure of the Association, executes all deeds and major contracts to which the Association is a party, reviews Association policies annually, and acts as a long-range planning committee.

The Board of Trustees is composed of six members elected by the Council, one each year, to serve for a period of six years, with the oldest member in point of service serving as Chairman.

GENERAL ADMINISTRATION . . .

By and large, the official governing bodies of the Association are policy-making groups. Decisions, programs, and policies established by the governing bodies are put into effect through (1) the administrative machinery of the Executive Vice-President and his staff at the headquarters office in Birmingham, Alabama, and (2) the Editor, Assistant Editors, and the Editorial Board.

MEMBERSHIP IN THE SOUTHERN MEDICAL ASSOCIATION

WHO CAN BELONG . . .

The membership of SMA is by invitation to physicians eligible for membership in the following state medical societies: Alabama, Arkansas, District of Columbia, Florida, Georgia, Kentucky, Louisiana, Maryland, Mississippi, Missouri, North Carolina, Oklahoma, South Carolina, Tennessee, Texas, Virginia, West Virginia, who are sponsored by the respective state Councilor, to invited medical officers of the United States Army, Navy, Air Force, Public Health Service and Veterans Administration on active duty, and to invited members of the Canal Zone Medical Association and the Puerto Rico Medical Association who are citizens of the United States of America.

The CONSTITUTION AND BYLAWS of the Association provides for active membership as well as for various classes of associate and emeritus membership.

DUES . . .

The modest dues of the Association, which includes the member's subscription to the SOUTHERN MEDICAL JOURNAL, keeps membership in this scientific

organization well within the financial reach of all physicians. Effective January 1, 1977, the annual dues were set at \$50, payable in advance, with membership effective on the date of the application.

Life membership is available to members in good standing upon application and the payment of the appropriate fee according to the following table:

Attained Age	Fee	Attained Age	Fee
40	\$965.00	56	\$570.00
41	\$940.00	57	\$550.00
42	\$915.00	58	\$525.00
43	\$890.00	59	\$505.00
44	\$860.00	60	\$485.00
45	\$835.00	61	\$465.00
46	\$810.00	62	\$445.00
47	\$785.00	63	\$425.00
48	\$760.00	64	\$405.00
49	\$735.00	65	\$385.00
50	\$710.00	66	\$370.00
51	\$685.00	67	\$350.00
52	\$660.00	68	\$335.00
53	\$640.00	69	\$320.00
54	\$615.00	70 & up	\$265.00
55	\$590.00		

ACTIVITIES OF THE SOUTHERN MEDICAL ASSOCIATION

I. THE ANNUAL MEETING

GENERAL INFORMATION . . .

The Association's annual meeting is traditionally held in November each year in one of the cities located within the Association's territory. Dates and sites for the annual meetings are selected at least five years in advance by the Council. All scientific activities, meetings, and exhibits at SMA annual meetings are open to physicians who are eligible for membership in their local and state medical societies whether or not they are members of the Southern Medical Association. Medical and nursing students, interns, residents, and para-medical personnel may also attend. A registration fee of \$20.00 is charged non-members of the Association attending the annual meeting.

Generally, the format of an annual meeting consists of two parts—the scientific program and the exhibits, both scientific and technical. Specifically, the scientific work of the Southern Medical Association is divided into twenty-two Sections, running the gamut from Allergy to Urology. Section work is augmented by general sessions, joint sessions, with two or more Sections cooperating to present programs of special interest, special symposia on timely subjects, scientific closed-circuit television programs, meetings of conjoint societies, postgraduate courses, and scientific and technical exhibits, all designed for one purpose—to help the doctor practice better medicine.

SCIENTIFIC SECTIONS . . .

The modern concept of Section work was instituted by the Association at its first annual meeting in Birmingham, Ala., in 1907 when scientific programs were presented in three Sections: Medicine, Surgery, and Ophthalmology. Thus the basic reason for the founding of the Association in 1906—"to provide a greater opportunity for self-improvement and achievement . . ."

As specialization developed, the need for a forum for the discussion of problems and progress in these new fields developed also. The Southern Medical Association has been quick to sense these needs related to special interests and has created Sections for their benefit. The Association has often led the way in the recognition of certain specialties by being the first general medical organization to create Sections for these specialties. When interest in, and the need for more than a single session is demonstrated, and the specific needs cannot be incorporated into existing Section programs, a new Section is created for that special need. At the same time, when need for a Section no longer exists or when its work has been absorbed by other Sections, then such Sections are discontinued. This practice of being constantly alert to the needs and wishes of the physicians in the South has produced an ever-changing list of the Association's Sections. The following list summarizes the Sections created by the Association in chronological order, with any changes from the original listed under the appropriate Section.

YEAR APPROVED BY COUNCIL

SECTION ON . . .

1906	Medicine
1906	Surgery

1906

Ophthalmology
1912—changed to Ophthalmology,
Rhinology, Otolaryngology and
Laryngology

1923—changed to Eye, Ear, Nose
and Throat

1929—changed to Ophthalmology
and Otolaryngology

1911

1963—changed to Ophthalmology
Hygiene and Preventive Medicine

1913—changed to Public Health

1961—changed to Preventive Medi-
cine

1912

1968—discontinued
Ophthalmology, Rhinology, Otolaryngology
and Laryngology

1923—changed to Eye, Ear, Nose
and Throat

1929—changed to Ophthalmology
and Otolaryngology

1963—changed to Otolaryngology

1916

Pediatrics

1919

Urology

1919

Orthopedic Surgery

1923—changed to Bone and Joint
Surgery

1942—changed to Orthopedic and
Traumatic Surgery

1919

Roentgenology

1920—changed to Radiology

1920

Obstetrics

1920

Neurology and Psychiatry

1974—changed to Neurology,
Neurosurgery, and Psy-
chiatry

1922

Dermatology and Syphilology

1961—changed to Dermatology

1922

Medical Directors of Southern Life
Insurance Companies

1923—discontinued

1923

Pathology

1924

Gastro-Enterology

1931—changed to Gastroenter-
ology

1926

Medical Education

1938—changed to Medical Educa-
tion and Hospital Training

1954—discontinued

1927

Railway Surgery

1944—discontinued

1927

Gynecology

1937

Anesthesia

1945—changed to Anesthesiology

1938

Allergy

Proctology

1970—changed to Colon and
Rectal Surgery

1941

Physical Therapy

1944—changed to Physical Medi-
cine

1949—changed to Physical Medi-
cine and Rehabilitation

1941

General Practice

1973—changed to Family Practice

1944

Industrial Medicine

and Surgery

1960

Plastic and Reconstructive Surgery

1973

Chest Diseases

Currently the scientific assembly of the Southern Medical Association is comprised of the following scientific Sections:

SECTION ON

Allergy
Anesthesiology
Chest Diseases
Colon and
Rectal Surgery
Dermatology
Gastroenterology
Family Practice
Gynecology
Industrial Medicine
and Surgery
Medicine
Neurology, Neurosur-
gery, and Psychiatry
Obstetrics

Ophthalmology
Orthopedic and
Traumatic Surgery
Otolaryngology
Pathology
Pediatrics
Physical Medicine
and Rehabilitation
Plastic and
Reconstructive
Surgery
Radiology
Surgery
Urology

Each Section elects its own officers—a Chairman, Vice-Chairman, Secretary, and Secretary-Elect, with primary responsibility for program planning resting on the Secretary. Duties of all officers are outlined in the CONSTITUTION AND BYLAWS. Section programs are coordinated in the winter at the Annual Section Secretaries Conference which is attended by the members of the Association's Committee on Scientific Work in addition to the Section Secretaries. Every effort is made to see that well-rounded scientific programs are planned for each Section.

A physician attending a Southern Medical Association meeting is not required to attend only one Section. He may spend time where, in his opinion, it will be most profitable to him. This freedom to choose provides great program flexibility, variety and personal appeal. At the same time this plan enables the Southern Medical Association to reach one of its continuing goals—helping doctors practice better medicine.

SCIENTIFIC AND TECHNICAL EXHIBITS . . .

Adding greatly to the teaching value of an annual meeting are the hundreds of scientific and technical exhibits. Highest standards for both types of exhibits are maintained by Committees which review all proposed exhibits on the basis of quality, originality, and teaching value. These exhibits, carefully screened, give the busy physician a look at what is new in medicine as well as what has been proven reliable as a result of research and experimentation. Awards are made for the most outstanding scientific exhibits. The sale of technical exhibit space, enables physicians to see the latest drugs and medical equipment on the market.

THE SOCIAL SIDE . . .

The annual meeting, while geared primarily to education, also has its moments of relaxation. Thriving on an informal atmosphere—where physicians from every type of practice can meet to exchange ideas—SMA has a widely-known reputation for its "Southern Hospitality" and for many years the SMA meeting has been a wife's choice of a meeting to attend with her husband. Social highlights of the annual meeting include: alumni reunions, Section social events, annual golf tournament, President's Reception, Luncheon, and Dinner Dance, activities for the ladies planned by the Woman's Auxiliary to the Southern Medical Association, and, of course, fellowship with members of the medical profession from all parts of the United States and many foreign countries.

II. PUBLICATIONS

THE SOUTHERN MEDICAL JOURNAL . . .

BRIEF HISTORY

During the first years of its history, the Association did not actually own a journal. Various publications were named "official organ of publication" from time to time.

At the annual meeting held in Atlanta, Ga., November 10-12, 1908, arrangements were made for the MEDICAL REPORT OF SHREVEPORT, Shreveport, La., to serve as the official organ of publication, name to be changed to JOURNAL OF THE SOUTHERN MEDICAL ASSOCIATION, effective January 1909 (Vol. 1, No. 1). Oscar Dowling, M.D., Shreveport, La., Secretary-Treasurer of the Southern Medical Association, was Editor. It was discontinued as JOURNAL OF THE SOUTHERN MEDICAL ASSOCIATION as of December 1909.

The GULF STATES JOURNAL OF MEDICINE AND SURGERY, Mobile, Ala., formerly the MOBILE MEDICAL AND SURGICAL JOURNAL, became the Association's official organ of publication with January 1910 (Vol. 16, No. 1). Owners Seale Harris, M.D., and H. A. Moody, M.D., both of Mobile, Ala., served as Editors.

The SOUTHERN MEDICAL JOURNAL, a publication privately owned by a group of Nashville, Tenn., physicians, began in Nashville, Tenn., physicians, began in Nashville, Tenn., July 1908 (Vol. 1, No. 1). It was purchased in October or November 1910 by Seale Harris, M.D., Mobile, Ala., as principal owner with some other physicians having minor financial interest. Thus, the owners of the GULF STATES JOURNAL OF MEDICINE AND SURGERY merged this publication (Vol. 17, No. 5) with their newly acquired publication, the SOUTHERN MEDICAL JOURNAL with the December 1910 issue (Vol. 3, No. 11). Also, beginning with the December 1910 issue, the new SOUTHERN MEDICAL JOURNAL carried the additional designation of JOURNAL OF THE SOUTHERN MEDICAL ASSOCIATION. Seale Harris, M.D., Mobile, Ala., served as Editor until November 1921, and H. A. Moody, M.D., Mobile, Ala., served as Managing Editor until April 1916.

From December 1910 to May 1916, J. A. Witherspoon, M.D., W. D. Haggard, M.D., William Litterer, M.D., W. A. Bryan, M.D., and M. M. Cullon, M.D., all of Nashville, Tenn., and Oscar Dowling, M.D., Shreveport and New Orleans, La., were Associate Editors.

From June 1916 to October 1917, M. Y. Dabney became Managing Editor and James R. Garber, M.D., Birmingham, Ala., became Associate Editor. From December 1917 to December 1919, Dr. Dabney served as Acting Editor while Dr. Harris was on active military duty. From January 1920 to November 1921, both Dr. Dabney and Dr. Garber were designated Associate Editors.

In November 1921 the Southern Medical Association, with a membership of 6,328, purchased the SOUTHERN MEDICAL JOURNAL from Dr. Harris and his co-owners and elected Dr. Dabney Editor. Dr. Harris resigned as Editor at that meeting. Dr. Dabney served as Editor from December 1921 to December 1954 and his wife, Eugenia B. Dabney, served as Assistant Editor, 1930-1935, and Associate Editor from 1935 until December 1954.

Curtice Rosser, M.D., Dallas, Texas, and Tinsley R. Harrison, M.D., Birmingham, Ala., were Associate Editors from January 1951 to December 1954. Curtice J. Lund, M.D., New Orleans, La., served as an Associate Editor from January 1951 to December 1952. Howard L. Holley, M.D., Birmingham, Ala., served as an Associate Editor from January 1954 to December 1954.

R. H. Kampmeier, M.D., Nashville, Tenn., became Editor and Mr. V. O. Foster Birmingham, Ala., Managing Editor, effective December 1, 1954. Mr. Robert F. Butts, Birmingham, Ala., became Managing Editor, December 1, 1960. Harris D. Riley, Jr., Oklahoma City, Okla., became Associate Editor of the JOURNAL in January 1971, and assumed the role of Editor in January 1973, upon Dr. Kampmeier's retirement. Dr. Kampmeier was retained as Advisory Editor.

With sound business and editorial management, the

JOURNAL has not only grown in size and financial stability, but it has also grown in scientific stature and influence. Its cumulative contribution to the medical literature parallels and mirrors the growth and scientific development of medicine in the South.

THE JOURNAL TODAY

Throughout its entire life, the SOUTHERN MEDICAL JOURNAL has adhered to its main objective announced in the first issue: to help doctors practice better medicine by bringing to them high class, original articles by leading medical researchers and specialists, and general information of concern to the medical profession.

The SOUTHERN MEDICAL JOURNAL is a general medical publication which presents monthly some 25 major articles, many profusely illustrated with photographs and drawings. Its contents are as broadly based as the practice of medicine and surgery. Articles are chosen from hundreds submitted and from the 300 or so papers presented at the annual scientific sessions by leaders in the various specialized fields of medicine.

Offices of the JOURNAL are in the headquarters building of the Southern Medical Association in Birmingham, Ala. The Editor, Harris D. Riley, Jr., M.D., is head of the Department of Pediatrics, Children's Memorial Hospital, University of Oklahoma Health Sciences Center, Oklahoma City, Okla. Dr. Riley began his Editorship of the JOURNAL on January 1, 1973, following the retirement of R. H. Kampmeier, M.D., Nashville, Tenn.

Assisting the Editor are Assistant Editors, Addison B. Scoville, Jr., Nashville, Tenn., (since December 1, 1975) and Sam E. Stephenson, Jr., M.D., Jacksonville, Fla. (since January 1, 1968); the Editorial Board, established by Dr. Kampmeier, January 1954, which usually consists of ten members who are appointed by the Editor for five-year terms (see YEARBOOK, page 31); and the Advisory Committee to the Editorial Board which is composed of the Secretaries of the Sections of the Southern Medical Association (see YEARBOOK, pages 35-38). The Association's Executive Vice-President, Mr. Robert F. Butts, Birmingham, Ala., has served as Managing Editor since December 1, 1960.

The JOURNAL carries advertising, often in full color, which helps keep physicians posted on latest pharmaceutical developments. Ads must meet highest professional standards—and they help pay the cost of the magazine so that a subscription is included in the annual membership dues.

Today the SOUTHERN MEDICAL JOURNAL goes into the 16 Southern states and the District of Columbia which comprise the Association's membership territory, as well as all other states, Puerto Rico, Virgin Islands, the Canal Zone, and 22 European and Asiatic countries. Now one of the most influential medical publications in the world, the JOURNAL brings to the practicing physician knowledge which will enable him to provide the best possible care for patients in this age of rapidly changing modern medicine.

THE SOUTHERN MEDICAL BULLETIN . . .

When the Association was only three years old—at the New Orleans Meeting, November 9-11, 1909—the Council recommended the publication of a quarterly bulletin. On November 1, 1912, the SOUTHERN MEDICAL BULLETIN, Volume 1, Number 1 was issued. It included the program for the forthcoming annual meeting and other information about the Association. The Council approved this bulletin, authorized its continuance, and the SOUTHERN MEDICAL BULLETIN has been published quarterly since 1912.

At the Miami Beach Meeting in 1957 a proposal to expand the quarterly SOUTHERN MEDICAL BULLETIN to a monthly publication was reviewed and approved by

the Council. The first step of the proposed expansion was taken when the new format of the SOUTHERN MEDICAL BULLETIN was introduced with the March 1961 issue with R. H. Kampmeier, M.D., Nashville, Tenn., Editor. The BULLETIN has been accepted overwhelmingly by the Southern physicians.

The purpose of the BULLETIN is to provide interesting and up-to-date scientific and non-scientific information for virtually all of the practicing physicians in the Association's membership territory, and to stimulate interest in the Association and its various activities.

Each issue is designed to be of reference value covering various subjects of interest such as current VD problems, cancer, rehabilitation, alcoholism and habituating drugs, family planning, roadside injuries, and the impact of the federal government upon medical care. From 1912 through 1968, the September issue of the

BULLETIN contained the preliminary program for the annual meeting. The second step in expanding the BULLETIN came in 1969 when all four of the quarterly issues followed the basic format, but with increased size, and the preliminary program for the annual meeting was published separately. During 1970 the BULLETIN increased to six issues, one every other month.

In January 1972, the name of the SOUTHERN MEDICAL BULLETIN was changed to SOUTHERN MEDICINE.

Addison B. Scoville, Jr., M.D., Nashville, Tenn., was appointed as Assistant Editor of Southern Medicine in June 1976.

It is certain that SOUTHERN MEDICINE will continue to grow in stature and become an increasingly important part of the postgraduate life of the men for whom it is designed—the Southern physicians.

III. MEDICAL STUDENTS' PROGRAM

The Medical Students' Program was inaugurated because the Council of the Southern Medical Association wanted to show, by specific action, the enormous interest the Association had in medical education. It was estimated that the majority of physicians practice medicine nearly ten years before attending regional or national medical meetings or any kind of refresher course. The Association's Council took action at the Houston Meeting in 1955 by appointing a Committee on Medical Student Representatives to study the advisability of inviting representatives from the senior classes of medical schools within the territory of the Association to the Association's annual meetings. The Committee recommended this program as a step toward eliminating the time-gap from graduation to postgraduate studies.

The first student guests of the Association, representing approximately one-third of the medical schools located within the Association's territory, came to the Washington Meeting in 1956. The program was continued by inviting one-third of the schools each year until at the Atlanta Meeting in 1959, the cycle was completed. Since this program had become immensely popular, with full approval and cooperation of the deans, the Council voted unanimously at the Atlanta Meeting to make this project an official part of each annual meeting. At the Dallas Meeting in 1961, it was decided by the Council that the program should be expanded by inviting two-thirds of the schools to participate in 1962 and all schools in the Association's territory to

participate in 1963. The Executive Committee of the Council further expanded this program in January 1968 by recommending that each school in the Association's territory be invited to send not only a senior class representative, but a representative from the junior class as well.

The Executive Committee of the Council decided in February 1971, that beginning with the Miami Beach Meeting, 1971, the Association invite only a representative from the junior class.

Special sessions are planned for the representatives during each annual meeting and the students are special guests of the President at the President's Reception, Luncheon, and Dinner Dance. In addition to the special sessions planned for the students, they are invited to attend and participate in all scientific activities of an annual meeting.

The objectives of this program are: (1) to give students an opportunity to participate in a full-scale medical meeting; (2) to teach students that study does not cease when classrooms are left and point out the value of continuing medical education after graduation; (3) to make students aware that medical organizations are engaged in a continuous effort to promote research and present results to practicing physicians, and that through the scientific sessions "postgraduate" courses in medicine are offered; and (4) to urge the students to share their findings with their classmates upon returning to school.

IV. RESIDENCY TRAINING GRANT AND LOAN FUND

ORIGINALLY A GRANT PROGRAM . . .

Recognizing the increasing need of financial assistance for those physicians who had completed their formal education, but who were seeking additional education in the form of residency training and fellowships, the Southern Medical Association established the Southern Medical Association Residency Training Grant Fund at the Miami Beach Meeting, November 1962. This project of the Association provided funds to allow a physician to complete a chosen number of years of training without adding to his previous indebtedness and still receive an income, which, while not necessarily commensurate with his education and value, would allow him a comfortable existence during this training period. The first four grants under this program were awarded in 1963 for the residency year 1963-64. Five grants were awarded in July 1964; seven, July 1965; ten, July 1966; eleven, July 1967; fourteen, July 1968.

The Grant Fund was established so that recipients, as well as other members of the Association, could make tax-deductible donations to the Fund thereby increasing the number of residents who could be assisted. While recipients of a grant assumed no legal obligation to repay, it was hoped all would assume a moral obligation to do so.

THEN A LOAN PROGRAM . . .

At the New Orleans Meeting, November 1968, the Council voted to change the existing Residency Training Grant Fund to the Residency Training Loan Fund and the Association's CONSTITUTION AND BYLAWS were amended by changing the committee's name to the Committee on Grants and Loans. The amount available for loans for the year July 1969-July 1970 was \$30,000.

NOW A GRANT AND LOAN PROGRAM . . .

In order to provide assistance to those in financial need as well as give recognition to exceptional individuals, greater flexibility was needed in the Program. Therefore, the Council voted at the Atlanta Meeting, November 1969, to give the Committee on Grants and Loans full authority to determine the needs and merits of each applicant and decide if a grant should be awarded or if a loan should be approved. The total amount of funds to be available for grants and loans for the year July 1, 1977-June 30, 1978 is \$40,000 (\$10,000 grants; \$20,000, loans).

RULES GOVERNING THE GRANT AND LOAN FUND . . .

(1) **Eligibility Requirements.** . . . In order to be eligible to apply for a loan or grant from this Fund, an applicant must satisfy the following requirements:

- (a) shall be a citizen of the United States of America;
- (b) shall be a graduate of an accredited medical school;
- (c) shall have completed internship prior to receipt of first loan or grant payment (application may be made, however, during final portion of internship);
- (d) shall be engaged (or accepted) in residency training in an approved hospital in the territory of the Southern Medical Association;
- (e) shall be engaged in part-time clinical or laboratory research;

(f) shall be required to be personally interviewed by the Association's Council or the Councilor's appointee in the appropriate state (Councilors are to secure information and submit a written report on each applicant to the Committee on Grants and Loans by the deadline for receiving applications each year, April 1).

Persons serving in the armed forces shall not be eligible nor shall the Grant and Loan Fund be made available to medical students and interns (other than those interns qualifying under c above).

(2) **Selection of Recipients.** . . . The criteria for the selection of loan or grant recipients shall be based on need and potential. Selection shall be made by the Committee on Grants and Loans prior to July 1.

(3) **Amount of Loan or Grant.** . . . The loan or grant shall be primarily for personal use with the exact amount determined by individual need. The maximum loan or grant available to one applicant shall be \$2,400, payable at the rate of \$200 per month for twelve months, beginning annually on July 1. A recipient may apply for additional loans or grants.

(4) **Application for Loan.** . . . Official application forms may be secured from the Southern Medical Association, 2601 Highland Avenue, Birmingham, Ala. 35205. Applications are primarily for a loan. The Committee, however, may decide to award a limited number of grants based on evidence that the applying physician is seeking additional educational experiences at a sacrifice in both time and money. Applicants shall be required to submit to the headquarters office by April 1.

(a) a completed official application form;

(b) a curriculum vitae;

(c) a 200-word summary of research project;

(d) a resume of previous accomplishments and future plans;

(e) two letters of recommendation from current senior associates and one letter from the dean of the medical school from which the applicant graduated.

Further, it is the applicant's responsibility to arrange for the interview as outlined under

(1) **Eligibility Requirements (f).**

(5) **Interest Rate on Loans.** . . . No interest shall be charged on loans made from this Fund until the beginning of the third year after the completion of recipient's residency training or at the end of the fifth year after recipient's graduation from medical college, whichever comes first. The interest rate charged shall be one percent.

(6) **Requirements for Loan Recipients.** . . . Loan Recipients shall be required to:

(a) sign properly executed promissory notes to be filed at the SMA headquarters office;

(b) submit a progress report of the year's activities at the end of the loan year.

(7) **Requirements for Grant Recipients.** . . . Grant Recipients shall be required to:

(a) submit progress reports to the headquarters office every six months (January 1 and July 1);

(b) remember that acceptance of a grant carries a moral obligation to repay grant monies received when circumstances permit by making tax-deductible donations to the SMA Grant and Loan Fund.

V. LECTURESHIP PROGRAM

During the Miami Beach Meeting in 1967, the Executive Director recommended that the Council adopt a long-range program of activities in keeping with the purpose of the Association. The suggestion that the Association sponsor a Lectureship Program was referred to the Executive Committee of the Council for consideration at its meeting in January 1968 and at that time the Southern Medical Association's Lectureship Program was established, thereby taking one more step toward fulfilling the purpose of the Association—to develop and foster scientific medicine. This program, under the direction of the Committee on Grants and Loans, has \$10,000 available annually, on a first-come basis.

RULES GOVERNING THE LECTURESHIP PROGRAM . . .

(1) **Who Can Participate.** . . . The Lectureship Program is budgeted \$500 for each of the medical schools in the Association's territory, for disbursement on a first-come basis until funds are expended.

It is left to the discretion of the state Councilor as to whether funds available are used to support a speaker in the medical school(s) in his state or in the community hospital(s) in his state.

VI. RESEARCH PROJECT FUND

Members of the Committee on Grants and Loans observed that funds for initiating small research projects were not readily available in most medical centers or training areas. Therefore, at the Atlanta Meeting, November 1969, the Council established the SMA Research Project Fund. This Fund originally consisted of \$6,000 annually from which grants could be made to those participating in investigative projects. Due to the large number of applications received for grants from this Fund during the first year of operation, the Committee on Grants and Loans recommended to the Council at the Dallas Meeting, November 1970, that the amount of grants be increased to \$20,000 annually (July 1-June 30). This Fund is under the direction of the Committee on Grants and Loans.

At the New Orleans Meeting in November 1976, the Committee on Grants and Loans recommended that the amount for grants be increased to \$40,000 annually.

RULES GOVERNING THE RESEARCH PROJECT FUND . . .

(1) **Amount Available.** . . .

(a) The headquarters office shall be responsible for notifying the Deans and Heads of Departments at the medical schools located in SMA's territory that limited funds are available for those participating in investigative projects.

(b) Money in the Research Project Fund will be available primarily to physicians in house staff training (Graduate Medical Education) rather than to established faculty investigators.

(c) The maximum grant available from this Fund, per school per year, shall be \$1,000.

(2) Purpose. . . .

(a) A grant from this Fund shall be primarily for the purpose of starting a new project, or for the continuation of a relatively new project. Only for a special purpose or use may funds be awarded to established projects.

(b) A grant from this Fund shall be used for the purchase of expendable items only. This includes the purchase and maintenance of animals.

(3) Application. . . .

(a) Official application forms may be secured by

writing the Executive Vice-President, Southern Medical Association, 2601 Highland Avenue, Birmingham, Ala. 35205. Deadline for receiving applications is April 1.

(4) If Approved. . . . When a grant is awarded, the Southern Medical Association shall issue a check jointly to the principle investigator and the institution with which he is connected. The check shall be mailed to the principle investigator.

(5) Requirements. . . . Recipients of grants from this Fund shall be required to send to the Southern Medical Association a summary of the results of the research project upon its completion.

VII. MEDICAL STUDENT SCHOLARSHIP FUND

Recognizing the need for providing assistance to first-year medical students, particularly those of superior abilities, the Council established the Southern Medical Association Medical Student Scholarship Fund at the Atlanta Meeting, November 1969. This Fund, consisting of \$30,000 annually, is under the direction of the Committee on Grants and Loans.

RULES GOVERNING THE MEDICAL STUDENT SCHOLARSHIP FUND . . .

(1) Amount Available. . . .

(a) The headquarters office shall be responsible for notifying the Deans of all medical schools located in SMA's territory that limited funds are available for scholarships for first-year medical students.

(b) The maximum scholarship available from this Fund, per school per year (September 1-August 31), shall be \$750. At the Dean's discretion, the

maximum amount may be divided between two or more students.

(2) Purpose. . . . A scholarship from this Fund shall be for the purpose of giving aid in providing tuition to a first-year student of superior ability who is in need of scholarship funds.

(3) Application. . . .

(a) Application for a scholarship from this Fund must be made by the Dean on behalf of his student, by writing to the Executive Vice-President, Southern Medical Association, 2601 Highland Avenue, Birmingham, Ala. 35205.

(b) The letter should give:

- (1) full name and mailing address of the student;
- (2) explanation of student's need;
- (3) deserving qualities of the student for a scholarship.

(4) If Approved. . . . When a scholarship is awarded, the headquarters office shall notify the Dean, and shall issue a check and send it directly to the medical school.

VIII. AWARDS

The Southern Medical Association has created from time to time awards so that the Association might honor worthy members. Presently there are three official awards of the Association; the Distinguished Service Award; the Seale Harris Medal; and the Original Research Award. Nomination and application forms, which may be obtained from the headquarters office, must be received at the headquarters office by August 1.

All nominations and applications are considered by the Committee on Special Awards. This confidential Committee, consisting of five members with the First Vice-President as Chairman, is appointed by the President to evaluate the contributions of the various candidates for special awards. If suitable candidates are selected by the Committee, it submits the names of not more than three such members to the Council for each award. The Council may then select one for each respective award and presentation of the awards takes place at the last general session of the annual meeting.

THE RESEARCH MEDAL . . .

During the 1912 annual meeting in Jacksonville, Fla., the Association established the Research Medal which could be awarded from time to time to a member of the Association for meritorious and original research work provided the member had made contributions to medical science of sufficient importance to merit this distinction.

In 1961 both the Research Medal and the Original Research Award existed. Then in 1962 the Research Medal as established in 1912 was discontinued in favor of the Original Research Award.

Recipients of the Research Medal

- 1912—Jacksonville Meeting—C. C. Bass, M.D., New Orleans, La., "for his epoch-making achievement in the study of malaria, namely: the cultivation of the malaria parasites in artificial media."
- 1916—Atlanta Meeting—J. Shelton Horsley, M.D., Richmond, Va., "in recognition of his original contributions and studies in the domain of vascular surgery."
- 1921—Hot Springs Meeting—Kenneth M. Lynch, M.D., Dallas, Texas, "for his original and meritorious investigations in the parasitology of tropical diseases."
- 1932—Birmingham Meeting—Evarts A. Graham, M.D., St. Louis, Mo., "for his outstanding research work, especially on the diagnosis and pathology of inflammatory diseases of the gall-bladder and liver."
- 1933—Richmond Meeting—William deB. MacNider, M.D., Chapel Hill, N. C. "for original and meritorious research, especially in the field of experimental nephritis."
- 1937—New Orleans Meeting—Ernest W. Goodpasture, M.D., Nashville, Tenn., "for his outstanding achievements through his research on the cultivation and the nature of viruses."
- 1940—Louisville Meeting—Alfred Blalock, M.D., Nashville, Tenn., "in recognition of his distinguished contributions to knowledge of the circulation, especially in relation to shock."

- 1942—Richmond Meeting—Perrin H. Long, M.D., Baltimore, Md., "in recognition of his outstanding contributions to the knowledge of bacteriology and chemotherapy."
- 1943—Cincinnati Meeting—Tom Douglas Spies, M.D., Birmingham, Ala., "in recognition of his outstanding contributions to our knowledge of the science of human nutrition, especially in his elucidation of the earlier and better methods of diagnosis and treatment of disease."
- 1945—Cincinnati Meeting—Tinsley R. Harrison, M.D., Dallas, Texas, "in recognition of his outstanding contributions toward the elucidation of structural and functional aspects of cardiovascular disease and particularly of practical problems arising from failure of the circulation."
- 1946—Miami Meeting—William H. Sebrell, Jr., M.D., Bethesda, Md., "in recognition of his important contributions to the understanding of nutrition and its relation to public health."
- 1947—Baltimore Meeting—George E. Burch, M.D., New Orleans, La., "in recognition of his important investigations in the clinical physiology of the circulation and of his valuable contributions of the understanding of cardiovascular disorders."
- 1949—Cincinnati Meeting—Seale Harris, M.D., Birmingham, Ala., "in recognition of his original and pioneer description of hyperinsulinism, for continued and meritorious achievements in the fields of nutrition and metabolism and especially his investigations of diabetes mellitus and his contributions to its treatment."
- 1950—St. Louis Meeting—Guy L. Hunner, M.D., Baltimore, Md., "for clarifying the relationship of focal infections as disease producers in the genitourinary tract, and especially for his constructive work on the diagnosis and treatment of the medical and surgical diseases of the urinary tract."
- 1954—St. Louis Meeting—Robert E. Stone, M.D., Birmingham, Ala., "in appreciation of his outstanding professional attainments and original research of benefit to mankind in the recognition and treatment of nutritional disorders and diseases of metabolism."
- 1957—Miami Beach Meeting—Joseph M. Hill, M.D., Dallas, Texas, "in recognition of his many contributions in the field of hematology, particularly in his original mass production method of desiccating human plasma and application in the therapy of shock, in his additions to the knowledge concerning the Rh factor, and in his current studies on leukemia."
- 1960—St. Louis Meeting—Leslie V. Rush, M.D., Meridian, Miss., "for research resulting in the development of the Rush pin, an intramedullary steel pin for internal fixation of fractures."
- 1961—Dallas Meeting—May Owen, M.D., Fort Worth, Texas, "for research in determining that glove powder was the cause of foreign-body granuloma on the serosal surface of the intestines in abdominal surgery."

THE DISTINGUISHED SERVICE AWARD . . .

At the Houston Meeting in 1955 the Association created the Distinguished Service Award which may be awarded annually to any member of the Association in recognition of outstanding contributions to the advancement of medical science and/or the Association. Any member of the Association is eligible to receive this award and nominations may be made by any member of the Association. Deadline for receiving nominations is August 1. The Committee on Special Awards evaluates all nominations and the recipient is notified and receives the Award at the last general session of an annual meeting.

Recipients of the Distinguished Service Award

- 1956—Washington Meeting—Curtice Rosser, M.D., Dallas, Texas
- 1957—Miami Beach Meeting—Kenneth M. Lynch, M.D., Charleston, S. C.
- 1958—New Orleans Meeting—T. W. Moore, M.D., Huntington, W. Va.
- 1959—Atlanta Meeting—R. L. Sanders, M.D., Memphis Tenn.
- 1960—St. Louis Meeting—Everett S. Lain, M.D., Oklahoma City, Okla.
- 1961—Dallas Meeting—George E. Burch, M.D., New Orleans, La.
- 1962—Miami Beach Meeting—Wilburt C. Davison, M.D., Durham, N. C.
- 1963—New Orleans Meeting—Fount Richardson, M.D., Fayetteville, Ark. (posthumously)
- 1964—Memphis Meeting—Hollis E. Johnson, M.D., Nashville, Tenn.
- 1965—Houston Meeting—Milford O. Rouse, M.D., Dallas, Texas
- 1967—Miami Beach Meeting—Robert D. Moreton, M.D., Houston, Texas
- 1968—New Orleans Meeting—M. Pinson Neal, Sr., M.D., Columbia, Mo.
- 1969—Atlanta Meeting—R. H. Kampmeier, M.D., Nashville, Tenn.
- 1970—Dallas Meeting—Joe T. Nelson, M.D., Weatherford, Texas
- 1971—Miami Beach Meeting—Seymour F. Ochsner, M.D., New Orleans, La.
- 1972—New Orleans Meeting—Charles M. Caravati, M.D., Richmond, Va.
- 1973—San Antonio Meeting—Edgar Hull, M.D., Pascagoula, Miss.
- 1974—Atlanta Meeting—Woodard D. Beacham, M.D., New Orleans, La.
- 1975—Miami Beach Meeting—George H. Yeager, M.D., Baltimore, Md.
- 1976—New Orleans Meeting—J. Garber Galbraith, M.D., Birmingham, Ala.

THE SEALE HARRIS MEDAL . . .

This medal, established at the New Orleans Meeting in 1958, may be awarded annually to any member of the Association as recognition for important research accomplishment in the broad field of metabolism, endocrinology, nutrition, or for research which contributes to a better understanding of the chemical changes occurring in disease. Any member of the Association is eligible to receive this medal and nominations may be made by any member of the Association. Deadline for receiving nominations is August 1. After nominations are evaluated by the Committee on Special Awards, the recipient is notified and receives the medal at the last general session of an annual meeting.

Recipients of the Seale Harris Medal

- 1959—Atlanta Meeting—Tom Douglas Spies, M.D., Birmingham, Ala., "for his contributions and accomplishments in the field of nutrition."
- 1960—St. Louis Meeting—Nicholas C. Hightower, Jr., M.D., Temple, Texas, "for his investigations and achievements in the field of metabolic diseases and gastroenterology."
- 1961—Dallas Meeting—Henry H. Turner, M.D., Oklahoma City, Okla., "for his distinguished and meritorious work in glandular disorders in the human, to which he has contributed internationally, and for which he is so widely accepted as an authority."
- 1962—Miami Beach Meeting—Howard L. Holley, M.D., Birmingham, Ala., "for his investigations on the synovial fluid in normal subjects and in patients with rheumatoid arthritis and for more recent studies on the chemical nature of hyaluronic acid."

- 1963—New Orleans Meeting—Joe M. Blumberg, M.D., Washington, D. C., "for his investigations and achievements in pathology and research, and for his contributions to medicine which have been recognized and accepted all over the world."
- 1967—Miami Beach Meeting—Julian M. Ruffin, M.D., Durham, N.C., "for his original investigative work centering about the malabsorption state, elucidation of the etiology of Whipple's disease and its management, and the nature of duodenal ulcer pain." (Note: actual presentation of this award was at the 1968 Meeting in New Orleans).
- 1970—Dallas Meeting—Grace Goldsmith, M.D., New Orleans, La., "for her investigations and research in the fields of metabolism and nutrition."
- 1972—New Orleans Meeting—John T. Galambos, M.D., Atlanta, Ga., "for his research and contributions to the field of gastroenterology."
- 1973—San Antonio Meeting—Stanley J. Dudrick, M.D., Houston, Texas, "for his work in intravenous alimentation."
- 1974—Atlanta Meeting—H. Harlan Stone, M.D., Atlanta, Ga.; Robert S. Nelson, M.D., Houston, Texas.
- 1975—Miami Beach Meeting—W. Dean Warren, M.D., Atlanta, Ga.
- 1976—New Orleans Meeting—John S. Fordtran, M.D., Dallas, Texas.

THE ORIGINAL RESEARCH AWARD . . .

At the Dallas Meeting in 1961 the Association established the original Research Award consisting of a medal and cash prize of \$500, which may be awarded annually in recognition of original research in clinical medicine or the basic sciences as applied to medicine. Application for this award may be made by submitting an essay, curriculum vitae, and a photograph to the headquarters office by August 1. The Committee on Special Awards evaluates all essays submitted, and the winner is notified that the Award will be presented at the last general session of the annual meeting.

Recipients of the Original Research Award

- 1968—New Orleans Meeting—Donald E. McCollum, M.D., Durham, N.C., Robert S. Matthews, M.D.,

Greenville, S. C., and Michael T. O'Neill, M.D., Durham, N. C., for their essay "Aseptic Necrosis of the Femoral Head: Associated Diseases and Evaluation of Treatment."

- 1973—San Antonio Meeting—Gilbert H. Fletcher, M.D., Houston Texas, for his work in building the first practical head for the housing of cobalt in the giving of external radiation.
- 1974—Atlanta Meeting—John W. Kirklin, M.D., Birmingham, Ala.
- 1975—Miami Beach Meeting—Cornelia P. Channing, Ph.D., Baltimore, Md.

THE SCIENTIFIC EXHIBIT AWARDS . . .

Scientific exhibits became an official part of the annual meeting at the Louisville Meeting in 1920. The Council established a Committee on Scientific Exhibit Awards and Certificates were given for: Best Exhibit by an individual Physician; Best Exhibit by a Medical School; Best General Exhibit. In 1924 the Council voted to change the award designation to: First Award; Second Award; Third Award; and Honorable Mention Award(s) at the discretion of the Committee.

The Committee on Scientific Exhibit Awards is a subcommittee of the Committee on Scientific Work.

The following standards are used by the Committee in making the awards: originality, practicability, applicability to practice of medicine, quality, teaching value, quantity, and personal demonstration.

Scientific exhibit awards are in the form of Certificates which are presented to the winners. Also, an appropriate sign is placed on each of the winning exhibits.

TECHNICAL EXHIBIT AWARD . . .

At a meeting of the Executive Committee of the Council held in Atlanta, Ga., March 31, 1973, the C. P. Loran Award for the outstanding Technical Exhibit was established. Recipients of this award are:

- 1973—San Antonio Meeting—Roche Laboratories, "Heart Sounds."
- 1974—Atlanta Meeting—Roche Laboratories.
- 1975—Miami Beach Meeting—Eli Lilly & Company.
- 1976—New Orleans Meeting—Merck, Sharp & Dohme.

IX. GROUP INSURANCE PROGRAM

The Southern Medical Association has had a group Insurance Program since November 1952 when the Disability Insurance Plan was approved by the Council during the Miami Meeting. The Insurance Program was expanded in February 1958 with the addition of the Accidental Death and Dismemberment Plan; the Major Hospital Insurance Plan in March 1958; the Life Insurance Plan in April 1959; and the Office Overhead Expense Plan in August 1960.

The Association's Committee on Insurance, alert to the needs and wishes of the members of the Association, has continuously up-dated the various Plans in an effort to provide the most coverage for the premium dollar and, ultimately, the best group insurance program available to the medical profession.

WHO IS ELIGIBLE? . . .

- SMA members and associate members (all coverages)
- Spouses of SMA members and dependent children from 14 days to 23 years, or 23-25 years if students (Life Insurance and Major Hospital only)
- Employees of SMA members (Life, Accidental Death and Dismemberment, and Major Hospital only)

PLANS INCLUDED IN THE SMA GROUP INSURANCE PROGRAM . . .

1. LIFE INSURANCE (Up to \$100,000)
Payable in event of death due to any cause. Four plans from which to choose. Dependent coverage available.
2. ACCIDENTAL DEATH AND DISMEMBERMENT (Up to \$150,000)
Full amount payable in addition to Life Insurance in the event of accidental death; proportional amounts payable for dismemberment. Three plans from which to choose. Spouse benefits also available.
3. LONG-TERM DISABILITY INCOME (Up to \$1,500 per month)
Guaranteed monthly income in the event of long term disability; Several plans from which to choose with varying waiting and benefit payment periods. Maximum benefit payment periods—accident benefits payable to age 65; sickness benefits payable up to ten years (to age 65).

Special Surviving Spouse Benefit: If insured should die while receiving disability income—payments will be continued to surviving spouse for up to 12 months.

4. ONE-YEAR DISABILITY INCOME (Up to \$1,500 per month). Guaranteed monthly income in the event of sickness or disability. Sickness and accident benefits payable from first day; confinement not required. Premium waived if totally disabled.
5. MAJOR HOSPITAL INSURANCE (Up to \$100,000 per person)
80% of hospital and nursing expenses payable after satisfying a \$300 or \$500 deductible. \$100,000 maximum payment available for SMA member and each of his eligible family members, for each separate illness or injury.
6. OFFICE OVERHEAD EXPENSE DISABILITY INSURANCE (Up to \$3,000 per month)
\$500 to \$1,500 per month provided to cover rent, telephone, electricity, heat, water, employees' salaries, depreciation, and other customary fixed office expenses. Benefits payable after insured has been disabled for 31 days; benefits are then retroactive to the first day of disability. Eight plans from which to choose.
7. SURVIVOR ANNUITY INCOME (up to \$1,000 per month)
\$100 to \$1,000 per month for five years to any named beneficiary. If named beneficiary is surviving spouse, benefits continue for 15 years or until death or remarriage of the beneficiary. If member and spouse are killed in the same accident benefits will continue until the youngest child reaches age 19, or to age 23 if a full-time student.

PLANS AVAILABLE TO FULL-TIME EMPLOYEES OF SMA MEMBER PHYSICIANS . . .

1. LIFE INSURANCE (Up to \$15,000)
Payable in the event of death due to any cause. Two plans from which to choose. Conversion privileges available in event insured leaves employ of SMA member.
2. ACCIDENTAL DEATH AND DISMEMBERMENT (Up to \$15,000)
Full amount payable in addition to Life Insurance in the event of accidental death; proportional amounts payable for dismemberment. Two plans from which to choose. Conversion privileges available in event insured leaves employ of SMA member. No dependent coverages available.
3. MAJOR HOSPITAL INSURANCE (Up to \$100,000 per person)
80% of hospital and nursing expenses payable after satisfying a \$300 or \$500 deductible. \$50,000 maximum payment available for each separate illness or injury. No dependent coverage available.

HEADQUARTERS OFFICE AND STAFF OF THE SOUTHERN MEDICAL ASSOCIATION

ADMINISTRATIVE OFFICERS . . .

Records were maintained by the physicians elected to the offices of Secretary, Treasurer, or Secretary and Treasurer, until November 1910 when Seale Harris, M.D., Mobile, Ala., was elected Secretary and Treasurer. Dr. Harris maintained the offices of the Association in Mobile, Ala., from November 1910 until July 1915 when he moved to Birmingham, Ala., and relocated the Association's offices in the Empire Building. Dr. Harris served as Secretary and Treasurer, as well as Editor, until his retirement in 1921. While Dr. Harris was on military duty, November 1917-November 1919, James R. Garber, M.D., Birmingham, Ala., filled in as Acting Secretary.

When Dr. Harris retired in 1921, Mr. C. P. Lorz, Birmingham, Ala., was named to the position of Secretary, Treasurer and Business Manager, a job he filled until November 1928. Mr. Lorz had worked for Dr. Harris since 1912 as Business Manager of the SOUTHERN MEDICAL JOURNAL, which was then privately owned by Dr. Harris. Mr. Lorz was designated Assistant Treasurer of the Association in November 1914 and Business Manager of the Association in November 1916. Mr. Lorz' title was altered to Secretary, Treasurer and General Manager in November 1928, and under the all-inclusive title of Secretary-Manager, he served until December 1, 1954. During Mr. Lorz' leave of absence due to illness, Emmett B. Carmichael, Ph.D., Birmingham, Ala., was appointed Acting Secretary-Manager from July 16, 1948, to October 31, 1948. Dr. Carmichael in turn appointed Mr. Robert F. Butts, who had been Assistant to Mr. Lorz since 1948, as Assistant Secretary-Manager.

Mr. V. O. Foster, Birmingham, Ala., took over the executive duties of the Association with the new title of Executive Secretary and Treasurer, with a five-year contract on December 1, 1954. However, the Council, wishing to continue utilizing the vast experiences of Mr. Lorz, voted to retain Mr. Lorz, after his retirement December 1, 1954, as Advisor and Professional Relations Counselor for a period of three years. This arrangement was renewed for a second three-year period ending December 1, 1957. Mr. Butts, who had served as Assistant to Secretary-Manager, 1948-1950, and Assistant Secretary-Manager, 1950-1954, was elected Business Manager with a five-year contract beginning December 1, 1954.

In September 1959 Mr. Foster became ill before fulfilling his contract. Mr. Butts was asked to serve as Acting Executive Secretary and Treasurer until further notice in addition to continuing as Business Manager.

Due to his mature years and impaired health, at the Atlanta Meeting, November 1959, the Council relieved Mr. Lorz of his assignment (which would not have expired until December 1, 1960) as Advisor and Professional Relations Counselor and bestowed upon him the permanent title of Advisor and Special Consultant. The Council extended Mr. Foster's contract as Executive Secretary and Treasurer for one year, December 1, 1959-December 1, 1960, and named Mr. Butts as Associate Executive Secretary and Treasurer for one year, December 1, 1959-December 1, 1960, and extended him a new five-year contract as Business

Manager, December 1, 1959-December 1, 1964. (This contract was later extended by one year so that all Mr. Butts' contracts would have the same expiration date.)

In January 1960, the Executive Committee of the Council took the following actions regarding the Association's executive personnel: (1) Mr. Butts' one-year contract as Associate Executive Secretary and Treasurer was cancelled and he was named Executive Secretary and Treasurer on a five-year contract, effective February 1, 1960, in addition to his contract as Business Manager; and (2) Mr. Foster's one-year contract as Executive Secretary and Treasurer was cancelled, and he was named Professional Relations Counselor, a position he held from February 1, 1960, to July 1, 1960, when he retired.

At the Dallas Meeting, November 1961, the title of Executive Director, which would include his present titles of Executive Secretary and Treasurer, Business Manager, and Managing Editor, was given to Mr. Butts.

Following a Constitutional change in November 1977, Mr. Butts will assume the title of Executive Vice-President. The Bylaws were changed during the New Orleans Meeting in November 1976 to reflect this change.

Mr. Butts' contract as Executive Vice-President is renewable every five years.

On February 27, 1971, the Executive Committee of the Council, at its meeting in Miami Beach, Fla., named Mr. Roy B. Evans, Jr., as Assistant Executive Director of the Southern Medical Association, and extended to him a contract, renewable every five years.

Following the New Orleans Meeting, November 1976, Mr. Evans assumed the title of Executive Director.

Mr. Evans joined the SMA staff in February 1960 and prior to his becoming Assistant Executive Director, served as Administrative Assistant, Assistant Business Manager, and Business Manager.

THE HEADQUARTERS OFFICE . . .

As mentioned previously, the Association's offices were in the Van Antwerp Building, Mobile, Ala., from November 1910-July 1915, and in the Empire Building, Birmingham, Ala., from July 15, 1915 until 1958.

Ground-breaking ceremonies for one of the country's most modern association buildings were held on August 4, 1957. The split-level structure of masonry and glass, located at 2601 Highland Avenue, Birmingham, Ala., completed at a cost of \$250,000, dedicated September 7, 1958, is now completely owned by the Southern Medical Association.

The headquarters office contains 6,854 square feet of space and is situated on a lot of nearly one and one-half acres. It provides a meeting place and business center, executive offices, offices for the Association's publications, Woman's Auxiliary room, mailing room, conference room, and storage space.

This well-equipped office building, tastefully decorated, provides a comfortable and pleasant place for the Executive Vice-President and his staff to carry out the administrative duties and activities of the Association.

SECTION OFFICERS' GUIDE

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INTRODUCTION

The annual meeting of the Southern Medical Association is a postgraduate educational meeting at which subjects pertaining to the science and art of medicine are presented and discussed. This scientific meeting is divided into twenty-two Sections representing the various branches of medicine.

This portion of the YEARBOOK is intended as a Guide to Section Officers to explain some of the major rules and methods of procedure that should be observed by the Section Officers when preparing for an annual meeting. While the stipulations regarding the scientific work as stated in the CONSTITUTION AND BYLAWS of the Southern Medical Association must be followed, the other provisions set forth in this portion of the YEARBOOK are mainly to act as a guide and Section Officers should constantly strive to develop new types of programs or experiment with new media for the transmission of medical knowledge.

THE COMMITTEE ON SCIENTIFIC WORK

The Committee on Scientific Work was created in 1958 at the recommendation of a Study Committee appointed by President W. Kelly West to evaluate the possible need for such a committee. The duties of the Committee on Scientific Work shall be as follows:

(1) Membership and Officers: The Committee on Scientific Work shall be appointed by the Chairman of the Council. The Committee shall consist of nine members, at least two of whom may be Councilors. Term of membership on the Committee shall be three years with appointments staggered to permit the retirement of three members each year. Reappointment for an additional term of three years or less will be permissible. Officers of the Committee shall be a Chairman, Vice-Chairman, and Secretary. The Secretary shall be appointed from the Association's staff. **(2) Meetings:** The Committee on Scientific Work shall meet at least three times a year. One meeting shall be held with the Section Secretaries in the Spring, and one meeting at the time of the Annual Meeting of the Association. The Committee shall meet one or more additional times as necessary, on call by the Chairman, to complete its work. All expenses of these meetings shall be borne by the Southern Medical Association. **(3) Work of the Committee:** In this Committee shall be vested the responsibility for the formulation and content of the scientific activities of the Association. The recommendations of the Committee shall be presented by the Chairman of the Committee to the Council at the time of

the annual meeting for approval and consultation. The Committee shall include in its scope of activities the following: (a) the format and content of the scientific sessions of the annual meeting and such other scientific sessions as may be held; (b) the development and assignment of a scientific theme or themes for the annual meeting in cooperation with the Section Secretaries; (c) the design and nature of postgraduate courses, workshops, specialty and multidisciplinary programs, and other programs of continuing education; (d) the Committee shall maintain liaison with: 1. medical school faculties and students in the site of the annual meeting; 2. specialty and subspecialty organizations; 3. allied health science organizations, and cooperate with them, in developing and design of scientific programs and continuing education activities. (e) the Committee shall be responsible for the selection and judging of scientific exhibits shown at the annual meeting; (f) the Committee shall be responsible for monitoring and evaluating scientific activities of the Association; (g) the Committee shall serve as an advisory group to the Section Secretaries in developing their Section specialty programs and coordinating and assisting the Secretaries in arranging combined Section meetings; (h) the Committee is empowered to create such subcommittees within its body as may be expedient to accomplish the stated purposes and work of the Committee.

THE SECTION SECRETARIES CONFERENCE

The Section Secretaries Conference is held annually in the city which will be the site of the next annual meeting in the late winter or early spring, usually in the months of February or March.

The Section Secretaries, members of the Committee on Scientific Work, and headquarters personnel meet together at this Conference to work out the general schedule for the scientific portion of the annual meeting, including coordination of the various Section programs,

selection of topics to be developed into general symposia, and the scheduling of television time (when available) for Sections desiring it. The Association will reimburse expenses incurred in attending this Conference.

Each Section Secretary should be prepared to state the number of half-day sessions desired by his Section and advise whether or not the Section wishes to utilize television (when available) in the Section program.

SCIENTIFIC PROGRAM FOR ANNUAL MEETING

The scientific program for an annual meeting is prepared by the Section Officers of the twenty-two Sections. The duties of each of the Section Officers in regard to preparing the program are outlined in the following pages. The overall program of an annual meeting is divided into the following parts which are reviewed in detail in the following pages:

1. **General Symposia***, selected at the Section Secretaries Conference.
2. **Postgraduate Courses**, coordinated with Sections.
3. **Section Meetings***, programs selected by the Section Secretaries.
4. **Scientific Exhibits**, as selected by the Committee on Scientific Exhibits.
5. **Technical Exhibits**.
6. **Audio-Visual Taping**

Participation in any part of the scientific program is open to all members of the Southern Medical Association and invited guests. Invited guests may include physicians who are not members of the Association and others in fields allied to medicine, such as dentists, pharmacists, chemists, physicists, etc. It is up to the Section Officers to determine whether or not a person is qualified to appear on a Section program.

1. GENERAL SYMPOSIA

Each year at the Section Secretaries Conference, topics are presented and an open discussion held in order to determine the most worthy subject to be developed into a General Symposium. There is no set number of symposia, however, generally there are from one to four such programs.

After the subject, or subjects, have been selected, a Chairman is appointed to formulate each symposium. The Chairman of such a program is free to select speakers whom he feels would add greatly to the quality of the scientific program.

2. POSTGRADUATE COURSES

At the Section Secretaries Conference held in San Antonio, Texas, March, 1973, it was decided that the Association would sponsor postgraduate courses.

After a subject has been chosen, a Director is appointed to formulate the course, working with the Committee on Scientific Work. The Course Director is free to select three speakers whom he feels would add greatly to the quality of the scientific program. The Course Director is fully responsible for all details concerning the course.

3. SECTION MEETINGS

The responsibilities of the Section Chairman and the Section Secretary regarding Section meetings are outlined on pages 160 and 161 under "Duties of Section Chairman," and "Duties of Section Secretary."

**Note: These programs may also include panel discussions, medical roundtables, etc., and other means of medical communication for which no formal "papers" are prepared.*

SECTION PROGRAM . . .

There is no set time when the Sections must hold their sessions. The schedule varies from year to year and is determined at the annual Section Secretaries Conference.

Two or more Sections may hold a "joint" meeting at the discretion of the Section Officers. Secretaries of Sections involved in a joint meeting must designate the Section in charge and the Secretary of the Section in charge will be held responsible for the program.

Each Section may hold as many half-day sessions as it deems necessary. However, Section Officers are urged to request only the number of half-day sessions for which there is a sufficient supply of interesting and educational material.

SCIENTIFIC SCHEDULE AND PROGRAM MATERIAL . . .

Section Secretaries meet with the Committee on Scientific Work in the city which will be the site of the next annual meeting in the early spring, usually in the months of February or March. The complete program, with abstracts, as finally selected by the Section Secretaries, must be sent to the headquarters office by May 1. The preliminary program is published in September. This preliminary program is prepared for publication by the headquarters staff from the copy furnished by the Section Secretaries. The same material is used for the final Official Program. It is very important, therefore, that the Section Secretaries verify the correct spelling of participants' names, correct addresses, and correct titles of all papers scheduled. The Section Secretary shall advise the headquarters office of any projection equipment or other special equipment required by the essayists. This information is requested of the essayists on special forms furnished the Secretary by the headquarters office. The Section Secretary is the official correspondent with references to the program with the headquarters office.

A maximum of ten papers per half-day session is recommended. Whether a Section will have five or ten papers per session is left to the discretion of the Section Secretary. However, a thirty-minute intermission for viewing exhibits must be arranged for each half-day session and a Section Business Session must also be scheduled during one of the Section's sessions.

A "panel discussion" in which there are several participants who take part in no pre-arranged order shall be considered as one "paper" for each thirty minutes that the panel is scheduled to last. A panel shall have a moderator and three or more panelists, all of whom shall speak on one basic topic.

A "symposium" where the participants speak according to a prearranged schedule shall be considered to have as many "papers" as there are speakers. A symposium should have a moderator and as many participants as deemed advisable. Each participant, while speaking on one phase of the overall topic, shall have an individual "paper" and title.

It is recommended that the Section Secretaries, in formulating their programs, keep in mind the large number of physicians in the South doing family practice, and that a portion of each Section program consist of practical papers that would be helpful to family practitioners.

TIME LIMITS AND PUBLICATION DATA . . .

All papers presented as a part of the Section program shall be limited to fifteen minutes, with the exception of the paper presented by a Section's official Guest Speaker whose time shall be set by the Secretary and Chairman of the Section.

The opening discussion shall be limited to five minutes and succeeding discussions should not exceed three minutes each. No one may discuss any paper more than one minute. The closing discussion is not to exceed five minutes.

All papers read before the Association or any of its Sections shall become the property of the Association. Each paper shall be deposited with the Secretary of the Section when read. The Officers of each Section, along with the Section's Steering Committee are responsible for evaluating all papers for the Editor in regard to timeliness of publication, quality, and educational value. This should be done during the annual meeting.

Extemporaneous discussion will not be considered for publication except when a Section Officer requests it. In such a case, the Section Secretary shall have such extemporaneous discussion reduced to writing by the discussant and transmitted to the headquarters office. Actual publication of such data is at the discretion of the Editor.

PROGRAM PARTICIPATION RULES . . .

A person, other than an official Guest Speaker, cannot appear on the same Section program as an essayist two years in succession. Neither may he appear before more than one Section nor present more than one paper at any one annual meeting. This does not prevent him from participating otherwise in any one or all of the following activities:

- Coauthor of another paper
- Discussant of another paper
- Participation in a television program
- Participation in a panel discussion
- Participation in a symposium
- Moderator for medical roundtable

An essayist on the program who fails to appear cannot be scheduled to appear on the program again for two years.

BROCHURES . . .

The Association designs and mails brochures each spring and fall to all physicians in SMA's territory. The purpose of the spring brochure is to encourage participation in the forthcoming annual meeting. The brochure points out the many ways a person may be a program participant and gives a complete list of the Section Officers, emphasizing that the Section Secretary should be contacted regarding a possible place on the program for an annual meeting.

The fall brochure is a "Preview of the Annual Meeting."

Every effort is made to design an attractive, colorful brochure that will not only be eye-catching to the physicians, but also provide them with as much information on the Association and the annual meeting as possible.

All Section mailings or brochures must be approved by the SMA headquarters office in order to minimize confusion and eliminate administrative problems.

MEETING ROOM ACCOMMODATIONS . . .

The facilities available for good meeting rooms will vary in each city. The Association procures the best meeting facilities possible and assigns meeting rooms to the different Section according to the size of the

expected audience. All meeting rooms are equipped as completely as possible with:

- Platform
- Lectern
- Speakers' Table
- Chairs
- Carousel projector with universal trays for 2" x 2" (35 mm.) slides
- Screen
- Operator for projection equipment
- Regular and electric pointers
- Blackboard, erasers, chalk
- Stop and go signals
- Public address system if room requires it (one microphone, or more if requested)
- Water and glasses

The Section Secretaries are responsible for notifying the headquarters office if other equipment is needed.

4. SCIENTIFIC EXHIBITS

Each applicant for scientific exhibit space must fill in and sign the regular application form for space. Application forms are available at the headquarters office and each Section Secretary is given a supply for distribution. The deadline for the receipt of applications is specified on the application form.

Exhibits may exemplify original investigation or may review a given subject, bringing together all pertinent known facts. Each exhibit must be attended throughout the meeting by the author of the exhibit or a competent representative.

Section Officers should always be on the alert for outstanding exhibits and should encourage authors of such exhibits to apply for scientific exhibit space as early in the year as possible.

The acceptance or rejection of applications is governed by the Committee on Scientific Exhibits. Actual exhibit space is assigned by the headquarters staff.

Certificates of Award for the best scientific exhibits and several Honorable Mention awards are given.

5. TECHNICAL EXHIBITS

Technical exhibits add greatly to the teaching value of an annual meeting. Highest standards are maintained in the selection of exhibits which are reviewed on the basis of quality, originality, and teaching value. These exhibits, carefully screened, give the busy physicians a look at what is new in medicine as well as what has proven reliable as a result of research and experimentation. The sale of technical exhibit space enables physicians to see the latest drugs and medical equipment on the market. During an annual meeting Section Officers should encourage physicians to visit the technical exhibits during intermissions.

The C. P. Loran Award is presented each year for the most outstanding technical exhibit.

6. AUDIO-VISUAL TAPING

No audio-visual tapings of any Section program may take place without written permission from the SMA headquarters office.

SECTIONS OF THE SOUTHERN MEDICAL ASSOCIATION

The scientific work of the Southern Medical Association is divided into twenty-two Sections according to the different branches of medicine. The Sections are listed below as well as the year each was established.

Allergy—1938	Ophthalmology—1906
Anesthesiology—1937	Orthopedic and Traumatic Surgery—1919
Chest Diseases—1973	Otolaryngology—1912
Colon and Rectal Surgery—1938	Pathology—1923
Dermatology—1922	Pediatrics—1916
Gastroenterology—1924	Physical Medicine and Rehabilitation—1941
Family Practice—1941	Plastic and Reconstructive Surgery—1960
Gynecology—1927	Radiology—1919
Industrial Medicine and Surgery—1944	Surgery—1906
Medicine—1906	Urology—1919
Neurology, Neurosurgery, and Psychiatry—1920; name changed in 1974	
Obstetrics—1920	

Each Section elects its own officers, makes its own rules and regulations for the conduct of Section work (insofar as they do not conflict with the CONSTITUTION AND BYLAWS of the Association and the rules and regulations as set up by the Committee on Scientific Work and the Council) and prepares its own program under the general supervision of the Committee on Scientific Work.

SECTION OFFICERS AND COMMITTEES

SECTION OFFICERS . . .

The officers of each Section shall consist of a Chairman, Vice-Chairman, and Secretary, and when deemed necessary, a Secretary-Elect.

Section Officers assume office at the end of the annual meeting during which they were elected.

Associate and honorary members are not eligible to hold office. The Section Secretary should consult with the Executive Vice-President to determine if the prospective nominees for Section Officers are eligible to hold office prior to their nomination.

SECTION STEERING COMMITTEE . . .

Each Section is encouraged to designate a Steering Committee which should consist of the current Chairman, Vice-Chairman, Secretary, the Chairman-Elect, if this office is utilized by the Section, and the three immediate past Chairmen.

The chief duties of the Section Steering Committee are as follows:

1. to aid in planning the work of the Section;
2. to evaluate papers read before the Section for possible publication.
3. to serve as a Section Nominating Committee when requested;
4. to fill vacancies that occur among Section Officers;
5. to perform such other duties, from time to time, as appear necessary.

SECTION OFFICERS' EXPENSES . . .

It is recognized that moderate expenses may be incurred by the Section Officers, primarily the Section Secretaries, in preparing the program for an annual meeting. Such necessary costs are to be itemized and submitted within thirty days after an annual meeting and will be reviewed for approval or disapproval by the Southern Medical Association's Committee on Finance within ninety days of receipt. Expense account forms are provided for Section Officers at the annual meeting, and if possible, should be completed and turned in before the conclusion of the annual meeting.

Section Secretaries: The Association will reimburse Section Secretaries (one per Section), for expenses incurred in attending the Annual Section Secretaries Conference. The Association will also pay roundtrip, first-class air transportation to the annual meeting, home city to convention city, for Section Secretaries, plus providing a \$60 per diem for a maximum of four days.

Postgraduate Course Director: The Association will reimburse a Postgraduate Course Director for expenses incurred in attending the annual meeting. Reimbursement will be as follows: first-class, roundtrip, air fare from home city to convention city; \$60 a day for expenses; \$200 honorarium.

Postgraduate Faculty Member: The Association will reimburse faculty members of postgraduate courses for expenses incurred in attending the annual meeting as follows: first-class air transportation, roundtrip, from home city to convention city; \$100 honorarium; \$60 a day for expenses.

DUTIES OF SECTION OFFICERS

DUTIES OF SECTION CHAIRMAN . . .

The CONSTITUTION AND BYLAWS of the Association states that "The Chairman shall preside at the meetings of the Section and shall perform such duties as may be provided by the rules of the Section. He shall be responsible for selecting and inviting the Section's official guest speaker and shall cooperate with the Secretary in arranging the Section program for an annual meeting." Following is a brief guide for the Section Chairman regarding duties (1) prior to an annual meeting; (2) during an annual meeting; (3) following an annual meeting.

PRIOR TO AN ANNUAL MEETING

1. Select and invite the Section's official Guest Speaker.

2. Notify Section Secretary as well as headquarters office of the name and address of the Section's Guest Speaker. (NOTE: The headquarters office will then make arrangement for the Guest Speaker's hotel accommodations.)

3. Secure a photograph, curriculum vitae, title, abstract, and length of presentation from Section's Guest Speaker and forward to the Section Secretary before Section Secretaries' Conference.

4. Make clear to Guest Speaker the Association's policy of reimbursing guest speakers (see page 162.)

5. Arrange for local physician in the city of the annual meeting to meet Guest Speaker at airport and see that he gets properly checked into hotel, etc.

6. Cooperate with Section Secretary in arranging program for Section.

7. Advise Section Secretary if Chairman's Address will be given at annual meeting in order that time may be provided in the Section's program for presentation. Also, title and abstract of presentation should be forwarded to Section Secretary before May 1.

8. Advise headquarters office by December 15 the name and address of physician residing in the city where the annual meeting will be held whom you wish to nominate as your local Section Host.

DURING AN ANNUAL MEETING

1. Preside at meetings of the Section and perform duties as usually pertain to office of Chairman or as may be provided by the rules of the Section.

2. Preside over "joint meetings" of two or more Sections when Chairman's respective Section is in charge of program.

3. Arrive at meeting room sufficiently far in advance of hour meeting is scheduled to perform certain duties, such as: (a) become familiar with the lectern and its lights and controls; (b) call the meeting to order promptly at the designated hour; (c) remind participants of the time limits for papers, instruct about stop and go signals; (d) conduct discussions, making certain all individuals identify themselves before discussing a paper, and be sure they confine themselves to the allotted amount of time. No one shall discuss a paper more than once; (e) see that all papers read before the Section are presented in the order listed in the official program.

4. Observe "Intermission—Visit Exhibits" breaks, urging members to visit both technical and scientific exhibits.

5. Mark an extra copy of the official program indicating your preference of papers for early publication in the JOURNAL. Turn marked program in to Section Secretary or at the SMA Business Office located proximal to the registration area.

6. Preside over Section's Business Session.

7. Relate any suggestions or criticisms to SMA staff.

FOLLOWING AN ANNUAL MEETING

1. Make sure Section's Guest Speaker is provided an expense account form and see that he is properly reimbursed.

2. Write necessary thank you letters.

3. Be sure Section Secretary forwards all necessary information and material to headquarters office (see page 161. Duties of Section Secretary) following an Annual Meeting.

DUTIES OF SECTION SECRETARY . . .

The Secretary shall perform all duties pertaining to his office and shall arrange the program with the cooperation of the Section Chairman in accordance with the rules and regulations as specified in the CONSTITUTION AND BYLAWS and those adopted by the Council. The Secretary is the official correspondent with reference to the program with the headquarters office and his work is continuous during the year. Following is a brief guide for the Section Secretary regarding duties (1) prior to an annual meeting; (2) during an annual meeting; (3) following an annual meeting.

PRIOR TO AN ANNUAL MEETING

1. Attend Section Secretaries Conference.
2. Formulate program for Section, secure speakers, discussants, and other participants as desired.
3. Send complete program for Section to headquarters office by May 1. Following information should be included: (a) complete names and addresses of all essayists (Secretaries are urged to be extremely careful to give the proper spelling of names and addresses of the participants. When there are incorrect initials and addresses or improper spelling of last names, a great deal of extra time, effort, and correspondence is necessary for proper identification); (b) complete titles of all papers; (c) complete names and addresses of each opening discussant; (d) a 25-50 word abstract of each paper; (e) list of all special equipment needed; (f) complete information regarding Section's social event; (g) a program outline including a thirty minute intermission in each half-day session (for the purpose of visiting the exhibits), and during one half-day session, the Section Business Meeting should be scheduled.
4. Be sure that Section Chairman selects and invites the official Guest Speaker and forwards his name, address, photograph, curriculum vitae, title, abstract, length of presentation, etc., in order that you might schedule the paper in the Section program.
5. Secretary should notify program participants of their acceptance as soon as possible and should urge them to make hotel reservations early and provide them with a hotel accommodations form.
6. Advise headquarters office by December 15 the name and address of physician residing in the city where the annual meeting will be held whom you wish to nominate as your local Section Host.

NOTE: Secretary of the Section on Urology—The Harry M. Spence Pyelogram Conference will be part of the Urology Program every year.

DURING AN ANNUAL MEETING

1. Check meeting room just prior to session for general readiness, projection equipment, and technical attendants.
2. Collect all manuscripts, illustrations and prepared discussions as presented and place in large manila envelope which will be provided in the meeting room at the beginning of each session. **TURN THIS ENVELOPE IN DAILY** at the SMA Business Office located proximal to the SMA registration area. Never give papers to anyone other than SMA staff members.
3. Make note of any authors who fail to read papers and forward those names to the incoming Section Officers, together with the cause of the delinquency, if known. A recommendation should be made to the new Section Officers whether the author should be penalized or not. Generally speaking, an author who fails to appear is not permitted to appear on the program again for two years.
4. Keep time on the speakers and operate the signals.
5. After all sessions are completed, mark an extra copy of the official program (enclosed in the manila envelope provided at beginning of each session) giving the following information: (a) place check mark in margin to indicate "presented by author"; (b) mark "hold" if doctor will hold manuscript for revision prior to publication; (c) indicate reason for failure of any essayist to appear; (d) rate papers (your personal preference) 1, 2, 3, etc., for excellence and early publication in the JOURNAL; (e) make notation if slides were utilized in presentation.
6. The Secretary should consult with the Executive Vice-President to determine if the prospective nominees for Section Officers are eligible to hold office prior to their nomination.
7. Secretary should make notes and keep proper records at the time of the Section Business Session.
8. Turn in to SMA Business Office the "Summary of Section Activities at Annual Meeting" form provided. This form should give: (a) names of nominating committeemen; (b) list of new officers elected; (c) copies of any resolutions adopted; (d) estimates of largest and smallest attendance at sessions; (e) any suggestions or criticisms.

FOLLOWING AN ANNUAL MEETING

1. Write necessary thank you letters.
2. Check to make sure all material and information was turned in to SMA Business Office or mailed to headquarters office.
3. Follow-up on any manuscripts not secured from authors at meeting.
4. Cooperate with Section Chairman to see that official Guest Speaker is properly reimbursed.

THE SECTION SOCIAL EVENT

Whether or not a Section has any sort of social event is left to the discretion of the individual Sections.

If a Section desires to have a luncheon, dinner, buffet, social hour, reception, or other form of social event, the Secretary is responsible for notifying the headquarters office. Public space in the hotels being utilized by the Association is always under blanket commitment, therefore, the location, time, and date of all Section social events must be cleared through the headquarters office if a Section wishes to utilize facilities of one of the hotels reserved by the Association. Otherwise, a Secretary may request the local Section Host to arrange for the social event.

Social events may not be scheduled in conflict with the President's Luncheon or the President's Night Dinner Dance.

Each Section shall be responsible for the selection of a menu, the printing of tickets, advance ticket sales, and giving the hotel a firm guarantee. Financial arrangements for all Section social events shall be the responsibility of the Sections. Publicity of Section social events may be included in the preliminary program if received at the headquarters office prior to May 1.

Section Secretaries or the local Section Host may arrange for a table and sign in the SMA registration area for the sale of tickets by notifying the headquarters office.

THE SECTION BUSINESS MEETING

The Chairman of the Section shall conduct the Business Meeting. The Business Meeting may be held during any half-day session the Section chooses, however, it must be properly scheduled and announced in the Official Program.

The method of electing officers is not specified in the BYLAWS. Each Section may follow whatever parliamentary procedure it desires. This should be decided by the Section Steering Committee. The BYLAWS do specify, however, that only active members may vote and hold office.

Other items of business to be conducted at the discretion of the Chairman include the following:

Reports, if any, from Section Officers

Changes, additions or deletions in the Section rules, if desired.

Resolutions for action by the Council. These should be forwarded to the headquarters office by January 1 in order that they may be presented to the Association's Executive Committee of the Council during its mid-winter meeting.

The Secretary of the Section should make the necessary record of the meeting. Such information, including the names and addresses of the newly elected Section Officers, should be transmitted to the Business Office at the conclusion of the meeting or as soon thereafter as possible. Acceptance forms are provided the Section Secretary at the time of the Business Session. These forms, when completed, indicate a person's willingness to serve as a Section Officer, and the Section Secretary should have the newly elected officers complete one of these forms and turn it in to the Business Office at the end of the session. Each elected Section Officer must complete one of these forms before his name can be published in the YEARBOOK.

THE OFFICIAL GUEST SPEAKER

Each Section may designate one official Guest Speaker for an annual meeting. The Chairman is responsible for selecting and inviting the official Guest Speaker and should exercise great care in choosing a person who would add greatly to the quality of the program.

The Association will reimburse each official Guest Speaker (one per Section) his first-class air travel expenses from the home city to the convention city, round trip; pay each official Guest Speaker \$60 per diem (maximum four days) for day or days actually on the

program, including travel time; give each official Guest Speaker an honorarium of \$200.

Guest Speakers may come from inside or outside the Association's territory. However, if speakers from abroad are invited, the Association will pay air travel expenses only from the border of the U.S.A.

IT IS THE DUTY OF THE CHAIRMAN TO MAKE CLEAR TO THE GUEST SPEAKER THESE FINANCIAL ARRANGEMENTS. The Chairman is also responsible for turning in the expense account of his Guest Speaker to the headquarters office.

INFORMATION FOR AUTHORS

Manuscripts are considered for publication in the SOUTHERN MEDICAL JOURNAL on any topic relevant to any of the medical disciplines, with the understanding that they, or their essential substance, have neither been published in nor submitted to another publication. Once accepted for publication, all articles are subject to editorial changes and a paper becomes the permanent property of the JOURNAL and may not be published elsewhere without permission from the JOURNAL. Articles are subject to copy editing and editorial revisions, but the author(s) remain responsible for the statements in the work including editorial changes. The author will receive a typescript for review.

Submit an original and two high quality copies (xerographic copies are preferred to carbon copies) including tables, glossy prints of illustrations, legends, and references. All copy must be typewritten, double-spaced on 22 x 28 cm (8 1/2 x 11 inches) heavy duty bond paper, with ample margins on both sides. In general, the body of the text (except Review Articles, Special Articles, and contributions to the Current Concepts series) should not exceed 3,000 words in length. Most single case reports can be presented in 1,200 words or less. A covering letter addressed to the Editor and accompanying the manuscript should identify one author as correspondent.

SOUTHERN MEDICAL JOURNAL invites submission of papers in any of the following categories: primary articles, case reports, clinical briefs, review articles, current concepts in diagnosis and treatment, special articles, Letters to the Editor, and book reviews. **Primary Articles** may describe clinical experience, original research and/or therapeutic trials, studies of disease etiology, pathology, epidemiology, diagnosis, and treatment. **Case Reports** describe patients with a newly identified disorder or an unusual syndrome. **Clinical Briefs** consist of a brief description of a new procedure or instrument. **Review Articles** are surveys of clinical or research experience of current interest, particularly in fields that have shown rapid development during recent years. **Current Concepts in Diagnosis and Therapy** describe new diagnostic and therapeutic concepts and approaches and evaluate their efficacy. **Comments from the Readers** are short letters (not exceeding 750 words) expressing opinions on articles published in the JOURNAL. **Other:** The JOURNAL will consider other types of articles for publication, including preliminary reports, brief research communications, articles concerning the history of medicine, special lectures, essays, and other material. The style of writing should conform to acceptable English usage and syntax. Medical jargon, slang, and abbreviated phrasing should be avoided and authors should strive for clarity and brevity.

Manuscripts reporting the results of experimental investigation involving human subjects should include appropriate information to the effect that informed consent was obtained.

Preparation of Manuscripts. Each manuscript should begin with a title page containing: (1) the title of the paper, which should be short and specific; (2) name(s) of author(s), including first names, degrees, and academic titles; (3) name of city where work was done; (4) departmental and institutional affiliation; and (5) name and address of author to whom reprint requests should be addressed. If the paper has been prepared for presentation at a meeting, this information also should be noted on the title page. An abstract (for primary articles) should appear on the second page. The third page should begin the main body of the text. Acknowledgments (if any) follow the text, then references, tables, and figure legends (all double-spaced). A summary should not be included for primary articles. However, a summary should follow Case Reports, Clinical Briefs, and certain articles in the Current Concepts and Review Article series.

Abstracts. Each primary article should be preceded by an abstract (150 word maximum). The abstract should be a factual (not descriptive) summary of the work done. An abstract should contain: (1) a brief statement orienting the reader to the purpose of the study within

the field; (2) the approach or study methods used; (3) the materials studied; (4) a short summary of the results and conclusions; and (5) if possible, the significance of the work. An abstract should be intelligible without reference to the text, so that it can be reprinted elsewhere and stand alone.

Abbreviations and Nomenclature. Abbreviations should be kept to a minimum, although long technical terms which the author finds necessary to use repeatedly in the text may be spelled out the first time, followed by the abbreviation in parentheses, and then used in the abbreviated form thereafter. For acceptable abbreviations, consult the *Stylebook/Editorial Manual of the AMA, Dorland's Medical Dictionary, and Stedman's Medical Dictionary*. Generic names of drugs, in general, should be used. Proprietary names may be included, but they should be capitalized, enclosed in parentheses, and follow the generic name. All measurements should be expressed in the metric system.

References. References should be typed double-spaced and numbered consecutively as they appear in the text, not alphabetically by authors' names. Accordingly, they should be listed in this numerical order in the reference list. References should be selected carefully and, in general, not exceed 20 in number. In certain instances, such as Review Articles, articles in the Current Concepts series and in other special articles, the number of references may exceed 20. The author is responsible for the accuracy of his references. When more than three authors' names appear in a reference, cite only the first three, followed by "et al." **Inclusive pages must be given for all references.** Unpublished data and "personal communications" should not be included in list of references, but may be footnoted in text. Below are examples of references to a journal article, a book, a chapter in an edited book, and a presentation at a meeting.

1. Jones JJ, Smith AW, Nelson EC, et al: Carcinoma of the parathyroid. *South Med J* 63:510-515, 1971

2. Avery ME: *The Lung and Its Disorders in the Newborn Infant*. Philadelphia, W. B. Saunders Co., 1964

3. Jones JJ, Smith AW, Wilson WW: Diseases of connective tissue. *Textbook of Pediatrics*. Edited by WE Nelson, VA Vaughn III, RJ McKay. Philadelphia, W. B. Saunders Co., 9th Ed, 1969, pp 995-1012

4. Jones JJ, Smith AW, Wilson WW: Thyroiditis in the adolescent. Presented at the forty-ninth annual meeting of the Endocrine Society, Chicago, June 20-22, 1967

Illustrations. Use only high quality illustrations that clarify and augment the text. Illustrations should be professionally drawn and photographed, if possible. High contrast, black and white glossy prints (not photocopies), preferably 12.5 x 18 cm (5 x 7 inches) in size, should be submitted in triplicate. Lettering and symbols should be clear and of even density. Each figure should have a label affixed to its back indicating the name of the author(s), the figure number, and the top of the figure. Prints should not be mounted, stapled or clipped. Photographs of patients must have identifying features masked or be accompanied by copies of signed permission for reproduction. If photomicrographs are submitted, the magnifications and stains used should be stated in the legends. Each illustration must be referred to in text. If more than six figures or more than 1.5 JOURNAL pages of illustrations are used, excess plates will be charged to the author at the cost to the JOURNAL. Illustrations in full color are published but in most cases the author is responsible for cost of publication.

Figure Legends. Figure legends should be typed consecutively, double-spaced, on a separate sheet. Any explanation of particular elements of a figure should appear in the legend and not in the text of the manuscript, so that the reader need not refer back and forth between the text and the figures.

Tables. Tables should be typed on separate sheets, numbered with Arabic numerals, have adequately descriptive captions, and be double-spaced. Explanatory material should appear as footnotes to the table,

and not in the table caption. **Data in the tables should not repeat information already given in the text or illustrations (and vice versa), and excessive tabular data are discouraged.** Tables should be numbered consecutively in the order in which they are mentioned in text. If a table must be continued, use a second sheet and repeat appropriate headings.

Permissions. Materials taken from other sources, including text, illustrations, or tables, must be accompanied by a written statement from both the author and publisher giving the JOURNAL permission to reproduce it.

Book Reviews. Books and monographs submitted for review should be mailed to the Editor. Acknowledgment will appear in the JOURNAL. Selection rights are reserved.

Reprints. Reprints of all papers published in the SOUTHERN MEDICAL JOURNAL are available at cost. Reprint order forms accompany the author's typescript before publication.

Manuscripts should be submitted in triplicate to:

Harris D. Riley, Jr., MD, Editor
Southern Medical Journal
Children's Memorial Hospital
University of Oklahoma Health Sciences Center
Post Office Box 26901
Oklahoma City, Oklahoma 73190 USA

For guidance in writing, consult *The Elements of Style* by W. Strunk, Jr., and E. B. White, the Macmillan Co., New York, 1959; *A Dictionary of Modern English Usage*, by H. W. Fowler, revised and edited by Sir Ernest Graves, 2nd Ed, Oxford University Press, New York and Oxford, 1966; *Stylebook/Editorial Manual of the AMA*, Chicago, 1971; *For Better Medical Communication*, Southern Medical Bulletin, Birmingham, Ala, December 1965.

SUGGESTIONS FOR THE PREPARATION OF SLIDES

The meetings of the Association will be held in rooms that can accommodate from 50 to 3,000 individuals. Our plans call for first-class projection equipment and for professional operators. Of course, quality of the image on the screen depends on the quality of the lantern slides that are projected. It is for this reason that we ask you to pay attention to the following instructions.

1. THE AMOUNT OF MATERIAL ON A SLIDE . . .

All of us have been present at talks where the speaker had so much tabular material on his slide that the projected image was too small and crowded to be seen beyond the first few rows in the audience. The effectiveness of any talk so illustrated is minimal.

If the following rules are followed, those in the rear of the room will be able to see your slides clearly:

- a. **Written material:** Figure 1 shows the maximum amount of material that should appear on a slide: 30 letters and spaces to a line and 10 lines. If only

capital letters are used, the material will be easier to read than if capital and lower case letters are used. If a Leroy or Wrico lettering guide is used, obey the same rule—30 letters and spaces to a line and 10 lines. Within the limits of print size normally used it does not matter how large or small is the print size of the original. As long as the original is reduced, or enlarged, so as to fill the **masked size** (see paragraph 2) of the lantern slide, the projected image will be satisfactory. If tables of data are used, leave 3 spaces between the columns if each column has 4 or more figures. If the columns have 1 to 3 figures, leave 2 spaces between the columns.

- b. **Photographs and drawings:** Project your slide. Stand at a distance from the screen equal to 6 times the width of the projected image. If you can see what the slide should show, so will the members of the Section in the last row of the audience. This will be the minimum size that you should use. If you err on size, be sure the image is too large rather than too small. Members with less than 20-20 vision will appreciate mistakes of this sort.

SOUTHERN MEDICAL ASSOCIATION

MANY SLIDES HAVE FAR TOO MUCH
ON THEM TO READ EASILY. AS A
GENERAL RULE HAVE NO MORE THAN
30 LETTERS AND SPACES ON EACH
LINE. USE CAPITAL LETTERS. USE
NO MORE THAN TEN LINES OF
MATERIAL ON A SLIDE. IF A TYPE-
WRITER IS USED, TEN DOUBLE SPACED
LINES CAN BE ACCOMMODATED.

Figure 1. The above is an example of the maximum amount of material that should appear on a slide. This should be reduced to a horizontal dimension of 3 inches on a 3¼ x 4 inch slide and to 35 mm on a 2 x 2 inch slide.

2. MAXIMUM IMAGE AREA FOR SLIDE (MASKED AREA) . . .

Most projectors will not project clearly the portion of the image at the edge of the slide. They are designed to project slides that have been masked properly. For a $3\frac{3}{4}$ x 4 inch lantern slide the maximum image area should be $2\frac{1}{4}$ x 3 inches. For a 2 x 2 inch slide (51 mm x 51 mm) the maximum used should be about $1\frac{5}{16}$ x $1\frac{5}{16}$ inches (34 mm x 34 mm). It is preferable that the vertical dimension be less. If possible, use the image size for a 2 x 2 inch mounted kodachrome transparency, which is 23 x 34 mm. The projectionist will place the projector in the auditorium so that the projected image of properly **masked** slides just fills the screen. Unmasked slides will, of course, more than fill the screen and material on the sides will not appear.

3. MARKING AND NUMBERING SLIDES . . .

Hold the lantern slide in the position that you wish the projected image to appear on the screen. Place a marker, such as a round **white** label at the lower left. The projectionist will hold the slide with his right thumb on the marker, and the back of his hand up, when he fits the slide in the projector. Refer to Figure 2.

Please number your slides in the order they are to be shown. Use india or black ink and make the numbers large. A large number on a white label will help the projectionist read the number in the darkened room. The number should be placed upside-down in the lower left-hand corner. Then, when the slide is reversed to be put in the projector the number will be properly oriented to be read.

4. SIZES OF SLIDES . . .

We equip all meeting rooms with Carousel projectors with universal trays for 2 x 2 inch slides. Projectors for $3\frac{3}{4}$ x 4 inch lantern slides are no longer placed in meeting rooms, and should be requested when needed. (*outside dimensions)

It will aid greatly if all of your slides are the same size.

5. MOUNTING LANTERN SLIDES . . .

The projectors used will be powerful, 500 watts or more. For this reason it is important that the lantern slides be mounted in **glass**. This will prevent "buckling," which otherwise would occur.

6. MATERIAL TO BE COPIED . . .

The originals for graphs, text material, tables, and diagrams are probably best done in india ink. However, entirely satisfactory typewritten text material and tables can be prepared as follows: Clean the type thoroughly. Remove the ribbon. Place one piece of new carbon paper against a sheet of white paper. Back the white paper with another piece of carbon paper. Type directly onto the carbon top. The white sheet will then have a carbon impression on the front and on the back. A high-contrast lantern slide can be made from it. (If you have available a typewriter with a carbon ribbon, excellent copy can be prepared.) **Be sure to keep within the size limits given in 1. a.**

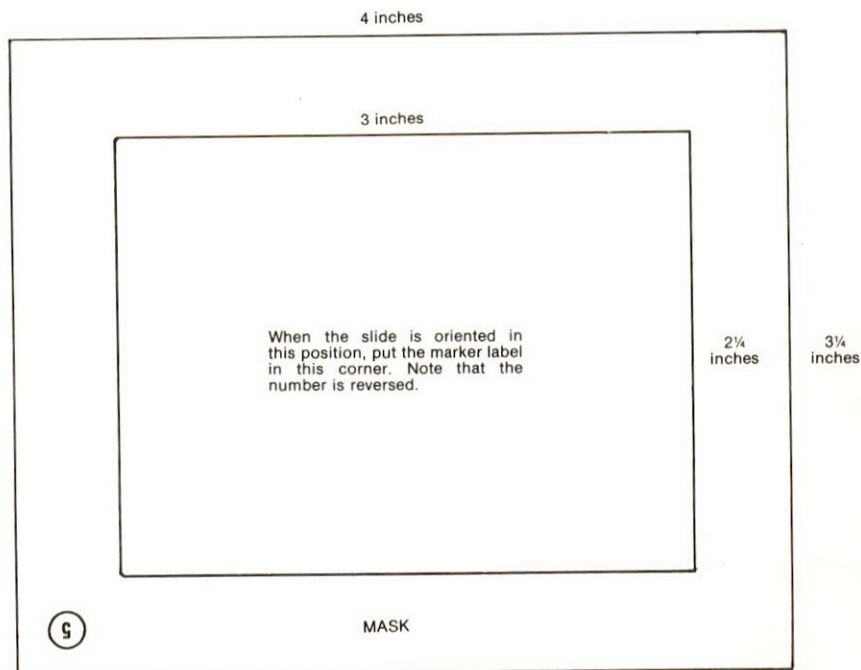


Figure 2. A properly masked, oriented, and numbered $3\frac{3}{4}$ x 4 inch slide

PLACES OF MEETINGS AND PRESIDENTS

- 1906, Chattanooga, Tenn., organization meeting.
- 1907, Birmingham, Ala., *H. H. Martin, Savannah, Ga.
- 1908, Atlanta, Ga., *B. L. Wyman, Birmingham, Ala.
- 1909, New Orleans, La., *G. C. Savage, Nashville, Tenn.
- 1910, Nashville, Tenn., *W. W. Crawford, Hattiesburg, Miss.
- 1911, Hattiesburg, Miss., *Isadore Dyer, New Orleans, La.
- 1912, Jacksonville, Fla., *James M. Jackson, Miami, Fla.
- 1913, Lexington, Ky., *Frank A. Jones, Memphis, Tenn.
- 1914, Richmond, Va., *Stuart McGuire, Richmond, Va.
- 1915, Dallas, Texas, *Oscar Dowling, New Orleans, La.
- 1916, Atlanta, Ga., *Robert Wilson, Charleston, S.C.
- 1917, Memphis, Tenn., *Duncan Eve, Sr., Nashville, Tenn.
- 1918, Influenza pandemic, no meeting that year.
- 1919, Asheville, N. C., *Lewellys F. Barker, Baltimore, Md.
- 1920, Louisville, Ky., *E. H. Cary, Dallas, Texas.
- 1921, Hot Springs, National Park, Ark., *Jere L. Crook, Jackson, Tenn.
- 1922, Chattanooga, Tenn., *Seale Harris, Birmingham, Ala.
- 1923, Washington, D. C., *W. S. Leathers, Jackson, Miss.
- 1924, New Orleans, La., *Charles L. Minor, Asheville, N. C.
- 1925, Dallas, Texas, *Stewart R. Roberts, Atlanta, Ga.
- 1926, Atlanta, Ga., *C. C. Bass, New Orleans, La.
- 1927, Memphis, Tenn., *J. Shelton Horsley, Richmond, Va.
- 1928, Asheville, N. C., *William R. Bathurst, Little Rock, Ark.
- 1929, Miami, Fla., *T. W. Moore, Huntington, W. Va.
- 1930, Louisville, Ky., *Hugh S. Cumming, Washington, D. C.
- 1931, New Orleans, La., *Felix J. Underwood, Jackson, Miss.
- 1932, Birmingham, Ala., *Lewis J. Moorman, Oklahoma City, Okla.
- 1933, Richmond, Va., *Irvin Abell, Louisville, Ky.
- 1934, San Antonio, Texas, *Hugh Leslie Moore, Dallas, Texas.
- 1935, St. Louis, Mo., *H. Marshall Taylor, Jacksonville, Fla.
- 1936, Baltimore, Md., *Fred M. Hodges, Richmond, Va.
- 1937, New Orleans, La., *Frank K. Boland, Atlanta, Ga.
- 1938, Oklahoma City, Okla., *J. W. Jervey, Greenville, S. C.
- 1939, Memphis, Tenn., *Walter E. Vest, Huntington, W. Va.
- 1940, Louisville, Ky., *Arthur T. McCormack, Louisville, Ky.
- 1941, St. Louis, Mo., *Paul H. Ringer, Asheville, N. C.
- 1942, Richmond, Va., *M. Pinson Neal, Sr., Columbia, Mo.
- 1943, Cincinnati, Ohio, *Harvey F. Garrison, Jackson, Miss.
- 1944, *W. T. Wootton, Hot Springs National Park, Ark.
- 1944, St. Louis, Mo., *James A. Ryan, Covington, Ky.
- 1945, *Edgar G. Ballenger, Atlanta, Ga.
- 1945, Cincinnati, Ohio, *E. Vernon Mastin, St. Louis, Mo.
- 1946, Miami, Fla., *M. Y. Dabney, Birmingham, Ala.
- 1947, Baltimore, Md., *Elmer L. Henderson, Louisville, Ky.
- 1948, Miami, Fla., *Lucien A. LeDoux, New Orleans, La.
- 1949, Cincinnati, Ohio, *Oscar B. Hunter, Sr., Washington, D. C.
- 1950, St. Louis, Mo., *Hamilton W. McKay, Charlotte, N. C.
- 1951, Dallas, Texas, *Curtice Rosser, Dallas, Texas.
- 1952, Miami, Fla., *R. J. Wilkinson, Huntington, W. Va.
- 1953, Atlanta, Ga., *Walter C. Jones, Miami, Fla.
- 1954, St. Louis, Mo., *Alphonse McMahon, St. Louis, Mo.
- 1955, Houston, Texas, *R. L. Sanders, Memphis, Tenn.
- 1956, Washington, D. C., *W. Raymond McKenzie, Baltimore, Md.
- 1957, Miami Beach, Fla., *J. P. Culpepper, Jr., Hattiesburg, Miss.
- 1958, New Orleans, La., *W. Kelly West, Oklahoma City, Okla.
- 1959, Atlanta, Ga., *Milford O. Rouse, Dallas, Texas.
- 1960, St. Louis, Mo., *Edwin Hugh Lawson, New Orleans, La.
- 1961, Dallas, Texas, *Lee F. Turlington, Birmingham, Ala.
- 1962, Miami Beach, Fla., *A. Clayton McCarty, Louisville, Ky.
- 1963, New Orleans, La., *Daniel L. Sexton, St. Louis, Mo.
- 1964, Memphis, Tenn., *Robert D. Moreton, Houston, Texas.
- 1965, Houston, Texas, *R. H. Kampmeier, Nashville, Tenn.
- 1966, Washington, D. C., *J. Garber Galbraith, Birmingham, Ala.
- 1967, Miami Beach, Fla., *Guy Thompson Vise, Sr., Meridian, Miss.
- 1968, New Orleans, La., *Oscar B. Hunter, Jr., Washington, D. C.
- 1969, Atlanta, Ga., *Donald F. Marion, Miami, Fla.
- 1970, Dallas, Texas, *J. Leonard Goldner, Durham, N. C.
- 1971, Miami Beach, Fla., *Albert C. Esposito, Huntington, W. Va.
- 1972, New Orleans, La., *J. Hoyle Carlock, Ardmore, Okla.
- 1973, San Antonio, Texas, *Joe T. Nelson, Weatherford, Texas.
- 1974, Atlanta, Ga., *George J. Carroll, Suffolk, Va.
- 1975, Miami Beach, Fla., *Andrew M. Moore, Lexington, Ky.
- 1976, New Orleans, La., *G. Gordon McHardy, New Orleans, La.

*Deceased

**Deceased in office

FUTURE MEETINGS OF SOUTHERN MEDICAL ASSOCIATION

November 6-9, 1977	Dallas, Texas
November 12-15, 1978	Atlanta, Ga.
November 4-7, 1979	Las Vegas, Nev.
November 16-19, 1980	San Antonio, Texas
November 15-18, 1981	New Orleans, La.
November 14-17, 1982	Atlanta, Ga.
October 31-November 3, 1983	Kansas City, Mo.

