

Medical GREEN SHEET

NEWS OF SOCIO-ECONOMIC MEDICINE

“Physician Assistant” Role Studied at Conference

Prospects for increased use of the “physician assistant” in Wisconsin were explored at a special conference called by the State Medical Society on February 11.

Held at the State Society headquarters in Madison, the meeting brought together some 65 representatives of the medical profession, hospitals, nursing, the Medical Examining Board, legislators, attorneys, and others affiliated with governmental agencies.

The conference was proposed by the State Medical Society in its “Position Paper on Health Manpower” issued last November. The Position Paper called for evaluation of the need, training, and mechanics for identification and discipline of the growing numbers of support personnel who have come to be identified as assistants to the physician, physician assistants or Medex.

Proponents suggest that wider use of these people in patient treatment can do much to ease the health manpower shortage.

At least four conclusions came from the conference:

1. There is immediacy to the subject of physician assistants. Although physicians have long used support personnel in the treatment of the sick, there is public recognition of the need for even greater use of qualified aides in health care.
2. Another meeting is required promptly to discuss specific proposals for the use of physician assistants. (The State Medical Society has since announced that the meeting will

be held at its headquarters on March 11).

3. Clarification of the delegatory authority of the physician is needed.
4. Any legislative approach to the subject should be frankly experimental and highly flexible.

The conference raised many questions: What should be the qualifications of physician assistants? What limitations can practically be imposed on the functions of the assistant and how? Should the assistant be an employee, and if so, whose?

How best can the physician be afforded protection for the delega-

tion of certain treatment tasks? Should the assistant be granted statutory recognition, and if so, by certification or by licensure?

Lead-off speaker at the conference was Thomas E. Henney, MD, Portage, member of the State Medical Examining Board. He reported that there may be nearly 100 different types of training courses for physicians in the nation today. Five states have broadened their laws to permit physicians the use of competent assistants of various types, eight more states have the matter under consideration.

However, “at the same time, the physicians’ assistant in most states

continued on page 27

State MEDIHC Program Started

Wisconsin is now participating in the nationwide program called Operation MEDIHC—Military Experience Directed Into Health Careers—a project sponsored jointly by the Department of Health, Education, and Welfare and the Department of Defense.

The two-fold program is designed to help alleviate health manpower shortages and to help returning Armed Services veterans with military medical training to enter civilian health careers.

In Wisconsin the MEDIHC program is being administered by the Wisconsin Health Council, Inc., which already supports a Health Careers Program.

The MEDIHC coordinator for Wisconsin is Mr. Frank M. Drew, 31, of Barneveld who formerly was associated with the Office of Clinical

Experience for Teachers at the University of Wisconsin.

The program is being financed, in part, by tax-supported funds. In December Gov. Warren P. Knowles announced that a \$10,000 grant would be released by the Department of Industry, Labor, and Human Relations to the WHC.

The MEDIHC program will operate from the State Medical Society headquarters in Madison. SMS is a member of the WHC.

Mr. Drew will be working with Mr. Howard Brower, an associate secretary of the State Medical Society of Wisconsin and the executive secretary of the Wisconsin Health Council, allowing for close coordination between the governmental and voluntary agencies who have legiti-

continued on page 26

"Cancer Shell" Exhibit Proposed

The State Medical Society's Charitable, Educational and Scientific Foundation has proposed development of a unique exhibit that would dramatize and personalize the ways to prevent and cure cancer.

Called the "Cancer Shell," this display would spend most of its summers at the Museum of Medical Progress and Stovall Hall of Health in Prairie du Chien. It would be viewed by upwards of 40,000 persons each season.

In late 1970 the Wisconsin Division of the American Cancer So-

ciety contributed \$1,000 to the CES Foundation to support the initial development.

The Beta Sigma Phi sorority chapters in Wisconsin have adopted the Cancer Shell as a major project.

A total of \$25,000 is needed to develop and present this unique educational program.

The sorority hopes that its goal can be reached in time for a grand opening at the Museum on April 15.

Contributions are being accepted in a special Beta Sigma Phi Cancer Shell fund by the CES Foundation.

Designed to appeal to all ages, but with an emphasis toward the younger adult generation, the Cancer Shell would be about 20 feet across and 10 feet high. It would accommodate as many as 25 persons at a time, yet be equally effective with only one.

Through the use of sound, light, art forms and sculptured shapes, the Cancer Shell's story would be short, very "alive," a little bit of a shocker and, above all, professionally and powerfully done.

During the off-season times of the year, the Cancer Shell would be displayed at public places such as fairs, schools, museums, and the like in major Wisconsin cities.

PHYSICIAN ASSISTANT

continued from page 25

is wandering in a kind of legal limbo, his status unclear, and his right to perform duties for which he is trained, uncertain," according to Dr. Henney.

Speaking to the physicians, Dr. Henney said a major effort is required to clarify the dilemma presented in the fact that "only a licensed physician may engage in the practice of medicine."

"Which medical acts and functions may be delegated to an unlicensed person, and how close must the supervision be," Dr. Henney queried.

Ben R. Lawton, MD, Marshfield, chairman of the State Medical Society's Commission on Scientific Medicine and a surgeon who has trained and uses a non-medical surgical assistant, described his views of the duties and use of the physician assistant.

He sees the immediate future of the assistant as a "one-to-one, close and direct relationship to the physician."

Otto A. Mortensen, MD, Madison, chairman of the Society's Special Committee on the Shortage of Physicians, reported on training programs for physician assistants. Additional data needs to be gathered on the specific tasks that various types of assistants can usefully perform before realistic educational efforts can be developed, he said.

W. T. Russell, MD, Sun Prairie, chairman of the Society's Commission on Public Policy, discussed professional and legal issues along with Society Attorneys Robert B. Murphy, Madison, and John A. Kluwin, Milwaukee.

Confusion Cleared on UW's Two Drug Info Centers

The existence on the University of Wisconsin Madison Campus of two organizations that are both known as drug information centers has resulted in some confusion.

One of the centers is an information source for students on the Madison campus while the other functions as a statewide source for health-care professionals and the public.

In 1970 the UW Division of Student Affairs opened a Drug Information Center for the purpose of helping students become better informed about drugs.

This "Drug Information Center" is not a professional treatment or counseling center, but rather an information gathering place for students with questions about drugs.

Mrs. Frances Hurst is director. It is located at 420 North Lake Street, Madison 53706; telephone (608) 263-1737.

Since 1964 the UW Hospitals' Department of Pharmacy has operated the statewide Drug Information-Poison Control Center which functions as a statewide source of up-to-date and difficult to obtain information on drugs and their applications to patient care. Information on toxicity of poisons and drugs along with antidotes and recommended treatment of poison ingestion is a prime function of the center.

The University Hospitals' Drug Information-Poison Control Center is available 24 hours a day, 7 days a week to answer questions from physicians, pharmacists, nurses, and other health-care professionals. It can be reached at (608) 262-1315.

National Health Care Spending Reached \$67.2 Billion in 1970

National spending for health care (public and private) increased from \$59.9 billion in 1969 to \$67.2 billion in 1970, according to the latest report from the Department of Health, Education, and Welfare.

In fiscal year 1970, the average health expenditure for each person in the United States was \$324, up \$33 from the previous year.

Other significant facts of the HEW Research and Statistics Note No. 25, 1970 were:

... Medicare spending in fiscal 1970 totalled \$7.1 billion; spending for Medicaid is estimated at \$4.9 billion.

... Three-fifths of all personal health care expenditures were met by third parties such as government, private health insurance, philanthropy, and industry. Government paid 58 percent of this amount.