

January 7, 1966

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Dr. Emory W. Morris
Kellogg Foundation
Battle Creek, Michigan

Dear Dr. Morris:

The Department of Medicine of the Duke University Medical Center is developing a program designed to bring career-oriented males into the health field to help fill the gap between the physician and the nurse. I would like to describe briefly the Physician's Assistant training program to determine if it is one in which the Kellogg Foundation might be interested in participating. If so, we have a proposal describing the program in detail which we will gladly send you.

Basically, the program will offer a two-year (24 months) training period for qualified high-school graduates and individuals with medical experience in the military to develop skills vital to the care of the sick and which are not adequately met today due to the insufficient number of physicians and the even more critical shortage of nurses.

The graduates of this program will not be in conflict with any existing jobs, but they will essentially strengthen today's health professions, as well as the medical demands of tomorrow. At the same time, the program will create new jobs and provide rewarding careers for able young men who might not otherwise be able to enter the professional field.

The trainee will spend a major portion of his first year in didactic sessions. The class material will include the following: anatomy, physiology, pathophysiology, metabolism, physical diagnosis, electronics, nursing aids, and psychosomatic medicine. The second year will be spent in laboratories with high doctor-patient ratios. The trainee will work closely with the physician and the patients, becoming responsible for much of the specialized care needed by these patients during their hospitalization. The areas capable of performing the training functions outlined are the cardiovascular laboratory, recovery room, renal laboratory, allergy laboratory, clinical research unit, hyperbaric chamber, and the cancer chemotherapy laboratory. The trainee will also spend time as an assistant to a group of practicing physicians.

At the end of two years the physician's assistant will have developed such skills as intravenous therapy, cardiac resuscitation, respiratory care, bladder catheterization, lumbar puncture, gastric and intestinal intubation, immobilization of broken bones, and administration

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of medication. He will be able to identify cardiac failure, shock and acute blood loss. He will be prepared to perform peritoneal dialysis, record electrocardiograms, and do emergency tracheotomy. This will be an open-ended program. The Duke Medical Center will train the assistant in any area desired by the responsible physician. In summary, he will be a highly skilled individual, capable of extending the arms and brains of the physician so that the physician may see more patients.

We recognize that the young men selected for this program face financial burdens which prevent their attending college. We therefore will provide a stipend of \$2,400 the first year and \$3,000 the second year for the trainee. Duke University will absorb the tuition cost.

Many of the funds to underwrite this program will be provided by the Duke Medical Center. Remaining funds needed during the first three years will total approximately \$329,768. Of this total, \$76,000 will be needed the first year; \$126,000 the second and third years.

The first-year budget for training twelve physician's assistants can be broken down as follows: \$28,800 for stipends for the trainees; \$28,000 for faculty and administrative staff; and \$19,200 for supplies, equipment, and overhead costs.

We are presently receiving funds from the National Institutes of Health to sponsor a pilot program to train physician's assistants to care for patients in the hyperbaric area. The project has the full support and cooperation of the University and the Medical Center. We feel this program offers far-reaching rewards to mankind through the health services and provides satisfying career opportunities for deserving young men.

We do not have a model program of complete medical care suitable for exportation to less well developed countries. The demonstration in our society of a new pattern of medical care in which many of the traditional functions of the physician are carried out by trained assistants may open the way for a more realistic approach to medical care in other countries.

Sincerely,

Eugene A. Stead, Jr., M.D.
Professor of Medicine and
Chairman, Department of
Medicine

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January 12, 1966

PHONE AREA CODE 616
NO. 965-1221

Eugene A. Stead, Jr., M.D., Chairman
Department of Medicine
Duke University Medical Center
Durham, North Carolina 27706

Dear Dr. Stead:

Your letter addressed to Dr. Morris has been referred to me. You certainly have a very unique program in mind in training assistants for physicians. It seems to us that this kind of a program could have profound implications for the practice of medicine if adopted nationally. I am not sure at this stage whether or not the Foundation would be interested in participating. However, we would like very much to read the complete proposal describing the program.

In reading your letter we wondered to what extent the program at Duke might serve as a pilot project for other medical schools in the country. It would seem that if this program is successful the curriculum content, teaching methods, etc., would have value for national utilization.

One of the questions that comes up is that of utilizing these people, especially since they will have developed skills ordinarily considered to be limited to regular physicians. I am thinking of the legal implications of such an individual doing a lumbar puncture even if supervised by a physician. I would think that the law would have to recognize these individuals as competent and licensed to do the procedures you have outlined. At one time a plan to train dental assistants suffered a severe setback due to resistance by the profession. I am wondering if the medical profession would be willing to approve training for this type of individual.

I wondered if this program might not be too advanced for high school graduates and if it might not be instead of a two-year program one of four years; two years of which could be taken in a community or junior college. This might provide a little more mature individual with a training as well as one with a better background.

I wondered what you had in mind as to the ultimate financial support of this kind of a project. In other words, what would happen when Foundation support terminated?

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Usually in training sub-professional people the question of job advancement comes up, especially in terms of college credit for the work taken. I am sure you have given thought to this.

In any case I think the idea is a very good one, and we will look forward to reading the prospectus.

Sincerely yours,



M. R. Kinde, M.D.

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April 27, 1966

Dr. Matthew Kinde
Kellogg Foundation
Battle Creek, Michigan

Dear Dr. Kinde:

I am writing to review the points raised by you in discussion.

1. The program of training physician assistants is now operated in the Duke Medical Center by a committee appointed by the Dean. This committee determines the curriculum, the faculty and the student body. It will issue a certificate after the satisfactory completion of the curriculum. The committee members are: Drs. James Sidbury, Andrew G. Wallace, William DeMaria, James C. Glenn, Kenneth D. Hall, Frederick Hine, Virginia Stone (Ph.D., Nursing), Dean Ann Jacobansky (Nursing), Mr. Ralph Jennings, Mr. James C. Mau, and myself.

2. This is not an effort to meet the needs of the Duke Medical Center. The prime motivation to begin this venture came from watching our own residents in practice. We cannot continue their education unless we create time for them. This means some change in the practice of medicine.

3. We are producing lecture and textbook material. We are training faculty. This has been at a slow pace not from lack of good will but from lack of funds. Our intent is to devise a core curriculum which can serve as the first-year work for a number of paramedical programs.

4. We do intend to carry this program to every county medical society in the state. We need to have a one-sentence modification of the medical practice act of North Carolina. Again, we need funds for support of this effort.

Please call me if I have not covered any area in enough detail.

Sincerely,

Eugene A. Stead, Jr., M.D.

Enclosure