



First Three Physician's Assistants

Complete Program at Duke University

▲ THEY'RE NOT JUNIOR DOCTORS and they're not senior nurses. Their exact roles must await the experience of the future.

But there's no doubt in the minds of the first three graduates of Duke University's Physician's Assistant Program that they and others who are to follow them will fill vital roles in the delivery of medical care in the years to come.

The three graduates—all former Navy hospital corpsmen—are the first products of a two-year-old curriculum that is designed to help fill the gap between medical care supply and demand.

Following them are 9 other students now in their second year of study and 12 who started the fulltime course last fall. An additional eight students are enrolled in courses part-time while they work at Duke Hospital.

In their 24 months of training, the students spend more than 600 hours in classroom and laboratory work that includes anatomy and physiology, metabolism, surgery, nursing arts, pharmacology, and psychosomatic medicine. This preclinical curriculum is aimed at acquainting the students with biological systems, the relationships between bodily structures and their functions, and effects of diseases.

In the clinical phase of their training, they spend four weeks each in the emergency room and the electronics instrument shop, where they become acquainted with diagnostic and treatment equipment. Then, they follow with two weeks in pulmonary function and six weeks in inhalation therapy, where they study disorders associated with the respiratory system.

Also they are expected to elect up to five additional courses of study in other clinical areas that may include patient admitting procedures, working with physicians in

private practice, rotation duty at another hospital, and study in specialized areas such as the cardiovascular lab, endocrinology, the hyperbaric unit, neurology, and others.

"It's not all flashing scalpels and white coats. You can pack a lot of medicine into 10 months."

That was the observation of one of the graduates, Richard J. Scheele, referring to the 10 months it takes to complete the core classroom and lab curriculum.

Scheele, 28, is a native of Mount Prospect, a suburb of Chicago. He had worked as a drug company salesman, spent two years in college, and worked as an operating room technician in the Navy prior to entering the Duke program.

He shares, with his fellow graduates as well as the others currently enrolled, a military medical background, which Duke feels is solid ground to start building.

In the Navy, Scheele said, "the orientation was almost entirely technical and the job involved more nursing-type procedures than anything else. It introduced you to sick people."

At Duke, he said, "the approach is more professionally oriented." The trainees are a part of the Department of Medicine and they work directly with the doctors, learning to apply clinically what they study in the classroom and lab.

At the end of his training, Scheele elected to spend an additional eight weeks in endocrinology—study of glands such as the adrenal, thyroid, and pancreas and the effects of their secretions of the physiological processes. He has been working with Dr. Harold E. Lebovitz, director of Duke's division of endocrinology.

Later Scheele worked with three general practitioners who operate a clinic and 38-bed hospital in Plymouth, a community of 8,000 near the eastern shore of North Carolina.

Scheele's rotation at Plymouth is part of Duke's continuing program to aid physicians and their patients by extending the services of the Duke medical complex to outlying areas.

Victor Germino, 27, Durham, spent a year as a deck hand on an ocean freighter between his second year at the University of North Carolina in Chapel Hill and his enrollment in the Physician's Assistant Program.

Before that he spent four years in the Navy, most of the time working in the neuropsychiatry division of the Naval Medical Center in Bethesda, Md.

"This is very extensive paramedical training," Germino said of the Duke program. "I think it prepares us for a multitude of jobs and qualifies us to work in almost any department in professional and technical positions."

FAMILY PRACTICE PROGRAM

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Germino believes the need for physician's assistants is evident because of the mounting demand on the doctor's time, much of which is taken up with nondecision-type procedures.

"Since the need is demonstrated here, at a large medical center," Germino said, "you can see what the need might be in rural areas where facilities and personnel are so limited."

Germino spoke from experience, because he worked as part of his elective clinical training with Dr. Archie Eagles, a cardiologist and internist at Ahoskie, a community in eastern North Carolina.

Germino said he felt this type of work—close association with a doctor or group of doctors in private practice—is one of the more important and needed roles to be filled by physician's assistants.

He is now working, primarily in pulmonary diseases, with Dr. Kaye H. Kilburn, chief of medical service at the VA Hospital in Durham.

Kenneth Ferrell, 23, also of Durham, helped man a small Navy hospital in Iceland and served in the "siekbay" of an amphibious ship out of Little Creek, Va, during his tour of duty as a corpsman.

He was the first applicant for the program and he is the only one of the three graduates who has had no college work. A high school diploma is the only academic requirement for applicants.

"I expected it to be only an advanced hospital corps school," Ferrell said, "but it went much deeper than that, and it has turned out to be even more than expected by the people who started it.

"I thought I knew a little bit when I got out of the Navy, but when I got here I found out just how little I did know," Ferrell admitted.

Ferrell said some confusion exists about the status of physician's assistants, because they are far from being doctors and their training also is different from that of nurses.

He uses an analogy to explain it. "I tell people," Ferrell said, "that we're the same to a doctor as a practical nurse is to a registered nurse."

Two months of Ferrell's clinical training was spent at Watts Hospital in Durham and he also served a rotation period working with the medical staff at North Carolina Central Prison in Raleigh.

Ferrell currently is working with Dr. Herbert O. Sieker at Duke in the area of allergies and chest diseases.

The program, supported in part by a grant from the National Institutes of Health, has not gone wanting for applicants.

Jim Mau, director of Duke's Health Career Programs and Administrative director of the physician's assistant project, said that more than 1,500 applications have been received since the program was first announced two years ago.

For this year's class of 12, he said applications were narrowed down to 200 and then divided, 50 each, among members of a four-man survey committee. Of those 200, 35 were invited to Duke for interviewing and testing, and the 12 were selected from them. All present students are men, but women are not excluded from applying.

Considerable interest has been expressed from the medical profession, with physicians, hospitals, and clinics contacting Duke about the availability of the trainees for work with them.

Inquiries have been received from as far away as Nigeria. The program grew from an idea of Dr. Eugene A. Stead, Sr., former chairman of Duke's department of medicine. Dr. E. Harvey Estes, chairman of the department of community health sciences, is program director, and Dr. Franklin P. Dalton, instructor in medicine, is medical director. ▲

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