



# National Association of Physicians' Assistants

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June 14, 1972

## MEMORANDUM

RE: Proposal Seeking Alliance Between . . . . .

THE NATIONAL ASSOCIATION OF PHYSICIANS' ASSISTANTS

and the

AMERICAN ACADEMY OF PHYSICIANS' ASSOCIATES, Inc.

Because the NATIONAL ASSOCIATION OF PHYSICIANS' ASSISTANTS and the AMERICAN ACADEMY OF PHYSICIANS' ASSOCIATES are the two largest professional, fraternal and representative organizations pertinent to the interests, aims and objectives of the physicians assistant and for the overall concept of PA's. As a result of these two professional associations having significant numbers of their respective memberships presently employed in the health-care delivery system or the medical education process, it is quite natural that they come together in some form of alliance.

A large number of smaller organizations, purportedly representing physician's assistants or physician's associates, are springing up across the nation. Some of these groups are those we believe to be wholly irrelevant to the general concept of the physicians assistant; still others were formed, not in the best interests of the physicians assistant, but rather put together for the selfish interests of the founders. Others - perhaps, may be creditable. Nevertheless, and despite the sincerity of their aims, purposes and objectives, these fractionated splinter organizations - with many diverse programs and interests, will only wreak havoc upon the employed physician's assistant for many years to come. Disastrous precedent will have already been well established and

firmly set in the minds of the medical profession. It would therefore take many years to undo the damage and to restructure the overall nomenclature of the physician's assistant concept. Ultimately, out of necessity, there must be one major professional association which will serve as the professional, fraternal and representative organization for the physicians assistant. It is more than likely a well established 'protective' cover will swallow-up the sincere organizations - on the larger's terms, as opposed to the needs, interests and best benefit of the physicians assistants. It will simply be much too late to alter the disastrous situation which will prove detrimental to us all.

One factor is strikingly clear in each of the organizations springing up throughout the country; the founders of each most assuredly recognize the potential of gaining control - tight-fisted, iron-handed control, over the presently small organizations. One day soon PA's will be a well functioning force in the medical profession. These people recognize this salient fact. And they have made attempts to take over a share of it.

We, as physician's assistants, must be allowed to guide our own destiny. We shall, too, if we concentrate our abilities for the protection of all PAs.

The AMERICAN ASSOCIATION OF PHYSICIANS' ASSISTANTS, a corporation formed under the laws of New York State is already in existence. This association purports to represent the physicians assistant, but the record is increasingly clear that they do not represent the PA. This group did not openly seek the advice and counsel of the AAPA or NAPA - the two largest professional associations in this respect. On the contrary, they actually circumvented such informative circles. The promotional literature relevant to this organization was, in substance, plagiarized from the exhaustive research material compiled by John Braun, now President of the American Academy of Physicians' Associates. Further, intimation of approval by many of those training schools for the PA seemed evident in such promotional data, despite the fact of NAPA's parent relationship with training the Marine Physicians Assistant and the AAPA's close association with Duke University. These associations were not even consulted, save furtively. We believe this organization is utilizing the term 'physician's assistant' quite

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literally, whereby even the hospital orderly, dietician, etc. can claim to be a physician's 'assistant'.

The MIDWEST ASSOCIATION OF PHYSICIANS' ASSISTANTS, the AMERICAN COLLEGE OF PHYSICIANS' ASSISTANTS, etc. are still others that have been formed. And there are perhaps other small fractionated splinter groups arising at this very moment.

The credibility of the SOA program which brought about NAPA is without question of doubt. Their involvement began long ago - in 1962 - when efforts to provide competent medical treatment and care to merchant mariners was commenced. Ultimately, the Pharmacist Mates Training Program was started. Later the name was altered to reflect the reality of today's situation to Marine Physicians Assistant. The graduates of this U.S. Public Health facility are actively employed as physicians assistants on board vessels of our merchant marine fleet. Surely the credibility - the authenticity of AAPA cannot be seriously questioned. Their record at Duke is now legend as regards the PA programs. NAPA and AAPA began their respective professional, fraternal and representative associations at approximately the same time. Of course, each employed different methods to achieve the same end, and each now have significant membership ranks - the total of which comprises the majority of actively employed physicians assistants. Both associations have aims, purposes and objectives closely akin to the other. No other major association in this particular regard exists. Only the small, ineffective, fractionated splinter groups that threaten the viability of NAPA and AAPA in the long run.

It cannot be doubted that the physicians assistant is here to stay as a permanent member of the nation's health-care delivery team. The numbers will magnify over the next few years - and sooner or later the physicians assistants themselves - on their own volition, will seek a protective cover - a professional, fraternal and representative association - one akin to the American Medical Association or the American Nursing Association. Self-preservation will demand this be accomplished. Small organizations, the fractionated splinters, the self-interests groups, will then be compelled, out of sheer desperation, to join a professional association, but by that time, will have little or no say in guiding their own destiny.

The officers and representatives of both NAPA and AAPA have frequently met to discuss mutual problems. Information has been exchanged. These discussions have always been mutually open, candid and rewarding. Indeed, each has sought the aid and counsel of the other. A fine rapport has been established. Agreed - there are wide differences in the educational methodology, one coupled to the academic route while the other is intensified skills training. But then, all types of physicians assistants will soon be trained for service in the critically shorthanded health-care delivery system. There will be many varied categories of PA. Already, by NIH standards, we have seen the establishment of at least three distinct groups: A, B and C. There will be additions to the future, depending upon the training input, experiences, standards established, etc. The aims, purposes and objectives of both AAPA and NAPA are not vastly different. Both associations are sincere in efforts to establish training standards, minimum standards for certification of the PA, and both are endeavoring diligently to promote the dignity and integrity of the physicians assistant.

NAPA and AAPA are today relatively small in size - when compared to what they will be five years hence. So too are the numbers of PAs educated and employed throughout the U.S.A. An alliance of NAPA and AAPA would be the formation of the important one viable functioning professional association NOW, while still small in size, that would effectively grow with each passing year - up to a maturity. The coming together of these two associations - uniting their respective efforts, will most certainly prove a boon to the individual physicians assistant and to the overall concept of the PA. For one thing, a unified association will emerge as the primary source of physicians assistant in the nation; it will permit the presentation of a united front in establishing and maintaining the professionalism, the high degree of integrity and the dignity required now and in the future. And such a merger will enhance the PA's prospects for the future and assure him (or her) of a strong voice in guiding their own futures. Once formed, PA's from all over the country will seek active membership in this new strong unit. Indeed, the small organizations will seek merger benefits.

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Only in numbers can we develop the strong, viable and well-functioning organization we need; one that can truly represent the best interests of the physicians assistant.

During the coming months much legislation will be sponsored, enacted or rejected, that is of real concern to the physicians assistant. We intend to 'ride herd' on such matters - in all legislative areas to assure our membership a decent shake in the political arena. NAPA, by virtue of its professional relationship to the SOA can utilize those officers, offices, legislative representation, and all other benefits of a professional associations position of strength. Some comment has been made with respect to NAPA's affiliation with the AFL-CIO. It must be pointed out that NAPA has it's own autonomy and individualized operation with such a body. (See attached reprints). The doctors, nurses, engineers, space-technicians, pilots, professors and teachers, all have professional associations with such an AFL-CIO tie-up, and with individualized autonomy. Such alliances have proven of mutual protection in time of essential need, and realistically, these associations have vastly improved in value to their respective memberships with such an affiliation. Again, in numbers there is a position of strength. The chain is only as strong as its weakest link.

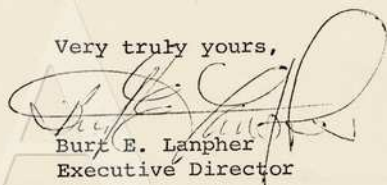
Generally, an alliance of NAPA and AAPA will bring these two important associations under one protective cover. Initially, each would maintain their own autonomy. The officers of each would become integrated into a national organization. The table of organization, the structural nomenclature, constitution and by-laws, etc. would then be developed along lines proving of benefit to the general membership. The final approval would necessarily have to come from the combined membership ranks of NAPA and AAPA.

Specifically, but briefly, the following outline suggests the order of priorities in this proposal, subject to alteration however:

1. AAPA and NAPA unite.
2. Officers function as now, without compensation.
3. Utilize NAPA's administrative offices, and staff to administer the association.

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4. As the new association begins to pay its own way, salaries be paid elected officers.
5. Develop constitution, by-laws, rules, etc.
6. Utilize NAPA's legal, administrative, etc. facilities.
7. Begin to organize other small groups in the association's fold.

Very truly yours,



Burt E. Lanpher  
Executive Director

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