September 28, 1966

Dr. George C. Stevenson Post Office Box 1296 Redding, California

Dear Dr. Stevenson:

We hoped to avoid establishing a separate licensing board for the physician's assistant. We would like to amend the medical practice act to give the physician authorization for using properly trained personnel in his practice. The Duke Medical Center will be one of the places which will certify the areas of competence in which the assistant can act under the physician's guidance. We would prefer to keep the Duke certificate open-ended. At the end of our two-year training program, the assistant's certificate would list the areas of competence where he could perform under the doctor's direction. If the doctor wished his assistant to become competent in other areas, he could return for additional training, and the new areas of competence would be attached to his certificate.

The odds are that these people will, at some future time, form their own society and eventually have an independent license. When that occurs, the doctor will be minus a true assistant, and the new generation will have to develop new patterns of personnel.

Any doctor or hospital using physician's assistaints to extend the arms and legs of the doctor does it at their own risk. On the other hand, if the medical profession makes no moves to discharge their responsibility to society, chaos will result. It is like treating a sick patient -- active therapy may have dangers, but they may be less than no therapy.

Sincerely,

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

Claremont Medical Building Suite F, P. O. Box 1296 REDDING, CALIFORNIA, 96001

September 7, 1966

Phone: Area Code 916 243-7531

Dr. Eugene Anson Stead, Chairman Department of Medicine Duke University, School of Medicine Durham, North Carolina

Dear Dr. Stead,

Pursuant to our recent discussion about your use of paramedical personnel, I wonder whether you could reduce to writing some of your feelings about the moral, ethical and legal utilization of these people in medical centers?

The state of California is currently involved in deciding what status these people should occupy in terms of formalizing legislation to cover their activities in a hospital.

Actually we have contacted the Bureau of Medicine and Surgery at the Navy Department, Washington, D.C. in trying to obtain medical corps technicians who have been discharged from the Navy and other Armed Forces. These men, well trained as technicians in the fields of orthopedic appliance, physical and orthopedic therapy, medical administration, radio-active therapy, pharmacy, x-ray and surgery, can be very advantageous.

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The entire Regional Medical Program, as outlined by the National Institutes of Health, in their recent legislation on heart disease, stroke and cancer (Public Law #89-239), supports the utilization of such personnel. A recent NIH document states that "the use of such paramedical utilization, in an effective and maximal manner, frees the physician from many tasks he normally has to perform in small as well as large medical facilities. The physician is then able to direct his diagnostic and therpeutic abilities to a larger number of patients and possibly has time for both clinical and research endeavors, even in smaller medical centers".

We have, for the past year, used an ex-Navy Corpsman as a

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paramedical surgical technician and physician assistant in much the same general tenor and with the same responsibilities as the physician assistants whose duties you outline in the recent article.

You did mention that your medical practice act in the state of North Carolina did not, as such, cover their activities, but that you as a University in that state were taking the stand that within your boundaries they, acting under the auspices of a physician, would have definite boundaries of responsibility within which they could work with alacrity and without fear of regal repercussions.

Any suggestions you might have along this line I would appreciate your sending to me, with a carbon copy to a close friend who is studying the same problem, Dr. Robert Combs, President, California Board of Medical Examiners, Business and Professions Building Annex, 1021 O Street, Room A 202, Sacramento, California.

Thanking you for your time and assistance, I am

Very truly yours,

George C. Stevenson, M.D.

GCS: jb

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