

CENTER- INGS

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April 1975

The School of Medicine

Working to Turn Out the "Best" New Physicians

The Dean calls this "a multi-mission School of Medicine," and spells out a number of commitments.

"We are working to turn out superlative primary care physicians, expert medical specialists, and medical scientists capable of providing the scientific flooring for the whole effort," said Dr. Marvin Kuschner, Dean.

Since the opening of the School of Medicine in September 1971 with an initial class of 24 students, the planning and implementation of the whole medical education program, from philosophy and curriculum to community relationships, has been geared to carry out this "multi-mission", though, admittedly, not always successfully.

But, out of the determination to be a medical school in tune with the drumbeats of today and also tomorrow, different choices were made in starting the School — bearing on students, faculty, curriculum and community. Decisions on admissions, curriculum, appointments, etc. have always been made in consort with committees broadly representative of the total staff-student membership of the School of Medicine.

Students who were admitted had a wider range of talents and interests than those usually represented in a standard medical school class. Their qualifications often included a set of life experiences that went beyond the necessary preparatory schooling. The heterogeneous character of the

class contributed to the challenge as well as to the difficulties of curriculum design and delivery.

The medical community was always closely involved with the School of Medicine from the planning days.

"The concept that the local health care community would, from the very start, finish a major part of our educational resource was new for this area. We conceived of the walls of this school as stretching from Montauk and Orient Points to the New York City line," stated Dean Kuschner, who is also Chairman of the Department of Pathology in the School of Basic Health Sciences.

"We felt the concept of a monolithic university hospital-oriented medical center

is outmoded, except perhaps in well-served urban communities where a multiplicity of schools exists. The crucial question are how one integrates medical education and medical care for 3 million people and how does a medical center impact meaningfully on medical care in a total area?"



Dr. Kuschner went on, "The solution to the problem of underservice is not simply to manufacture more physicians, but to develop a graded system that will encompass a whole area under the leadership of a medical center in order to provide services at all levels with a variety of health professionals."



The School of Medicine established partnership contracts with five hospitals designated as clinical campuses. (See page 7). The commitment to this consortium idea is permanent, Dr. Kuschner emphasized.

"There is some suspicion that when the University Hospital opens, we will disassociate from the consortium. Nothing is further from the truth," he stated.

A further partnership arrangement with community hospitals and institutions allows the University to give medical service to Long Islanders by investing its faculty resources in primary care in many hospitals,

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Co-Chairs Appointed

Two outstanding Long Island physicians have been appointed to head the Department of Obstetrics and Gynecology at the School of Medicine.

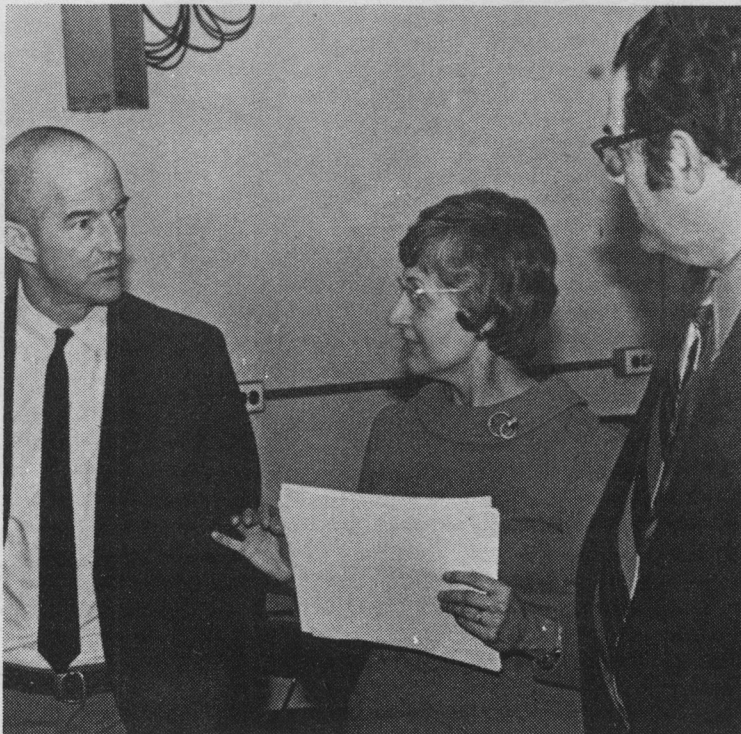
Named as co-chairmen of this department are Dr. Leon Mann, Chairman of the Department of Obs/Gyn at the Nassau County Medical Center, and Dr. Joseph Rovinsky, Chief of Obs/Gyn at Long Island Jewish-Hillside Medical Center. Both physicians have had appointments as Professors with the School of Medicine and have already done much of the groundwork needed for the planning of a Department of Obs/Gyn for the medical school.

Team

As co-chairmen of the Department of Obs/Gyn, Drs. Mann and Rovinsky are well-teamed. As put by Dr. Rovinsky, "Dr. Mann's expertise is what happens to the baby, and

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Lecture Series Ending April 14



A recent guest Speaker, Dr. Lawrence Weed, left, confers with Prof. Vaughn Nevin, center, and Dr. Max Schoen, right, committee members for the public lecture series on Contemporary Issues in Health Care and Public Policy, which has continued weekly since last fall. The series will conclude on April 14 with a program on the role of the Nurse Practitioner, with Dr. Catherine DeAngelis, a Nurse-M.D., as guest speaker.

photos by Toni Bosco

Health Sciences Center
 State University of New York
 Stony Brook, N.Y. 11794

Flash!

Dr. Lenora McLean has just received notice from Albany that plans to launch the M.S. degree graduate program in the School of Nursing have been officially approved.

Conference Slated for April

A two-day conference — which may include the most unusual lineup of subjects ever to be brought together under one umbrella — has been set for April 25-26 at the Student Union of the State University of New York at Stony Brook.

Seeking to explore the age-old question of What Is Life?, the conference will look at the most up-to-date scientific developments exploring how life arose, how it continues and its relationship with our universe, asking:

Is life governed by an electro-dynamic energy field? Does healing-by-touching have a scientific basis? Are biorhythms and biofeedback valid scientific developments or just the latest fad?

And — do these developments, along with evolution studies, physics, philosophy, parapsychology, radionics, Kirlian photography and ancient healing ways — have anything in common?

Planned Conference

Dr. Dorothy Harrison, Director of Undergraduate Programs at the School of Nursing and planner of the conference, pointed out that all these areas of study are elements in a new scientific approach to basic questions about life, seeking to examine the available evidence that life does not exist as an individual entity and that it may be governed by an electro-dynamic energy field.

"A lot of scientists have been investigating the many different, yet related, phenomena dealing with this question of the nature and nurture of life, and we're trying to bring them together as a team for the first time," explained Dr. Harrison.

New Era

She added that when these phenomena can be put to use to diagnose and heal, a whole new era in scientific holistic treatment

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First Nurse Midwife on Campus

An instructor at the School of Nursing has become the first certified nurse midwife on campus.

Selena Elsie Campbell, a surgical specialties nurse and educator, completed the obstetrical training program for midwifery at Downstate Medical Center and has received national certification from the American College of Nurse Midwives. Her



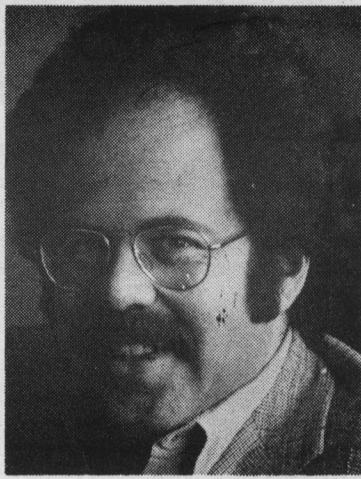
S. Elsie Campbell

concern is to emphasize the professionalism of the modern midwife and to put an accent on the "beauty of childbirth."

"Some still regard a midwife as an old woman practicing in the backwoods without formal training. But we are highly trained to do physical assessment, pelvic examinations, sutures, deliveries, counselling and teaching, and family planning," said Prof. Campbell, who received her first nurse's training in Trinidad where midwifery was part of the curriculum. "We stay with our patient from admission to delivery and then make postpartum visits. The response of the women to this very personal care is beautiful."

She emphasized that midwives are not in competition with obstetricians, but rather can "enhance their practices by freeing them for the more complicated cases."

Nurse midwives are being used in some city hospitals and rural areas. They are not allowed to practice in Nassau and Suffolk counties.



Dr. Henry Berman

Dr. Henry Berman is the newly-appointed Director of the University Health Services. A specialist in Adolescent Medicine, Dr. Berman received his M.D. from New York University and worked three years at Mount Sinai Hospital before coming to Stony Brook.

Dr. Berman said he was determined both to upgrade the medical care available to students at the Infirmary and to work on prevention of health problems. He is already working with the Department of Family Medicine, giving training in adolescent medicine to family practice residents in the Stony Brook program.



Dr. Cynthia Fuchs Epstein

Dr. Cynthia Fuchs Epstein, well-known advocate of women's rights, was a visiting professor at the Health Sciences Center for the first three months of 1975. Dr. Epstein, whose book *Woman's Place, Options and Limits in Professional Careers*, has been widely acclaimed, met with campus women both formally and informally during her stay.

She warned that "the problems of women cannot be 'trivialized' and said she believes the women's movement has had a bad press when the emphasis has been on "bra burning and when having men open doors is played up as a crucial element of life."



Dr. Clarence Dennis

Dr. Clarence Dennis, a surgeon who is nationally recognized for his leadership in cardiovascular surgery has been appointed a Professor in the Department of Surgery of the School of Medicine at SUNY at Stony Brook.

Until recently, Dr. Dennis was in charge of the artificial heart program at the National Institutes of Health in Bethesda, Maryland. He will work directly with the Chairman of the Department of Surgery, Dr. Harry Soroff, in developing surgical training programs and continuing research on finding ways of keeping ailing hearts alive.

photos by Toni Bosco

People

Dr. Eugene P. Cronkite, Medical Director of the Brookhaven National Laboratory Medical Department and Dean of the clinical campus there, has been awarded the Ludwig Heilmeyer Medal in Gold by the German Association for Progress in the Field of Internal Medicine to be awarded to him in Germany this spring. The medal is being awarded for his career achievements in internal medicine and hematology. Of consideration in the award were the contributions that have been made by Dr. Cronkite in promoting international cooperation in many medical fields and the stimulus given to many young scientists from all parts of the world to have worked in Brookhaven's medical department and have become leaders of research in hematology and internal medicine in many parts of Europe.

Mr. George Boykin, research associate in the Department of Anatomical Sciences, received a public thanks recently from the National Pituitary Agency for his shipment of 85 glands to this organization. These glands will be used for sorely needed production of human growth hormones.

Robert Hawkins, Associate Dean in the School of Allied Health Professions, was a group facilitator for the Rutgers Medical School course on Human Sexuality given in January.

A 628-page atlas of tumor radiology entitled *The Vertebral Column*, by Dr. Bernard S. Epstein of Great Neck, has been published by Yearbook Medical Publishers, Chicago. Dr. Epstein is Chairman of the Department of Radiology at Long Island Jewish-Hillside Medical Center and Professor of Radiology at the School of Medicine here.

Julius Elias, Assistant Professor in the Department of Pathology, was a guest lecturer at a continuing education seminar for histotechnologists, sponsored by the Armed Forces Institute of Pathology. Prof. Elias was also an invited participant in a recent workshop on histopathology held at C.W. Post College.

From the *Division of Administrative Programs* of the School of Allied Health Professions:

Kong-Kyun Ro, Ph.D., has joined the faculty as Research Associate Professor. Dr. Ro is a well-known health economist who is widely published in the field.

Most recently, he has been Associate Professor at the University of Cincinnati's Department of Economics and Community Health and a senior Fulbright lecturer under A.I.D. fellowship.

Gerald Mazzola is assuming primary responsibility for directing the development of continuing administrative education services and will be arranging workshop institutes and conferences for managerial, planning, financing and other related personnel in the Long Island area.

Ingrid Abrams has joined the staff, part-time to assist with student affairs in the graduate program and other office functions.

E.S. Srinivasan is also a part-time staff member and will provide graduate assistance for operations research courses, statistical consultation for graduate students, and help in the development of various research undertakings to be planned by the Division this year.

Carole Stapleton is a part-time instructor and is teaching a graduate course in human relations and an undergraduate administrative course for the Allied Health Professions programs.

Dr. Tom Dunaye, Chairman, has been nominated to the proposed Board of Directors of the new Nassau-Suffolk Health Planning Council which is merging the planning programs of the previous Nassau-Suffolk Comprehensive Health Planning and Long Island Health and Hospital Planning Councils.



Ruth Baines

The Greater New York District of the American Physical Therapy Association has presented their 1974 Distinguished Service Award for Physical Therapy to Ruth Baines. Formerly a faculty member of the Physical Therapy Department of New York University, Miss Baines joined the faculty of the School of Allied Health Professions as Assistant Professor and Director of Interdisciplinary Clinical Education in September 1974.

She serves on the National American Physical Therapy Association as a member of the Reference Committee and as Chairman of the Minority Recruitment Committee. In addition, she is a team leader for the AMA-APTA Committee for the Accreditation of Physical Therapy Schools.

New Faculty at School Of Podiatric Medicine

Drs. Harvey Lemont, Glenn Ocker, Thomas Sgarlato and Herman Tax became the first faculty to join the new School of Podiatric Medicine in the Health Sciences Center at Stony Brook, it was announced by Leonard A. Levy, Dean of the School.

Dr. Sgarlato, a nationally known expert in biomechanics, has become the School's first Chairman, heading up the Department of Podiatric Biomechanics and holding the academic rank of Professor of Podiatric Biomechanics and Professor of Podiatric Surgery.

Dr. Harvey Lemont was

appointed Professor of Podiatric Medicine and has already begun studies on pathology of foot conditions. A scholar with a broad area of knowledge in podiatric pathology at both the microscopic as well as clinical level, Dr. Lemont is working closely with pathologists from the School of Basic Health Sciences. Dr. Lemont also holds a Clinical Assistant Professorship in Dermatology at New York Medical College.

Dr. Herman Tax, known throughout the country as an expert in podopediatrics, comes to Stony Brook as Associate Professor of Podiatric Medicine

after more than 30 years of faculty service at the New York College of Podiatric Medicine. Dr. Tax has authored many articles and two manuals on foot problems in children which have been widely used in the profession. As a full time faculty member at the NYCPM he developed an outstanding children's clinic.

Dr. Glenn Ocker joins the faculty of Stony Brook as Assistant Professor of Podiatric Surgery. Dr. Ocker is spending a large amount of his time at the clinical campus at the Northport Veterans Administration Hospital. He will be instrumental in developing a podiatric medical service at the facility for both in-patient and out-patient surgical and non-surgical conditions. This service will eventually become one of the initial clinical areas for podiatric medical students and residents.

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Students View Their Medical School

An overwhelming characteristic of the medical students can be stated in one word — "individuality."

Thus, no story based on a smattering of interviews can categorically claim to be speaking for the 66 three-year program medical students now in their second and third years of training, and the 48 first-year students in the beginning four-year program.

Yet, conversations with a number of medical students in the past few weeks showed a pattern of crisscrossing observations, with students being freely outspoken about both the positives and negatives they are experiencing in the School of Medicine.

Agree

Perhaps the most significant strength cited dealt with the students selected for the School and their subsequent treatment by faculty. Students interviewed believe that the Admissions Committee shapes the School and does a "fabulous job"; and that the faculty communicates respect for the students.

"We can see they want people who will be good doctors, not just good medical students," commented Bob Sandhaus, who was accepted for the very first class in September '71 and at the end of his third year chose to go into another year of training in the M.D./Ph.D. program offered jointly by the Schools of Medicine and Basic Health Sciences.

Howard Sawyer, who will receive his M.D. in May, said he appreciated the School for "the sense about me that it preserved rather than changed. I didn't feel I was becoming one of 'them' — a physician I didn't want to become."

He added another plus for the School, saying, "It's easy to forget your exposure to other cultures and socio-economic struggles once you wear the

white coat, but your awareness is kept alive in this medical school rather than stifled."

Plusses

The students pointed out many other strengths in the School, naming:

- the personal attention
- the "great" people they deal with — administrators, peers, and faculty
- the clinical teaching and being immediately involved with patients
- a faculty of superior quality
- access to faculty
- access to top departments in hospitals
- the Organ Systems teaching, combining classes with clerkships
- the contact with the "best" private practice physicians at hospitals in the different communities
- an evident interest in wanting to rid medicine of "elitiness"
- the mutual admiration felt among fellow classmates

"I think highly of every one of my classmates. They're very respectable people and I look forward to seeing the contribution of all of them," said Howard.

Students mentioned "disorganization", but without placing too much importance on this.

"I had a hard time initially, meeting loose ends, but as you go through, it gets better," said second year student Peter Fisher, a biomedical engineer and ex-serviceman.

Barry Newman, also a second-year student, added, "I expected disorganization and found it. But what I do like about this medical school is its looseness and informal atmosphere, and that goes with the disorganization."

Travel

The major and unanimous problem was listed as "physical" because of the clinical campus setup.

"I'm frankly tired," said Howard. "I logged close to 45,000 miles during my medical education."

Other negatives were cited as:

- problems of the state system, causing delays in construction and hiring faculty when money is tight
- conflicts among those having strong, but different, views about what medical education is

- sometimes, at the clinical campuses, experiencing a subtle feeling that they'd rather be teaching Harvard students
- lack of communication among faculty members at the different clinical campuses and hospitals
- the fading away of initial plans for interdisciplinary education of the Health Sciences Center students
- the lack of traditions because of its newness
- a felt need for strengthening in the basic sciences



Anne Remmes

"There is no interdisciplinary aspect here, and this is a disappointment to me. It's important in health care. In the real world, you have to deal with everybody," Barry commented.

Jean Kassler, a first-year student, would like to see a different approach to social sciences and humanities for medical students.

"We have so much work to

do, that if something has to be shafted, it's humanities," she admitted.

The students have no student organization as such, but they view each class as small enough to be a cohesive organization unto itself. Class meetings become the occasion for a focusing on academic and other problems.

More Women

The School of Medicine deserves some attention for its leadership in bringing women into the medical profession. Of the 48 students admitted to the September '74 incoming class, 26 are women.

"Being female, you don't feel problems at the medical school here. But at clinical campuses, you notice you're being called 'girls'," observed Jean.

Originally an English and French major at Columbia, Jean decided to switch to science and medicine "to focus on people." She would like to see changes in the organization of health care and she also refuses to put doctors on a pedestal.

"I can't see equating a certain technical skill with the level of a social position. Becoming a doctor doesn't entitle one to other social privileges or ways of behaving," she stated, adding her opinion that "some change will take place as women come into the profession."

Mother-Student

Anne Remmes lives with the woman-mother problem of raising a child alone while getting her medical education. But she's willing "to make compromises," she said, because she is determined to be a doctor giving primary care to people living in doctor-poor rural areas. A French major, she was turned on to medicine as a Peace Corps volunteer working for the rural poor with a physician in Ghana.

Bob leans toward working in a University Hospital where he could continue research.



photos by Toni Bosco
Bob Sandhaus, left, and Howard Sawyer, center, attend a lecture.

"I'd love to be able to do everything — teaching, research and practice. The experience of the M.D./Ph.D. program will enable me to be one of these people," said Bob, adding honestly, "I've never claimed to be one wanting to go to the ghetto, but I wrestle with this and don't know how to solve it."

Uncertain

Howard Sawyer, facing internship, is uncertain even of his immediate future.

"Right now — today — I frankly feel incompetent to face internship. That might be normal. The job of internship with its demands of day-by-day care of patients is not found in books and lectures. There are a lot of unknowns 'til I get there," he admitted, adding reflectively, "There's a lot to be said for the idea of having a fourth year for sub-internships."

Howard then spoke of a particular value he gained from the School of Medicine.

"Traditional medical students are taught to master the literature of medicine; but this School taught me that this content changes, there is a daily task of learning. The certificate is merely the paper marking the beginning of learning for all time. We build the remainder."

Students Come First

As Associate Dean for Students in the Schools of Medicine and Dental Medicine, Dr. Gerald Green, has a dual function — managing the technical end of admissions and meeting the human needs of students.

"I do a lot of counselling," stated Dr. Green, who is also an Associate Professor of Psychiatry.

Problems Evident

The admissions problems are evident as soon as one looks at the ratio of applications to acceptances.

"We had 4100 applications this year for 72 places in both schools," stated Dr. Green, adding "the nature of the beast is such that we're a rejection

agency, not admissions."

Part of this job is to develop a system for determining whom to interview.

"Everything in a student's file is read. We are certainly influenced by academic records. We don't want to accept someone who won't survive the academic requirements. But we also want to take other good qualities into consideration, as well as insure that people excluded in the past, for example, because of sex and ethnic background, would no longer be cut off for those reasons."

Final decisions on admissions are made by a 15-member faculty-student admissions committee.



Jean Kassler

Health Teams Conference

Members of several health teams, already functioning on Long Island, have been invited to participate in all-day Saturday workshops, scheduled for March 29, April 26, June 7 and June 28 at Sunwood. Titled "Team Development For Health Care Practitioners," the workshops are being offered by the University through a grant awarded by the Nassau-Suffolk Regional Medical Program, Inc. Dr. Richard Adelson, Assistant Dean For Continuing Education at the School of Dental Medicine planned and coordinated the workshops. For further information, call him at 444-2947.



Dr. Gerry Green, left, with students, from right, Arnold Benardette, Peter Fisher, and Barry Newman.

What Is Life?

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of the ill will have arrived, supplementing (not replacing) traditional medical care.

"The ultimate object of the conference is the search for a scientific basis for holistic concepts for the nature and nurture of life, which will explain and demand a healing approach which deals with man as a total, integrated whole and functioning organism," said the nursing professor-administrator, who is an Anthropologist interested in health and culture and comes to Stony Brook from Yale. "Professional nursing has long held these basic ideals," she added, explaining why the conference was being sponsored by the School of Nursing.

Guests and Topics

Conference participants include scientists from the State University of New York at Stony Brook and from universities in Massachusetts, metropolitan New York, Virginia and Miami, Florida, speaking on topics as diverse as using physics to gain an understanding of biological phenomena; Kirlian photography — a method which it is said actually photographs the "halo" surrounding life forms, caused by emanated bioelectricity; ancient methods of healing reflecting health defined as being in harmony with nature and the universe, giving early evidence of the electromagnetic field theory; body electrochemistry; and healing by the laying on of hands, as a scientific, not psychic, phenomenon.

Rooms will be set up for demonstrations of Kirlian photography and electromagnetic field testing.

"We're hoping that a spin-off from this conference will be the development of university courses and research studies on this subject," Dr. Harrison pointed out.

Registration Open

The conference is limited to 300 participants. Special rates are available for students and groups. To reserve a place, contact Dr. Dorothy Harrison, School of Nursing, Building G, South Campus, State University of New York at Stony Brook, Stony Brook, New York 11794, or call her at 444-2388.

Department of Psychiatry and Behavioral Science

A map on the wall of Dr. Stanley Yolles's office is a visual expression of the goal and operating philosophy of the Department of Psychiatry and Behavioral Science. The pins show the extent of community outreach already underway by the Department with the goal of making the University both the stimulus and catalyst for unified and coordinated mental health services on Long Island. The scope of the outreach indicates a determined mission.

"You build on a tripod of training, service and research. These are interdependent. You can't do one without the other. This is our operating philosophy," stated Dr. Yolles, Professor and Department Chairman, formerly the Director of the National Institute of Mental Health, from 1964 to 1970.

Community Link

Since his coming to Stony Brook in April, 1971, Dr. Yolles has consistently and effectively linked the community to the resources of his department, while at the same time developing an educational program for medical students, an approved Residency Program in Psychiatry, which now has fifty-five residents in training; and, jointly with the Suffolk branch of the American Psychiatric Association, a continuing education program for psychiatrists in Suffolk County, which has just been awarded first prize in a national competition.

"We have become the Regional Training Center for the New York State Department of Mental Hygiene, responsible for the training of psychiatric residents in all the state institutions in this area," Dr. Yolles said, adding that the training is conducted through a consortial arrangement of the Northport VA Hospital for the five New York State Department of Mental Hygiene psychiatric facilities with the University.

6 Divisions

To carry out its objectives of developing comprehensive education, service and research programs, the Department has set up six divisions — Community and Social Psychiatry, Clinical Psychiatry, Biological Psychiatry, Behavioral Sciences, Child Psychiatry and Mental Retardation and Human

Development. Of equal significance is the strong and broad research component within the Department, with more than a dozen clinical investigations currently underway, including specific scientific studies of schizophrenia, depression, drug abuse, alcoholism, sleep, sexuality and the organization and evolution of the vertebrate brain.

The Department has been fortunate in attracting leading research authorities such as Dr. Max Fink, an internationally recognized figure in psychopharmacology and electroencephalography — and Dr. Harvey Karten, a widely respected authority on the evolution of the vertebrate brain.

Wide Area

Notably, the State Department of Mental Hygiene has demonstrated an unusual confidence in the Department of Psychiatry by giving it the responsibility for mental health care services in a large "catchment" area, including North Brookhaven and the five eastern Suffolk Towns, a population area of 350,000.

University Psychiatric Services

To carry this out, the State has further given the Department the use of three buildings on the grounds of the Central Islip Psychiatric Center. Under an umbrella called the University Psychiatric Services, the Department has had Building L-3 renovated as a training and education center with classrooms, library, television studios, etc. and Building L-6 for research, with Building L-4 already in use as an inpatient facility, with a current population of 48.

"This provides us with a facility for the whole gamut of mental health training," said Dr. Sherman Kieffer, Professor and Vice Chairman of the Department and Chief of the Department's Division of Clinical Psychiatry, formerly Associate Director for Patient Care of the National Institute of Mental Health. Dr. Kieffer has a nationwide reputation for action in setting up modern treatment programs and radically changing the sub-human living conditions found in some large, old, understaffed institutions, which he thinks of as "human warehouses."

"We are very sensitive to the importance of maintaining human dignity and a feeling of self-esteem for each



photos by Toni Bosco
Dr. Stanley Yolles

patient," he said, adding that "a good in-patient psychiatric service parallels the treatment environment of a good general medical and surgical community hospital."

Released patients receive subsequent care at two follow-up clinics run by the Department located in Riverhead and Farmingville. A third clinic is being planned for Port Jefferson.

"We are equally interested in ambulatory care," Dr. Yolles emphasized. We are now completing our negotiations with the Suffolk County Department of Health Services for a contract arrangement through which we will assume the responsibilities for ambulatory mental health services in our catchment area."

When this comes about, Dr. Yolles hopes to add a comprehensive alcoholism service to the Riverhead Center, as well as special treatment programs for legal offenders, migrant laborers, children and the aged.

VA Hospital

The psychiatric services at the Northport Veterans Administration Hospital are also the responsibility of this Department, providing over 150,000 outpatient visits per year, a Day Hospital accommodating an average of 50 patients and a 350 patient bed service which includes a general alcohol and drug dependence treatment unit. Aftercare services for discharged patients are given in eight "satellite" clinics in Suffolk County and two in Nassau.

What all this adds up to is a new

possibility on the horizon, that for the first time, the fragmented mental health services in its catchment area will be unified, with the University being the "unifying" thread.

Dr. Yolles, who began his medical career as a parasitologist, turned to psychiatry because of his strong interest in preventive medicine and public health.

"The one frontier where preventive efforts were most clearly needed and underdeveloped was in mental health," he said.

From NIMH

As Director of the National Institute of Mental Health, Dr. Yolles pioneered many notable paths, including among others, a push on the national level: (1) to develop a field of "Mental Health Administration," (2) to transcend the existing taboos so that the field of human sexuality would become a legitimate discipline for research, education, therapy and counselling services, and (3) to bring consumers into the mental health care field as essential components of community mental health centers advisory boards.

New Developments

At Stony Brook, Dr. Yolles is now adding a new Division of Mental Health Administration which will treat the teaching and development of mental health administrators as a "science of its own."

A Center for Human Sexuality has been set up to become "outstanding — and internationally known," promised Dr. Yolles. The program, which includes among others, Drs. Richard Green and Joseph LoPiccolo, combines clinical therapy and counselling and training at all university levels, along with research in such areas as gender identity and sexual dysfunction. It has already received national attention through a story in *Science Magazine*. The internationally known journal, *Archives of Sexual Behavior*, is published in the Department. Another international journal published in the Department, the *Journal of Biological Psychiatry*, is edited by Dr. Joseph Wortis, who is the Chief of the Division of Mental Retardation and Human Development.

Department of Medicine: No Ivory Tower

The Department of Medicine is the antithesis of an "ivory tower." It was based from its beginning at the Northport Veterans Hospital to bring students, residents and faculty directly into the working hospital situation. Since the coming of Dr. Harry Fritts as Department Chairman in May 1973, the Department has galloped into a strong extended component of the School of Medicine, handling a huge teaching and clinical load.

The Department of Medicine, though based at Northport, encompasses the Medical Departments at the four clinical campuses, plus the departments at South Nassau Communities Hospital and Nassau Hospital. Faculties of all these institutions carry out the responsibilities of teaching and supervision both of students and house officers, training research fellows and providing continuing education in medicine.

Students

The Department emphasizes a strongly individualized approach to teaching.

"Although the students encounter individual members of the Department in the Systems curriculum, their first contact with the Department of Medicine is the medical clerkship. The class is divided into thirds, with groups going to Nassau County Medical Center, Long Island Jewish, and here. In each place,

they become part of a group, under senior physicians, actually delivering patient care. Each student is placed in the hands of a preceptor, who supervises no more than three students. This means each preceptor can give a lot of time per student," explained Dr. Fritts. "The students present cases to their preceptors, have conferences, demonstrations, specific sessions, all of which focus on the patient."

House Officers

The House Officers program trains interns and residents and offers training in research. (Electives in research are also available to medical students.) The training-flow is as follows: graduation from medical school, one year internship and two years of residency qualify them to practice general internal medicine. If they wish to be certified in a medical sub-specialty, they must train for two additional years. If they so choose, they can branch off at almost any point to engage in research. As of July 1975, the Department of Medicine will have 50 house officers in training.

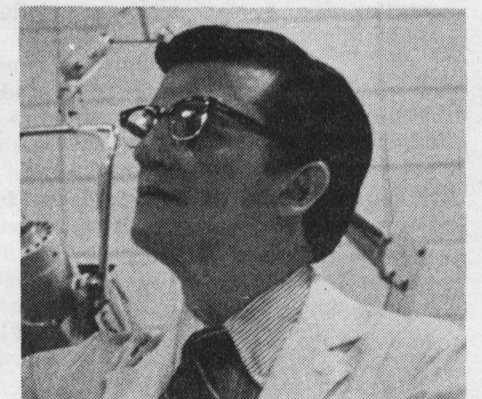
By basing the Department of Medicine at the VA Hospital — a plan carried through by Dr. Leonard Meiselas — the medical care offered to patients has been vastly improved due to the availability of expanded specialty services given by over 200 physician-faculty members.

"We've grown to the level where we take care of 6000 ambulatory patient visits each month. The patients have all sorts of medical problems. In addition, we have 240 bed patients for acutely ill patients and 180 beds for patients needing intermediate care," Dr. Fritts stated, adding that the Department of Medicine has established specialty services in cardiology, hematology, oncology, respiratory diseases, endocrinology, neurology, renal diseases, immunology and connective tissues.

Research

Dr. Fritts, an authority on cardiopulmonary diseases, underscored the strong research component within the Department of Medicine. The faculty at the VA hospital are investigating a number of problems including the

differences seen when anemia is the result of infections versus the result of cancer; the way the lung clears itself of inhaled particles; and the role of the cortex of the brain in seizures.



Dr. Harry Fritts

Library Offers New Service

Beginning with March and each month thereafter, a computer produced list of items added to the collection will be mailed to a select list of users. This is part of the Library's continuing program for providing its users with ongoing subject coverage of the literature. The citations for monographs include a complete bibliographic statement with call numbers. New serial titles are also listed.

This service should provide you with a tool for selecting materials for required reading, compiling bibliographies and general course development. Should any of you who are not included in the first mailing wish your name to be added to the list, please call Mrs. DeCicco on 4-2529, or Mrs. Skolits on 4-2527 and they will take the information.

Department of Surgery

In a little over a year, the members of the Department of Surgery have built a visible working Department.

Coming as Chairman in February 1974, Dr. Soroff, part of the cadre of cardiovascular surgeons who made the first major breakthroughs in developing artificial heart devices, has, with the help of the faculty, developed the surgical component of the School of Medicine into a full-fledged department with 220 full time and clinical faculty members, involved in extensive surgical service, teaching and research. A surgical residency program has been designed and approved. The Department has been extended regionally to encompass the best surgical resources available in other hospitals. Surgical care has been provided to the campus infirmary.

"I think we have the capability of creating an outstanding health organization, offering service, health maintenance and outstanding educational programs by utilizing the strengths that exist in the area," said Dr. Soroff.

Based at the Northport V.A. Hospital, the Department of Surgery has taken responsibility for the day-to-day running of the surgical service there — a 160-bed unit of the 480-bed hospital, now a general hospital.

"We have a modest surgical schedule, doing about 200 procedures a month. That's an increase of about 50% in one year's time," he said, adding "The complexity of the surgical procedures has also increased."

Dr. Soroff is now awaiting final

approval for an open heart program at the V.A. Hospital. He is also actively a part of the committee's recruiting chairmen for orthopedics and anesthesiology.

The vision of a University-Regional Surgical Residency Program resulted in a new kind of surgical residency for this area, an integrated program with five participating hospitals, all of which have outstanding reputations as teaching hospitals, and all varied enough to serve a different type of patient population. These include Nassau Hospital, the oldest voluntary non-profit hospital on Long Island; Nassau County Medical Center, a county hospital; St. Francis Hospital, a specialty hospital known internationally as a Heart Center; Huntington Hospital, a 429-bed community hospital; and the Northport Veterans Administration Hospital.

"We are also in the process of signing an affiliation agreement with the New York Eye and Ear Infirmary," stated the Chairman.

Residents

Currently, eleven residents are in training in the four year program. Residents who will specialize later in urology and orthopedics have been accepted. The Department is awaiting final approval of a five-year program from the surgery accreditation boards.

Medical students meet the Department of Surgery in their first year when they take a trauma course, and in subsequent years in the organs systems teaching and clinical clerkships.

"We have tried to organize the

clerkships so that these are standardized on all the campuses," Dr. Soroff commented.

An experimental surgery course, directed by Dr. Myron Jacobson, is also offered for medical students, giving them the opportunity for early orientation to the operating room by allowing them to do surgical procedures on animals.

Infirmary

Surgical care has been brought to the campus by the Department which has set up a surgical clinic at the University Health Services. A different faculty member is assigned each month to run the clinic which is open one day a week.

The Department has two new priorities on the planning board. A clinical fellowship program, open to residents who have completed the general surgery requirements, will be established by July to concentrate on clinical specialization.

"We hope to have a very active research program in developing artificial

heart devices, vascular surgery, and research on the metabolic response to trauma," he said. Shortly after his appointment, Dr. Soroff brought a biomedical engineer into the Department to direct some of the research programs, Professor William Birtwell, his longtime co-worker.

The Future

Dr. Soroff, in conjunction with Dr. Leonard Meiselas, Associate Dean, is also hoping to work closely with the Brookhaven National Laboratory Medical Department, activating hopefully twenty of its research beds for a Clinical Research Center.

"To begin with, we would like to work on special problems dealing with rehabilitation of the trauma patient or the arthritic," he said.

Several research projects are now underway in the Department, in areas including assisted circulation, cardiac physiology, and the testing of new drugs.



Dr. Henry Soroff checking equipment with Mrs. T. Strang, head operating room nurse

Department of Family Medicine

A popular subject for the media these days is the story usually labeled "The Family Doctor is Making a Comeback." The tendency is to think nostalgically that the old horse and buggy physician — friend of the family is back, or that the general practitioner will be around in greater numbers once more.

There's true and false in both notions, according to



PHOTOS BY TONI BOSCO

Dr. Campbell Lamont

Dr. Campbell Lamont, Chairman of the Department of Family Medicine.

True, the new family practice physician will take a personal interest in the people and families he cares for. But he won't be making house calls and probably won't be working alone. The new family doctor will most likely work with a health team, including a nurse-practitioner and social worker.

False, the new family doctor does not signal the reappearance of the general practitioner. They are similar in that both give primary care and the type of services they give can overlap. But the basic difference is that family practice refers to the function of the practitioner, while general practice refers to the content of the physician's practice.

Continuing Care

"We are training family practice physicians who will assume responsibility for the continuing care of a group of families. Such a physician is concerned about the patient in his family and environmental setting, looking after not only his physical condition but also the emotional and psycho-social conditions which contribute to ill health," explained Dr. Lamont who was a "family doctor" in rural Canada for 19 years before going full time into medical education.

Students

The program of the Department of Family Medicine includes the supervision of undergraduates who may take electives in office preceptorships with practicing family physicians during their first three years of training, plus completing a required 8-week clerkship in family and community medicine; and a three-year

residency program. Currently thirty-two residents are in training at three participating hospitals, Nassau County Medical Center, Glen Cove Community Hospital, and Southside Hospital, Bay Shore (including the Brentwood Health Center). Of eight residents who have completed the program, six have gone into practice locally, one went into research, and one went into military service.

Residents are accepted through the National Internship and Residency Matching Program. Their training includes

- six months internal medicine service
- six months in pediatrics
- two months in obstetrics/ gynecology
- two months in surgery
- two months in emergency room service including a month of psychiatry
- eleven months of specialized family medicine studies
- four months of further elective study in one or more specialty areas.

Dr. Lamont believes in an interdisciplinary emphasis and has worked with faculty of other schools to develop the concept of a health care team. He has also participated in the planning of the graduate family nurse practitioner program, with the School of Nursing, which will be conducted in close cooperation with the Department of Family Medicine.

Dr. Lamont and Dr. Melville Rosen, Director of the Residency Programs, have set up two health teams at Southside Hospital, each including two nurse practitioners, a social worker, a senior resident, a part-time clinical psychologist, and a health educator.

With a focus on trying to reach a goal set by the American Medical Association — that 25% of graduating MD's specialize in family practice — Dr. Lamont encouraged first and second year medical students to form a Family Practice Club.

Medical School

continued from page 1
including family residencies at Glen Cove Community Hospital, Nassau County Medical Center, and Southside Hospital; liaison with the Department of Community Medicine at Brookhaven Memorial Hospital; ambulatory and inpatient care at the Northport Veterans Hospital, and consortial arrangements between the Department of Surgery and five Long Island Hospitals. (See page 5). Additional segments of the required curriculum are delivered at the South Nassau

Communities Hospital and Mercy Hospital.

The Medical School curriculum was developed with some unusual features. The change was not in content but in how the material is taught. Students have patient contact from the time of their admission; their basic science courses are integrated with clinical experiences; and each organ system is taught in coordination with clinical facilities. The students move directly into clinical mini-clerkships, after a period of didactic teaching for each such system. The Systems teaching was initiated and developed by

Dr. Leonard Meiselas, Associate Dean.

The curriculum includes a course for medical students in social sciences that deals with the relationship between the health professions and society.

Dr. Kuschner has always been concerned with the effectiveness of what a school is doing and so has appointed Dr. Arlene Barro as Assistant Dean for Educational Evaluation to the Medical School.

New Move

The School of Medicine originally started out as a three-year program. As of September 1974, they switched to a four-year curriculum, a

move which has generally been greeted affirmatively.

"The three-year curriculum required students and faculty to be involved in teaching and learning eleven to twelve months a year. There was a feeling of too much pressure, limited effectiveness, no time for elective kind of opportunities, and constant fatigue," explained Dr. Roger Cohen, Associate Dean, adding "By decompressing the curriculum, all its ingredients were preserved and strengthened."

To date 135 students have been accepted by the School of Medicine. The September '74 entering class made medical

school history by accepting 27 women out of a class of 48, approximately 60% as compared to a national average of 22%. The first medical school graduation took place in May 1974. Of the initial class of 24, 18 received MD degrees, one transferred to another school, two went on leave (have since returned), one opted for the MD-PhD program, and one decided to take a fourth year.

"We have had no attrition," Dr. Kuschner commented proudly.

The School receives invaluable help from the Dean's assistants, Eddie Beauvoir and Muriel Regan.

Dr. Leonard Meiselas Master Planner

The one single feature underscored by faculty, students, clinical deans and all associated with the School of Medicine as the most outstanding achievement of this school is the Systems teaching curriculum.

The plans for this curriculum design were carefully drawn by Dr. Leonard Meiselas, invited five years ago by Dr. Edmund Pellegrino, then Vice President for the Health Sciences, to come to Stony Brook as Associate Dean in charge of planning for the School of Medicine.

His idea was to get medical students out of a classroom atmosphere and into the real world where medicine is practiced — but without relenting a fraction on the need for intense training in the hard sciences.

"I thought medical education had suffered because students were in a distorted situation for their first two years. They were leaving Basic Science, not knowing what it was really related to," Dr. Meiselas reflected.

Integrated

With the conviction that basic sciences and clinical medicine needed to be integrated early in the medical students' education, Dr. Meiselas led the planning of a curriculum where students would get didactic studies, with some clinical encounters, in each organ system on campus, followed by a period of full time work as clinical clerks in that organ system at a hospital.

"This had two immediate advantages," said Dr. Meiselas. "It gave us an instant faculty and on-site curriculum and gave hospitals a stake in the teaching. We created a situation where the Health Sciences Center continued to play its role, but a hospital also had an essential role to play."

Dr. Meiselas was no newcomer to

innovative planning. From a background which included many years of private practice as an internist, being a Clinical Professor of Medicine at Downstate Medical Center, and Director of a research division on rheumatic diseases at Maimonides Medical Center in Brooklyn, Dr. Meiselas became Chief of Medicine at the Nassau County Medical Center in 1966. While in this position, his interest in community health, coupled with his planning expertise, led to the establishment of the Inwood Health Care Center as a satellite clinic of the Nassau County Health Department.

This was no easy task. For while a health center was a sorely needed facility for the Five Towns, with its significant low income and minority population, an amalgam of agencies had to be convinced of its merit and pledge their support, including the Town, the Supervisor of the Nassau County Medical Center, the County Health Department, various philanthropic agencies, the Economic Opportunity Council, etc.

"Our greatest personal achievement was to have pulled this off politically and operationally," Dr. Meiselas said, calling the Inwood Center "probably still a unique place."

Liaison with CUNY

Recently Dr. Meiselas has been involved in planning a liaison between the School of Medicine and Center for Biomedical Education at the City College of New York. The CCNY program combines premed and liberal arts with medical school in a six-year package leading to an MD degree.

"This is an opportunity to admit culturally, educationally and economically disadvantaged students into medical schools. We think CUNY should have a role in biomedical education and we're working with them to develop admission procedures to guarantee that standards are met," said Dr. Meiselas.

The Stony Brook School of Medicine has agreed to take 10 CUNY students, after they have completed four years of training, who will come here as resident medical students entering the junior class.

Community Medicine

A Department of Community Medicine is probably the only one in a medical school which doesn't fit into a single precise definition. For it attempts to deal not with disease, as a malfunction of the body, but with dis-ease, the gamut of personal and environmental conditions which both cause and continue poor health.

"The field is diverse and you don't get the same answers to what is Community Medicine from everyone in the field," commented Dr. Roger Cohen, Acting Chairman of this Department and Associate Dean for the School of Medicine. "We're concerned with relationships between the social order and the nature of health and disease. We ask, have health and human service programs been adequately developed, and have institutions been designed to meet the needs of populations? If not, why not? If so, are these effective? Community Medicine assesses needs scientifically, based on epidemiology and bio statistics. It is very much concerned with preventive health measures that result in reducing dis-ease," he stated.

The diversity of community medicine is reflected in the faculty comprising the Department. Their expertise includes experience in the National Public Health Service; work with the rural poor in Mississippi and the urban poor in Boston; county-wide emergency medical services; community health planning; and expertise in setting up health maintenance organizations.

Because the Department deals directly with the health needs of people, where they live, and the training of physicians is for the care of people, the School of Medicine begins the medical education of its students with a three-week orientation period, under the Department of Community Medicine.

"The incoming class spends three weeks in August getting introduced by the Community Medicine faculty to the problems in health care delivery. This

marks the beginning of their exposure to the nature of the encounter between patient and the health care provider," said Dr. Marvin Kuschner, Dean.

The Department is further involved in some of the organ systems teaching and in the clinical clerkships.

"Our intent is to provide a stimulus for hospital-based activities providing a teaching setting for students," said Dr. Cohen who holds a Ph.D. in Sociology and spent five years developing O.E.O.-funded health programs, prior to coming to Stony Brook in 1971.

Currently, the Department has supportive staff at the South Nassau Communities Hospital and Brookhaven Memorial, where Dr. Martin Posner and Dr. Dorothy Lane direct the hospital Departments of Community Medicine.

The Department has made some important contributions to Suffolk County. In 1974, Dr. Tamarath Yolles, a Professor of Community Medicine, obtained a \$347,000 award for Suffolk County from the Robert Wood Johnson Foundation for the development of an emergency medical services program in Suffolk. Dr. Steven Jonas, Associate Professor, with Dr. Campbell Lamont, Chairman of the Department of Family Medicine, directed a study of the health needs of Shelter Island, a small residential community in eastern Suffolk with an escalated population in the summer season. Dr. David Weeks, Associate Professor, developed a proposal for a health program for adolescents in conjunction with the Smith Haven Ministries, a social service agency located in the Smith Haven Mall. The County has also called on the Department for consultation on health services for the jail population and migrant workers.

"Right now we're exploring the feasibility of developing an HMO for Suffolk County in conjunction with the Suffolk Community Council and Blue Cross-Blue Shield of Greater New York," said Dr. Cohen.

Dr. Arlene Barro Evaluating the Process

Dr. Arlene Barro belongs to a relatively new — but important and here-to-stay component of medical school education, namely, Evaluation. Titles may differ, with some schools having an "Office of Medical Education" or an "Office of Educational Measurement and Research." But clearly in evidence is a growing trend in medical schools nationally, to set up a professional office to deal specifically with the ways in which the educational process can be improved. One major goal of these offices is to help faculty identify the important instructional objectives, to direct instruction toward those objectives, and to evaluate whether these objectives have been achieved.

Question

"One reason for this trend is accountability. The concern for improving the quality of health care among both consumers and professionals continues to grow. This concern has encouraged medical schools to question the evaluation methods that they have been using," explained Dr. Barro, Assistant Dean for Educational Evaluation for the School of Medicine, adding, "Medical educators work with faculty members to establish criteria for acceptable performance. Setting standards for performance and requiring students to meet these standards should contribute to the development of high-quality physicians."

"In addition," she went on, "medical schools are more and more concerned about improving the quality of their own instruction. The use of a variety of instructional aids and approaches to meet the needs of

the medical students illustrates this."

As an evaluation specialist, Dr. Barro's main goal is "to improve the evaluation approaches and methods that we are now using and to develop new ones." In order to do this she works closely with faculty, curriculum committees, and Systems chairmen.

She added, "It is essential to determine what you want students to do with content that they are required to master. Frequently, in testing we overemphasize the importance of memorizing certain facts and underemphasize assessing the students' ability to apply, to analyze, to synthesize, and to do problem-solving."

Patient Management

In order to evaluate a student's ability to solve clinical problems and to assess the logic that he or she uses to make a diagnosis, Dr. Barro has introduced the technique of using simulated patient management problems to the School of Medicine's curriculum.



Dr. Arlene Barro

New Chairmen

continued from page 1
mine is the mother."

Dr. Mann, a graduate of Albert Einstein College of Medicine, is noted for his work in fetal physiology and is the recipient of several awards for his work. As a commissioned officer with the United States Public Health Service, he served on the National Institute of Children's Health and Human Development at the National Institute of Health in Maryland. He also directs the Laboratory of Perinatal Medicine at the Cornell University College of Medicine.

Dr. Rovnisky, a graduate of the School of Medicine at the University of Pennsylvania, and a former U.S. Air Force Captain, has been both a private practitioner and a medical educator in obstetrics and gynecology, teaching several years at Columbia University and at Mount Sinai School of Medicine.

Planning

The newly appointed co-chairmen will continue the work they've already begun of planning a department that will offer the best in obstetrical and gynecological care, including the management of the more rare and difficult cases.

Dr. Rovnisky added, "We'll be moving in three major directions—an emphasis on maternal and fetal medicine, the development of a well-staffed and professionally equipped gynecological service, and a research component to study such areas as gynecological endocrinology; these are the three legs of the stool."



Dr. Roger Cohen, left, and Dr. Jack Geiger, Professor of Community Medicine, right, chat with Dr. John Hatch from the University of North Carolina. All were former co-workers in Community Medicine programs in Mississippi. Dr. Hatch was a speaker recently in the Monday evening lecture series on Contemporary Issues in Health Care and Public Policy.

What Is Readable?

Could you fill in the missing blanks?

So warm, _____ right hand once more _____ went over again: choice _____, made of finest Ceylon _____ The far east. Lovely _____ it must be: the _____ of the world, big _____ leaves to float about _____ cactuses, flowery meads, snaky _____ they call them.

Probably not. That's a segment from James Joyce's *Ulysses*, a book generally recognized as hard to read.

Now try this: Once _____ a _____, a little _____ had a _____ pony. They _____ in a _____ in the country.

Easy. The point is that readability ranges on a scale from very easy to very difficult.

"It's the readability level that determines if people keep on reading," said Dr. Kay Stolorow, Assistant Director of Research at the School of Allied Health Professions.

The problem she sees is that too many important publications and news items on health have a readability level rating too high or too dull to catch and maintain the interest of readers, who then miss out on getting information most important to their health maintenance.

Consequently, she made a proposal to provide readability analysis consultation to any health affiliated agencies in Suffolk County who have to write brochures, news blurbs, etc. using computer methods which give a quantitative index of reading difficulty. The Regional Medical Plan has awarded Dr. Stolorow a grant for this project. Pat McKernon, a graduate psychology student, is the Research Assistant for this project.

Any people or agencies interested in availing themselves of this service may contact Dr. Stolorow or Pat at 444-2393.

The Clinical Campus Experience

Introduction . . .

One of the most notable features from the early planning of this Health Sciences Center was the decision to be, from the very beginning, not an ivory tower, but a University that extended the length and breadth of the Long Island Community.

This decision was, admittedly, born of necessity. Where could health professions students receive clinical experience in the absence of a University hospital, if not in the already existing facilities? Interestingly, the experience of this first four years of operation has proven that the "clinical campus" plan has sufficient validity to keep it as a permanent part of the Health Sciences Center design.

Specifically, students have received a cohesive medical education, with exposure to the real and practical health care delivery environment, because of a unique partnership between the Health Sciences Center and four major hospitals on Long Island, one in Nassau County, one in both Nassau and Queens Counties, and two in Suffolk, each having its own Dean.

For this special issue on the School of Medicine, the Deans gave an evaluation of the relationship between them and this one School, as they have experienced it:

As the Deans See It . . .

A major point of agreement among the four Deans is that "the Medical School probably could not have been mounted without the consortium of the clinical campus-based faculty," as stated by Dr. James Mulvihill, Dean of the clinical campus at Long Island Jewish-Hillside Medical Center/Queens Hospital Center.

Name any System — Cardiovascular, Endocrine, REspiratory, Musculo-skeletal, etc. — and one would find that clinical campuses were involved in some 30% to 100% of the teaching.

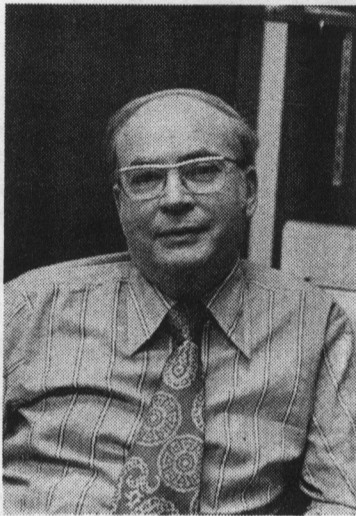
Clinical faculty participation is extensive, involving a financial, physical and time-outlay for the physicians, most of whom hold non-paid appointments.

"Our people will go to Stony Brook, and then because they have responsibilities for a complex set of services here will work from 5 p.m. to 10 p.m. at night or they will do things like come in 1½ hours earlier for a catheterization to get to Stony Brook for a curriculum meeting," said Dr. Mulvihill, adding "We're not complaining. If one wants to be a University-related teaching institution, a certain amount of this is accepted."

Advantages

The advantages of being a part of a growing University campus is admittedly valuable to the clinical campuses, the Deans agreed.

"For example, an isolated Veterans Hospital has very little attractive pull for academically-oriented physicians. But a VA Hospital that is part of a University campus does," stated Dr.



photos by Toni Bosco
Dr. Avron Ross

Jacques Sherman, Dean of the Clinical Campus at Northport VA Hospital. "Because of our partnership, we've been able to recruit exceptionally qualified people for the VA staff. To have a large number of faculty members here means that patient care is notably better."

Dr. Avron Ross, Dean of the Clinical Campus at the Nassau County Medical Center said "a primary teaching hospital is a drawing card for a better house staff."

However, because of the significant contribution of clinical faculty, the Deans feel they have a responsibility to see that their faculty receive appointments in accordance with their skills and contribution.

Curriculum

The Deans gave an A-1 rating to the Systems teaching and to the involvement of the clinical campuses in curriculum planning.

"Through the understanding of people like Dr. Kushner, Dr. Meiselas and Dr. Cohen, we have been able to develop a meaningful role in curriculum planning for the clinical campus," Dr. Mulvihill affirmed, calling this break from the "ivory tower" planning, classic to most medical schools, a "positive thing."

"Clinical campuses have been involved in planning the content, delivery and evaluation of curriculum, especially the Systems teaching and clinical clerkships, and this has been a real strength," he added.

Search for Faculty

The deans have also been able to appoint members to search committees for department chairmen.

"We are able then to structure the committee so that very dedicated types of individuals who participate fully, in committee activities become members, and because they are chosen for special knowledge of the departments involved, can presumably search out people who will be outstanding leaders," said Dr. Ross, adding that in this way the Deans have a great deal of ability to influence quality care in their medical institutions.

Problems

A major problem still unsolved is what Dr. Ross referred to as "housing roulette." Medical students now put in "terrible travel time" getting to clinical campuses, ranging a distance of 15 to 65 miles from their dorms and apartments.

The Dean also sees an increased sense of a "team role" for medical students in the



Dr. James Mulvihill

annualized clerkships, by having a reserved place on the team for medical students throughout the year. This way the student would become not just "latched on" to the team but truly an integral member which the team needs.

"If they don't depend on him, they don't feel the need for his presence," Dr. Ross explained. Communication is also a grey area.

"The lack of highly efficient communication between clinical campus faculty and the University leads to gaps and overlaps. Students often feel people teaching them are not fully aware of what's gone before, or a faculty member could bring up a subject for which medical students have insufficient background," said Dr. Ross.

Team Education

The commitment to have an interdisciplinary approach to medical education raises another question.

"The interdisciplinary concept was unique, but I'm not sure it's working," said Dr. Sherman, adding, "Still, these medical students have a better understanding of the other health disciplines than students did years ago."

Dr. Mulvihill underscored that

the clinical campuses are "the place where interdisciplinary education should be done."

"I don't think clinical campuses have been tapped enough as an on-site resource for interdisciplinary training," he said.

The resources of the clinical campuses have been available cost-free to the University. These partner institutions have absorbed all costs incurred by their staffs for teaching, lecture-preparation, committee meetings, rounds, travel to Stony Brook, etc. Both Dr. Mulvihill and Dr. Ross referred to these as "considerable costs" and indicated their belief that the question of some cost compensations needs serious consideration by the University.

The Deans admit to being in a "sensitive spot," with loyalties to both their own institutions and to the University.

"The Dean has to search his conscience to be truly the liaison person he's supposed to be," said Dr. Ross.

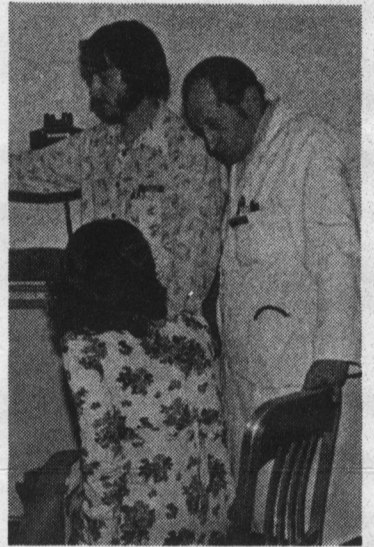
The Deans Propose . . .

The commuting problem: How can a way be found to cut down the amount of time medical students have to be on the road just getting back and forth to clinical campuses, University and home?

"To modify the curriculum so that students would spend their first two years at the University and next two years at the clinical campuses would not be a good solution because this would mean surrendering the Systems teaching which generally has been a unique strength of the Medical School," said Dr. Mulvihill.

He's got, he thinks, a better idea. He's been inquiring about large houses for sale in the Nassau County area, nicely located convenient to both Long Island Jewish and Nassau County Medical Center and wonders why the University couldn't buy one of these 26 to 40-room houses, now greatly reduced in price, as a housing facility for the medical students. A faculty couple could be houseparents. Zoning laws might be a problem in some areas, but this should be explored. An alternative would be for the University to control a block of apartments in the area through a leasing arrangement.

The communications problem: Dr. Ross would like to work on the communications problem. He feels a "retreat weekend" for University and clinical campus faculty and medical students — "a few



Dr. Jacques Sherman consulting with technicians monitoring closed TV programming at the VA hospital in Northport.

unbroken days to hammer things out" — would be a good start.

Educational aid: Dr. Sherman has a project in full production which will reinforce a medical student's training by giving him the opportunity to "replay" lessons of his choice. The largest and most sophisticated two-way closed circuit TV system to be put in a VA Hospital has been installed in Building 12, complete with a studio. Currently, 273 programs have been taped and are available for individual viewing by students in carrels in the library.

Closed circuit TV sets have been installed throughout the main medical-surgical buildings.

The Special Clinical Campus

Brookhaven National Laboratory Medical Research Center, one of the Health Sciences Center's clinical campuses, is a very unusual resource. It is one of only four hospitals in the United States that are clinical-research centered.

"To date, very few medical students have shown an interest in pursuing a full-time career in research, but that is the general picture nationally," stated Dr. Eugene Cronkite, Chairman of the Medical Department and Dean of the Clinical Campus.

"I doubt if more than 1% of the nation's medical students are interested at all in this type of career," he said.

Apprentices

Specifically, what Brookhaven offers is an on-the-job apprentice-type training in

clinical research at the 48-bed hospital to see how the work of clinical investigation is performed.

"We don't have a sufficiently broad spectrum of patients for a mini-clerkship in clinical research to be a part of the medical school curriculum. We can only offer an apprentice-type experience," Dr. Cronkite explained.

Future

The future looks more promising, in Dr. Cronkite's judgment.

"I think the future will see a strong research commitment between here and Stony Brook, particularly with the departments of medicine and surgery. When the University Hospital is

"I suspect Brookhaven will remain in the clinical research resource within the

University structure," the Dean affirmed. completed, the HSC will be developing research programs requiring clinical beds, which we have. Also, University Hospital house officers will want to rotate through a place like this.

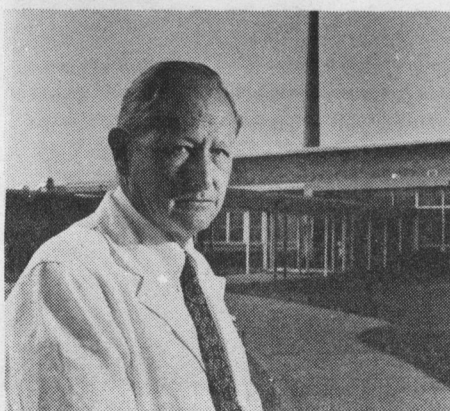


photo by Brookhaven National Laboratory
Dr. Eugene Cronkite

New Campus

The Health Sciences Center will have a fifth clinical campus sometime in the future. An agreement has been signed with the Hamptons Hospital and Medical Center, now under construction in the eastern end of Suffolk County, designating this facility as a teaching center for the University's medical and health professions students. Dr. Irving Sarot, the Center's chief planner, will serve as its Medical Director.

The 194-bed hospital is being built on 45 acres on the north side of Old Country Road in Westhampton Beach. It will be community owned, with outpatient and emergency facilities, community health services, and intensive care units.

Round Up . . .

New Faculty Senator

The new faculty senator for the Health Sciences Center, Antol Herskovitz, believes in the concept of "participative management."

"Members of a community have responsibility for the management and operation of that community," he stated simply upon his election to the University Faculty Senate, an advisory body to the Chancellor, explaining his willingness to serve.

Elected as faculty alternate to Mr. Herskovitz, who is the Director of HSC Media Services, is Lorne Golub, Associate Professor of Oral Biology and Pathology, School of Dental Medicine. Mr. Herskovitz is the second faculty senator for the Health Sciences Center, succeeding James Conklin who served three years.

Mr. Herskovitz stressed that although the Faculty Senate is advisory, "it is a mechanism for providing input into the Chancellor's office and it does have influence." He added that the Chancellor attends each meeting.

Major current concerns of the Senate are faculty governance, affirmative action programs, credit by evaluation, and possible retrenchment in the University system as a result of the budgetary picture.

"We debated and passed a resolution strongly recommending to the Chancellor that in the event retrenchment is required, units have the flexibility to review programs for selective retrenchment rather than be mandated to across-the-board percentage cuts in all programs," said Mr. Herskovitz.

School of Nursing

The School of Nursing in conjunction with the Strathmore Branch of the American Cancer Society offered instruction on self-breast examination to all SUNY students, staff and faculty as well as women of the Three Village Community, given on the south campus on March 11, 12 and 13.

RN Licensing Exam Course

A course designed to prepare students who are graduate nurses for the New York State Board Licensing Examination for Registered Nurses is now being offered. Sponsored jointly by the School of Nursing and the Informal Studies Program of the Center for Continuing Education, the course includes intensive review of medical, surgical, pediatric, obstetrical, and psychiatric nursing. The spring course, one of the few courses of its type ever to be offered on Long Island, began February 24th with each class meeting for four hours per week for a total of 42 hours.



Dr. Kay Stolurow and Dean Robert Hawkins, left, who head the Office of Research and Teaching Resources for the School of Allied Health Professions, confer on P.S.T.A.T. results.

Mental Health in Year 2001

The Department of Psychiatry and the School of Allied Health Professions of SUNY, Stony Brook, in conjunction with the Suffolk County Mental Health Association and Suffolk County Mental Health Department presented an all-day conference on mental health on March 25 entitled "The Year 2001 A.D. — Directions in Mental Health."

The workshop was given by outstanding guests engaged in better mental health for Suffolk County residents and was open to all interested people. The four groups who planned the workshop stated "Our legacy of mental health problems indicates that crystal gazing aside, those of us committed to mental health must begin serious dialogue — . . . so that 2001 A.D. will find us ready to cope with mental health demands."

P.S.T.A.T

P.S.T.A.T. has come to the Health Sciences Center, thanks to Dr. Kay Stolurow, Associate Director for Research in the Office of Research and Teaching Resources of the School of Allied Health Professions.

P.S.T.A.T. is — a powerful language and a simplifier of complicated statistical problems.

You guessed it — P.X.T.A.T. introduces people to the magic and mystery of computers.

It is a programming system called simply The Princeton Statistical Package, which is so user-oriented that "in a couple of hours, most anyone can become quite facile at doing statistical analysis," Dr. Stolurow said assuringly.

Graduate students in the Health Services Administration program are now taking a course in systems analysis, statistics, data analysis and operations research, using this new program system.

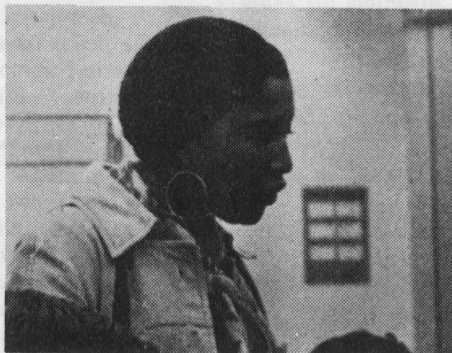
"Hospital administrators have to keep track of vast amounts of record-keeping, inventories, accounting, patient records, medications — all of which are more and more going to utilize computers," said Dr. Stolurow.

Dr. Tom Dunaye, Chairman of the Health Services Administration programs, said he is enthusiastic about the value of this course to his graduate students.

"Nearly every hospital and major health organization today needs and uses computer-based information systems, and most current health administrators have next to no knowledge of how to take best advantage of these tools. Our students are not trained as computer programmers or operators, but rather as information systems analysts who will be able to provide improved management direction for the technical contribution these resources can make for more efficient and higher quality medical care," said Dr. Dunaye.

First Career Day

A first career day, with special emphasis on minority students was held in December, coordinated by Anne Gilbert, Assistant to the Vice President for Minority Affairs. The Saturday program introduced students residing in the metropolitan area to the varied health professions in which the Center provides training and education. Specific information on programs, applications, academic requirements, financial aid and housing was given by administrators and faculty members of the various schools on campus.



Anne Gilbert speaking with students during Career Day.

Women's Health

As guests of the "Women and Health" class in the School of Social Welfare, Jeannie and Lollie Hirsch, a mother and daughter team, presented a program on cervical self-examination for interested south campus women. Mrs. Lollie Hirsch, a mother of five, has authored a book entitled *The Breeders — Childbirth From the Woman's Viewpoint*, to be published soon by Hawthorne Press.

Swedish Social Policy Experts

In February, a noted husband and wife team of experts on Sweden's social policies gave a public lecture in Building F on the current debates on social policy now going on in Sweden. The visit by Dr. Bengt Borjesson, former Dean of the Stockholm School of Social Work and current Director of Barnbyn Ska, an internationally famous family research center, and his wife, Kirsten Vinterhed, the social policy specialist for Stockholm's leading newspaper, *Tagens Nygter*, was sponsored by the School of Social Welfare.

Workshop to Deal With Academic Needs of Minorities

A workshop dealing with the need for academic support services for minority students has been set for April 26.

Planned and coordinated by Anne Gilbert, Assistant to the Vice President of the Health Services for Minority Affairs, the workshop, entitled *Academic and Career Counseling As It Relates to Minorities*, is open to professional educators and counselors from high schools, junior colleges, and senior colleges in the metropolitan area. It is also open to university faculty and staff.

The Saturday event will be held in Building F beginning at 9 a.m. and ending at 4 p.m. For further information, contact Miss Gilbert at 4-2341.

Psychodrama

An open demonstration of psychodrama was presented on Saturday, March 1 in the Union Auditorium, sponsored by the School of Social Welfare. Robert W. Siroka, a leading psychodramatist and executive director of the Institute for Social Therapy in New York City conducted the session.

In-Service Training for Dental Faculty

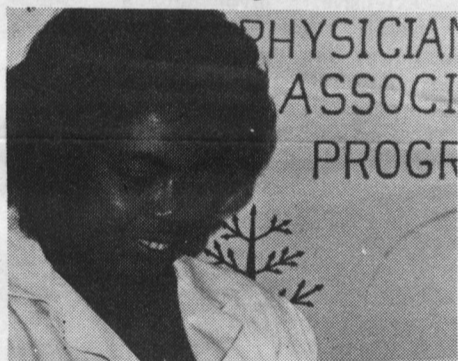
An in-service training program for faculty members of the Dental School has begun. To date, programs have been held on the Etiology of Dental Caries, in January, and the Epidemiology of Dental Caries, held in March.

British Health Care System

Dr. James Mulvihill, Dean of the Clinical Campus at L.I. Jewish-Hillside Medical Center/Queens Hospital Center recently moderated a program on the British Health System. A speaker was Dr. Robert K. Match, Executive Vice President and Director of L.I. Jewish-Hillside Medical Center and Professor of Community Medicine in the School of Medicine who spoke on "British Health System — Can We Learn From Its Experience?" Dr. Match recently returned from a study tour of British Health System as a World Health Organization Fellow. Also participating in the program was Dr. Steven Jonas, Associate Professor of Community Medicine, who spent two years in the British Health System.

PA Alumnus Honored

Cecelia Figueras, a 1974 graduate of the Physicians Associate Program of the School of Allied Health Professions, and now working at the VA Hospital in Northport, received the "Honorary Intern of the Year" award presented by the hospital for outstanding service.



Cecelia Figueras

Continuing Ed for PA's

The School of Allied Health Professions and Emory University in Atlanta, Georgia have planned an invitational conference to be held from May 11 through May 14, which will try to identify the areas in which continuing education for P.A.'s — assistants to the primary care physician — looms as both necessary and desirable, particularly those working in inner city and isolated rural sections. Attention will also be given to finding methods by which these needs might be met effectively.

The conference, to be held in Williamsburg, Virginia, selected as the "halfway" point for traveling participants, represents a first effort undertaken by these universities to focus on a systematic approach to continuing education for P.A.'s.

Dean Edmund McTernan, said he sees this first step in continuing education for P.A.'s as being a precedent-setter and reference source for future continuing professional education programs, not only for P.A.'s but also for the whole category of health manpower.

The two participating universities have gained national attention as leading institutions for health manpower education. Both have established programs for P.A.'s which have gained full accreditation by the Council on Medical Education of the American Medical Association.

Participation in the conference which is being funded by a private foundation, will be limited to 30 people.