The Bulletin of Vanderbilt University 1987–88

Medical Center



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Policies concerning non-curricular matters and concerning withdrawal for medical or emotional reasons will be found in the *Student Handbook*.

Vanderbilt University Medical Center







The Medical Center

School of Medicine School of Nursing University Hospital



Vanderbilt University 1987–88

Containing general information appointments and courses of study for the 1987–88 session corrected to 15 May 1987 Nashville

School of Medicine Calendar, 1987-88

FALL SEMESTER 1987

Registration 3rd and 4th years / Monday 24 August
Registration 2nd year / Tuesday 25 August
Registration 1st year / Monday 24 August to 26 August
Classes begin 3rd and 4th years / Monday 24 August
Classes begin 1st and 2nd years / Thursday 27 August
Thanksgiving holidays / Thursday 26 November to 29 November
Exam period elective courses 1st and 2nd years / Monday 7 December
to 11 December
Instruction ends required courses / Friday 11 December
Exam period required courses 1st and 2nd years / Monday 14 December
to 18 December
Fall semester ends / Friday 18 December
Christmas holidays / Saturday 19 December to Sunday 3 January

SPRING SEMESTER 1988

Spring semester begins / Monday 4 January
Spring holidays 1st and 2nd years / Saturday 27 to 6 March
Spring holidays 4th year / Wednesday 23 March to 27 March
Spring holidays 3rd year / Saturday 2 April to 10 April
National Boards (Part II) 4th year / Tuesday 12 April and 13 April
Exam period elective courses 1st and 2nd years / Monday 25 April to 29 April
Instruction ends required courses 1st, 2nd, and 4th year / Friday 29 April
Examination period required courses 1st and 2nd years / Monday 2 May to 6 May
Commencement / Friday 13 May
National Boards (Part 1) 2nd year / Tuesday 14 June and 15 June
Instruction ends 3rd year / Friday 17 June
Examination period 3rd year / Monday 20 June to 24 June

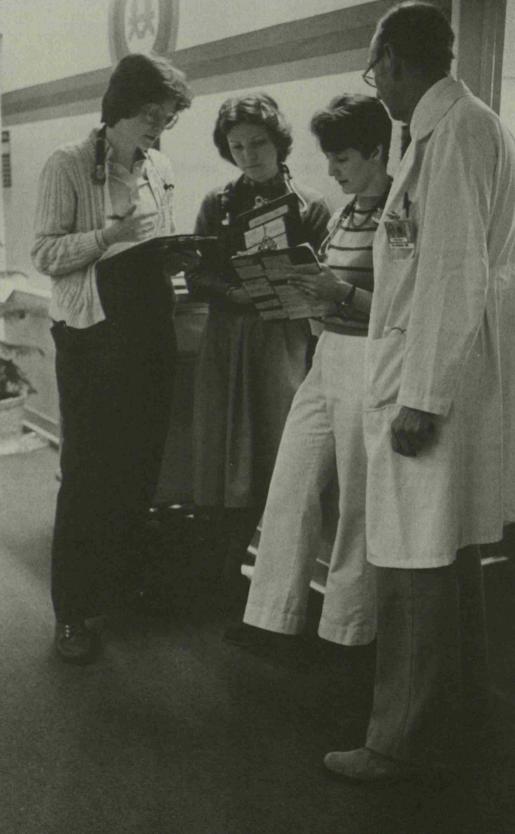
School of Nursing Calendar, 1987-88

FALL SEMESTER 1987

Orientation for transfer students / Saturday 22 August
Registration / Tuesday 25 August and 26 August
Classes begin / Thursday 27 August
Homecoming / Saturday 31 October
Thanksgiving holidays and fall break / Sunday 22 November to 29 November
Classes end / Wednesday 9 December
Reading days and examinations / Thursday 10 December to 18 December
Christmas holidays begin / Saturday 19 December

SPRING SEMESTER 1988

Registration / Tuesday 12 January
Classes begin / Thursday 14 January
Spring holidays / Sunday 6 March to 13 March
Founder's Day / Thursday 17 March
Parents' Weekend / Friday 25 March to 27 March
Classes end / Wednesday 27 April
Reading days and examinations / Thursday 28 April to 6 May
Commencement / Friday 13 May



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The Medical Center

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An Academic Health Care Center for the Southeast

ANDERBILT University Medical Center has a three-fold mission—the education of health professionals, research in medical sciences, and patient care. This mission is carried out in three main operating units—the School of Medicine, the School of Nursing, and the 661-bed Vanderbilt University Hospital, where patients receive exemplary care from physicians and nurses who are creative teachers and scholars, instructing their students in healing sickness and unraveling its mysteries.

Members of the faculty maintain proficiency and establish working relationships in the professional community by participating directly in patient care. Their practice encourages the free flow of ideas among the School of Medicine, the School of Nursing, and the University Hospital, and facilitates joint research activities. As a result, the Medical Center can undertake significant, innovative programs that set the standard for

health care in the region.

Such outstanding service has established Vanderbilt's reputation as a referral center for the Southeast. Physicians from other states and foreign countries refer to Vanderbilt those patients whose health problems demand interdisciplinary skills and expert knowledge. Consequently, students in the Medical Center encounter a wider range of diseases than they would likely see in many years of private practice.

The Medical Center furnishes support for University-wide programs in engineering and law—and makes possible the Ann Geddes Stahlman professorship in medical ethics as well as interdisciplinary programs in

philosophy, religion, and the social sciences.

Through the education of physicians, nurses, biomedical scientists, and technicians in allied health professions—and through the best possible care of patients—Vanderbilt Medical Center works to improve the health of the individual. Through scholarship and research leading to new knowledge about the nature, treatment, and prevention of disease, the Medical Center works to improve the health of all.

Facilities

Vanderbilt University Hospital

The hospital is a dramatic, twin-tower structure of red brick, especially equipped to provide complex and vital services to its patients, continuing Vanderbilt's century-old tradition of the best in patient care.

At the fifth floor level is a unique "playground in the sky" for youngsters in the Children's Hospital and Junior League Home. This spacious courtyard utilizes the roof of the fourth floor as a playground, providing the children access to outdoor recreation just a few steps from their rooms.

Rudolph A. Light Hall

Completed in 1977, Light Hall provides classroom and laboratory space for students in the School of Medicine. It houses the departments of biochemistry and physiology and the Howard Hughes Medical Institute. Named for Dr. Rudolph A. Light, former professor of surgery and member of the Board of Trust, Light Hall is connected by tunnels to the West Wing of Medical Center North and to the Hospital.

Medical Center North

Outpatient clinics, the 21-bed Newman Clinical Research Center, Cooperative Care Center, dietary services, and most other support functions are in Medical Center North. The complex also houses such specialized treatment and research units as the Burn Center, the Rehabilitation Center for patients with severe physical handicaps, Vanderbilt Institute for Treatment of Alcoholism (VITA), and Physical Therapy Services.

Faculty and administrative offices and research space for all Medical School departments except biochemistry, neurology, and physiology are in Medical Center North. The original portions of the building were completed in 1925. Since that time a number of connecting wings and buildings have been added:

A. B. Learned Laboratories. Completed in 1961 and dedicated primarily to research in the basic sciences, this building is shared with the general University and is attached to Medical Center North at the north side.

West Wing. Known as the Round Wing, this portion was completed in

1962.

West Court Building. Completed in 1964, this building is entered off the plaza connecting Medical Center North with the hospital.

Zerfoss Building. Completed in 1967, the Zerfoss Building is located

north of the Round Wing.

Northwest Court. This wing, also completed in 1967, is located north of the Round Wing.

Joe and Howard Werthan Building. The Werthan Building, completed in 1972, fronts on 21st Avenue South.

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Vanderbilt Child and Adolescent Psychiatric Hospital

Opened in 1985 as a joint venture of Vanderbilt and the Hospital Corporation of America, this hospital provides care for children and adolescents with general psychiatric problems, chemical dependency, and psychosomatic and neuropsychiatric problems. The hospital is a regional referral center for middle Tennessee and serves as a teaching and research facility for medical students and resident physicians in psychiatry.

Medical Center South

The Medical Center South includes inpatient facilities for child psychiatry, the department of neurology, the Jerry Lewis Neuromuscular Disease Research Center, the Comprehensive Development Evaluation Center, and the Office of Space and Facilities Planning—Medical Center.

Vanderbilt Clinic

The Vanderbilt Clinic, scheduled for completion in January 1988, is designed to house all outpatient units and clinics of Vanderbilt Hospital.

Mary Ragland Godchaux Hall

Contains classrooms and offices of the School of Nursing faculty.

Center for Nursing Research

Established in 1987 jointly by the School of Nursing, Vanderbilt Hospital, and Veteran's Administration Hospital, the Center for Nursing Research will be used to develop and test clinical devices and instruments; conduct research in patient care, nursing management, and related issues; and set up models of health care problems, delivery systems, fiscal analysis, and staffing ratios. The center is on the third floor of Godchaux Hall.

Helene Fuld Instructional Media Center

Established in 1967 by the Helene Fuld Health Trust and housed in Godchaux Hall, the center provides multimedia learning materials, including computer terminals and microcomputers, either in a carrel area or in classrooms. More than 1,000 programs are available for instructional purposes. In addition, the School of Nursing receives new programs via the Helene Fuld television network that serves all the schools in the Helene Fuld Health Trust system.

Langford Auditorium

Located in the Medical Center area, this 1,200-seat facility is for general University use.

Bill Wilkerson Hearing and Speech Center

A community-operated diagnostic and treatment center for audiological and speech problems, the Wilkerson Center is located at Edgehill Avenue and 19th Avenue South.

Center for Health Services

The Center for Health Services, occupying a historic residence near the Round Wing, is a multidisciplinary entity with campus-wide student and faculty participation. It was founded in 1971 to encourage and pursue improvements in health care, primarily in under-served communities. The curriculum of the center is designed around current health care issues. Outreach projects are directed by students with faculty advice. At present, course offerings for medical students are non-credit and elective credit in certain departments.

Medical Arts Building

Erected in 1955, the Medical Arts Building provides members of the clinical faculty with convenient office space and houses a number of Vanderbilt Hospital outpatient clinics.

The Cooper Building

Twelve miles from campus, on the grounds of the Middle Tennessee Mental Health Institute, the Cooper Building has been made available to Vanderbilt by the State of Tennessee. It houses the Tennessee Neuropsychiatric Institute, which is dedicated to clinical and basic research in the area of mental health.

Affiliated Facilities

Vanderbilt is closely affiliated with the 485-bed Veterans Administration Medical Center—a Vice-Chancellor's Committee hospital containing 439 acute-care beds and outpatient facilities—and with the Howard Hughes Medical Institute, which occupies the seventh floor of Rudolph A. Light Hall.

The Nashville Metropolitan General Hospital and Saint Thomas Hospital are closely affiliated with the educational programs of the Medical and Nursing schools. The Medical Center also utilizes the facilities of

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Baptist Hospital, the Luton Community Mental Health Center, the Metro Nashville–Davidson County Health Department, and Park View, Southern Hills, and West Side hospitals.

Medical Center Library

Founded in 1906 as the library of the School of Medicine, the Medical Center Library was moved in 1964 to its present location in the northeast wing of Medical Center North. These quarters were improved and expanded in 1977. The library serves the bibliographical and informational needs of all Vanderbilt University personnel who are engaged in the study, teaching, or practice of the health sciences and is a major informa-

tion resource for the health professionals of this region.

The library, which is the official archive of the Medical Center, contains over 140,000 volumes. About two-thirds of these are bound periodicals, and nearly 1,800 current periodicals and serial publications are received on subscription. The History of Medicine Room houses a collection of materials illustrating the roots and development of medicine and nursing, especially in the United States. Access to materials in the Library is provided through the Library's integrated, automated system—Acorn. Public catalog terminals are located in all Library divisions and units, and circulation of books is handled by this new system, as well.

The library provides seating for some 200 readers. It offers a wide range of services, including reference assistance and advice on bibliographic matters; instruction and orientation in use of library resources and in information retrieval; literature searches; document delivery; and the usual circulation, reserve book circulation, and copying services. Online access to MEDLINE and the many other computer-based information retrieval services is also available. The library participates in various cooperative ventures and projects, including the Online Computer Library Center (OCLC) and the nationwide Regional Medical Library Program.

In addition to the resources of the Medical Center Library, readers have access to the total resources of the Jean and Alexander Heard Library, numbering over 1.6 million volumes. Included are the Central, Divinity, Education, Law, Management, Music, and Science Libraries.

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Canby Robinson Society

In 1978 Vanderbilt established the Canby Robinson Society in honor of George Canby Robinson, M.D., the Medical School's first dean. It was through Dr. Robinson's leadership that the teaching hospital and the research laboratories were placed under one roof, thrusting Vanderbilt to the forefront of medical education. His innovation regarding the diversity of the Medical School's curriculum, with emphasis on biomedical research and improved health care, is a legacy that continues today.

The six-hundred-plus members, including an active board, provide impetus to the Medical Center's philanthropic programs. Through the leadership of this group, private support to the Medical Center has increased over the past several years, with the society contributing over

four million dollars last year.

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MARGARET S. WARNER, Nashville WILLIAM K. WARREN, Tulsa, Oklahoma NATALIE WARREN, Tulsa GEORGE WATERHOUSE, Nashville GLORIA WATERHOUSE, Nashville W. BEDFORD WATERS, Maywood, Illinois WILLIAM R. WELBORN, JR., Sheffield, Alabama LINDA WELBORN, Sheffield LEAH ROSE WERTHAN, Nashville ELLEN WILLS, Nashville DAVID K. WILSON, Nashville EDITH WINN, Lake Arthur, Louisiana CHARLES E. WORK, Cincinnati, Ohio MILDRED WORK, Cincinnati THOMAS L. YOUNT, JR., Nashville JANE YOUNT, Nashville RAYMOND ZIMMERMAN, Nashville ARLENE I. ZIMMERMAN, Nashville EDMOND P. ZIMSKI, JR., Boca Raton,

The Environment

Favored for its key location in the rapidly developing sunbelt region, Nashville offers unique professional, cultural, and recreational opportunities.

Florida

The modern buildings and restored historic structures punctuating the downtown skyline give graphic evidence of the city's business vitality. Nashville has long been known as a center of banking, finance, publishing, and insurance. The rapid expansion of manufacturing and service operations since 1960 has completed a picture of prosperity that resists the swings of national economic cycles. Nashville is home base for a number of major national corporations, including Hospital Corporation of America, Genesco, and Aladdin Industries. Many major manufacturing installations—among them Dupont, Ford, Avco, Nissan, and the new General Motors' Saturn facility—are located in the area.

Nashville is the state capital, and government agencies constitute a substantial portion of the city's economic base. In addition, the city's sixteen colleges and universities include two major medical centers—Vanderbilt and Meharry Medical College—and studies in the health sciences are enriched by Nashville's status as a regional medical center for the Southeastern states.

More than a dozen colleges and universities attract more than thirty thousand students from the U.S. and around the world. Vanderbilt is the best known of these institutions, which form a broad, influential community of higher education and earn Nashville the nickname "Athens of the South."

The Medical Center 23

Cultural life is greatly enriched by the Tennessee Performing Arts Center, with auditorium facilities for the Nashville Symphony Orchestra and a great variety of theatrical and musical presentations. In addition, music, drama, and dance performances by both touring and resident artists are regularly scheduled events on the Vanderbilt campus.

Some of the most sophisticated soundstage and television studio facilities in the United States are here. RCA, Columbia, and many other record companies have offices and recording studios in Nashville, which

enjoys longstanding fame as Music City, U.S.A.

Nashville's many restaurants cater to dining preferences ranging from barbecue and turnip greens to Peking duck. Entertainment choices are likewise wide-ranging, from hole-in-the-wall bluegrass establishments to swank, showcase supper clubs. For recreation, the area surrounding Nashville is a natural for hiking, camping, and caving. An abundance of streams and rivers allows boaters to choose lazy, scenic float trips or the thrilling trials of whitewater. Old Hickory and Percy Priest lakes, each about thirty minutes from Vanderbilt, are popular with skiers, sailors, and anglers. The Nashville Sounds play baseball April through September and, together with Vanderbilt's football, basketball, and other Southeastern Conference teams, generate sports excitement throughout the school year.

The city's many beautiful residential areas, easily accessible to offices, shopping, and recreation, provide a comfortable environment for family

life.

All these diverse elements of the city are drawn together by a progressive form of city-county metropolitan government that has been studied and adopted by many other cities since its inception in 1964.

The University

One-and-a-half miles from Nashville's downtown business district lies Vanderbilt University's 330-acre campus, which adjoins and includes the Medical Center facilities. Here arrogant squirrels scamper across broad lawns and up the glossy-leaved magnolias and towering oaks that shade the brick walkways connecting all parts of the University complex.

Vanderbilt was founded in the reconstruction period following the Civil War, when Commodore Cornelius Vanderbilt gave a million dollars to build and endow a university that would "contribute to strengthening the ties which should exist between all sections of our common country." Medical education has been an integral part of the University from its

very beginning. The School of Nursing was founded in 1909.

Today Vanderbilt is a private, selective university with a strong faculty of nearly 1,400 full-time members and a diverse student body of about 8,600 from "all sections of our common country." Academic work is still governed by the honor system that was inaugurated at the school's founding. The University now consists of ten schools:

The College of Arts and Science, offering the Bachelor of Arts and Bachelor of Science.

The Graduate School, offering the Master of Arts, the Master of Arts in Teaching, the Master of Science, and the Doctor of Philosophy.

Blair School of Music, offering studies leading to the Bachelor of Music

degree.

The Divinity School, offering the Master of Divinity and the Doctor of Ministry.

The School of Engineering, offering the Bachelor of Engineering, the Bachelor of Science, and the Master of Engineering.

The School of Law, offering the Doctor of Jurisprudence. The School of Medicine, offering the Doctor of Medicine.

The School of Nursing, offering the Bachelor of Science in Nursing and the Master of Science in Nursing.

Owen Graduate School of Management, offering the Master of Manage-

ment and the Master of Business Administration.

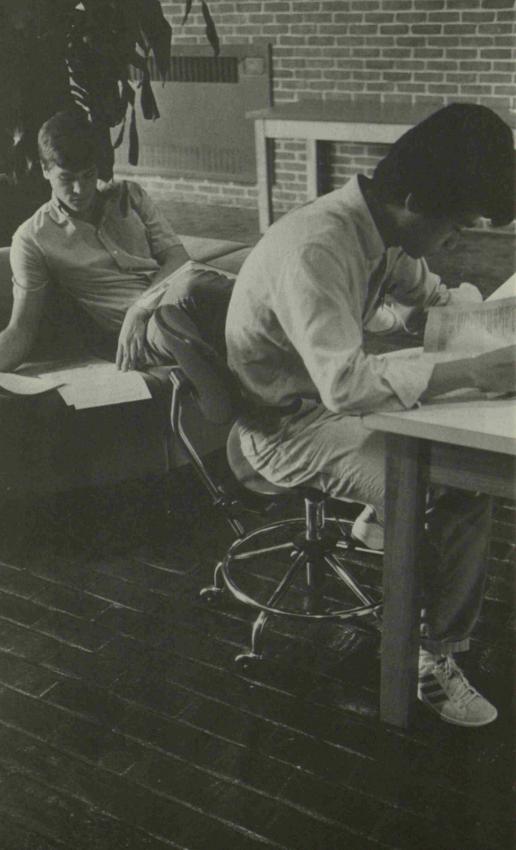
Peabody College offering the Bachelor of Science, the Master of Education, the Master of Library Science, the Specialist in Education, and the Doctor of Education.

No honorary degrees are conferred.

Vanderbilt is a member of the Association of American Universities and is accredited by the Southern Association of Colleges and Schools.

The Medical Center 25





Life at Vanderbilt

ANDERBILT provides a full complement of auxiliary services to meet the personal needs of students, to make life on the campus comfortable and enjoyable, and to provide the proper setting for academic endeavor.

Housing Facilities

The Office of Residential and Judicial Affairs provides suitable and appropriate housing for as many graduate and professional students as possible. Applications and inquiries concerning housing should be addressed to the Office of Residential and Judicial Affairs, Box 1677, Station B, Vanderbilt University, Nashville, Tennessee 37235, as soon as notice of admission is received. A \$200 deposit is required at the time of application.

Entering students who apply by 1 May are given priority for housing space. After 1 May, assignment is made on the basis of the date of application.

Apartments are leased for the entire academic year. Students who are assigned space on the campus are thus committed for one year and should understand that only withdrawal from the University will cause the lease to be terminated.

Residential occupancy is subject to the terms and conditions of a lease executed by the occupants. Only full-time students at Vanderbilt are eligible for campus apartments. Apartments must be vacated within twenty-four hours if the occupants cease to be students.

Because housing on the campus is limited, unmarried students must share apartments: two per efficiency, two per one-bedroom, and three per two-bedroom.

University housing for graduate and professional students is available

in the following facilities:

Lewis House, on the south side of campus, is an eleven-story apartment building with air-conditioned efficiency, one-bedroom, and two-bedroom apartments. It is primarily for married students. There are recreational facilities for children.

Oxford House contains efficiency and one-bedroom apartments in an eleven-story building on 21st Avenue South at Dixie Place, near the Medical Center. These apartments are usually assigned to single students. There are no provisions for children.

The Married Students Apartments, located at the eastern edge of campus on 18th Avenue South are town-house apartments with living

room and kitchen downstairs and two bedrooms upstairs. The apart-

ments are designed for families.

The Garrison Apartment complex on 18th Avenue South has air-conditioned efficiency and one-bedroom units. Single as well as married students are assigned here.

Off-Campus Housing

The Office of Residential and Judicial Affairs maintains a listing of available off-campus accommodations in the Nashville area. The majority of rental property is close to the campus. Cost, furnishings, and conditions vary greatly. For best choices, students seeking off-campus housing should visit the office by early July for suggestions and guidance.

Dining Services

Several dining facilities on campus offer a variety of types of service and food. Branscomb Dining Hall, the Divinity Refectory, the Cumberland Room (Hill Center), the Rand and Commodore Dining Rooms (Rand Hall), and McTyeire Dining Hall all offer complete menus. At least two of these facilities are open seven days a week, from 7 a.m. till 7 p.m.

The Overcup Oak in Sarratt Student Center has an informal, pub-like atmosphere. Specialty foods are available for lunch and dinner. Another facility is the cafeteria in Medical Center North. This operation will be moving to its new location in the Vanderbilt Clinic in Janury 1988.

Through liberal board plans ranging from \$100 to \$600 per semester, students may use meal cards to purchase food, al la carte, at any of the

above listed locations.

Counseling Center

The Psychological and Counseling Center is a broad-based counseling center that is available to students, faculty, staff members, and their immediate families. Services include:

-Individual and group counseling for personal problems and issues

—Group support programs for learning special techniques or skills such as relaxation, assertiveness, marital communication, reading and study skills, and weight, stress, and time management

-Administration of national testing programs

—Career counseling

-Outreach and consultation with faculty and staff

Those eligible for services may make appointments by visiting the Counseling Center at 300 Oxford House, at Twenty-first Avenue South and Dixie Place, or by calling 322-2571.

Student Health Service

The Vanderbilt Student Health Service is a student-oriented facility that provides medical care for chronic and acute conditions. The director of the Health Service is a tenured member of the Medical Center faculty.

The following general health services are provided without charge:

-Visits to staff physicians and nurse practitioners

-Personal counseling by psychiatrists and psychologists

-Routine treatments, dressings, and suturings

-Confidential testing to detect common communicable diseases

-Educational information and speakers for campus groups

Students are billed for any services provided by the Medical Center; many services, however, may be covered by the student hospitalization

insurance policy.

The Health Service is open from 8 a.m. to 4:30 p.m., Monday through Friday, and 8:30 a.m. until noon on Saturday. Students are requested to call for appointments when possible, but "walk-ins" are helped on a first-come first-served basis. When Student Health is closed, students may receive medical care at the emergency room of Vanderbilt University Hospital. They will be charged for emergency room services, but a part of this cost may be covered under the student insurance plan.

A twenty-four-hour consultation service is also available (except during

summer and scheduled academic breaks) by calling 322-2427.

Hospitalization Insurance Plan

All students at Vanderbilt are required to have adequate hospitalization insurance coverage, and a health insurance plan is offered through the University. This plan is designed to provide hospital, surgical, and major medical benefits. A brochure explaining the limits, exclusions, and benefits of insurance coverage and a waiver/acceptance card are mailed to all new and returning medical students prior to registration.

The annual premium is in addition to tuition. Coverage extends from 21 August until 20 August of the following year, whether a student re-

mains in school or is away from the University.

A medical student who does not wish to subscribe to the insurance plan offered through the University must notify the Medical School Office of Student Services of adequate coverage under another policy. New students will automatically be covered under the University policy unless a waiver card is received by the Medical School Office of Student Services before or during registration. Returning students must submit an acceptance/waiver card only if they wish to change their current insurance status.

Notice of cancellation or waiver of insurance coverage must be received by the Medical School Office of Student Services by 15 October.

Family Coverage. An additional premium is charged for family hospital coverage. Married students who wish to provide coverage for their families may secure an application form from the Medical School Office of Student Services at the time of registration.

International Student Coverage. International students and their dependents residing in the United States are required to purchase for-eign-student health insurance. No exceptions are made unless, in the judgment of the University, adequate coverage is provided from some other source. This insurance is required for part-time as well as full-time students. Information and application forms are provided through the Office of International Services.

Services for Handicapped Students

Vanderbilt has a strong commitment to persons with disabilities and provides unique services from the first day of their academic careers. Among the University's many services are: readers, brailled or taped books, and special print-enlarging equipment for visually impaired persons; assistance in locating interpreters for hearing impaired persons; and modifications of class locations and assignments for persons with mobility impairments.

The Opportunity Development Center serves as a resource regarding complaints of unlawful discrimination concerning state or federal equal

opportunity laws.

The University provides access to academic programs, parking, and recreational facilities. Specific concerns pertaining to services for people with disabilities should be directed to Stephen B. Moore, Associate Director, Financial and Administrative Services, School of Medicine, 115 Light Hall, Nashville, Tennessee 37232 or Patricia L. Peerman, Director of Student Advising, School of Nursing, 106 Godchaux Hall, Nashville, Tennessee 37240. The Opportunity Development Center is also available to help with any specific concerns. Write Pat Pierce, Director, P.O. Box 1809, Station B, Nashville, TN 37235.

Child Care Center

Vanderbilt Child Care Center operates as a service to University staff, faculty members, and students. The program serves 89 children, six weeks old through kindergarten. Tuition is determined by the child's age and family income. The center is open from 6:30 a.m. to 5:30 p.m. Daily activities always include outdoor play, music, art, and listening experiences. Additional information is available from the Vanderbilt Child Care Center, Box 83, Peabody College, Nashville, Tennessee 37203.

Police and Security

Of primary concern to the Department of Police and Security is the protection of students, faculty and staff members, and the assets of the University. Security services are provided in response to this concern.

Shuttle Bus Service

The University Shuttle Bus Service operates from 7 a.m. to 2 a.m., Monday through Friday, and 6 p.m. to 2 a.m. on weekends. The bus is accessible to persons with disabilities. Schedule and route information may be obtained at the Department of Police and Security or by calling 322-VUSS. The shuttle bus service does not operate on holidays or during academic break periods.

Escort Service

A vehicular or walking escort service is available after dark for persons who need an escort for personal safety reasons or for those who need transportation because of physical disability. The telephone number for the service is 321-8888.

Blue Light Emergency Telephones

These highly visible phones are strategically placed around the campus. Simply lifting the receiver identifies the location and sends an immediate message to the Department of Police and Security.

Lost and Found

Articles abandoned on campus are turned in to the Department of Police and Security in Alexander Hall, 2505 West End Avenue. Students are advised to label all personal belongings with proper identification.

Vehicles and Parking on Campus

Parking space on campus is severely limited. Cars, motor bikes, and bicycles owned by students must be registered with the Department of Police and Security. Students will be assigned to specific areas of the campus for parking purposes, but off-campus parking is strongly encouraged.

Bishop Joseph Johnson Black Cultural Center

The meeting place and center of activities for Vanderbilt black students in the seventies, Residence 4 was renovated as a student center in 1984

and named the Bishop Joseph Johnson Black Cultural Center, honoring the memory of Vanderbilt's first black student (B.D. '54, Ph.D. '58). The Bishop Johnson Center sponsors lectures, symposia, and social events, and provides a community home for students of all Vanderbilt schools.

Women's Center

The Women's Center was established in 1978 to provide support for women at Vanderbilt and resources about women, gender, and feminism for the University community. Programs for students, staff, and faculty are scheduled regularly during the fall and spring semesters, and are publicized in the monthly newsletter, *Women's VU*, which is distributed without charge to campus addresses on request.

The center houses a small library with an excellent collection of unbound materials such as clippings, magazines, and journals. Books circulate for two weeks. Copy facilities are available on the premises. The center is located on West Side Row, and is open weekdays from 8:30 a.m.

to 5 p.m.

Sports and Recreation

Graduate and professional students are encouraged to participate in the many physical activity classes, intramurals, and club sports offered by the University. Spouses and family members must pay a user fee to use the facilities (includes towel and locker).

The physical activity classes, including such unusual ones as *tae kwon do*, wind surfing, and scuba diving, are offered along with the old standbys: tennis, volleyball, and racquetball. Physical activity classes are offered on an elective, no-credit basis. Eighteen club sports provide opportunity for participation in such favorites as sailing, fencing, rugby, and lacrosse.

The University recreation facilities include gymnasiums, indoor and outdoor tracks, an indoor tennis center plus many outdoor hard courts, an indoor swimming pool, a nautilus room, racquetball courts, and softball diamonds. Playing fields are irrigated and constantly maintained to assure excellent field conditions. Excellent lighting is available for night games.

Students may purchase tickets to Vanderbilt basketball and football games at reduced rates after their ID cards have been validated.

Religious Life

The Office of University Ministry exists to provide occasions for religious reflection and avenues for service, worship, and action. The Office of University Ministry and its staff of chaplains (Baptist, Episcopal, Jewish, Presbyterian, Roman Catholic, and United Methodist) provide many

opportunities for involvement; the Alternative Spring Break; Vanderbilt Prison Project, the Oxfam Fast, the Second Harvest Food Bank, the Student Y, and the interracial, student-initiated Racial Environment Project are major service projects. The Holocaust and Martin Luther King lecture series provide two intense weeks of lectures investigating these climactic historical events and times.

Worship services for Catholics and Episcopalians are conducted in chapels on campus. Provision for worship by other Christian groups and for Muslim students is also made by the University.

Sarratt Student Center

The Madison Sarratt Student Center provides a wide variety of programs and activities for the campus community. The center is equipped with a movie theatre where classical and contemporary films are shown nightly, large and small meeting rooms for conferences and seminars, a game room, meeting and work space for student organizations, an art gallery, craft and darkroom space for classes and individual work, facilities for the several campus publications and radio station, comfortable reading rooms and lounges, and a deli, The Overcup Oak.

Education Records

Vanderbilt University is subject to the provisions of federal law known as the Family Educational Rights and Privacy Act (the Buckley Amendment), affording students rights of access to education records and imposing obligations on the University in the release and disclosure of

those records to third parties.

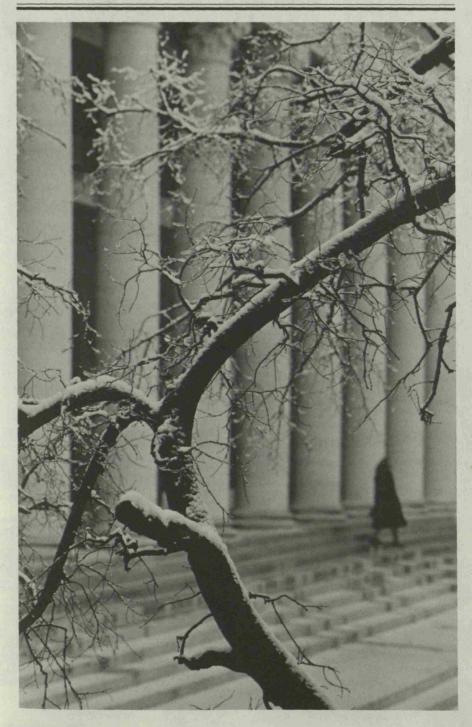
In order to comply with federal regulations promulgated pursuant to the Buckley Amendment, Vanderbilt University has formulated and adopted institutional policies and procedures to be followed by the University and by others with regard to the disclosure of information from the education records of current and former University students. Copies of these policies can be obtained by students who are or have been in attendance at Vanderbilt University from the University Registrar, 239 Alexander Hall. The final federal regulations pursuant to the Buckley Amendment will also be available for inspection by students.

For purposes of the Buckley Amendment, Vanderbilt University has designated the following information as "directory information" and may make such information available to any person without the student's consent unless the student gives notice as provided for below: the student's name, address, telephone number, date and place of birth, major field of study, participation in officially recognized activities and sports, weight and height of members of athletic teams, dates of attendance, degrees, residency appointments, and awards received, the last education agency or institution attended by the student, and other similar information.

Any student who does not wish disclosure of directory information should notify the University Registrar in writing, specifying the type or types of directory information to be withheld. Such notification must be given within a reasonable period of time after the completion of the stu-

dent's first registration of the academic year.

If a student believes that the University has failed to comply with the Buckley Amendment and does not wish to use the grievance procedure set forth in the University policies and procedures to resolve a grievance, or is dissatisfied with the outcome of such procedure, the student can file a written complaint with the Family Educational Rights and Privacy Act Office, Department of Education, 4511 Switzer Building, Washington, D.C. 20202.





The School of Medicine

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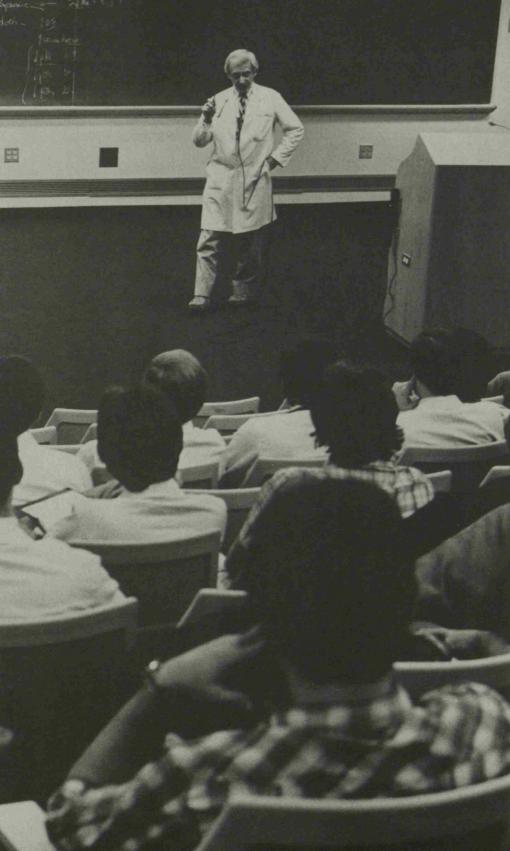
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The School of Medicine



JOHN E. CHAPMAN, M.D., Dean
GERALD S. GOTTERER, M.D., Ph.D., Associate Dean
JOHN H. HASH, Ph.D., Associate Dean for Biomedical Sciences
DENNIS K. WENTZ, M.D., Associate Dean for Graduate and Continuing Medical Education
PHILIP W. FELTS, M.D., Assistant Dean, Division of Student Affairs
RICHARD M. SCOTT, B.A., Assistant Dean, Division of Student Services
ALEXANDER S. TOWNES, Assistant Dean for VA Affairs
LLOYD H. RAMSEY, M.D., Assistant to the Dean
WINFRED L. COX, M.B.A., C.P.A., Director of Financial and Administrative Services
JOHN O. LOSTETTER, Ph.D., Director of Program Support Services
STEPHEN B. MOORE, M.B.A., Associate Director, Financial and Administrative Services
JANELLE CAREY OWENS, Executive Assistant, Office of the Dean

Executive Faculty

John E. Chapman, Chairman. William A. Altemeier III, Harvey W. Bender, Jr., Lonnie S. Burnett, Leon W. Cunningham, Michael H. Ebert, James H. Elliott, Gerald M. Fenichel, Daryl K. Granner, Joel G. Hardman, William H. Hartmann, John H. Hash, A. Everette James, Jr., Harold L. Moses, John A. Oates, John L. Sawyers, William Schaffner, Bradley E. Smith, Dan M. Spengler. Regular Non-Voting Members: Winfred L. Cox, Gerald S. Gotterer, Fred V. Lucas, Roscoe R. Robinson, Dennis K. Wentz, Norman Urmy.

EXECUTIVE COMMITTEE OF THE EXECUTIVE FACULTY. John E. Chapman, Chairman. Gerald M. Fenichel, Joel G. Hardman, William H. Hartman, Harold L. Moses, John A. Oates, John L. Sawyers.

Standing Committees

(The Dean is an ex officio member of all standing and special committees.)

Academic Programs

The Academic Programs Committee, appointed by the Dean, is composed of faculty and students. It is charged with monitoring the content and implementation of the Medical School curriculum and recommending to the Dean and the Executive Faculty any actions or modifications in policies relating to its area of responsibility.

George F. Gray, Chairman. Daniel G. Colley, Robert D. Collins, Jackie D. Corbin, Michael H. Ebert, Gerald M. Fenichel, Joel G. Hardman, Paula C. Hoos, John M. Leonard, John L. Sawyers, William Schaffner, Kenneth W. Sharp. Ex Officio: Philip W. Felts, Gerald S. Gotterer.

Admissions

The Admissions Committee has the responsibility of reviewing Medical School applications for admission and making recommendations to the Dean for the admission of those students who are considered best qualified.

Virgil S. LeQuire, Chairman. John G. Coniglio, Kathryn M. Edwards, George F. Gray, Craig R. Heim, Sanford B. Krantz, William B. Lawson, John N. Lukens, Jr., Walter H. Merrill, Pauline L. Rabin, Richard M. Zaner. Ex Officio: Philip W. Felts, Gerald S. Gotterer, Richard M. Scott.

Advisory Council

The Advisory Council provides a formal structure for the synthesis of faculty opinion. It is advisory and has no power to implement its opinion except through the Dean. The council should provide the Dean and Executive Faculty with a long-range perspective on issues that the administration and Executive Faculty may not have the opportunity to develop while responding to day-to-day crises. Furthermore, the Advisory Council provides the faculty with an alternative channel of communication with the Dean through representatives other than the appointed departmental chairmen who compose the Executive Faculty.

Benjamin J. Danzo, Carl G. Hellerqvist, Lewis B. Lefkowitz, Jr., William M. Mitchell, James W. Pichert, D. Martin Watterson.

Standing Policy Committees

These committees report to the Advisory Council. (For committee charges, see Rules and Procedures of the School of Medicine, Article II.) Each committee has a student representative.

BIOMEDICAL SCIENCES. D. Martin Watterson, Chairman. Graham F. Carpenter, Robert B. Cotton, Lillian B. Nanney, Robert H. Ossoff, Raymond L. Woosley.

FACULTY. Benjamin J. Danzo, Chairman. Thomas P. Graham, Jr., Clark R. Gregg, Marie R. Griffin, David H. Johnson, Linda Jo Van Eldik.

GOALS AND GOVERNANCE. Carl G. Hellerqvist, Chairman. B. Stephens Dudley, Fred Gorstein, Joanne L. Linn, John O. Lostetter, Walter H. Merrill.

MEDICAL EDUCATION. James W. Pichert, Chairman. Ian A. Blair, Patrick W. Meacham, James R. Sheller, Charles W. Stratton, Larry B. Vogler.

POSTGRADUATE EDUCATION. John W. Brock III, Emmanuel N. Dessypris, Roger M. Des Prez, J. Raymond Fletcher, David L. Page, Dinesh Shah.

Clinical Research Center

The Clinical Research Center Advisory Committee meets regularly to act upon new and current faculty research proposals for the use of the center, to formulate policy and review all aspects of the administration of the center, and to approve reports and applications by the center to the National Institutes of Health.

Emmanuel N. Dessypris, Chairman. Robert A. Branch, Kenneth R. Hande, W. Scott McDougal, Barbara O. Meyrick-Clarry, John H. J. Nadeau, David M. Regen, James V. Staros, Peter F. Wright. Ex Officio: John H. Hash.

Continuing Education

The Continuing Education Committee has the responsibility of developing policies and providing leadership, liaison, and recommendations regarding departmental and institutional programs of instruction designed for those who have completed formal studies in their respective health fields. This year the committee should pay special attention to short- and long-range efforts in which the Medical School can feasibly be involved.

Dennis K. Wentz, Chairman. Gordon R. Bernard, Stephen S. Feman, Gerald M. Fenichel, Arthur C. Fleischer, Marion C. Harper, Carl M. Herbert III, John A. Morris, John H. J. Nadeau, Robert H. Ossoff, John A. Phillips III, Bradley E. Smith, Charles W. Stratton, Charles H. Wallas, Lester F. Williams, Jr., Raymond L. Woosley. R. B. Gaston, Consultant. Ex Officio: Marilyn D'Asaro, Gerald S. Gotterer.

Faculty Appointments and Promotions

The committee, appointed by the Dean, is responsible for consideration of faculty promotions in the School of Medicine and for examination of credentials of candidates for appointment to faculty positions.

Daniel G. Colley, Michael H. Ebert, Fred Gorstein, Elaine Sanders-Bush, James D. Snell, Jr., Dan M. Spengler, James V. Staros, Anne Colston Wentz. Ex Officio: Gerald S. Gotterer.

Graduate Education

The Graduate Education Committee is the faculty body concerned with graduate student affairs and graduate programs in the Medical Center.

Thomas R. Soderling, Chairman. Jeffrey Mark Davidson, Loren H. Hoffman, Edwin K. Jackson, Russell J. Love, Neil Osheroff, Clark Tibbetts.

Institutional Review Board for the Protection of Human Subjects

The Institutional Review Board for the Protection of Human Subjects comprises a chairman and the committees of Behavioral Sciences and Health Sciences, which are composed of physicians, behavioral scientists, a staff attorney, and community members. Acting through its two committees, the board reviews research proposals involving human subjects with respect to the rights and welfare of the human subjects, the appropriateness of methods used to obtain informed consent, and the risks and potential benefits of the investigation. Approval of the board or one of its component committees is required prior to initiation of any investigation.

Behavioral Sciences Committee

John C. Masters, Chairman. Penelope H. Brooks, Daniel B. Cornfield, Robert Fox, Jeffery J. Franks, Robert D. Hunt, Ralph E. Kirkman, Thomas M. Klee, Alasdair C. MacIntyre, Thomas R. McCoy, Arlene G. Owen, Richard C. Shelton, Steven H. Smartt, Diana P. Smith, Richard M. Zaner.

Health Sciences Committee

Thomas A. Hazinski, Chairman. M. Lawrence Berman, John D. Bransford, Shirley M. Caldwell, Frank Chytil, S. Julian Gibbs, Joel G. Hardman, John H. Hash, Edwin K. Jackson, Karla Jensen Johns, David H. Johnson, James E. Loyd, Julia Morris, Rose M. Robertson, Ronald Setzkorn, Raphael Smith, Neal T. Wetherall, Ronald G. Wiley, Grant R. Wilkinson.

International Medical Educational Experiences

The Internation Medical Educational Experiences Committee acts as a channel for exchange of students and faculty in areas of international education.

Student Representatives: Lee Gordon, Co-Chairman. George Sawaya, Co-Chairman. Lisa Bellino, Thomas Biggs, John DeVincenzo, Julie Fanburg, Capri Mara Fillmore. Molly Hughes, John Wadlington, Clair Yang.

Faculty Advisers: Daniel G. Colley, Richard M. Heller, Jr., David T. Karzon, William Schaffner, Peter F. Wright. Ex officio: Philip W. Felts, Gerald S. Gotterer.

Coordinator: Janelle Carey Owens.

M.D./Ph.D. Committee

The M.D./Ph.D. Committee has responsibility for admitting students to the M.D./Ph.D. program; for recommending candidates for fellowships and other funds available for the program; and for maintaining, on a continuing basis, a review of the activities and progress of the students in the program.

Daryl K. Granner, Chairman. Naji Abumrad, Daniel M. Buxbaum, Daniel G. Colley, Gerald S. Gotterer, Thomas R. Harris, Alexander R. Lawton, Virgil S. LeQuire, David E. Ong, John A. Phillips III, Warren Jackson Pledger, Dan M. Roden, Oscar Touster, Linda Jo Van Eldik.

Medical Center Library and Archives

The Medical Center Library and Archives Committee advises and informs the library director on developments affecting the library and archives, and suggests and supports the response to these developments; it also recommends and reacts to changes in policy and procedure and helps the director obtain the necessary support for the operation and advancement of the library and archives.

Mary Louise Donaldson, Chairman. Robert B. Cotton, Rebecca C. Culpepper, George F. Gray, Barbara J. Holtzclaw, Lewis B. Lefkowitz, Jr., R. Todd Light, James A. Patton. Ex Officio: T. Mark Hodges.

Medical Center Promotion and Tenure Review Committee

The Medical Center Promotion and Tenure Review Committee reports to the Vice-Chancellor for Health Affairs. Its membership is made up of representatives from the School of Medicine, the School of Nursing, and the Dean of Graduate Studies and Research. The committee is responsible for review of all promotions to tenure in the Medical Center.

John N. Lukens, Jr., Chairman. June C. Abbey, Harvey W. Bender, Jr., Helen F. Bigler, Mary Louise Donaldson, Russell G. Hamilton, Marie-Claire Orgebin-Crist, C. Leon Partain, James V. Staros, Grant R. Wilkinson.

Promotions (First and Second Year)

The Promotions Committee of the first and second years has the responsibility for reviewing student progress in each of these years and of making recommendations to the Executive Faculty concerning the progress and promotion of each student.

John G. Coniglio, Chairman. Miles K. Crowder, Joel G. Hardman, Marcus C. Houston, Robert D. Hunt, Ronald F. Kourany, Thomas L. McCurley III, Jeanette J. Norden, Thomas Guv Pennington, David M. Regen, John P. Robinson, Richard S. Stein. Ex Officio: Philip W. Felts, Richard M. Scott.

Promotions (Third and Fourth Year)

The Promotions Committee of the third and fourth years has the responsibility of reviewing student progress in each of these years and making recommendations to the Executive Faculty concerning the promotion of students, in the case of the third year, and recommending to the Executive Faculty those students completing the fourth year who are deemed qualified to receive the M.D. degree.

Frank H. Boehm, Chairman. John G. Coniglio, Miles K. Crowder, Marcus C. Houston, Howard S. Kirshner, John M. Leonard, Thomas J. Limbird, John N. Lukens, Jr., Kenneth W. Sharp. Ex Officio: Philip W. Felts, Richard M. Scott.

Special Student Programs—Fellowships and Merit Awards

The committee is charged with responsibility for the overall coordinating of free-time fellowship experiences for medical students throughout the Medical School and elsewhere and recommends to the Executive Faculty institutional policy in this regard.

Philip W. Felts, Chairman. John D. Hainsworth, Anthony W. Kilroy, William M. Mitchell, John H. Newman.

Student Representatives: Jan Lewis Brandes, Nicole Schlechter.

Student Affairs

The Student Affairs Committee is composed of students, faculty, and administration. It serves as a forum for exchange of views and continuing review of student programs and policies and recommends to the Executive Faculty and Dean those actions and policies that have committee endorsement in its area of responsibility.

Philip W. Felts, Chairman. Michael A. Haralson, Richard M. Heller, Jr., Frederick Kirchner, Jr., James M. May.

Student Representatives: Alice Clark, Mark Earnest, Donald Griffin, Walter Jones.

University Animal Care Committee

The University Committee on Animal Care is responsible for the establishment and periodic review of University policy on the humane care and use of animals in experimentation. While not involved in the direct administration of any animal facility, the committee makes recommendations to the Chancellor on policies maintained by these facilities.

In reviewing and establishing such policies for animal care, the committee considers prevailing federal, state, and local laws and guidelines and their applicability to situations

unique to the Vanderbilt experience. The committee also is concerned that its policies lead to standards which will enhance the quality of scientific investigation in the University.

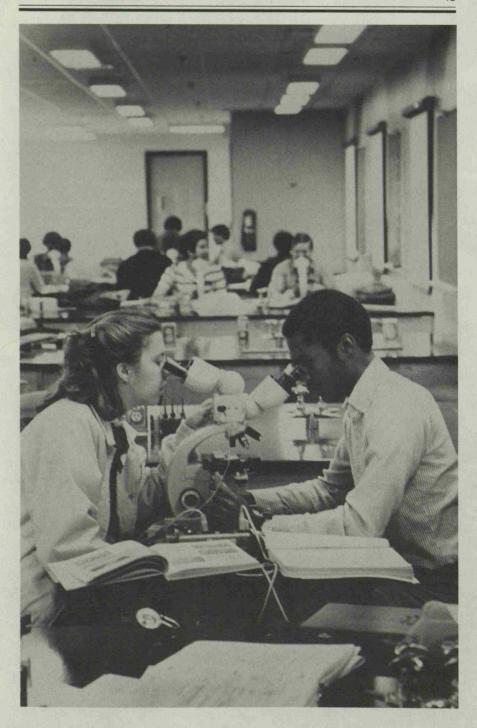
The committee is free to consult with and take recommendations to the Vice-Chancellor for Health Affairs, the Provost, and the deans of the various schools of the University as it formulates and reviews animal care policies.

Ronald R. Price, Chairman. Thomas F. Barnes, Burton J. Bogitsh, Alfred B. Bonds III, John J. Compton, Donald W. Horne, G. Judson Newbern III, Jean Porter, Richard H. Porter, D. Lewis Sly, Steven H. Smartt, Larry L. Swift, John P. Wikswo, Jr., Phillip E. Williams.

Vice-Chancellor's Committee for the Veterans Administration Medical Center

The Vice-Chancellor's Committee is the fundamental administrative unit for policy development and evaluation of educational and research programs at the affiliated Veterans Administration Medical Center. It is composed of senior faculty members of the School of Medicine and others who are associated with the Veterans Administration Medical Center. Vanderbilt members are appointed by the chief medical director of the Veterans Administration on nomination by the Vice-Chancellor for Health Affairs.

Roscoe R. Robinson, Chairman. John E. Chapman, Colleen Conway-Welch, Roger M. Des Prez, Larry E. Deters, Michael H. Ebert, James H. Elliott, Eugene W. Fowinkle, William H. Hartmann, A. Everette James, Jr., John A. Oates, Joseph C. Ross, John L. Sawyers, Dan M. Spengler, Conrad Wagner, Dennis K. Wentz, Lester F. Williams, Jr., Stephen C. Woodward.





Medical Education at Vanderbilt

HE Vanderbilt University School of Medicine is committed to the education of physicians who are firmly grounded in basic medical science, who can recognize, treat, and prevent diseases and disorders in their patients, who can obtain, evaluate, and apply the results of scientific research, and who can translate their proficiency into effective humanitarian service.

The medical school's major strength lies in the quality of its students and faculty. This fact is responsible, in part, for the medical school's unusually low attrition rate; less than two percent of Vanderbilt's medical students fail to graduate within four years, as compared to the national rate of nine percent. Vanderbilt graduates rank high on the National Board examinations and traditionally seek—and receive—entrance to residency programs of high quality around the country.

The faculty, which represents a variety of specialties and many strong research programs, has a national and international reputation for excellence in the biomedical sciences and clinical care. House staff officers who have teaching duties receive commendation for their contribution to

the educational program.

The medical school curriculum contains within its core and elective components the full spectrum of medicine. The curriculum provides sufficient structure to afford guidance, with flexibility to encourage initiative. It provides traditional experiences in the subspecialty disciplines of medicine and offers students research opportunities for academic credit. To enrich and expand the student's understanding of people and nontechnical aspects of medicine, there are courses in human development, human behavior, medical philosophy, medical ethics, medical history,

death and dying, and human sexuality.

From among the 4,000 or more applications received each year at the School of Medicine, approximately a hundred students are chosen for the first-year class. A hallmark of the Medical School admissions process is the personal attention to details by the administrative staff and the Admissions Committee. The involvement of more than a hundred faculty members in the interview and evaluation process creates a personal interest in each applicant. One of the most effective components of the admissions process is the applicant's tour of the Medical School facilities with a member of the student body as guide.

A special program encourages enrollment of minority and disadvantaged students who are invited to visit the campus so that they may be interviewed and see the Medical School before making a decision regard-

ing acceptance.

Undergraduate medical education is but the beginning of a continuing process. Following graduation from medical school, there is a period of further formal training in specialized areas of medicine. For the physician who aspires to a career in academic medicine, additional postdoctoral training in research is needed. The Vanderbilt program in medical education provides a sound basis for the physician graduate to enter any field of medicine he or she chooses. Vanderbilt's commitment to medical education as a lifelong pursuit is evidenced in programs of continuing education offered to alumni and to physicians practicing within the region primarily served by Vanderbilt Hospital.

Mission of the School

The School of Medicine fulfills two parts of the Medical Center's threefold mission—education and research—and contributes to fulfillment of the third—patient care.

Education. The school's mission is to educate physicians at all levels of their professional experience: undergraduate medical school; postgraduate education, including basic science and clinical experience; and continuing education in both formal and informal settings. The faculty seeks to provide students with the attitudes and background, based on sound biomedical science, to continue their education lifelong. At Vanderbilt, every medical student has access to examples of the highest standards of biomedical investigation and clinical practice in as many areas of medicine as are feasible within the limits of a four-year course of study. The desired end is a graduate who has been challenged and stimulated by the best there is to offer in all branches of medicine, a graduate who has the knowledge necessary to select an appropriate career and to contribute understanding and information to that chosen area of interest.

Patient Care. A teaching hospital and its extensions into outpatient care constitute a classroom based on high academic standards. The clinical facility also provides the faculty with a laboratory setting for clinical research. Faculty members serve as role models for young physicians, teaching the practice of exemplary patient care at all levels. Model programs of health care delivery, at primary, secondary, and tertiary levels, are consistent with the school's responsibility for community service in the widest context.

Research. In addition to teaching, members of the medical school faculty have a second and overlapping responsibility as members of the academic community to generate new knowledge through research. Exposure to an inquiring faculty sparks the spirit of inquiry in students. At Vanderbilt, research encompasses basic scientific questions, clinical problems, and problems related to the health care system itself.

Vanderbilt is recognized as one of the leading medical schools in research activity in the United States. Because students are encouraged to participate, more than thirty percent have research experience before

they graduate.

History of the School

The first diplomas issued by Vanderbilt University were to sixty-one Doctors of Medicine in February of 1875, thanks to an arrangement that recognized the University of Nashville's medical school as serving both institutions. Thus, Vanderbilt embraced a fully-organized and functioning medical school even before its own campus was ready for classes in October of that year.

The arrangement continued for twenty more years, until the school was reorganized under control of the Board of Trust. In the early days, the School of Medicine was owned and operated as a private property of the practicing physicians who composed the faculty and received the fees paid by students—a system typical of medical education in the United States at the time. Vanderbilt made no financial contribution to the school's support and exercised no control over admission requirements, the curriculum, or standards for graduation. After reorganization under the Vanderbilt Board in 1895, admission requirements were raised, the course was lengthened, and the system of instruction was changed to include laboratory work in the basic sciences.

The famous report of Abraham Flexner, published by the Carnegie Foundation in 1910 and afterward credited with revolutionizing medical education in America, singled out Vanderbilt as "the institution to which the responsibility for medical education in Tennessee should just now be left." Large grants from Andrew Carnegie and his foundation, and from the Rockefeller-financed General Education Board, enabled Vanderbilt to carry out the recommendations of the Flexner Report. (These two philanthropies, with the addition of the Ford Foundation in recent years, have contributed altogether more than \$20,000,000 to the School of Medicine since 1911). The reorganized school drew upon the best-trained scientists and teachers in the nation for its faculty. The full benefits of reorganization were realized in 1925 when the school moved from the old South Campus across town to the main campus, thus integrating instruction in the medical sciences with the rest of the University. The school's new quarters were called "the best arranged combination school and hospital to be found in the United States."

Rudolph A. Light Hall, completed in 1977, is a sophisticated facility providing much-needed space for medical education and other student activities. The seven-story structure contains 209,000 square feet of space housing the latest in laboratory equipment, audio-visual and electronic teaching tools, and multi-purpose classroom space. The second floor student lounge is designed to foster medical student interaction and to permit informal educational experiences—leading to the development of physicians grounded in the sciences but enlightened by humanitarian

interests and understanding.

Light Hall is the physical manifestation of Vanderbilt Medical School's ongoing commitment to excellence in all areas of medical education.

Objectives of the Program

The medical education faculty seeks to provide the aspiring physician with:

1. an understanding of the fundamental principles involved in human development, from its normal sequence to the disorders of development, structure, and function. To reach this understanding, the student must acquire basic knowledge concerning the physical, chemical, biological, psychological, and social factors which affect human development.

2. the basic diagnostic skills to recognize disease and disorders in the patient. To acquire these skills, the student must be trained to perform physical examinations and laboratory tests and to interpret the results within the

framework of the patient's unique history.

3. the knowledge of operative and therapeutic procedures to treat disease and disorders, and of the techniques and resources for their prevention. To acquire this knowledge, the student must be directly involved with sick patients, with the clinical processes requisite for their treatment, and with the means available for the prevention of disease and the maintenance of health.

4. the training that will enable the student to keep abreast of developments in medicine after the M.D. degree is earned. The exponential rate at which medical knowledge has grown in the recent past and the likelihood that it will continue to expand with equal rapidity in the future make it imperative that the student be exposed to the method, rigors, and techniques of scientific research in order to be able to evaluate and use wisely the results of scientific investigation.

In its first century of professional medical education, Vanderbilt has established a proud tradition. We enter our second century keenly aware of what the future demands, prepared to adapt our educational programs to the health care needs of tomorrow. Vanderbilt Medical School will identify and meet those needs within the context of proven strengths and our focused mission as a school of medicine. The diversity of emphasis and strength which has characterized Vanderbilt's first hundred years carries us confidently into the future.

Admissions



Requirements for Entrance

Vanderbilt School of Medicine seeks students with a strong background in both science and the liberal arts who will have the baccalaureate degree before matriculation. The Medical College Admission Test (MCAT) is required and used along with other observations to predict success in preclinical course work.

Applicants must present evidence of having satisfactorily completed the minimum requirements listed below. A semester hour is the credit value of sixteen weeks of work consisting of one hour of lecture or recita-

tion or at least two hours of laboratory.

Biology. Eight semester hours, including laboratory, in either general biology, zoology, or molecular biology. Courses should deal with the structure and function of living organisms at the cellular and molecular level.

Chemistry. A minimum of 16 semester hours, 8 in general inorganic chemistry, including laboratory, and 8 in organic chemistry, covering al-

iphatic and aromatic compounds and including laboratory.

While a year of inorganic chemistry is designated, Vanderbilt will accept one semester if it represents the fundamental course in chemistry offered by the college as a satisfactory basis for further courses in chemistry. The course must also be considered by the college to be prerequisite and qualifying for course work in organic chemistry.

English and Composition. Six semester hours.

Physics. Eight semester hours, including laboratory. Quantitative laboratory work should be emphasized.

Advanced placement credits are not acceptable for science requirements.

Recommendations for Entrance

A broad experience in non-science courses is encouraged, especially experience beyond the introductory course level in areas such as English, the humanities, the arts, and the social and behavioral sciences. A major in non-science courses does not affect selection.

Selection Factors

The Committee for Admissions seeks applicants who have demonstrated academic excellence and leadership qualities, with broad extra-

curricular experience. Experience in research and evidence of a concern

for others are positive factors for selection.

The applicant's essay, letters of recommendation, and the interview are also important factors in the Committee's evaluation. Interviews are conducted at Vanderbilt and, for those applicants unable to travel to Nashville, regionally.

Medical College Admission Test

The Medical College Admission Test is given under the auspices of the Association of American Medical Colleges and is required of applicants to Vanderbilt. It is given twice a year at most universities and colleges. Since the examination score is used by medical schools in the selection of applicants, candidates should take the test in the spring prior to the time application is submitted.

Application Procedure for Admission

As a convenience to the applicant, Vanderbilt School of Medicine participates in the American Medical College Application Service. All application materials may be obtained through AMCAS by writing:

American Medical College Application Service Association of American Medical Colleges Suite 301 1776 Massachusetts Avenue Northwest

Washington DC 20036

Washington, D.C. 20036

The Committee on Admissions evaluates the initial application received through the application service. Applicants receiving favorable initial review are invited to file a final application which includes an interview and a request for letters of evaluation. Applications are received by AMCAS any time after 15 June and before 1 November preceding an anticipated fall semester enrollment date. Vanderbilt participates in the Early Decision Program through the American Medical College Application Service.

Visiting Medical Students

Visiting students are permitted registration for course work in the Medical School (if class space is available) with approval of the department in which course work is visited and with concurrence of the course instructor and the Assistant Dean for Student Affairs. Visiting students must present evidence of adequate professional liability coverage and health insurance coverage and pay a registration fee when registering for course work. Since visiting students have no status for credit as Vanderbilt medical students, they are not issued credit for their experience at Vanderbilt, nor do they establish a medical-school-based record at Vanderbilt, nor do they establish a medical-school-based record at Vanderbilt.

derbilt. The normal opportunities and prerogatives of regularly enrolled medical students are not available to visiting students. The visiting student is subject to all regulations of the University as well as to any special regulations relating to visiting student status as determined by the department, the course instructor, or the Dean or his deputy.

Medical Scientist Training Program

The combined M.D./Ph.D. program is designed to develop investigators and teachers in the clinical and basic medical sciences. Students in the program have the opportunity to study a basic biomedical science in depth and to do research in some phase of that subject while concurrently pursuing studies leading to the medical degree. This training develops the skills and techniques necessary for an experimental approach to problems in basic and clinical medical sciences. The program is designed for students aspiring toward careers in academic medicine and medical research.

The M.D./Ph.D. program fully meets the Vanderbilt Medical School requirements for the Doctor of Medicine degree and Vanderbilt Graduate School requirements for the Doctor of Philosophy degree. The combined degree program usually requires six to seven calendar years beyond the baccalaureate for completion. Although some saving of time is built into the program, there is no implication that the combined degree program circumvents, alters, or dilutes requirements for either the M.D. or the Ph.D. The intent is to profit optimally from the strengths of each school.

Admission to the Program

Those applying to the M.D./Ph.D. program should complete the Medical Scientist Training Program section of the final application to Vanderbilt Medical School. Applications to the program are reviewed by the Medical Scientist Training Program Committee and by the Medical School Committee on Admissions. Applicants must be accepted into Vanderbilt Medical School and into Vanderbilt Graduate School upon recommendation of the Medical Scientist Training Program Committee. In exceptional circumstances, late applications to the program will be received from applicants who have already been accepted into the Medical School. Students who have completed one or more years in medical or graduate school may also apply for admission to the combined degree program.

Upon enrollment in the M.D./Ph.D. program, students are assigned to faculty and student advisers. During their first semester, they become familiar with Ph.D. study and research activities of the affiliated graduate programs: Cell Biology, Biochemistry, Biomedical Engineering, Microbiology, Molecular Biology, Pathology, Pharmacology, and Molecular

Physiology and Biophysics.

Following the orientation program, but before the end of their second year in medical school, M.D./Ph.D. students must select and be accepted into the graduate program of an affiliated department. M.D./Ph.D. students work closely with their assigned faculty and student advisers in all matters related to enrollment, registration, course selection, and scheduling. The usual course of study is divided into several phases. The first phase consists of the first two years of medical school, devoted largely to the basic biomedical sciences. Students then enter the graduate school (Ph.D.) part of the program after the second year of medical school. During this second phase the student meets the Graduate School residency requirements. The third phase consists of the clinical rotations of the third year and the clinical clerkships of the fourth year of medical school.

Requirements for the Ph.D. degree are set out in detail in the catalog of Vanderbilt Graduate School. Briefly stated, Ph.D. students must complete 72 hours of graduate work for credit, of which a minimum of 24 hours is required in formal course and seminar work. Ph.D. students must also complete a qualifying examination to test their knowledge of their field of specialization and present an acceptable dissertation in the major field of study.

M.D./Ph.D. students are encouraged to begin courses for graduate school credit and to select a preceptor to supervise their dissertation research as soon as possible. They are also encouraged to undertake research at an early stage, including the summer prior to matriculation. Students usually complete much, if not all, course work, research, and writing for the Ph.D. dissertation before entering the third phase of the

program.

Certain features concerning the assignment of course credit toward the Graduate School and Medical School degrees should be noted. The only course allowed for credit toward both the M.D. and Ph.D. degree is the basic course of the student's graduate department. All other approved courses are allowed for credit toward either the Ph.D. degree or the M.D. degree, but not both. Certain Graduate School courses may be taken as part of the elective program in the Medical School and be applied toward formal course work requirements for the Ph.D. degree. The M.D./Ph.D. student must be officially enrolled in any one semester in either or both the Medical and Graduate schools to insure appropriate assignment of credits.

Financial Support

Special funding (tuition and stipend) is possible for those who gain admission to the Medical Scientist Training (M.D./Ph.D.) Program.

Students who wish to receive financial support should so indicate on their application to the program. The limitations of financial support create a competitive situation in the selection process. Candidates are urged to submit their application to the M.D./Ph.D. program as early as possible. In accepting financial support for the program, the student agrees to promote primary effort to M.D./Ph.D. studies, and further agrees not to undertake concurrently any other gainful employment or effort without formal approval of the Medical Scientist Training Program Committee and the Medical School officers responsible for the M.D./Ph.D.program.

In general, financial support is arranged by mutual agreement of the Medical Scientist Training Program Committee, the Dean of the Medical School and, in certain instances, the chairman of the graduate department involved. Various sources of funds are available with each having different application requirements, restrictions, obligations, and levels of support. Some potential sources for support available to the student in-

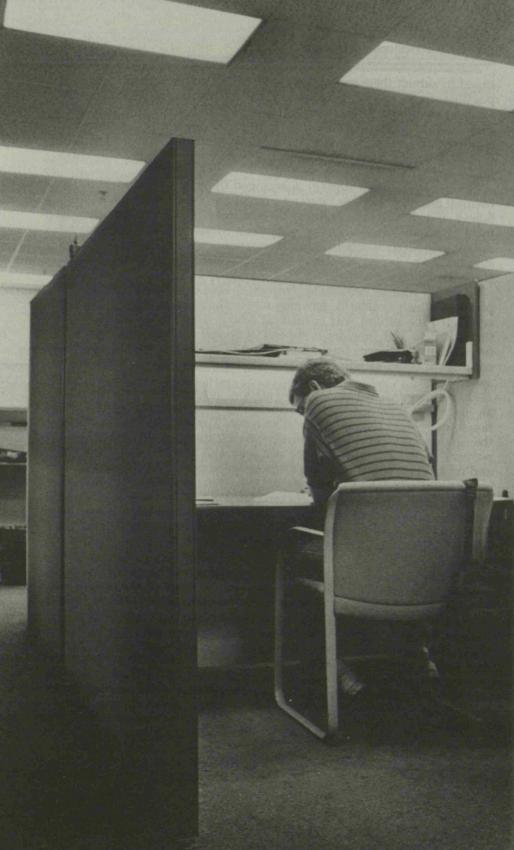
clude the following:

Vanderbilt Medical Scholarship Program. This is a privately endowed program which ordinarily provides scholarships to students who have completed the second year of medical school. The scholarship pays tuition and fees and provides a stipend of \$8,000 a year. Once awarded, financial support from this scholarship will continue at the above rate, contingent upon satisfactory performance, until the M.D. degree is awarded.

National Research Service Award. Financial support is available through an institutional grant awarded to Vanderbilt Medical School by the National Institute of General Medical Sciences. The support pays tuition at the current level, provides a stipend of \$6,552 (plus Medical School supplement bringing total to \$8,000) per year, and includes funds for fees and related expenses. This support is assigned primarily to qualified incoming students. The students should consider special requirements, restrictions, and obligations that are associated with this source of financial support. As with all federal funding, support is guaranteed for only one year at a time, since all federal funds are reviewed and funded annually. Generally, funds are renewed and support is continued.

Departmental Support. Limited resources are available through graduate departments. Tuition awards are available as well as some stipend support either from federal training grants or research funds. Interested students should request from their faculty adviser or department chairman specific information on the availability of this type of support.

Personal Support. This refers to the student's own resources or sources of funds. Approved students for the Medical Scientist Training Program who do not receive financial support from any of the above sources may remain in the joint program at their own expense. Although not guaranteed, financial support can usually be obtained for the graduate phase of the M.D./Ph.D. program.



The Academic Program

HE curriculum is divided into required courses taken by all students and elective courses taken at the choice of the individual student. Required courses constitute the nucleus of medical education at Vanderbilt; elective courses are an integral part of each student's educational experience in the Medical School, providing considerable flexibility in individual programs. Each student is assigned a faculty adviser to aid in the selection of elective courses, which must be approved by the Assistant Dean for Student Affairs.

All electives are courses for credit, graded on the same basis as required courses. Electives include: lecture or seminar series; specialty clinics, clinical clerkships, or research experience, at Vanderbilt or other

institutions; Vanderbilt undergraduate or graduate courses.

One hour each week is designated for presentations of school-wide interest—lectureships, medical society meetings, and student papers. Students and faculty are expected to attend.

The Medical School curriculum in the preclinical years is divided on a semester basis. Students are encouraged to participate in a summer re-

search fellowship program.

The curriculum is under constant review by both faculty and students, and is subject to timely change as recommended by the Academic Programs Committee and approved by the Executive Faculty and Dean of Medicine.

Major Courses

First Year. Biochemistry, gross anatomy, physiology, histology, microbiology, neurobiology, and psychiatry. Saturday mornings, all day Wednesday, and Friday afternoons are reserved for study and electives. Electives available to the first-year student cover a wide range of subjects, including fundamental principles in use of radioisotopes, topics in general physiology, medicine in families and the community, and medical ethics.

Second Year. Methods in clinical science, additional microbiology, pathology, pharmacology, radiology, preventive medicine, and psychiatry. Students begin the study of patients during the second semester, when all the clinical departments cooperate in providing an introduction to history taking, physical examination, and laboratory study of patients through a series of lectures, demonstrations, and individual practice by the student. A variety of electives, such as medical genetics, medical ethics, or pediatric pathophysiology, may be taken either on Wednesday or on Friday afternoons.

Third Year. Medicine, obstetrics-gynecology, pediatrics, surgery, surgical subspecialties, psychiatry, neurology, and orthopaedics. Ward clerkships occupy the third year. Each student is randomly assigned to a rotation group for the first academic unit, and then proceeds through the succeeding units of the year. The precise schedule for each student is derived from computer algorithm.

Students have close contact with a limited number of selected patients

under the supervision of attending physicians and house staff.

Fourth Year. Electives in basic science and/or clinical areas. The fourth year is divided into four week academic units. Fourth-year students serve as clinical clerks in electives in the Outpatient Service. Here they have opportunity to see disease in its earlier stages when diagnosis is more difficult, under conditions of office practice, and with opportunities for follow-up examinations and observation over relatively long

periods.

Students also serve in elective inpatient clerkships. The opportunities for use of this elective time include research fellowships in a clinical or preclinical department, at Vanderbilt or other institutions: advanced ward clerkships in clinical areas; combinations of a variety of specialty clinics and lecture courses. The flexibility of the fourth-year curriculum gives the student maximum opportunity for individual development. Eight full academic units are required, including a major clerkship in Medicine, a clerkship in Surgery (or surgical subspecialities), and a clerkship in Pediatrics.

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-26 FEBRUARY	THURSDAY	Preventive		Pharmacology			8	Physical Diagnosis	THE RESERVE	Dean's Hour
ALF (4 JANUARY	WEDNESDAY	assubs of 3	Pharmacology				Managada Angaranga Angaran	Electives	METWERDWA	
STER—FIRST H	TUESDAY	vgtjinstrupkt	Physical				Banosell	Laboratory Diagnosis	THERM	CPC
2ND YEAR, SPRING SEMESTER—FIRST HALF (4 JANUARY-26 FEBRUARY)	MONDAY	Pharmacology		Preventive			Alternation of the second	Physical Diagnosis	**Config	ENTE BEMESTE
2ND YEAF	HOURS	8-9	9–10	10-11	11-12	12-1	1-2	2-3	3-4	4-5

2ND YEAR, SPRING SEMESTER—SECOND HALF (7 MARCH-29 APRIL)	ONDAY TUESDAY WEDNESDAY THURSDAY FRIDAY SATURDAY	Psychiatry Pharmacology P	Physical Diagnosis Pharmacology	rchiatry Pharmacology Psychiatry semester)					Tuesdays only)	COC
3, SPRING SEMESTER		nacology		Psychiatry				Physical Diagnosis		
2ND YEAR	HOURS	6-8	9-10	10-11	11–12	12-1	1–2	2-3	3-4	4-5

3rd Year			ACTIVATION OF	Emina prom	Scl	Schedule of Courses
HOURS	MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY	SATURDAY
8:00–12:00	Wards:	10 weeks, Medi Gynecology; 5 v	10 weeks, Medicine; 10 weeks, Surgery; 5 weeks, Pediatrics; 5 weeks, Obstetrics and Gynecology; 5 weeks, Psychiatry; 2½ weeks, Neurology; 2½ weeks, Orthopedic Surgery	irgery; 5 weeks, P	ediatrics; 5 weeks gy; 2½ weeks, Orth	, Obstetrics and topedic Surgery
1:00-4:00						
4:00 P.M.	34 hrs Surgery 6 hrs Neurology	CPC Radio-biology	20 hrs Medicine 19 hrs Pedi- atrics 12 hrs Med Law 11 hrs Anesthe- siology	Dean's Hour	11 hrs Ob-Gyn 6 hrs Psychia- try	Semesters and semesters are seminarized and semesters and semesters and semesters and seminarized and semesters and seminarized and semina

Elective time is unshaded.
 Minimal elective hours = 0.
 Clinical-pathological conferent

Clinical-pathological conferences will routinely be given in the Tuesday Student-Faculty Hour.

3rd Year (1st half)			100	distribution of the			Rotation	Rotation(random assignment)
STUDENT	1st 5 weeks	weeks	2nd 5 weeks	weeks	3rd 5	3rd 5 weeks	4th 5	4th 5 weeks
The latest and the la								
v m	Medicine	cine	Medicine	cine	Sur	Surgery	Sur	Surgery
4								
5			Nen	Orth				
9	Psychiatry	natry	Orth	Neu	Med	Medicine	Med	Medicine
7	Nen	Orth	C					
8	Orth	Nen	Psycniatry	liatry				
6	d				d	700	Nen	Orth
10	Pediatrics	itrics	Up-ayn	nyc	Psychiatry	natry	Orth	Neu
1	d	!			Neu	Orth	c	
12	Op-ayn	ayn	rediatrics	ITICS	Orth	Nen	Psyc	Psychiatry
13	Company of the Company		P. C.		-		d	
14	(Pediatrics	itrics	90	Op-dyn
15	Surgery	jery	Surgery	ery	d			and the same of th
16					Up-ayn	ayn	reali	Pediatrics
								The second second second second

3rd Year (2nd half)							Rotation (Rotation (random assignment)
STUDENT	5th 5	5th 5 weeks	6th 5	6th 5 weeks	7th 5	7th 5 weeks	8th 5	8th 5 weeks
			i				Neu	Orth
2	Pedia	Pediatrics	90	Ob-Gyn	Psychiatry	natry	Orth	Nen
8					Nen	Orth	c	
4	o O	Op-Gyn	Pedic	Pediatrics	Orth	Neu	rsyc	Psychiatry
0 2					Pediatrics	ıtrics	-qo	Ob-Gyn
8	Sní	Surgery	Surg	Surgery	Ob-Gyn	Syn	Pedii	Pediatrics
o (AL DO
10	Med	Medicine	Med	Medicine	Surgery	Jery	Sur	Surgery
12								
13			Neu	Orth				
14	Psyci	Psycniatry	Orth	Nen	Medicine	eine	Dalk	Medicine
15	Neu.	Orth						
16	Orth	Neu	Psychiatry	nairy			to the state of	Anna and American
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4th Year

Half the Class (I) is assigned preference in enrolling for clerkships (A) in the odd-numbered academic units while the other half (II) has priority for clinic assignments (B).

The fourth year academic unit is approximately four weeks in duration.

option r course on it t		Fall Se	Fall Semester			Spring	Spring Semester		
Student Group	1st unit	2nd unit	3rd unit	4th unit	5th unit	6th unit	7th unit	8th unit	
Class Half I	4	В	A	В	A	В	A	8	
Class Half II	В	4	8	4	Θ	<	В	4	

and a clerkship in Pediatrics, and Emergency Room experience on a regularly assigned basis except students having ER Requirements include eight full academic units, a major clerkship in Medicine, a clerkship in Surgery (or surgical subspecialties) experience through clerkships at the Metropolitan General Hospital in Medicine, Surgery, or Pediatrics.

Advanced Training

In addition to its primary responsibility of educating medical students, the School of Medicine has active programs for graduate students in the preclinical sciences, for postdoctoral interns and residents, and for postdoctoral research trainees.

Residency Training

Students preparing for the practice of medicine usually spend three or more years in house staff training. Such experiences at Vanderbilt are particularly varied and well supervised. Applicants for positions are carefully chosen because of the competition for positions. As a result, the house staff makes up a competent and stimulating group, with considerable responsibility in medical student teaching.

The faculty of the School of Medicine has professional responsibilities at Vanderbilt, Veterans, Saint Thomas, Baptist, and Metropolitan Nashville General hospitals. Patients in these hospitals are cared for by members of the medical staff, assisted by the intern and resident staff.

Vanderbilt University Hospital is a referral center and consequently has a patient population with complex medical and surgical problems. Nashville General Hospital is a community-owned facility in which patients present a wide spectrum of health problems. The Veterans Administration Hospital, adjacent to the Vanderbilt Medical Center, serves veterans and their families from throughout the mid-south and is an important component of the teaching program. All physicians at the VA Hospital are full-time faculty member of the School of Medicine.

Residencies and Fellowships

Dr. Cobb Pilcher-William Henry Howe Fellowship in Neurosurgery. In December 1945, the William Henry Howe Fellowship in Neurosurgery was established in the School of Medicine. The fellowship was made available to the University by the late Dr. Pilcher and has been continued by the generosity of his family and friends.

Post-Residency Fellowships

Postdoctoral courses have as their goal the training of physicians for practice and certification in a medical subspeciality. Fellows admitted to this program must have completed an approved residency program. The fellow is expected to participate in departmental activities related to teaching, clinical services, and research.

Continuing Medical Education

Vanderbilt University School of Medicine and Vanderbilt University Medical Center recognize a major commitment to the continuing education of physicians and others in the health professions. The School of Medicine views medical education as a continuum initiated in the undergraduate phase, progressing through graduate medical education, and maturing in ongoing continuing medical education. The professional life of the physician and all health professionals should include activities encompassing this view, with the goal of improving health care for patients. Under the auspices of the Division of Continuing Medical Education, the School of Medicine offers a broad spectrum of courses throughout the year to meet the needs of physicians in practice and other health professionals. Since many courses have limited registration, inquiries should be directed to the Division of Continuing Medical Education.

Of special interest is the clinical training program, or "mini-residency," whereby physicians return for one or more weeks of clinical education in the patient units of the various hospitals, in conjunction with regular programs of graduate and undergraduate medical education. Physicians interested in this type of specialized, intensive experience in a specialty or subspecialty should direct their inquiries to the Division of Continuing Medical Education.

Courses toward the Master's and Ph.D. Degrees

Candidates for the degree of Master of Science or Doctor of Philosophy may pursue work in the medical sciences given in the Medical School, either in regular courses or in special elective courses, provided such students are accepted by the chairmen of the departments concerned and are registered in the Graduate School of the University. Graduate work in the medical sciences is regulated by the faculty of the Graduate School, and candidates should apply to the registrar of the Graduate School. (See also Medical Scientist Training.)

Candidates for the degree of Master of Science in hearing and speech sciences may pursue work in their fields in the Bill Wilkerson Hearing and Speech Center and the School of Medicine. Graduate work in this division is regulated by the faculty of the Graduate School. Candidates

should apply to the registrar of the Graduate School.



Academic Regulations

HE School of Medicine operates under the honor system. All work submitted as a part of course requirements is presumed to be the product of the student submitting it unless credit is given in the manner prescribed by the course instructor. Cheating, plagiarizing, or otherwise falsifying results of study are prohibited. The student, by registration, acknowledges the authority of the Medical School Honor Council.

Students are expected to familiarize themselves with the *Student Handbook*, available at registration, which provides information about University services, policies, and procedures, including reference to the Honor Councils of the schools of the University, the Graduate Student Conduct Council, the Appellate Review Board, and related regulations.

Requirements for M.D. Degree

Candidates for the Doctor of Medicine degree must be mature and of good moral character. They must have spent at least four years of study or its equivalent as matriculated medical students at an acceptable medical school as judged by the Vanderbilt Medical Admissions Committee; the last two years must have been in Vanderbilt University School of Medicine. They must have completed satisfactorily the medical curriculum, have passed all prescribed examinations, and be free of indebtedness to the University. Students fulfilling these requirements will be recommended for the degree Doctor of Medicine.

Advisers

The Vanderbilt Medical School has one of the lowest attrition rates in the country. The faculty and administration take an active interest in assuring that each student achieves to maximum capability. Advisers, both student and faculty, and staff members of the office of the Dean are available to assist students toward successful development of their plans.

The National Boards

The school no longer requires that students sit for National Board Examinations, Parts I and II. National Boards are a means of obtaining licensure. Students will be advised regarding possible advantages of taking these examinations.

Examinations and Promotions

Successful completion of the courses of the medical curriculum and scholastic standing are determined by the character of the student's daily work and the results of examinations. Examinations may be written, oral, or practical, and may be held in conjunction with each course or at the end of each semester, by a committee composed of the instructors responsible for the student's major courses. Promotion is determined by a committee of the faculty at the end of each academic year. The committee, on recommendation of the several departments, recommends to the Executive Faculty for promotion those students who have demonstrated personal, professional, and intellectual achievement consistent with faculty expectations for them at their particular stage of professional development. Students deficient in a major area or areas will be required to complete additional efforts satisfactorily in order to remedy deficiencies. Students deficient in a major undertaking or who demonstrate marginal performance in a major portion of their work may be denied further enrollment. Academic performance is evaluated on the following levels: superior, 88-100; satisfactory, 75-87; marginal, 70-74; unsatisfactory, 69 and below.

Students who fail in two major courses or fail a re-examination in a major course may be required to withdraw from the school. Students with no reported failures may be required to withdraw from the school if their work has been of a generally marginal quality. Students may be given credit for a subject by re-examination, but failures remain on their record and may be counted as a cause for withdrawal if another failure in a major course occurs.

Any student who fails to pass a course will be required to remove the failure before being permitted to enter the courses of the next academic year. Any student shown by work or conduct to be unfit for the practice of medicine may be required to withdraw from the school at any time.

Extracurricular Work

The Medical School does not regulate the outside work of its students, although it does take the firm position of discouraging outside work. No outside commitments may be assumed by medical students that may compromise their responsibilities at the Medical School. If the outside obligation is considered prejudicial, the student may be required to discontinue it.

Leave of Absence

A leave of absence may be granted by the Dean for a period not to exceed one year for purposes of approved studies or for recuperation from illness. Should it be necessary for a student to be absent for a period of more than one calendar year, the student must make formal reapplication and be reconsidered by the Admissions Committee, unless special approval is given by the Dean for a more extended leave.

Professional Liability Insurance

Students will be automatically covered with professional liability insurance, required of all enrolled medical students, at the time of registration. The annual premium is payable in addition to tuition. Details of the policy are available at the University insurance office, and students are encouraged to familiarize themselves with these details and with their

responsibilities in this regard.

Students are covered whether they are at the Vanderbilt-affiliated hospitals (Vanderbilt University Hospital, Nashville Veterans Administration Hospital, St. Thomas Hospital, or Metropolitan General Hospital) or elsewhere as a "visiting student," providing that (1) the clerkship or other educational experience has prior approval from the School of Medicine as coursework for credit, and (2) the activities within this experience are consonant with the student's level of training and experience and are performed under the supervision of appropriate faculty and/or staff.

Lectureships



THE ALPHA OMEGA ALPHA LECTURE. The Alpha Omega Alpha Honor Medical Society each year invites a scientist of prominence to deliver a lecture before the students and faculty and members of the medical community. The first lecture was given during the school year 1926/1927.

THE ALLAN D. BASS LECTURESHIP. This lectureship was established in 1976 in recognition of Dr. Bass's outstanding contributions to Vanderbilt University, the Nashville community and the field of Pharmacology. He served as professor and chairman of the Department of Pharmacology from 1953 to 1973, as associate dean for biomedical sciences from 1973 to 1975, and as acting dean of the School of Medicine from 1973 to 1974. The lectureship is made possible through the generosity of his associates and colleagues in the American Society of Pharmacology and Experimental Therapeutics; FASEB; the AMA Council on Drugs; the Nashville Academy of Medicine; present and former staff, students and faculty members at Vanderbilt University; and the Department of Pharmacology. The first lecture was given in April 1977.

THE ROBERT N. BUCHANAN, JR., VISITING PROFESSORSHIP IN DERMATOLOGY. The Department of Medicine established in 1980 a visiting professorship to honor Dr. R. N. Buchanan, Jr., professor emeritus and former chairman of the Division of Dermatology. Each year a distinguished dermatologist is invited to come to Vanderbilt to deliver a series of formal lectures and participate in teaching conferences.

THE BARNEY BROOKS MEMORIAL LECTURESHIP IN SURGERY. In 1952 through the generosity of a Vanderbilt alumnus an annual lectureship was established to honor the memory of Dr. Barney Brooks, formerly professor of surgery and head of the department, and surgeon-in-chief of Vanderbilt University Hospital. As a fitting memorial to Dr. Brooks these lectures have been given by physicians who have made distinguished contributions in clinical or investigative surgery. The first Barney Brooks Memorial Lecture in Surgery was given during the spring of 1953.

THE ROLLIN A. DANIEL, JR., LECTURE IN THORACIC SURGERY. In 1977 the Department of Thoracic and Cardiac Surgery established the Rollin A. Daniel, Jr., Lecture as a tribute to Dr. Daniel. Since Dr. Daniel's death, there has been generous support from Dr. Daniel's family and many former residents to this lectureship fund. Each year a distinguished thoracic surgeon is invited by the Department to visit Vanderbilt and deliver the annual lecture, usually in the fall.

THE LEONARD W. EDWARDS MEMORIAL LECTURESHIP IN SURGERY. This annual lectureship was established in 1972 by the family and friends of Dr. Leonard Edwards, who was professor of clinical surgery, in recognition of his more than fifty years of contributions to Vanderbilt and the Nashville community as a distinguished surgeon and teacher. The first lecture was given in 1972 by Dr. Lester Dragstedt. Lectures usually concentrate on surgery and physiopathology of the alimentary tract.

THE ABRAHAM FLEXNER LECTURESHIP. In the fall of 1927 Mr. Bernard Flexner of New York City gave \$50,000 to Vanderbilt University to establish the Abraham Flexner Lectureship in the School of Medicine. This lectureship is awarded every two years to a scientist of

outstanding attainments who shall spend as much as two months in residence in association with a department of the School of Medicine. The first series of lectures was given in the fall of 1928.

THE ALVIN F. GOLDFARB LECTURESHIP IN REPRODUCTIVE ENDOCRINOLOGY. Established by the children of Dr. Goldfarb to honor their father, an alumnus of Vanderbilt University School of Medicine, this is the first named lectureship in the Center for Fertility and Reproductive Research. Serving as an important forum for continuing education, the lectureship enables the Vanderbilt medical community to learn from those at the cutting edge of research and practice in reproductive biology.

THE ERNEST W. GOODPASTURE LECTURE. In 1968 the Goodpasture Lecture was established by a friend of Vanderbilt University and of the Department of Pathology, Mrs. George M. Green, Jr. The lecture is to honor the memory of Dr. Ernest William Goodpasture, distinguished chairman of the Department of Pathology from 1925 until his retirement in 1955. Each year a lecturer prominent for achievements in research or in medical education is selected. The first lecture was given in the fall of 1971.

THE J. WILLIAM HILLMAN VISITING PROFESSORSHIP. This professorship was established in 1976 as a tribute to the late Dr. J. William Hillman who served as professor and chairman of the Department of Orthopaedics. To commemorate Dr. Hillman's tireless dedication to the art of teaching, the department annually invites a prominent orthopaedist to spend three or four days in residence teaching the house staff through a series of walking rounds and informal talks, concluding with a day-long seminar on special topics in the field.

THE CONRAD JULIAN MEMORIAL LECTURE. This lecture was instituted in 1980 in honor of Dr. Conrad G. Julian, the first director of gynecologic oncology at Vanderbilt University Hospital. The lecture is delivered each year on a subject related to gynecologic oncology and is given in conjunction with the annual Gyn Oncology Seminar.

THE PAULINE M. KING MEMORIAL LECTURESHIP. This lectureship was established in 1962 by Mr. Robert F. King of Klamath River, California, as a memorial to his wife. Each year a distinguished thoracic or cardiovascular surgeon is invited by the Department of Surgery to lecture at Vanderbilt School of Medicine. The first Pauline M. King Memorial Lecture was given in the spring of 1963.

THE M. GLENN KOENIG VISITING PROFESSORSHIP IN INFECTIOUS DISEASES. This visiting professorship was established in 1973 through the generosity of alumni, faculty, friends, and the family of the late Dr. M. Glenn Koenig who served as professor of medicine and head of the Division of Infectious Diseases. In recognition of Dr. Koenig's unexcelled ability to teach at the bedside, the Department of Medicine invites physicians of unusual competence in the teaching of clinical infectious diseases to join the Division of Infectious Diseases for short periods to spend time on the wards and in discussions with students, house staff, fellows, and faculty. The first visiting professorship was held in 1973.

THE PAUL DUDLEY LAMSON MEMORIAL LECTURE. This lectureship was instituted in 1965 in memory of Dr. Lamson who was professor of pharmacology and chairman of the Department of Pharmacology from 1925 until his retirement in 1952. A prominent scientist is brought to the campus biennially under the sponsorship of the alumni and staff of the Department of Pharmacology.

THE FRANK H. AND MILBREY LUTON LECTURESHIP. Established in 1976 through the generosity of friends and former students, this lectureship honors Dr. Frank H. Luton, the first psychiatrist on the Vanderbilt faculty. Each year a prominent lecturer in the field of psychiatry is selected.

THE DAN MAY LECTURE. Made possible by a gift from the May family, this lecture series honors Mr. May, a Nashville business, educational, and civic leader who was a Vanderbilt graduate, long-time Board of Trust member, and friend of the University. The lecturer is a distinguished scholar of medicine or another discipline with expertise in cardiovascular disease, medical education, or humanistic aspects of medicine.

THE GLENN A. MILLIKAN MEMORIAL LECTURE. This lectureship was established in 1947 in memory of Dr. Millikan, professor of physiology, by members of the then second-year class. It has subsequently received support by means of a capital fund by Dr. Millikan's father and mother, Dr. Robert A. Millikan and Mrs. Gretna B. Millikan, and friends. Contributions have been made to the fund by members of the founding class and other students. The lectureship is maintained to provide a distinguished lecturer in physiology.

THE HUGH J. MORGAN VISITING PROFESSORSHIP IN MEDICINE. This visiting professorship was established in 1959 through the generosity of faculty, former house officers, and friends of the late Dr. Hugh J. Morgan, who served as professor of medicine and chairman of the department at Vanderbilt from 1935 through 1959. As a tribute to Dr. Morgan and his outstanding qualities as a superior clinician, the Department of Medicine invites a distinguished physician to spend one week in residence, during which time the physician assumes the teaching duties of the professor of medicine with students, house officers, and faculty. The first visiting professorship was awarded in 1959.

THE ELLIOTT NEWMAN VISITING LECTURESHIP. This lectureship was formally established by the Board of Trust of Vanderbilt University in 1977. Dr. Newman was a distinguished scientist and medical scholar, an outstanding clinician and teacher, and a loyal friend and faculty member of the School of Medicine for a period of twenty-one years.

THE WILLIAM F. ORR LECTURESHIP. This annual lectureship was established in 1976 through the generosity of Hoffman-LaRoche, Inc., in honor of Dr. William F. Orr, first professor and chairman of the Department of Psychiatry, a position he held from 1947 to 1969. A psychiatrist of national prominence is invited each year to present the lecture and to participate in various teaching conferences in the Department of Psychiatry.

THE COBB PILCHER MEMORIAL LECTURE. In 1950 the Pi Chapter of the Phi Chi Medical Fraternity established the Cobb Pilcher Memorial Lecture to honor the memory of Dr. Pilcher, formerly associate professor of surgery, distinguished neurosurgeon, and a member of Phi Chi fraternity. Each year a lecturer of prominence is selected. The first lecture was given in 1950.

THE DAVID RABIN LECTURE IN ENDOCRINOLOGY. The Department of Medicine established in 1980 a visiting lectureship in recognition of the salient contributions of Dr. David Rabin to the world of endocrinology. Dr. Rabin was professor of medicine and head of the Division of Endocrinology from 1975 until his death in 1984. This lectureship annually brings to Vanderbilt a world leader in the science of endocrinology and the application of that science to the solution of the problems of humankind.

THE VANDERBILT UROLOGY SOCIETY VISITING PROFESSORSHIP AND RHAMY-SHELLEY LECTURE. This annual visiting professorship and lectureship was established in 1972 through the efforts of former residents in urology at Vanderbilt University Medical Center. An outstanding urologist, from either the United States or abroad, is invited to spend four or five days as visiting professor in the Department of Urology, to join with former residents and other urologists in demonstrations of surgical technique and diagnostic acumen, as well as in a series of conferences and lectures. The activities conclude with a formal lecture which honors Dr. Robert K. Rhamy, who was chairman of the Department of Urology at Vanderbilt

from 1964 to 1981, and Dr. Harry S. Shelley, former chief of the Division of Urology at Nashville Veterans Administration Hospital.

THE CHARLES J. THUSS, SR., AND GERTRUDE NOBLE THUSS LECTURESHIP IN PLASTIC AND RECONSTRUCTIVE SURGERY. This lectureship was established in 1977 by Dr. Charles J. Thuss, Jr., Medical Class of 1961, of San Antonio, Texas, in honor of his parents. The lectureship is funded in collaboration with the Department of Plastic Surgery for the purpose of bringing distinguished lecturers in the field of plastic and reconstructive surgery to the Vanderbilt campus.





Honors and Awards



Alpha Omega Alpha

A chapter of this medical honor society was established by charter in the School of Medicine in 1923. Not more than one-eighth of the students of the fourth-year class are eligible for membership and only one-half of the number of eligible students may be elected to membership during the last half of their third year. The society has for its purpose the development of high standards of personal conduct and scholarship and the encouragement of medical research. Students are elected into membership on the basis of scholarship, character, and originality.

Founder's Medal

This medal is awarded to the student in the graduating class of the School of Medicine who, in the judgment of the Executive Faculty, has achieved the strongest record in the several areas of personal, professional, and academic performance in meeting the requirements for the Doctor of Medicine degree during four years of study at Vanderbilt.

Other Prizes and Awards

THE BEAUCHAMP SCHOLARSHIP. This scholarship, founded by Mrs. John A. Beauchamp in memory of her husband who was for many years superintendent of the Central State Hospital in Nashville, is awarded to the student showing the greatest progress in neurology and psychiatry and who is otherwise worthy and deserving.

THE AMOS CHRISTIE AWARD IN PEDIATRICS. Established in 1970 by an anonymous donor, this award is made to the student in the graduating class who has demonstrated the outstanding qualities of scholarship and humanity embodied in the ideal pediatrician. The award is in memory of Dr. Amos Christie, professor of pediatrics, emeritus, who was chairman of the Department of Pediatrics from 1943 to 1968.

THE DEAN'S AWARD. This award is presented by the Dean to students who have distinguished themselves by their outstanding contribution of leadership and service throughout four years of study at Vanderbilt University School of Medicine.

THE HOSPITAL AWARD FOR EXCELLENCE. This award recognizes the graduating medical student selected by the chief residents of all the services as having made the largest personal contribution toward quality patient care by demonstrating sensitivity, compassion, and concern in his or her clinical responsibilities to patients.

THE RUDOLPH H. KAMPMEIER PRIZE IN CLINICAL MEDICINE. An annual award of \$1,000, presented through the generosity of the Southern Medical Association, is made to the student who, at the completion of the fourth year of training, is judged by the faculty of

the Department of Medicine to have exhibited the qualities of the excellent physician as exemplified by Dr. Rudolph H. Kampmeier throughout his career. The qualifications to be given greatest weight will be proficiency in diagnosis and therapy; consideration of the patient as a complete person with a life that is more than that of a "sick patient"; ability to think with originality and to teach, lead, and inspire others; willingness to devote himself/herself unstintingly to the welfare of others; and ability to work effectively with other members of the medical and paramedical professions.

THE KAUFMAN PRIZE IN MEDICINE. This award, honoring J. Kenneth Kaufman, M'39, is presented to a graduating medical student who has demonstrated qualities of humaneness, dedication, and unselfish service in the study of medicine and will apply these qualities in medical practice.

THE ROENTGEN AWARD. This is an annual award to a graduating medical student who has made important contributions in one of the radiological sciences during his or her four years at Vanderbilt Medical School. Named for Wilhelm Conrad Roentgen (1845–1923), a pioneer in diagnostic radiology, the award recognizes discoveries in either clinical or research areas.

THE SCHOOL OF MEDICINE AWARD OF DISTINCTION IN MEDICAL EDUCATION. This award is presented to the student who has demonstrated outstanding qualities of scholarship, leadership, and humanitarian service in the context of medical education.

THE H. WILLIAM SCOTT, JR., PRIZE IN SURGERY. This award is presented to the graduating student who exemplifies the qualities of leadership, performance, and character reflecting the ideal surgeon.

THE JOHN L. SHAPIRO AWARD FOR EXCELLENCE IN PATHOLOGY. This award is given to the student selected by the Department of Pathology on the basis of accomplishments and potential in medicine with superior performance in the pathology course or superior performance in research in pathogenesis of disease.

THE SURGICAL CLERKSHIP AWARD. This award is presented annually by the section of surgical sciences to a student who has had a superior performance in the third-year surgical clerkship and who plans to enter graduate education in surgery. The award includes an expense-paid attendance at the annual meeting of a national surgical society.

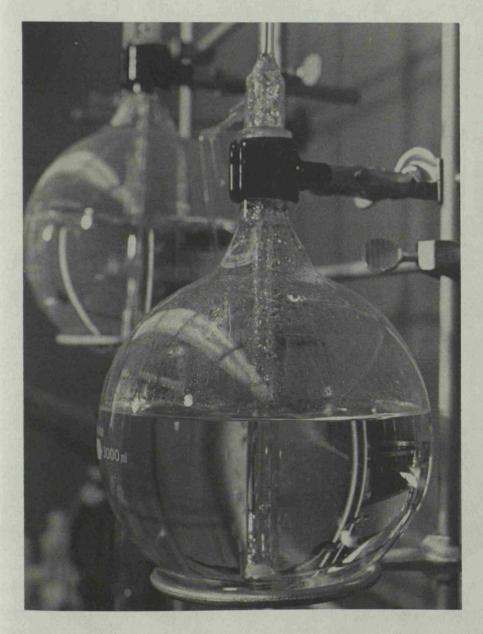
THE UPJOHN AWARD. This award is given each year to a medical student in the graduating class who is distinguished by an outstanding record in scholastic, personal, and professional achievement, and as a member of the Vanderbilt community. The Upjohn Award is provided through the interest and generosity of the Upjohn Pharmaceutical Company.

THE ALBERT WEINSTEIN PRIZES IN MEDICINE. Three prizes established in memory of Albert Weinstein, M.D., are awarded at graduation to fourth-year students who, in the opinion of the faculty of the Department of Medicine, merit recognition for high scholastic attainment and the qualities which characterize the fine physician.

Dr. Albert Weinstein was graduated from Vanderbilt University in 1926 and was founder's medalist from Vanderbilt School of Medicine in 1929. Following training at Vanderbilt and Johns Hopkins he returned to Vanderbilt as chief resident in medicine, 1933—1935, and served as a distinguished member of the faculty and clinical professor of medicine until his death on 1 October 1963. Despite a busy and successful practice, Dr. Weinstein contributed regularly to the medical literature and maintained a major interest in the teaching of medical students. These prizes were established in 1964 by contributions from friends, associates, and former patients of Dr. Weinstein.

THE CANBY ROBINSON SOCIETY AWARD. This award is presented by the Canby Robinson Society to the graduating student whose medical school career exemplifies leadership and service to his class and school.

TENNESSEE ACADEMY OF FAMILY PHYSICIANS AWARD. This award is given to a graduating medical student in recognition of dedication to the high ideals of Family Practice.





Financial Information



HE annual expense of a student in the School of Medicine is estimated to be \$20,000.

Tuition and Fees

Tuition (1987/88 academic year)	\$11,300
Application fee (to accompany final application)	50
Student activities fee (Sarratt Center)	62
Microscope usage fee per year (1st and 2nd years)	85
Student health insurance	294
Professional liability insurance	50

Tuition and fees are set annually by the Board of Trust and are subject to review and change without further notice.

All regularly enrolled medical students must pay the full tuition each year. There will be no exception to this requirement. Graduate students who enroll in courses in the medical curriculum for credit toward an academic degree and who later become candidates for the Doctor of Medicine degree may be required to pay the full tuition as indicated above. First-year medical students who are also three-year students in the College of Arts and Science are required by the College to pay a senior-inabsentia fee equal to one hour of Arts and Science tuition. Students who withdraw officially or who are dismissed from the University for any reason after the beginning of a term may be entitled to a partial refund in accordance with a schedule available in the Office of Student Services. No refund will be made after the eighth week in any semester.

Tuition, fees, and other University charges are due and payable by 25 September.

Late Payment of Fees

Charges not paid by 25 September will be automatically deferred, and the student's account will be assessed a monthly late payment fee at the following rate: \$1.50 on each \$100 that remains unpaid after 25 September (\$5 minimum). An additional monthly late payment fee will be assessed unless payment is received in full on or before the 25th day of the month; and late payment fees will continue for each month thereafter based on the outstanding balance unpaid as of the 25th day of each month. Students who have applied for and are awaiting financial aid

(i.e., GSL, HEAL, etc.) should notify the Financial Aid Staff of Student Services, and a late payment fee will not be charged.

Financial Clearance

Students will not be allowed to register for any semester if they have outstanding unpaid balances for any previous semester. No transcript, official or unofficial, will be issued for a student who has an outstanding balance until the account has been paid. Degrees of graduating students will be withheld until all bills are paid.

Microscopes, Books, and Equipment

First-year and second-year students are provided microscopes by the University. The usage fee for this service is included in the tuition and fee schedule and is required of all students in these classes.

All students must have clean white laboratory coats. In their second year students must acquire hemocytometers and ophthalmoscopes. The minimum cost for these instruments is approximately \$400.

The minimum cost of books is approximately \$400-\$500 per year. Purchases made at the Vanderbilt Medical School Bookstore are on a cash basis.

Activities Fee

The \$62 annual student activities fee entitles medical students to use the facilities of Sarratt Student Center. By payment of an additional fee, during specific and announced periods, students and their spouses may have their I.D. cards validated for admission to athletic events.

Honor Scholarships

JUSTIN POTTER MEDICAL SCHOLARSHIPS. The Justin Potter Medical Scholarships commemorate Mr. Justin Potter, a Nashville businessman, industrialist, and financier. These scholarships were established in 1963 by Mr. Potter's family and are awarded annually to applicants who have legally established residences in any of the following southern states: Alabama, Arkansas, Florida, Georgia, Kentucky, Louisiana, Mississippi, North Carolina, South Carolina, Tennessee, or Virginia. Children of full-time faculty of Vanderbilt University School of Medicine are not eligible for consideration for a Justin Potter Medical Scholarship.

Scholarships of \$10,000 annually are awarded to successful candidates and, once awarded, continue at this rate for four years contingent upon

satisfactory performance.

The method of selection of Justin Potter Scholars is as follows: the Justin Potter Medical Scholarship Committee reviews candidates from the eleven southeastern states who have accepted official invitation to attend Vanderbilt and have completed the scholarship application. Candidates selected by the scholarship committee are then invited to Nashville for personal interviews (candidates will be reimbursed for their expenses). The committee, composed of a medical educator, a practicing physician, a businessman, and an attorney, makes the final selection.

CATHERINE EASTERLING MOUNTCASTLE SCHOLARS PROGRAM. The Catherine Easterling Mountcastle Scholars Program was established in 1983 through the generosity of Mrs. Mountcastle's family to support superior students who need financial aid to attend Vanderbilt School of Medicine. Catherine Easterling Mountcastle Scholars will be selected by the Scholars Selection Committee from applicants who have accepted official invitation to the School of Medicine.

Scholarships of \$11,000 annually are awarded to successful candidates and, with satisfactory progress at Vanderbilt, continue for four years.

CANBY ROBINSON SCHOLARSHIPS. The Canby Robinson Scholarships provide full tuition and, with satisfactory progress at Vanderbilt, continue for four years. The scholarships are awarded on the basis of academic achievement and financial need. Scholarship recipients will be recommended by the Dean and the chairman of the Admissions Committee and be chosen by a committee from the Canby Robinson Society.

These scholarships were established in 1986 by the Canby Robinson Society.

DeLOACHE SCHOLARSHIP. The DeLoache Scholarship is given every four years to an incoming medical student who has demonstrated qualities of scholarship and leadership as well as financial need. To be eligible, the candidate must come from a state specified as a southeastern state east of the Mississippi. It is a full-tuition scholarship for four years of medical study contingent upon satisfactory performance.

Financial Assistance

Education leading to the Doctor of Medicine degree requires a careful consideration of financial commitment by the prospective student and family. Financial planning is an important part of the student's preparation for medical school.

In addition to the Honor Scholarships just described, scholarships and loans are available through Vanderbilt, based on demonstrated financial need and continued satisfactory academic progress. Financial aid from school sources must be considered a supplement to governmental and other sources, rather than the primary source of funds necessary to at-

tend medical school. University financial aid is not adequate to meet students' demonstrated need, but recent experience has been that most (but not all) approved financial aid requests have been met for items basic to the student's subsistence and education from a combination of sources, including the student's personal and family assets and Vanderbilt aid funds.

Satisfactory Performance. Students must perform satisfactorily in order to qualify for financial assistance (see Examinations and Promotions).

Government funds that furnish significant loans to medical students are: the Guaranteed Student Loan program, the Health Education Assistance Loan program, the Supplemental Loan to Students Program, and

the PLUS (parent loan) program.

Applications for financial aid will be sent to incoming first-year students in February, or if invited after that date along with the offer of admission to the Medical School. Applicants desiring more specific information about financial aid resources should request a copy of the Vanderbilt University School of Medicine Manual of Student Financial Aid Policies and Procedures from the Medical School Student Services Office.

The following are some of the Vanderbilt University School of Medicine institutional scholarships and loans available to assist students with demonstrated financial need.

Scholarships

THE EUGENE AND MARGE BESPALOW SCHOLARSHIP FUND. This endowed scholarship fund for deserving medical students was established by Dr. Bruce Dan, a Vanderbilt alumnus, in honor of his grandparents.

THE BURRUS SCHOLARSHIP FUND. This endowed scholarship was established by members of the Burrus family to help meet the cost of tuition for medical students.

THE ALICE DREW CHENOWETH SCHOLARSHIP. This scholarship honors the career of Dr. Alice Drew Chenoweth, a 1932 School of Medicine graduate who had a distinguished career as a pediatrician in the area of public health.

THE HERBERT ESKIND MEMORIAL FUND. This scholarship honoring the memory of Mr. Herbert Eskind was established by members of his family. Each recipient is provided with a scholarship of \$1,000.

MEDICAL STUDENT SCHOLARSHIPS. Funds are available to needy students through gifts donated by alumni and friends of Vanderbilt Medical School.

THE JAMES PRESTON MILLER TRUST. This trust, left by the will of James P. Miller in memory of his father, James Preston Miller, provides funds to assist in the medical education of deserving young men and women at Vanderbilt University. Residents of Overton County, Tennessee, are to be given first preference, and other residents of Tennessee to be given second preference.

MINORITY SCHOLARSHIP FUNDS. Funds are provided to needy, minority medical students.

THE WILLETT H. "BUDDY" RUSH SCHOLARSHIP. Established in memory of Dr. Rush, a 1941 graduate of the School of Medicine, this scholarship honors the dedication he showed to the practice of medicine and the Frankfort, Kentucky community. Awards are given in order of preference to students from Frankfort, Kentucky, the Blue grass region of Kentucky, and then the state of Kentucky.

THE FRED C. WATSON MEMORIAL SCHOLARSHIP. This scholarship is made on the recommendation of the Medical School to students selected by a committee based in Lexington, Tennessee, to students who are graduates of Lexington High School and are residents of Henderson County.

Other Scholarships

Other scholarships are available outside of the need-based institutional financial aid program. They are as follows:

THE WILLIAM N. PEARSON FELLOWSHIP FUND. A scholarship for studies in nutrition is awarded by the Department of Biochemistry. Further information is available from the department.

THE MARY AND WILLIAM O. INMAN, JR., SCHOLARSHIP FUND This fund ws established by Miss Grace McVeigh to pay tribute to the many contributions to the Brunswick, Georgia, community by the Inman's. This fund supports students in the combined M.D./Ph.D. program.

THE MEADE HAVEN SCHOLARSHIPS IN BIOMEDICAL SCIENCES. The Meade Haven scholarships in biomedical sciences have been endowed to provide support for medical students who have made a serious career commitment to obtain advanced experience and training in research in the biomedical sciences.

Revolving Loans

THE ALPHA KAPPA KAPPA ALUMNI ASSOCATION FUND. These funds are made available to students through contributions from alumni of the Alpha Kappa Kappa medical fraternity.

THE EDWARD F. COLE REVOLVING MEDICAL LOAN FUND. These funds are made available to students through contributions from Dr. Edward F. Cole, a Vanderbilt Medical alumnus.

THE F. TREMAINE BILLINGS REVOLVING STUDENT LOAN FUND. Established by Elizabeth Langford and friends, this loan fund honors Dr. Billings and his many contributions as friend and internist. It is to be used for the education of worthy medical students.

THE MAX EISENSTAT REVOLVING STUDENT LOAN FUND. This fund was established to honor the memory of Dr. Max Eisenstat.

THE J. F. FOX STUDENT LOAN IN MEDICINE. This fund was established in memory of Dr. J. F. Fox, a Vanderbilt graduate, and provides for annual assistance to students in the School of Medicine as a revolving loan fund based on scholarship, promise, and financial need.

THE TINSLEY HARRISON LOAN FUND. This fund was endowed to assist needy and worthy medical students by Dr. T. R. Deur, a Vanderbilt Medical School alumnus, in memory of Dr. Harrison, a former teacher and clinician at the school.

THE DR. ISADORE DAVID HASKELL FUND. This fund is provided by a bequest from the will of Mrs. Elena G. Haskell. The loans are to be provided in emergency situations to needy and deserving students.

THE GALE F. JOHNSTON LOAN FUND. The funds donated by Gale F. Johnston are to be used as a revolving loan fund for students in the School of Medicine.

THE W. K. KELLOGG FOUNDATION LOAN FUND. This fund was established through donations from the W. K. Kellogg Foundation.

THE IKE J. KUHN FUND. This revolving loan is provided by a bequest from the will of Mr. Ike J. Kuhn and is awarded in the School of Medicine to a worthy man or woman born and reared in any of the states commonly known as the "southern states."

THE THOMAS L. MADDIN, M.D., FUND. This fund is provided by a bequest from the will of Mrs. Sallie A. C. Watkins in memory of Dr. Thomas L. Maddin.

THE McVEIGH LOAN FUND. This loan fund is provided by a bequest from the will of Grace McVeigh in memory of her mother and father, Bess and Townsend A. McVeigh.

THE VANDERBILT MEDICAL FACULTY LOAN FUND. This fund is made available by donations from members of the Medical School faculty to be used to defray the educational costs of disadvantaged students.

THE MEDICAL LOAN FUND OF LIFE AND CASUALTY INSURANCE COMPANY OF TENNESSEE. Through donations from the Life and Casualty Insurance Company of Tennessee, needy students are provided revolving student loans.

THE KARL METZ MEMORIAL LOAN FUND. This fund for needy students was established in memory of Karl Metz.

THE J. C. PETERSON STUDENT LOAN FUND. This fund was established in memory of Dr. J. C. Peterson to provide loan monies for deserving medical students.

THE LOUIS ROSENFELD STUDENT LOAN FUND. This fund was established by contributions from Dr. Louis Rosenfeld and from friends in honor of Dr. Rosenfeld.

THE JOHN N. SHELL ENDOWMENT FUND. This revolving loan fund is provided by a bequest from the will of John N. Shell.

THE LEO SCHWARTZ LOAN FUND. This loan fund was established through contributions from Dr. Leo Schwartz.

THE ROBERT E. SULLIVAN MEMORIAL LOAN FUND. Through the generosity of Robert E. Sullivan a fund has been established to assist worthy and deserving medical students.

THE ROANE-ANDERSON COUNTY MEDICAL SOCIETY FUND. A revolving loan to a needy medical student, with preference given, when possible, to students from Roane, Anderson, and Morgan Counties of Tennessee.

THE THOMAS W. RHODES STUDENT LOAN FUND. Funds provided by the will of Georgine C. Rhodes were left to Vanderbilt University for the purpose of establishing a loan fund in the School of Medicine.

THE THOMPSON STUDENT LOAN FUND. This fund is to be used as a revolving loan fund for students in the School of Medicine from Middle Tennessee.

THE VANDERBILT MEDICAL EDUCATION FUND. This fund, derived from the donations of friends and alumni, provides significant help by making loans to qualified students with the funds available.

THE JOE AND HOWARD WERTHAN FOUNDATION FUND. The funds made available by this foundation to Vanderbilt University are to be given or lent to those students in the School of Medicine needing financial assistance.

Student Summer Fellowships

Student research under the sponsorship of members of the faculty of the preclinical and clinical departments is endorsed as an important part of the elective medical curriculum. Stipends vary from about \$2,000 to \$2,250 for the summer programs, depending upon experience. Limited funds for fellowship support are available on a competitive basis from individual departments within the Medical School. Funds are provided from a variety of sources, including the United States Public Health Service and various private foundations and health-interested organizations such as the local affiliates of the American Heart Association.

Research projects may be taken as electives for credit but without remuneration. Special arrangements can be made for participation in research programs abroad or in other medical schools in the United States. Individual departments or faculty members may also support student research experiences. Funds from all sources are becoming more difficult to obtain, but remain available, though limited.

THE DAN MAY SUMMER SCHOLARSHIP IN CARDIOVASCULAR MEDICINE. This scholar-ship for a predoctoral student was made possible by a gift from the May family in honor of Mr. May, a Nashville business, educational, and civic leader who was a graduate of Vanderbilt, long-time Board of Trust member, and friend of the University. The scholarship provides a summer stipend to support a predoctoral student who shows interest and promise in academic cardiovascular medicine.

Employment Opportunities for Spouses

Nashville is a middle-sized city (500,000) affording employment opportunities common to an industrial, business, and educational center. Major employers include Vanderbilt University, two national insurance companies, and the state government. Every attempt is made to find a position within the University for spouses of students. If interested, student spouses should make inquiry at the Vanderbilt Employment Center.



Research in Medical Sciences

Chairs and Professorships

THE THEODORE R. AUSTIN CHAIR IN PATHOLOGY. This chair is in memory of Dr. Austin, a pathologist who practiced in Alexandria, Virginia. He was an alumnus of Vanderbilt Medical School. The chair was established by his wife, Mrs. Dorothy B. Austin.

THE JAMES G. BLAKEMORE CHAIR IN PSYCHIATRY. Through the generosity of James G. Blakemore, Nashville businessman and Vanderbilt alumnus, this professorship in psychiatry was endowed in 1973 to support a distinguished faculty member in the Department of Psychiatry, providing freedom to contribute to research and teaching within a specific field of excellence.

THE LUCIUS E. BURCH CHAIR OF REPRODUCTIVE PHYSIOLOGY & FAMILY PLANNING. In December of 1967, the Department of Obstetrics & Gynecology received funds, through the generosity of an anonymous donor, to endow this professorship, the purpose of which is to further research in basic reproductive biology, and applied family planning. The chair is named for Dr. Lucius E. Burch, dean of the School of Medicine from 1913 until 1920, and chairman of the Department of Obstetrics & Gynecology until his retirement in 1945.

THE CRAIG-WEAVER CHAIR IN PEDIATRICS. Established through the generosity of Elizabeth Proctor, this undesignated chair is to enhance research and teaching programs of Children's Hospital and provide high quality specialty care for children. The chair honors Mrs. Proctor's parents, the late Mr. and Mrs. Edwin Wilson Craig, and her late husband, William C. Weaver, Jr.

THE JOHN CLINTON FOSHEE DISTINGUISHED PROFESSORSHIP OF SURGERY. Through the generosity of the late Dr. John C. Foshee, graduate of Vanderbilt University School of Medicine in 1916, distinguished surgeon of Grand Rapids, Michigan, and former president of the Vanderbilt Medical Alumni, this professorship was endowed in 1976 for the purpose of furthering medical education and research in the field of general surgery.

THE THOMAS F. FRIST CHAIR IN MEDICINE. This professorship was established to support and recognize a distinguished leader-physician-scholar of national stature who combines the qualities of an eminent physician and experienced medical scholar in the person of one with the leadership qualities to have a positive effect upon important issues of medical education practice or research. When possible, the occupant of the chair will be the chairperson of the Department of Medicine.

THE ERNEST W. GOODPASTURE CHAIR IN EXPERIMENTAL PATHOLOGY. In recognition of Ernest W. Goodpasture, this chair is established to enhance basic investigative efforts in experimental pathology.

THE GEORGE W. HALE PROFESSORSHIP IN OPHTHALMOLOGY. Through the generosity of Virginia McHenry Hale, this professorship was established in 1960 for the advancement of ophthalmology.

THE ELSA S. HANIGAN CHAIR IN PULMONARY MEDICINE. Mr. John L. Hanigan has endowed this chair in memory of his wife. The chair strengthens the ability to treat and care for

patients with respiratory diseases and offers a unique opportunity for Vanderbilt University Medical Center and Saint Thomas Hospital jointly to develop innovative programs in pulmonary research, education, and rehabilitation.

THE HARRY JOHNSON PROFESSORSHIP IN NEPHROLOGY. Established by Dialysis Clinics, Inc., this professorship for the chief of the Division of Nephrology is to foster and enhance research and education at Vanderbilt in the field of nephrology.

THE GUY M. MANESS CHAIR IN OTOLARYNGOLOGY. This chair was created through the generosity of Dr. Maness, longtime friend of Vanderbilt Otolaryngology. The chair launches a comprehensive program of education, research, and treatment of diseases of the ears, nose, throat, head, and neck at Vanderbilt.

THE JAMES C. OVERALL PROFESSORSHIP IN PEDIATRICS. Through the generosity of Mr. and Mrs. William K. Warren of Tulsa, Oklahoma, this chair was endowed in 1981 to enhance the academic program in the Department of Pediatrics. The professorship honors Dr. James C. Overall, clinical professor emeritus of pediatrics, a distinguished clinician and contributor to American pediatrics.

THE LEO AND MARGARET MILNE RECORD CHAIR IN SURGERY. This chair was established through the generosity of Dr. Record, a prominent Chattanooga physician, and his wife.

THE PAUL W. SANGER CHAIR OF EXPERIMENTAL SURGERY. Through the generosity of the late Dr. Paul W. Sanger, graduate in Vanderbilt Medical School's class of 1931, distinguished surgeon of Charlotte, North Carolina, and former president of the Vanderbilt Medical Alumni, this professorship was established in 1969 and funded in collaboration with the Department of Surgery for the purpose of furthering research in surgical biology and in the general field of surgery.

THE H. WILLIAM SCOTT, JR., CHAIR IN SURGERY. Through the generosity of members of the H. William Scott, Jr., Society, consisting primarily of residents trained by Dr. Scott, this professorship was established in 1983 to honor Dr. Scott for his contributions to the Section of Surgical Sciences and Vanderbilt University during his thirty-year tenure as chairman from 1952 to 1982.

THE ADDISON B. SCOVILLE, JR., PROFESSORSHIP IN DIABETES AND METABOLISM. Through the generosity of the Justin and Valere Potter Foundation of Nashville, this professorship was established in 1973 for the purpose of furthering research in the field of diabetes and metabolism.

THE ADDISON B. SCOVILLE CHAIR IN MEDICINE. This chair has been endowed to support and recognize a distinguished physician scholar whose accomplishments in investigative medicine will enrich and strengthen the scientific endeavors of the Department of Medicine. The Addison B. Scoville Professor will be appointed by the Dean of the Vanderbilt University School of Medicine upon the advice of the chairperson of the Department of Medicine.

THE ANN GEDDES STAHLMAN CHAIR IN MEDICAL ETHICS. The broad objective in establishing the Ann Geddes Stahlman Chair in Medical Ethics is to contribute to the return of humanism to the practice of medicine. Individuals who hold this endowed chair may by background and training be nondenominational theological scholars, ethics scholars, philosophy scholars, scholars in the law, or members of the teaching faculty of a school of medicine.

THE GLADYS PARKINSON STAHLMAN CHAIR IN CARDIOVASCULAR RESEARCH. Through the generosity of Mr. James C. Stahlman this professorship was endowed in 1973 for the purpose of engaging in cardiovascular research with primary emphasis in the areas of etiology, prevention, and treatment.

THE MILDRED THORNTON STAHLMAN CHAIR IN PERINATOLOGY. The generosity of Mr. James C. Stahlman established this professorship in perinatology. The chair to be established in this new field of medical research will reinforce this program over an indefinite period of time.

THE MARY GEDDES STAHLMAN CHAIR IN CANCER RESEARCH. Through the generosity of Mr. James C. Stahlman, this professorship was endowed in 1972 for the purpose of furthering studies in cancer research. The professorship provides funds to help establish Vanderbilt as a national center for cancer research.

THE EDWARD CLAIBORNE STAHLMAN CHAIR IN PEDIATRIC PHYSIOLOGY AND CELL METABOLISM. This professorship was endowed in 1972 by Mr. James C. Stahlman for studies in pediatric physiology and cell metabolism.

THE MINA COBB WALLACE CHAIR IN IMMUNOLOGY. Established through the generosity of John Wallace in memory of his mother. The chair will support advancements in education and research in the field of immunology.

THE JOE AND MORRIS WERTHAN PROFESSORSHIP IN EXPERIMENTAL MEDI-CINE. Through the generosity of the Werthan family of Nashville, this professorship was established in 1951 for the purpose of furthering research in the general field of internal medicine.

THE WESLEY WILKERSON CHAIR IN AUDIOLOGY. This chair was established by Thomas and Jane Yount in memory of her father, Wesley Wilkerson, who founded the Bill Wilkerson Hearing and Speech Center. This chair will enhance the three-fold mission of the Bill Wilkerson Center—research, education, and service.

Endowed Research Funds

THE RACHEL CARPENTER MEMORIAL FUND. This fund was established in 1933 by a gift from Mrs. Mary Boyd Carpenter of Nashville. The income derived from the fund is to be used for education in the field of tuberculosis.

THE BROWNLEE O. CURREY MEMORIAL FUND FOR RESEARCH IN HEMATOLOGY. This is a memorial fund created by the friends of Brownlee O. Currey. The income is being used for the support of research in the field of hematology.

THE JACK FIES MEMORIAL FUND. The income from a gift to Vanderbilt by Mrs. Hazel H. Hirsch as a memorial to her son, Jack Fies, is to be used to support research in the field of neurosurgery. It is hoped that subsequent donations will be made by those who may be interested in creating a larger fund for this phase of research.

THE JOHN B. HOWE FUNDS FOR RESEARCH. In January 1946, the members of the family of the late John B. Howe established two funds in the University to be known as the John B. Howe Fund for Research in Neurosurgery and the John B. Howe Fund for Research in Medicine. The expenditures from the funds for neurosurgery and medicine are administered through the Department of Surgery and the Department of Medicine.

THE BEQUEST OF AILEEN M. LANGE FOR MEDICAL RESEARCH. To be used for medical research in preventing and curing ailments of human beings.

THE ANNIE MARY LYLE MEMORIAL FUND FOR MEDICAL RESEARCH. This gift is to be used for basic or applied research in medical science, particularly cardiovascular research or another area of need.

THE NEUROLOGY RESEARCH FUND. Funds to be used for research efforts in the field of Neurology.

THE MINNIE J. ORR FUND FOR RESEARCH IN POLIOMYELITIS OR HEART DISEASE.

THE MARTHA WASHINGTON STRAUS—HARRY H. STRAUS FOUNDATION, INC. The foundation provides support for research in the Department of Medicine in the field of cardiovascular diseases.

THE LESLIE WARNER MEMORIAL FUND FOR THE STUDY AND TREATMENT OF CANCER. This fund was established in 1932 in the memory of Leslie Warner of Nashville, Tennessee. Half of the founding grant was contributed by the nieces and nephews of Mrs. Leslie Warner.

Research Centers

Vanderbilt University School of Medicine encompasses a number of multidisciplinary research groups that are funded primarily by external sources. Many of the centers involve investigators from schools of the University other than medicine. A brief description of each center and its general activities follows.

Arthritis and Lupus Center

Theodore Pincus, Director

The program of this center is organized around five Vanderbilt-associated rheumatologists who participate actively in center activities and provide clinical research data bases regarding natural history, therapy and outcome of rheumatic disease patients. A small, full-time University staff concentrates on analysis of clinical data and a basic research program concerning the cellular regulation of immune function. Projects in various stages of development include clinical research, education, and community activities.

Cancer Center

F. Anthony Greco, Director

The center, still in a fledgling state, is identified with all cancer-related efforts at Vanderbilt. The center is assigned 5,000 square feet of space in which most members of the Oncology Division of the Department of Medicine maintain their offices. The A.B. Hancock, Jr., Memorial Labora-

tory is also located in this area. Research focuses on the biochemistry and biology of chromatin and cell nuclei in normal and malignant cells. A cancer chemotherapy program is a strong component. Principal support for the center comes from the National Cancer Institute.

Clinical Research Center

David H. Robertson, Interim Director

The Clinical Research Center (CRC) is a 21-bed unit located in Medical Center North. Its objectives are to encourage and support clinical research into the cause, progression, prevention, control, and care of human disease. These it fulfills by creating a controlled environment for studies of normal and abnormal body function. The CRC provides space, hospitalization costs, laboratories, equipment, and supplies for clinicial research by any qualified member of the faculty in any medical school department. The common resources of the CRC support all disciplines, with particular emphases on clinical pharmacology, endocrinology, gastroenterology, hematology, and diabetes. The CRC is supported by a grant from the Division of Research Resources.

Clinical Nutrition Research Unit

Harry L. Greene, Director

The CNRU is one of seven units established nationwide by the National Institutes of Health. Its objectives are to improve research in clinical nutrition; to strengthen the nutrition training of medical students, house staff, practicing physicians, and other health care personnel; and

to improve patient care by focusing attention on nutrition.

Clinical activities and projects explore the nutritional factors in hepatic encephalopathy; the zinc and copper needs of pediatric patients on total parenteral nutrition; vitamin-trace element metabolism in patients with chronic dialysis or with essential fatty acid deficiency; evaluation of the effect of nutritional repletion of moderately undernourished patients after surgery; and the feasibility of home nutritional support in small-cell lung cancer. The center also operates a metabolic assessment laboratory for the assay of 18 vitamins, minerals, and proteins important to nutrition. The work of the CNRU is supported by a grant from the National Institute of Arthritis, Diabetes, and Digestive and Kidney Diseases.

Diabetes Research and Training Center

Oscar B. Crofford, Director

The Vanderbilt Diabetes Research and Training Center (DRTC) involves ninety-one participating faculty members from fourteen departments, schools, and colleges of the University. The center is organized into three components: research, training and translation, and administrative. The

activities of the research component include basic biomedical research and the Pilot and Feasibility Studies Program, which aids new investigators in testing the feasibility of new ideas before submitting grant proposals for long-term support. The training and translation component operates a model demonstration unit in which students in the health professions encounter patients with well-characterized diabetes who have volunteered for approved clinical research programs. The administrative component develops outside resources for training and research grants and initiates and supervises such activities as the Diabetes Center Seminar Series and the Visiting Scientist Program. Center funding is provided by grants from the NIH.

Center in Molecular Toxicology

F. Peter Guengerich, Director

The center studies potentially harmful chemicals in the environment and the origin and mechanism of disease states brought about by such chemicals. Investigators are drawn from the departments of biochemistry, pathology, pharmacology, preventive medicine, and chemistry at

Vanderbilt and from Western Kentucky University.

Current research projects include model studies with sulfur compounds; heavy metal toxicology and chelating agents; chemical mechanisms of metabolism; naturally occurring central nervous system toxins; mycotoxins; metabolism of toxic compounds; metal carcinogenesis; bacterial mutagenesis; and tissue studies. Center funding derives from a grant from the National Institute of Environmental Health Sciences and from a training grant in toxicology.

SCOR in Hypertension

Tadashi Inagami, Director

The objective of the SCOR (Specialized Center for Research) in Hypertension is to contribute to improved diagnosis, treatment, and prevention of hypertension, with major effort directed to the study of renal and adrenal hypertension. The multidisciplinary research group is composed of investigators from the areas of biochemistry, clinical pharmacology, endocrinology, vascular surgery, cardiology, urology, radiology, and biostatistics.

The accomplishments of the center's investigators include: one of the best success records in renovascular surgery; complete purification of renin for the first time since its discovery eighty years ago; preparation of well-defined antibodies to renin; discovery of the major role of prostaglandin I2 in renin release; operation of a clinic internationally recognized for excellence in the diagnosis of renovascular hypertension and primary aldosteronism. Center support is provided by a SCOR grant and a training grant from the National Heart, Lung and Blood Institute.

SCOR in Newborn Lung Disease

Mildred T. Stahlman, Director

Investigators from the departments of pediatrics, medicine, biochemistry, pathology, and pharmacology work together in the SCOR in Newborn Lung Disease. Research projects focus on pulmonary growth and development *in utero*, the ability of the lung to adapt to the stress of birth at differing stages of maturity, and the pathogenesis of some of the most important neonatal pulmonary disorders (hyaline membrane disease and Group B Beta-hemolytic streptococcal sepsis, for example). Investigators employ an integrated approach of basic science disciplines, animal modeling of physiological problems, and mathematical evaluation of the outcome to address these problems. The center is funded by a grant from the National Heart, Lung and Blood Institute with additional support from a March of Dimes Birth Defects Foundation.

Neuromuscular Disease Research Center

Gerald M. Fenichel, Director

The center, which encourages close collaboration between basic and clinical sciences, draws investigators from the University departments of biochemistry, molecular biology, pathology, pharmacology, physiology, medicine, pediatrics, and neurology. Center projects include six studies of muscle membranes in normal and abnormal states, five studies of metabolic and endocrine factors in nerve and muscle disease, and two basic studies concerned with neuromuscular transmission and the degradation of contractile proteins. Clinical studies include a collaborative study to find a therapeutic agent for Duchenne dystrophy, a genetic study of T-cell regulation of B-cells in polymyositis. The center is funded primarily by grants from the Muscular Dystrophy Association.

Center for Pharmacology and Drug Toxicology

John A. Oates, Director

Center investigators include clinical pharmacologists in the areas of medicine, pediatrics, and psychiatry working in association with a nucleus of investigators whose research in biochemical pharmacology includes the biotransformation of drugs, analytical pharmacology, and pharmacokinetics. Research programs focus on the metabolism, distribution, and biochemical effects of drugs in human beings. The center's scientific resources enable application of the best available techniques and approaches to studies of drugs in humans and provide an environment for training investigators in clinical pharmacology. Funds for center support come from the National Institute of General Medical Sciences.

Center for Population and Reproductive Biology

Marie Claire Orgebin-Christ, Director

Thirty-four faculty members from ten departments in the School of Medicine and the College of Arts and Science participate in the work of the center. Basic and clinical research focuses on four areas: the male reproductive system; the female reproductive system; fertilization, implantation, and embryonic development; and reproductive endocrinology. Center financing is provided by a grant from the National Institute of Child Health and Human Development and from research grants related to both basic and clinical aspects of the reproductive sciences.

SCOR in Pulmonary Edema

Kenneth L. Brigham, Director

The SCOR in Pulmonary Edema involves nineteen full-time investigators from the departments of medicine, pediatrics, pathology, surgery, and pharmacology. The general focus of research is on lung circulation—specifically, on mechanisms of lung vascular injury and on the response of the lung to such injury. Investigations range from basic laboratory studies to clinical studies in patients with acute respiratory failure.

Principal support of the research derives from a Specialized Center of Research in Pulmonary Vascular Diseases grant from the National Heart, Lung and Blood Institute. Additional support comes from an NIH training grant, a private foundation training grant, and several individual awards made through the NIH to investigators participating in the pro-

Courses of Study



School of Medicine Departments

Anesthesiology Biochemistry Cell Biology Hearing & Speech Sciences Medical Administration Medicine Dermatology Microbiology Molecular Physiology and Biophysics Neurology Obstetrics & Gynecology Ophthalmology Orthopaedics & Rehabilitation Pathology Pediatrics Pharmacology Preventive Medicine Biostatistics Psychiatry

Radiology and Radiological Sciences

SURGICAL SCIENCES

General Surgery
Dentistry
Neurosurgery
Oral Surgery
Otolaryngology
Pediatric Surgery
Plastic Surgery
Thoracic & Cardiac Surgery
Urology

Anesthesiology

CHAIRMAN Bradley E. Smith

EMERITUS Charles B. Pittinger

PROFESSORS M. Lawrence Berman, Duncan A. Holaday, Bradley E. Smith, Margaret Wood CLINICAL PROFESSOR David A. Chadwick

ASSOCIATE PROFESSORS Ramon S. Harris, Joanne L. Linn, Winston Clive-Victor Parris, Charles W. Quimby, Jr.

ASSOCIATE CLINICAL PROFESSORS Geoffrey Berry, Yilmaz Eryasa, James M. Phythyon, Lawrence G. Schull

ASSISTANT PROFESSORS Ildefonso A. Alcantara, John J. Franks, Bennett Franklin Horton, Sr., Steve Alan Hyman, Jayakumar Reddy Kambam, Thomas C. Lewis, Edwin J. Lilly, Stephanie M. Mouton, Geeta Wasudev

ASSISTANT CLINICAL PROFESSORS Michael W. Bertz, Charles G. Cannon, Jr., Pong M. Chang, Erol Genca, Thomas J. Holcomb III, James W. Menzie

ASSOCIATE Robert N. Jamison

INSTRUCTOR Jacqueline J. Smith

CLINICAL INSTRUCTORS John E. Erpenbach, James A. Ramsey

RESEARCH ASSOCIATE Darel G. Hess

*THE Department of Anesthesiology offers a required lecture course for third-year students on aspects of the general practice of anesthesiology. Fourth-year elective courses are offered in the pharmacology of anesthesiology, as well as a clerkship which includes didactic and operating room experience in the conduction of anesthesia.

Required Course

501. Anesthesiology. This course for third-year students consists of a series of lectures on some aspects of anesthesiology applicable to the general practice of medicine. Among the topics presented will be: preoperative evaluation of the patient; premedication, selection of anesthetic agent and technique; local anesthesia, resuscitation, and oxygen therapy.

Biochemistry

CHAIRMAN Leon W. Cunningham

DISTINGUISHED PROFESSOR Stanley Cohen

EMERITI William J. Darby, Willard R. Faulkner, Wayland J. Hayes, Jr.

PROFESSORS Graham F. Carpenter, G. Roger Chalkley, Frank Chytil, John G. Coniglio, Leon W. Cunningham, F. Peter Guengerich, Tadashi Inagami, John A. Phillips III, James V. Staros, Oscar Touster, Conrad Wagner, Benjamin J. Wilson

VISITING PROFESSOR E. Neige Todhunter

ADJUNCT PROFESSORS Harry P. Broquist, Robert A. Neal

ASSOCIATE PROFESSORS Harry L. Greene, Carl G. Hellerqvist, George V. Mann, David E. Ong

RESEARCH ASSOCIATE PROFESSORS Jorge H. Capdevila, Benjamin J. Danzo

ADJUNCT ASSOCIATE PROFESSOR Dixie W. Frederiksen

ASSISTANT PROFESSORS Robert J. Boucek, Jr., Philip W. Felts, Peter Gettins, R. Stephen Lloyd, Michael J. Meredith, Neil Osheroff, Laken G. Warnock

RESEARCH ASSISTANT PROFESSORS Robert C. Briggs, Robert J. Cook, Ghazi A. Dannan, Roy A. Fava, Donald W. Horne, Thomas N. Oeltmann, Ann M. Soderquist

INSTRUCTOR Barbara Mroczkowski

VISITING INSTRUCTOR Toshiki Muto

RESEARCH INSTRUCTORS David M. Duhl, Kailash N. Pandey, Augustinus Rinaldy, Masaaki Tamura

RESEARCH ASSOCIATES P.S.R. Anjaneyulu, Arnaud Bondon, William R. Brian, James T. Davis, Marion L. Dodson, Jr., Lesa D. Fraker, Marek Gaczynski, Cecile Ged, Terrence D. Giugni, Hiromi Hagiwara, Koichi Higashimori, Teruaki Imada, Liu Ji-Min, Yao Kunquan, Shunzo Nishibe, Lisa A. Peterson

THE Department of Biochemistry offers to first-year students basic information on the chemistry of chemical compounds and related reactions in living organisms. Electives available to students at all levels include such topics as: nutritional biochemistry; toxicology; fundamentals of human nutrition; advanced biochemistry; genes and their regulation; clinical biochemistry; lipid chemistry, metabolism and transport; nutrition rounds; chemical mechanisms of enzyme catalysis; and reproductive biology. Research experience in biochemistry and nutrition is available to fourth-year students. The department offers as electives in the first, second, and fourth year a biochemistry seminar and a course in special problems in nutrition. A preceptorship in biochemistry is also offered in the fourth year.

Required Courses

501. Biochemistry. Lectures on the chemistry and metabolism of carbohydrates, proteins, lipids, nucleoproteins, and on the chemistry and function of enzymes, vitamins, and other factors related to cellular metabolism and body processes. FALL. [6] *Dr. Coniglio, Dr. Cunningham, Dr. Meredith, and Staff.*

502. Biochemistry Laboratory. This laboratory course accompanies Biochemistry 501 and emphasizes chemical, physical, and physiologic aspects of topics presented there. FALL. [2] *Staff.*

Cell Biology

CHAIRMAN Harold L. Moses EMERITUS James W. Ward

PROFESSORS R. Benton Adkins, Jr., Alvin M. Burt III, Vivien A. Casagrande, Jack Davies, John A. Freeman, Loren H. Hoffman, Virgil S. LeQuire, Harold L. Moses, Gary Edward Olson, Marie-Claire Orgebin-Crist, Warren Jackson Pledger

ASSOCIATE PROFESSORS G. Rodman Davenport, Jon H. Kaas, James McKanna, Jeanette J. Norden, Linda Jo Van Eldik

ASSISTANT PROFESSORS Lucille H. Aulsebrook, Robert J. Coffey, Jr., Stephen R. Hann, Jeffrey T. Holt, Paula C. Hoos, Edward B. Leof, Lynn McCormick Matrisian, Lillian B. Nanney, Linda Sealy

RESEARCH ASSISTANT PROFESSORS Brian R. Costello, Roy A. Fava, Nancy Olashaw, Danna Beth Zimmer

RESEARCH ASSOCIATES Charles C. Bascom, Daniel Blackburn, George J. Condo, Sean Flaherty, James B. Hutchins, Russette M. Lyons, Peter G. Mitchell, Claudia J. Morgan, Jed Michael Rifkin, Nancy J. Sipes

THE Department of Cell Biology is responsible for instruction in histology, gross anatomy, and the human nervous system as part of the required curriculum for first-year medical students. Elective courses are offered by the department in areas of reproductive biology, advanced neurobiology, surgical anatomy, neurochemistry, and cell biology.

Required Courses

501. Cell Biology. This course is designed to give the student a familiarity with the normal microscopic anatomy of tissues and organs of the human body. Emphasis is placed on the correlates between structure and function at both the light and electron microscopic levels so as to serve as a basis for understanding the physiological and biochemical activity of cells and tissues. SPRING. *Dr. Hoffman and Staff.*

502. Gross Anatomy. The course is devoted to a systematic dissection of the human body. This is supplemented by lectures and demonstrations. The emphasis is on the function and clinical relevance of the anatomical structures. Saturday morning lectures are concerned with the embryological basis of the anatomical structures and emphasize the problem of congenital abnormalities. FALL. *Dr. Davies and Staff.*

503. Neurobiology. A basic course with emphasis on a systematic study of anatomy, physiology, and chemistry of the human nervous system. Clinical material is utilized, where appropriate, to emphasize the basic anatomy and physiology. A block of time will also be devoted to basic behavioral science. SPRING. *Dr. Norden and Staff.*

Hearing and Speech Sciences

DIRECTOR Fred H. Bess

EMERITI Freeman McConnell, Jay Sanders

PROFESSORS Fred H. Bess, Russell J. Love

ADJUNCT PROFESSORS Michael E. Glasscock III, Harold P. Mitchell

ASSOCIATE PROFESSOR Howard S. Kirshner

ASSISTANT PROFESSORS Sid P. Bacon, Bertha Smith Clark, Thomas M. Klee, Ralph N. Ohde, Wanda G. Webb

ADJUNCT ASSISTANT PROFESSORS D. Wesley Grantham, Anne Forrest Josey, Barbara F. Peek

ASSISTANT CLINICAL PROFESSORS John R. Ashford, C. Gary Jackson

INSTRUCTORS Gene W. Bratt, Ellen J. Davis-Dansky, Susan A. Logan

CLINICAL INSTRUCTORS Sara Greene Hoffman, Blake B. Lazenby, Johnny D. McQuain, Mary A. Schaffer, Paulette W. Shanks, Linda Logan Sweat, Anne Marie Tharpe

THE Division of Hearing and Speech Sciences offers work leading to the master's and Ph.D. degrees in the following areas: audiology, speech and language pathology, and hearing or speech science. Information on regulations and requirements may be found in the catalogue of the Graduate School. The research, teaching, and clinical programs associated with this program are housed in the Bill Wilkerson Hearing and Speech Center.

Medical Administration

CHAIRMAN John E. Chapman VICE-CHAIRMAN John O. Lostetter

PROFESSORS John E. Chapman, Gerald S. Gotterer, A. Everette James, Jr.

ASSOCIATE PROFESSORS Richard A. Couto, T. Mark Hodges, Norman B. Urmy, Dennis K. Wentz

ASSOCIATE CLINICAL PROFESSOR Alexander C. McLeod

ASSISTANT PROFESSORS Donald E. Hancock, Allen H. Heim, John O. Lostetter, Charles W. Quimby, Jr.

ADJUNCT ASSISTANT PROFESSOR Robert H. Crumby ASSISTANT CLINICAL PROFESSOR Charles E. McKay INSTRUCTORS Winfred L. Cox, Larry E. Deters CLINICAL INSTRUCTOR Warren F. McPherson ASSISTANT Philip N. Bredesen

THE Division of Medical Administration was established in 1969 to provide an academic base for those who engage in service, education, and research as these support the objectives of the Medical School. The division offers elective courses on subjects related to past and present trends in American medical education, the influence of various professional organizations and government bodies in medical education, and issues in health care at all levels, and the transition to medical practice and medical practice management. Special subject seminars are encouraged.

Medicine

CHAIRMAN John A. Oates

EMERITI F. Tremaine Billings, Richard A. France, Thomas F. Frist, Robert A. Goodwin, Jr., Hollis E. Johnson, Rudolph H. Kampmeier, Grant W. Liddle, Samuel S. Riven, Addison B. Scoville, Jr., Harrison J. Shull, Clarence S. Thomas, Thomas Bowman Zerfoss

PROFESSORS Robert A. Branch, Kenneth L. Brigham, Thomas G. Burish, Raymond F. Burk, Daniel G. Colley, Oscar B. Crofford, Jr., Roger M. Des Prez, Garret A. FitzGerald, John M. Flexner, Gottlieb C. Friesinger II, Daryl K. Granner, Frank Anthony Greco, Thomas R. Harris, Luc M. Hondeghem, Harry R. Jacobson, Lloyd E. King, Jr., Sanford B. Krantz, Peter T. Loosen, Barbara O. Meyrick-Clarry, John A. Oates, David N. Orth, Theodore Pincus, Lloyd H. Ramsey, L. Jackson Roberts II, David H. Robertson, Roscoe R. Robinson, Joseph C. Ross, William D. Salmon, Jr., William Schaffner, Raphael Smith, James D. Snell, Jr., W. Anderson Spickard, Jr., William J. Stone, Paul E. Teschan, George B. Theil, Alastair J. J. Wood, Raymond L. Woosley, Richard M. Zaner

RESEARCH PROFESSOR Samuel Enoch Stumpf

CLINICAL PROFESSORS Crawford W. Adams, Robert H. Alford, W. Barton Campbell, Laurence A. Grossman, Herman J. Kaplan, Clifton Kirkpatrick Meador, Harry L. Page, Thomas Guv Pennington

ASSOCIATE PROFESSORS Naji Abumrad, Paul S. Auerbach, George R. Avant, Jorge H. Capdevila, Graham F. Carpenter, G. Dewey Dunn, Philip W. Felts, James P. Fields, Stanley E. Graber, David W. Gregory, Kenneth R. Hande, H. Keith Johnson, Allen B. Kaiser, Mark J. Koury, Marvin W. Kronenberg, Robert C. MacDonell, Jr., George V. Mann, John J. Marini, Samuel R. Marney, Jr., James M. May, L. Clifford McKee, John H. Newman, James M. Perry, Jr., Rose M. Robertson, Dan M. Roden, Martin P. Sandler, Stephen Schillig, Paul E. Slaton, Jr., James R. Snapper, Richard S. Stein

RESEARCH ASSOCIATE PROFESSOR Marc M. A. Schapira

ASSOCIATE CLINICAL PROFESSORS Benjamin J. Alper, James Erwin Anderson, Jr., E. William Ewers, Howard R. Foreman, Fred Goldner, Jr., Alan L. Graber, John Hooper Griscom, Thomas B. Haltom, John S. Johnson, Alexander C. McLeod, John S. Sergent, Paul R. Stumb, Charles B. Thorne, Lawrence K. Wolfe

ASSISTANT PROFESSORS Kamal F. Badr, Neil L. Barg, Gordon R. Bernard, Maurice C. Bondurant, Julia Glynn Breyer, Matthew D. Breyer, Brenda J. Butka, Benjamin F. Byrd III, Peter J. Campbell, Alan D. Cherrington, Frank Chytil, Robert J. Coffey, Jr., A. Gene Copello, Thomas Oran Daniel, C. Rowan DeBold, Michael D. Decker, Emmanuel N. Dessypris, Debra S. Echt, Darrel L. Ellis, Desmond J. Fitzgerald, James T. Forbes, Mervyn B. Forman, W. Brian Gibler, Barney Scott Graham, John P. Greer, Clark R. Gregg, William W. Grosh, Curt H. Hagedorn, John D. Hainsworth, Raymond C. Harris, Jr., Craig R. Heim, Alan S. Hollister, Marcus C. Houston, Donald P. Island, David H. Johnson, Douglas S. Kernodle, Howard R. Knapp, William J. Kovacs, John T. Lee, Lewis B. Lefkowitz, Jr., John M. Leonard, Michael J. Lichtenstein, R. Todd Light, James E. Loyd, Michael E. May, John H. J. Nadeau, Thomas N. Oeltmann, Nancy J. Olsen, Spyros N. Pavlou, James W. Pichert, Lester L. Porter III, James S. Powers, Charles E. Saunders, David G. Schlundt, Richard P. Schneider, James R. Sheller, Ghodratollah Siami-Araghi, Stanford J. Stewart, Charles W. Stratton, Dennis K. Wentz, Steven N. Wolff, Barry E. Yarbrough

VISITING ASSISTANT PROFESSOR Jian Guo Yang

RESEARCH ASSISTANT PROFESSORS James M. Bateman, Jerry C. Collins, Scherer S. Duke, Ronald E. Gates, Stanley B. Higgins, Kristina E. Hill, Richard E. Parker, Elizabeth A. Perkett, Stephen T. Sawyer, Christa A. Stoscheck

ADJUNCT ASSISTANT PROFESSOR T. Rubel Shelly

ASSISTANT CLINICAL PROFESSORS Mark S. Averbuch, Paul H. Barnett, Phillip D. Bertram, Stanley J. Bodner, James D. Bomboy, Jr., William J. Card, James R. Cato, Robert Seth Cooper, Orrie A. Couch, Jr., Thomas J. Davis, John H. Dixon, Jr., J. Vance Fentress, Rand T. Frederiksen, Richard Lee Gibson, Francis W. Gluck, Jr., Milton Grossman, Gerald Halprin, James R. Hamilton, Herbert Harkleroad, William E. Harston, Jr., Aubrey B. Harwell, James B. Haynes, Jr., Robert M. Johnson, Peter R. Kaplan, Dana L. Latour, Ralph W. Massie, Wallace R. G. McGrew, Jr., Larry W. McNeil, John R. McRae, Cullen R. Merritt, Carl E. Mitchell, Harrison J. Shull, Jr., Murray W. Smith, Dennis A. Stouder, Craig R. Sussman, Jerome S. Tannenbaum, Russell D. Ward, James P. Wilson, Frank G. Witherspoon, Robert J. Workman, John Lanier Wyatt

ASSOCIATE Arlene S. Samowich

INSTRUCTORS Thomas G. Arnold, Jr., Italo Biaggioni, Francesca Catella, Jan Stallings De-Lozier, Raymond G. Dufresne, Jr., Howard A. Fuchs, Douglas A. Gentile, Leonard Giannone, James Taylor Hays, Gary J. Jacques, Michael D. McCadden, Wendell E. Nicholson, Charles R. Prince, Cheryl J. Slinger, Dirk Snyders, C. Gordon Vire

RESEARCH INSTRUCTORS R. Keith Carr, Jonathan J. Lipman

ADJUNCT INSTRUCTOR Albert C. Roach

CLINICAL INSTRUCTORS Edward E. Anderson, Edwin B. Anderson, Jr., H. R. Anderson, T. Dee Baker, Jack M. Batson, John Michael Bolds, John Breinig, J. Randall Byrd, Jack W. Coggeshall, Alan G. Cohen, Alan C. Dopp, Deborah R.G. Doyle, John W. Duncan, Eric L.

Dyer, Roy O. Elam III, Melvin L. Elson, Irwin B. Eskind, Jeffrey B. Eskind, Stephen K. Felts, Richard W. Garman, Jr., John R. Gibson, Robert P. Graham, Jr., Antonio M. Granda. James P. Gregory, David P. Hall, William B. Harwell, Jr., Phillip W. Hayes, James H. Haynes, A. Clyde Heflin, Jr., Stephen L. Hines, James M. Hinson, Jr., H. Douglas Holliday, Robert M. Hollister, Joseph W. Huston, Jeffrey L. Hymes, John W. Interlandi, Henry S. Jennings III, J. Thomas John, Ira T. Johnson, James S. Kennedy, Jack P. Kinnard, Jr., Otto Morse Kochtitzky, Michel E. Kuzur, Russell B. Leftwich, Michael J. Magee, William R. McDaniel, Guat-Siew Lee McKee, Alvin H. Meyer, Paul R. Michael, Michael E. Miller, Michael ael P. Miller, Fernando Miranda, Douglas P. Mitchell, William G. Morris, Andrew N. Muller, Jr., Robert L. Neaderthal, Daryl L. Nichols, Michael Niedermeyer, John G. Pearson, William H. Pettus, Richard T. Pope, Ann H. Price, Robert S. Quinn, William B. Ralph, Jr., Frank M. Rembert, Kenneth S. Robinson, Howard E. Rosen, Marvin J. Rosenblum, Sol A. Rosenblum, Robert M. Roy, Howard Lee Salyer, Herbert J. Schulman, John Robert Schweikert, Lucien C. Simpson, W. David Strayhorn, Jr., James N. Sullivan, W. Wade Sutton, Stephen T. Ticaric, Aubrey Lee Tucker, Jr., F. Karl VanDevender, James W. Ward, Jr., Ann. O. Wehr, W. Carter Williams, Jr., Eugen J. Winter, Taylor Wray

RESEARCH ASSOCIATES M. Candice Burger, Marshall G. Frazer, Alice Gung, Nancy L.

Rogers

Dermatology

DIRECTOR Lloyd E. King, Jr. EMERITUS Robert N. Buchanan PROFESSOR Lloyd E. King, Jr.

ASSOCIATE PROFESSORS Graham F. Carpenter, James P. Fields

ASSISTANT PROFESSOR Darrel L. Ellis

RESEARCH ASSISTANT PROFESSORS Ronald E. Gates, Christa A. Stoscheck ASSISTANT CLINICAL PROFESSORS James R. Hamilton, Dana L. Latour, Frank G. Withers-

INSTRUCTORS Raymond G. Dufresne, Jr., Michael D. McCadden, C. Gordon Vire CLINICAL INSTRUCTORS William B. Harwell, Jr., William R. McDaniel, Alvin H. Meyer, Howard Lee Salyer, Lucien C. Simpson

*THE Department of Medicine offers four areas of required course work:

Second Year. Two courses: An interdepartmental course which introduces sophomore students to the basic laboratory techniques, methods, principles, and procedures of clinical medicine; and a course in the diagnosis of disease and the application of clinical medicine to patient care.

Third Year. Third-year medical students are assigned to the medical wards for a ten-week period for an intensive inpatient experience.

Fourth Year. Fourth-year medical students participate in an outpatient

experience as well as a major medical clerkship.

The Department of Medicine has many subspecialty divisions, and a number of different elective programs are available.

Clinical Research Electives

The clinical research elective program includes such specialty areas as infectious diseases, nuclear medicine, medical cytogenetics, ischemic heart disease, hematology, electrocardiography and electrophysiology, and biomedical engineering.

Clinical Clerkships

The clinical clerkship program offers fourth-year electives which include rotations at affiliated hospitals, participation in a model private teaching unit, and an experience in the Clinical Research Center at Vanderbilt Hospital. Other clerkships include such subspecialty areas as pulmonary disease, renal pathophysiology, infectious diseases, clinical pharmacology, clinical epidemiology, cardiology, pulmonary consultation, rheumatology, clinical endocrinology, and medical oncology.

Medical Specialty Clinics

Experiences in the medical specialty clinics elective program available to fourth-year students include the following specialties: allergy, dermatology, diabetes, endocrinology, gastroenterology, hematology, rheumatology, oncology, and chest.

Other Electives

A number of other electives available to students at various levels consist of course work covering a variety of subjects which include: problems facing the prospective intern; pulmonary disorders; human nutrition; clinical biochemistry; psychosocial aspects of life-threatening illness, dying, and death; disorders of fluid and electrolyte metabolism; clinical electrocardiography; clinical endocrinology; nutrition rounds; renal pathophysiology; medical genetics and cytogenetics; correlations in cardiological disease; history of medicine; medical philosophy; basic concepts of cancer; clinical diagnosis of cancer; cancer therapy; laboratory experiences in cardiac catheterization.

Required Courses

501.1. Laboratory Diagnosis. An interdepartmental course designed to acquaint the student with the basic laboratory techniques, methods, principles, and procedures employed in clinical medicine. Weekly meetings for a total of twenty-four weeks with the initial twelve weeks devoted entirely to hematologic laboratory methods and theory. Following this, such topics as parasitology, principles of roentgen diagnosis, clinical bacteriology, urinalysis, renal function tests, laboratory tests in neurology, examination of stool and gastric content, and examination of joint fluid will be covered. Basic format of course is a one-hour lecture in which theory and clinical indications for laboratory methods will be stressed. Following this, there will be a laboratory period of two hours at which time demonstrations and the practical

application of lecture material will be stressed. During the laboratory, students will be divided into small groups of units with individual instructors and assistants. Precise outlines and laboratory guides will be distributed. *Dr. Stein and staff.*

501.2 Physical Diagnosis. Education of second-year medical students in diagnosis of disease by the art of examination at the bedside and in the laboratory, emphasizing the significance of information gained in the basic science courses as applied to clinical medicine. SPRING. *Dr. Pennington.*

502. Clinical Clerkship. The third-year class is assigned to the medical wards for ten-week periods. During the medical clerkship, time is divided equally between the Vanderbilt Hospital and the Veterans Administration Hospital. The medical wards at Vanderbilt Hospital comprise one-hundred thirty-five beds used in teaching, plus an additional twenty-one beds in the Clinical Research Center. The Veterans Administration Hospital has approximately 100 teaching beds. At Vanderbilt Hospital these services include patients with diseases of the nervous system and the skin in addition to general medical patients. At the VA there is a separate neurologic ward to which clinical clerks are assigned for two weeks during their medical clerkships. In addition, an active pulmonary service functions within the medical service at the VA Hospital. Patients are under the care of members of the faculty of medicine. Subdepartmental areas are organized for teaching and clinical research as well as management of patients: The clinical clerkship is regarded as the backbone of the student's training in medicine and represents the most intensive inpatient experience offered within the department. It is believed that learning is most vivid through direct experience with patients, obtaining histories, doing physicals and laboratory studies, and that it is amplified by reading and intensive contact with members of the house staff and teaching staff. Students are given considerable responsibility under close supervision of the teaching staff. Additional instruction is carried out during rounds with the chief of service. In these sessions, clinical clerks present cases for discussion and criticism and the more important fields of internal medicine are covered. Instruction in dermatology, consisting of a series of clinics and clinic demonstrations, is held once weekly in the Veterans Administration Hospital. Ward work is supplemented by numerous teaching and subspecialty conferences held throughout the academic year. Dr. Leonard, Dr. DesPrez, Dr. Salmon, and Staff of the Department of Medicine

Microbiology

INTERIM CHAIRMAN John H. Hash

PROFESSORS Tamar Ben-Porat, Daniel G. Colley, Sidney Harshman, John H. Hash, Albert

S. Kaplan, Alexander R. Lawton, Theodore Pincus

ASSOCIATE PROFESSORS John P. Robinson, Clark Tibbetts

RESEARCH ASSOCIATE PROFESSOR Jeanette M. DeMarchi

ASSISTANT PROFESSORS Wayne F. Green, Peter F. Wright

RESEARCH INSTRUCTOR Mayme L. Blankenship Wood

RESEARCH ASSOCIATES Sandra M. Horikami, Thomas Mettenleiter, Malcolm R. Powell

THE Department of Microbiology provides second-year students with the basic understandings of micro-organisms in health and disease. Several electives are offered. One group of electives for second-year students consists of a series of lectures on such topics as: microbial toxins and enzymes, antibiotics and microbial metabolism, immunochemistry, basic animal virology, and microbial and macromolecular ultrastructure. An advanced immunochemistry laboratory experience is available, as an

elective, to students at all levels. Second- and fourth-year students may select a laboratory course dealing with experimental methods in microbiology. A research program is also available to fourth-year students as an elective.

Required Course

502. Basic Microbiology. First year. This course provides an introduction to Microbiology, including microbial genetics and basic immunology. FALL. *Dr. Hash and staff.*

501. Microbiology. Second year. Lectures and laboratory exercises. The important bacterial, mycotic, parasitic, and viral infections are considered from the standpoint of etiology, epidemiology, pathogenesis, immunology, and laboratory diagnosis. Ten hours of lectures, seminars, and laboratory exercises. Prerequisite: Biochemistry 501-502 or equivalent. FALL. *Dr. Hash and Staff.*

Molecular Physiology and Biophysics

CHAIRMAN Daryl K. Granner

EMERITUS Charles Rawlinson Park

PROFESSORS G. Roger Chalkley, Alan D. Cherrington, Jackie D. Corbin, John H. Exton, David L. Garbers, Daryl K. Granner, Tetsuro Kono, H. C. Meng, Jane H. Park, Robert L. Post, David M. Regen, Thomas R. Soderling

ASSOCIATE PROFESSORS Kenneth L. Brigham, Oscar B. Crofford, Jr., David N. Orth

RESEARCH ASSOCIATE PROFESSOR P. Anthony Weil

ASSISTANT PROFESSORS Nada A. Abumrad, Naji Abumrad, Albert H. Beth, Peter F. Blackmore, Sharron H. Francis, Balwant Khatra, Linda Sealy, Roland W. Stein, William L. Taylor RESEARCH ASSISTANT PROFESSOR Hamid M. Said

INSTRUCTORS Wayne P. Schraw, Richard R. Whitesell

RESEARCH INSTRUCTORS K. Balasubramanian, Owen Patrick McGuinness

RESEARCH ASSOCIATES Teresa L. Andreone, Janet L. Atkinson, Guy Augert, Stephen J. Beebe, Stephen B. Bocckino, Bernard Emile Bouscarel, David Tai Wai Chu, Charles E. Cobb, Roger J. Colbran, Susan R. Cordle, Matthew L. Cotton, Steve Faber, Thomas Fitzgerald, Claude Forest, Zafiroula Georgoussi, Thomas W. Gettys, Yoshinori Goto, Yoshiaki Hashimoto, Helen R. Irving, Philip A. Patston, Patrick G. Quinn, Charles M. Schworer, John B. Shabb, Hiroshi Shibata, Mary Shimkus, David H. Wasserman

*THE Department of Molecular Physiology and Biophysics instructs first-year students in the essentials of physiological processes related to organs, tissues, and cells. Students may devise course work in any area of Molecular Physiology and Biophysics, in conjunction with a sponsoring faculty member. Opportunities to participate in research activities are available to fourth-year students as electives.

Required Course

501. Molecular Physiology and Biophysics. This course consists of lectures, conferences, and laboratory work designed to cover the essentials in Molecular Physiology and Biophysics for first-year medical students. It or its equivalent is also required of all graduate students majoring in Molecular Physiology and Biophysics. SPRING. [7] *Dr. Corbin, Dr. Regen, and staff.*

Neurology

CHAIRMAN Gerald M. Fenichel

VICE-CHAIRMAN Howard S. Kirshner

PROFESSORS Wolf-Dietrich Dettbarn, Gerald M. Fenichel, Frank R. Freemon, H. Carl Haywood

CLINICAL PROFESSORS William M. Clark, Gary W. Duncan, Bertram E. Sprofkin, John Sloan Warner, Charles E. Wells

ASSOCIATE PROFESSORS David Michael Bear, Richard S. Burns, Anthony W. Kilroy, Howard S. Kirshner

ASSISTANT PROFESSORS Philip F. Chance, Mary Ellen Clinton, Patrick Lavin, Michael J. McLean, Karl Edward Misulis, Wanda G. Webb, Harry T. Whelan, Ronald G. Wiley, Ronald E. Wilson

ASSISTANT CLINICAL PROFESSORS Alfred S. Callahan III, Michael James Kaminski, Barbara J. Olson

CLINICAL INSTRUCTOR Georgia D. Montouris

THE Department of Neurology offers instruction in neurobiology to first-year students, seminars in clinical neurology to second-year students, and instruction in diseases of the nervous system to third-year students. Further clinical experience can be attained through specialty clinics offered as fourth-year electives. These clinics include the specialties of pediatric neurology, adult neurology, epilepsy, general neurology, and neuromuscular disease. Clerkships in neurology at affiliated hospitals are available, as electives, in the fourth year. Elective research programs in basic neuroscience or clinical neurology are available to students at all levels.

Required Course

501. Clinical Clerkship. All members of the third-year class are alternately assigned to the neurology wards for two and-one-half weeks. Students are given direct responsibility for the evaluation and care of patients under the supervision of house staff and faculty. This brief exposure is intended to provide the students with an approach to patients with diseases of the nervous system. *Dr. Kirshner and Staff.*

Obstetrics and Gynecology

CHAIRMAN Lonnie S. Burnett

EMERITUS Willard O. Tirrill, Jr.

PROFESSORS Frank H. Boehm, Lonnie S. Burnett, Benjamin J. Danzo, A. Everette James, Jr., Marie-Claire Orgebin-Crist, Anne Colston Wentz

CLINICAL PROFESSORS D. Scott Bayer, Henry W. Foster, C. Gordon Peerman, Jr., Houston Sarratt

ASSOCIATE PROFESSORS Stephen S. Entman, Howard W. Jones III, Beverly Jane Rogers ASSOCIATE CLINICAL PROFESSORS Larry T. Arnold, Roger B. Burrus, Angus M. G. Crook, James F. Daniell, Jr., James H. Growdon, Jr., Joel T. Hargrove, James W. Johnson, James B. Millis, Robert H. Tosh

ASSISTANT PROFESSORS Douglas H. Brown, Peter S. Cartwright, Arthur C. Fleischer, Carl M. Herbert III, George Alan Hill, Kevin G. Osteen, Dinesh M. Shah

RESEARCH ASSISTANT PROFESSOR Michael K. Holland

ASSISTANT CLINICAL PROFESSORS Benjamin H. Caldwell, Jr., George B. Crafton, Makbib Diro, B. Stephens Dudley, James Wood Ellis, Marvin G. Gregory, Ralph R. Kling, Jr., Roland D. Lamb, Horace T. Lavely, Jr., H. Newton Lovvorn, Jr., Roy W. Parker, John E. Van-Hooydonk

ASSOCIATES Elizabeth Ann Colvin, Mary F. Haire

INSTRUCTOR Salvatore J. Lombardi

CLINICAL INSTRUCTORS Harry Baer, Donald R. Barnett, Robert R. Bendt, Bruce Robert Beyer, Michael Robert Bishop, James M. Brakefield, Phillip L. Bressman, Guillermo Cadena, Jill F. Chambers, Jackson Daniel Cothren, Richard John Davis, Robert T. Dodd, Joe Michael Edwards, Frederick L. Finke, Charles M. Gill, Bruce R. Goodman, Paul A. Green, Jr., Erich B. Groos, Larry D. Gurley, M. Bruce Hirsch, Charlie Joe Hobdy, Orrin Lester Jones, Jr., John L. Link II, Donald R. Lovelace, Marcia A. Montgomery, V. Tupper Morehead, Betty K. S. Neff, H. Clay Newsome III, Philip A. Nicholas, Richard E. Presley, Ron N. Rice, Jacqueline Lee Rodier, Mitchell K. Sanders, Gilmore M. Sanes, Jr., Mary Ann Snowden, Stephen M. Staggs, Wilborn D. Strode, William D. Sumpter, Jr., Anthony E. Trabue, Ramona N. Walsh, Norman E. Witthauer, Carl W. Zimmerman

RESEARCH ASSOCIATE Thomas W. Toney

THE Department of Obstetrics and Gynecology provides third-year students with an introductory experience in inpatient and outpatient obstetrics and gynecology. A number of electives are offered at various levels. These include: reproductive biology, a high-risk obstetrics seminar, human sexuality, gynecologic pathology, and sex counseling. Research experiences and a clinical clerkship in obstetrics and gynecology are available as electives to fourth-year students.

Required Course

502. Clinical Clerkship. One-eighth of the third-year class is assigned for five weeks in each year. An introductory experience in inpatient and outpatient obstetrics and gynecology is obtained. One-half of the experience will be at the Nashville General Hospital. *Dr. Hill, Dr. Brown, and staff.*

Ophthalmology

CHAIRMAN James H. Elliott
EMERITA Kate Savage Zerfoss
PROFESSORS James H. Elliott, John A. Freeman, Denis M. O'Day
CLINICAL PROFESSOR George W. Bounds, Jr.
ASSOCIATE PROFESSORS John Stevens Andrews, Jr., Stephen S. Feman
ASSOCIATE CLINICAL PROFESSORS John B. Bond III, Wallace H. Faulk, Jr., Ralph E.
Wesley

ASSISTANT PROFESSORS Karla Jensen Johns, Patrick Lavin

ASSISTANT CLINICAL PROFESSORS Abraham Pacha Cheij, L. Rowe Driver, Roy C. Ezell, Walter W. Frey, Gary W. Jerkins, Reginald Lowe, Jr., Philip L. Lyle, Lee Roy Minton, Joseph W. Wahl

INSTRUCTORS Carolyn M. Parrish, Clive H. Sell

CLINICAL INSTRUCTORS Steven R. Anderson, E. Dale Batchelor, James A. Bookman, Joseph E. Boone, Jr., M. Terry Burkhalter, James E. Burnes, James F. Conrad, John E. Downing, Meredith A. Ezell, James W. Felch, Stephen E. Grinde, Robert R. Henderson, Bruce E. Jones, James P. Loden, John M. Omohundro III, Y. B. Paranjape, Howard H. Rosenblum, Deborah J. Ruark, Joseph W. Scobey, Charlie R. Smith, Jonathan N. Terhune, K. Shannon Tilley, Willard O. Tirrill III, Gates J. Wayburn, Jr.

THE Department of Ophthalmology provides second-year students an introduction to ophthalmology and the methodology of clinical science. The department also instructs third-year students, providing them with clinical exposure in ophthalmology. An elective course available in the second year consists of lectures on the basic and clinical aspects of ophthalmology. An elective fourth-year clerkship and clinic provide intensive clinical experience.

Required courses

501. Physical Diagnosis: Introduction to Ophthalmology. Second year. This interdepartmental core curriculum is designed to acquaint the students with the techniques, approach and methods of clinical science. Two periods of two hours are devoted to didactic lectures on diagnostic techniques and instrumentation used routinely by physicians to examine the eye and ocular adnexa. The class then is divided into small tutorial groups and each student has exposure to a faculty member for a one and one-half-hour period for detailed instruction in the use of the direct ophthalmoscope. *Dr. Johns and Staff.*

502. Ophthalmology Clinical Clerkship. Third year. During the third year students participate in ophthalmology as a two-and-a-half-week clinical rotation in the surgical subspecialty rotations. The student gains operating room experience, and a series of lectures is presented. Students also participate in general ophthalmology and ophthalmic subspecialty clinics. *Staff.*

Orthopaedics and Rehabilitation

CHAIRMAN Dan M. Spengler VICE-CHAIRMAN Neil Edward Green

PROFESSORS Neil Edward Green, Dan M. Spengler

CLINICAL PROFESSORS S. Benjamin Fowler, A. Brant Lipscomb

ASSOCIATE PROFESSORS Marion C. Harper, Jeremy J. Kaye

ASSISTANT PROFESSORS Michael J. Christie, Dennis P. Devito, Thomas J. Limbird, Michael A. Milek, E. Paul Nance, Jr., Herbert S. Schwartz, Richard G. Shiavi, Marc F. Swiontkowski, Horace E. Watson

ASSISTANT CLINICAL PROFESSORS Donald L. Gaines, Frank E. Jones

SENIOR ASSOCIATE David P. Guy

INSTRUCTORS Gregory W. Brick, Hubert Stanley Reid, Roy Sanders

CLINICAL INSTRUCTORS Dave A. Alexander, Jr., Allen F. Anderson, John C. Brothers, Shannon S. Curtis, Michael Craig Ferrell, David W. Gaw, Robert K. Johnston, Robert B. Snyder, Thomas E. Tompkins

THE Department of Orthopaedics and Rehabilitation provides second-year students an introduction to orthopaedic surgery in association with the methodology of clinical science. In the third year the department offers an introduction to clinical orthopaedic surgery and some experience in an orthopaedic inpatient service. Outpatient experience is offered to fourth-year students in coordination with the general surgery and other clinics. Elective specialty clinics are offered in the fourth year in such specialties as cerebral palsy, hand, and crippled children; and an elective fourth-year clerkship includes an intensive clinical experience in orthopaedic surgery. An elective clerkship is available to students in their fourth year. The department also offers an opportunity for third- and fourth-year students to do research in orthopaedic surgery.

Required Course

5020. Orthopaedics. During the third year each student group will be assigned to orthopaedic surgery for two and one-half weeks. The two and one-half weeks will be spent with the students participating in ward patient care, clinic assignments, operating room experience, and daily conference. Students will be given a listing of materials they are expected to learn. D'Ambrosia's textbook, *Musculoskeletal Disorders*, will be the standard text. *Dr. Milek and Staff.*

Pathology

CHAIRMAN William H. Hartmann

EMERITI Mary Edmond Phillips Gray, Martin G. Netsky

PROFESSORS Robert D. Collins, Fred Gorstein, George F. Gray, William H. Hartmann, Virgil S. LeQuire, Fred V. Lucas, Barbara O. Meyrick-Clarry, William M. Mitchell, Harold L. Moses, David L. Page, Mildred T. Stahlman, William O. Whetsell, Jr., Stephen C. Woodward

CLINICAL PROFESSORS Robert G. Horn, Hugo C. Pribor

ASSOCIATE PROFESSORS Jeffrey Mark Davidson, James P. Fields, Alan D. Glick, Susan A. Halter, Myron A. Holscher, Richard L. Hoover, Larry L. Swift, Renu Virmani, Charles H. Wallas

VISITING ASSOCIATE PROFESSOR Maria Gabriella Giro

RESEARCH ASSOCIATE PROFESSOR Marc M. A. Schapira

ASSOCIATE CLINICAL PROFESSORS William J. Boyd, Jr., Richard D. Buchanan, Thomas C. Delvaux, Jr., Louis S. Graham, Richard Oldham, Ronald W. Oxenhandler, Bertram E. Sprofkin, John Brown Thomison

ASSISTANT PROFESSORS James B. Atkinson III, David Lee Black, Robert C. Briggs, Terence T. Casey, John B. Cousar, Jr., Anh H. Dao, Hugh A. Davies, Kenneth J. Fawcett, Agnes B. Fogo, Wayne F. Green, William C. Gruber, Mary Louise Guerry-Force, Michael A. Haralson, Charles W. Harlan, Jeffrey T. Holt, A. G. Kasselberg, R. Todd Light, Thomas L. McCurley III, David C. Montefiori, Kevin G. Osteen, Fritz F. Parl, William Harry Rodgers, Warren N. Schmidt, D. Lewis Sly, Charles W. Stratton, Kyi T. Tham, Neal T. Wetherall, Song Win Wong

RESEARCH ASSISTANT PROFESSOR James T. Forbes

ASSISTANT CLINICAL PROFESSORS Maurice M. Acree, Jr., Jere W. Baxter, Harry G.

Browne, Charles S. Byerly, Daniel D. Canale, Jr., Sara J. Clariday, Ben Weldon Davis, Rufus Jack Freeman, Thomas E. Hanes, Jerry K. Humphreys, Thomas E. Mason, Lilia D. Mauricio, Edward C. McDonald, Adelisa Panlilio, Harty Stewart Powell, Lowell W. Rogers, Steven J. Schultenover, Christopher P. Stowell, David J. Switter, Robert W. Wahl, Ellen P. Wright, John E. Wright

SENIOR ASSOCIATES Barbara G. Albert, Herman Benge, Martha K. Miers, Hilda B. Ratner,

Shirley S. Schuffman

ASSOCIATES Susan B. Casey, Mary Carole Smith, Patricia C. Tanley INSTRUCTORS Mary L. Abram, H. Gayle Jacobs, Mahlon D. Johnson CLINICAL INSTRUCTORS Carla M. Davis, Larry M. Lewis, Ronald Bruce Wilson RESEARCH ASSOCIATE Samuel J. Dimari

THE Department of Pathology offers instruction in the study of the pathogenesis of disease and the structural and functional alterations which result from disease, including the natural history of these changes. The elective program includes lecture and/or laboratory experi-

ences and research programs.

Lecture and/or laboratory electives include such subject areas as: the basic concepts of cancer, neuropathology, post-mortem material, neuropathology case presentations, neuropathology and its clinical correlation, reviews of current autopsy cases, gynecologic pathology, clinical pathology, clinical aspects of anatomic pathology, renal biopsy pathology, and hematopathology. A number of clerkships, offered as electives for third- and fourth-year students, provide experiences in autopsy pathology, surgical pathology, and pathology specialty areas.

Research fellowships are available to fourth-year students as electives and include a fellowship in pathology with a choice of research problems

and a fellowship in electron microscopy.

Required Course

501. General and Special Pathology. General and special pathology presented to second-year students in the form of lectures, demonstrations, discussions, and laboratory work. Gross and microscopic lesions characteristic of various diseases are studied and correlated. [10] *Dr. McCurley and staff.*

Pediatrics

EMERITI Randolph Batson, Hearn G. Bradley, James C. Overall, Sarah H. Sell, Joe M. Strayhorn

PROFESSORS William A. Altemeier III, Robert B. Cotton, Gerald M. Fenichel, Fayez Ghishan, Thomas P. Graham, Jr., Harry L. Greene, Richard M. Heller, Jr., Iekuni Ichikawa, David T. Karzon, Alexander R. Lawton, John N. Lukens, Jr., John A. Phillips III, Mildred T. Stahlman, Peter F. Wright

ADJUNCT PROFESSORS Festus O. Adebonojo, Mary Ann South

CLINICAL PROFESSORS Eric Martin Chazen, William M. Doak, William Brown Wadlington ASSOCIATE PROFESSORS Amin Y. Barakat, Robert J. Boucek, Jr., Kathryn M. Edwards, Neil

Edward Green, John W. Greene, Richard L. Hoover, Anthony W. Kilroy, Rodney A. Lorenz, Robert C. MacDonell, Jr., Jayant P. Shenai, Hakan W. Sundell

RESEARCH ASSOCIATE PROFESSOR Vaithilingam G. Dev

ASSOCIATE CLINICAL PROFESSORS Luther A. Beazley, Eugene L. Bishop, Jr., John P. Fields, William F. Fleet, Leonard J. Koenig, Joseph F. Lentz, William R. Long, Robert E. Mallard, Dan S. Sanders, Jr., Charles Gordon Rennick Sell, David D. Thombs, Earl E. Vastbinder, Arville V. Wheeler, G. Wallace Wood

ASSISTANT PROFESSORS Merlin G. Butler, Philip F. Chance, James C. Gay, John P. Greer, Jens B. Grogaard, William C. Gruber, Thomas A. Hazinski, Gerald B. Hickson, Donna M. Sedlak Hummell, Robert L. Janco, A. G. Kasselberg, Sandra Kirchner, Valentina Kon, Gordon A. Moreau, Wallace W. Neblett III, Susan M. O'Connor, Larry B. Vogler, Lynn S. Walker, Harry T. Whelan, Aida Yared, Thomas D. Yeager

RESEARCH ASSISTANT PROFESSORS Jeffrey King Beckman, James O. Hill, Toshio Homma, Daniel P. Lindstrom, William E. MacLean, Jr., Hamid M. Said

VISITING RESEARCH ASSISTANT PROFESSOR Louise A. Rollins-Smith

ADJUNCT ASSISTANT PROFESSOR Francis Joseph McLaughlin

ASSISTANT CLINICAL PROFESSORS H. Victor Braren, Sam W. Carney, Jr., Norman M. Cassell, Ray L. Dubuisson, Ralph Greenbaum, Douglas C. Henry, Charles S. Hirshberg, Hossein Massoud, John R. Morgan, James S. Price, Jorge Rojas-Brassetti, Robert S. Sanders, Joseph Steranka, Dorothy Jean Turner, Ethel Walker, Thomas C. Whitworth, Erle E. Wilkinson, Thomas B. Zerfoss, Jr.

ASSOCIATES Laurie Gilbert, Frances P. Glascoe, Brenda Miles, Juliette M. Thompson INSTRUCTORS Barbara Engelhardt, Rita A. Fie, Wendy Fish, Regina A. Gruber, Evon Batey Lee, Ruth Barron Long, Jennifer L. Najjar

RESEARCH INSTRUCTOR Kathryn B. Sherrod

ADJUNCT INSTRUCTOR Barbara S. Culley

CLINICAL INSTRUCTORS Lindsay K. Bishop, Janet G. Blackwell, Arthur Scott Brooks, Robert E. Burr, Sigred L. Coyle, Lisa T. Craft, George T. Critz, Paul M. Douthitt, Mary Catherine Dundon, Lee Ann Freeman, Johnny E. Gore, Roland W. Gray, James P. Henderson, Robert H. Hutcheson, Jr., John O. Jackson, Jr., Margreete Johnston, Barbara Kennedy, Mary E. Keown, Löwry D. Kirby, Elizabeth Duke Krueger, H. Brian Leeper, Russell B. Leftwich, George C. Martin, Raymond L. Meneely, Ronald V. Miller, David M. Moroney, Dewey G. Nemec, John T. Netterville, Jr., Steven W. Neubauer, Kenneth T. North, Barbara J. Olson, Gabe A. Payne, Jr., Elizabeth P. Pierce, Diane Pincus, John B. Plonk, Jr., Patricia F. Robinson, Dan S. Sanders III, E. Conrad Shackleford, Jr., Michael R. Sharpe, William T. Slonecker, James Clinton Smith, C. Norman Spencer, C. A. Stilwell, Steven M. Tate, Julia Thompson, Elizabeth Grimes Triggs, Bernard A. Wiggins, Melissa A. Will, Kenneth N. Wyatt

ASSISTANTS Melinda Cohen, Susan C. Donlevy, Cheryl W. Major, Shasta M. Morey, Janet Ulm

THE Department of Pediatrics provides second-year students an introduction to pediatrics as part of the Methods in Clinical Science course. Third-year students participate in a clinical experience on the pediatric wards and attend a series of clinical lectures and demonstrations. Fourth-year students participate in the outpatient service or in clinical externships.

Électives are available to students in all four years including such courses as: signposts of human growth and development; pediatric pathophysiology; pathogenetic mechanisms in clinical infectious disease;

pediatrics ward rounds; an introduction to clinical pediatrics; nutrition rounds; the fundamentals of human development; methods of delivering pediatric medical care in rural areas; urban health problems; child be-

havior and growth and development.

Pediatric clinics available to fourth-year students include: allergy, urology, genetics, cystic fibrosis, behavior, crippled children's, host defense, rheumatology, endocrinology, renal, diabetic endocrine, and general pediatrics. Fourth-year students may participate in the following clerkship electives: ward experience at Vanderbilt Hospital and Nashville General Hospital, pediatric immunology, neonatology, pediatric infectious diseases, pediatric neurology, child development, rural health, ambulatory pediatrics, pediatric cardiology, pediatric endocrinology, pediatric hematology, and pediatric gastroenterology and nutrition. Inpatient and outpatient experience are part of all but the Vanderbilt Hospital ward clerkship. Private practice preceptorships are available to some fourth-year students. Research electives in the fourth year include programs in newborn physiology and most pediatric sub-specialties.

Required Courses

501. Methods in Clinical Science: Introduction to Pediatrics. As an integral part of the course methods in Clinical Science, a series of lectures will be given in the second year. These lectures will prepare the students for their clinical experiences in the third year. Additionally, students are rotated through the department in small tutorial groups. SPRING. *Dr. Altemeier and Staff.*

502. Clinical Clerkship. One-eighth of the third-year class is assigned to the pediatric wards for five weeks. Students participate in all phases of diagnosis and treatment of a wide variety of illnesses of children and infants. A portion of the clerkship includes work with selected infants in the premature and intensive care nurseries. Bedside teaching rounds on the wards and nursery and seminars are held daily. *Dr. Altemeier, Dr. Vogler, and staff.*

503. Pediatric Clerkship or Clinics. During the fourth year, students take one clerkship in general pediatrics or one of the pediatric subspecialties or three clinics in either area. Staff.

Pharmacology

CHAIRMAN Joel G. Hardman EMERITUS Allan D. Bass

PROFESSORS Ian A. Blair, Robert A. Branch, John E. Chapman, Wolf-Dietrich Dettbarn, Michael H. Ebert, Garret A. FitzGerald, David L. Garbers, Joel G. Hardman, Luc M. Hondeghem, Lee E. Limbird, John A. Oates, L. Jackson Roberts II, David H. Robertson, Elaine Sanders-Bush, B. V. Rama Sastry, Fridolin Sulser, D. Martin Watterson, Grant R. Wilkinson, Alastair J. J. Wood, Raymond L. Woosley

ASSOCIATE PROFESSORS Robert J. Barrett, M. Lawrence Berman, Alan R. Brash, Richard S. Burns, Kenneth R. Hande, Edwin K. Jackson, Erwin J. Landon, Peter R. Martin, Oakley S. Ray, Peter W. Reed, Dan M. Roden, Dennis E. Schmidt, Linda Jo Van Eldik, Jack N. Wells, Margaret Wood

VISITING ASSOCIATE PROFESSOR Jacques Haiech

RESEARCH ASSOCIATE PROFESSOR Brian J. Sweetman

ASSISTANT PROFESSORS Daniel M. Buxbaum, Thomas Oran Daniel, Desmond J. Fitzgerald, Michael J. McLean, Michael K. Skinner, Ronald G. Wiley

RESEARCH ASSISTANT PROFESSORS Lawrence J. Dangott, Thomas J. Lukas

INSTRUCTORS Italo Biaggioni, Francesca Catella, Karl Edward Misulis

RESEARCH INSTRUCTORS Paul B. Bennett, Jr., Michael D. Chinkers, Richard P. Koshakji, Thomas D. Noland, Chandra Prakash

RESEARCH ASSOCIATES Kenneth A. Aulsebrook, David D. Gillespie, Donald Hal Manier, W. Bolton Smith

THE Department of Pharmacology is responsible for the instruction of second-year students in the reactions of the human organism to chemical substances. Electives available to second-, third-, and fourth-year students include: pharmacokinetics, drug metabolism, cardiovascular pharmacology, molecular pharmacology, psychopharmacology, and drug receptor interactions. A clerkship in clinical pharmacology is offered in the fourth year. Seminars, research programs, and special course work assignments are also available to fourth-year students as electives.

Required Course

501. Pharmacology. Lectures in which the reaction of the human organism to chemical substances is taken up in a systematic manner; conferences and demonstrations in which the student has an opportunity to become familiar with pharmacological literature and techniques. Six lectures and three hours of laboratory or conference work a week. SPRING. *Dr. Hardman and Staff.*

Preventive Medicine

CHAIRMAN William Schaffner
EMERITI Robert W. Quinn, W. Carter Williams
PROFESSORS Lewis B. Lefkowitz, Jr., William Schaffner
ASSOCIATE PROFESSOR Eugene W. Fowinkle
ASSISTANT PROFESSORS Michael D. Doeler Marie B. C.

ASSISTANT PROFESSORS Michael D. Decker, Marie R. Griffin, Michael J. Lichtenstein ASSISTANT CLINICAL PROFESSORS Joseph M. Bistowish, Robert S. Sanders, Dorothy Jean Turner

CLINICAL INSTRUCTORS John S. Derryberry, Robert H. Hutcheson, Jr.

Biostatistics

PROFESSOR Charles F. Federspiel ASSOCIATE PROFESSORS William D. Dupont, Wayne A. Ray

THE Department of Preventive Medicine offers a second-year course in the fundamentals of epidemiology, medical statistics, and the basic principles of public health and preventive medicine. Electives available to stu-

dents at various levels include: biometry; problems and experiences of aging; clinical trials and medical surveys; sampling methods; environmental/occupational health; and special projects in public health. A first-year field experience provides an introduction to comprehensive medical care. A preceptorship in primary health care and clerkships in applied public health, sexually-transmitted diseases, and family and community medicine are also available to second-, third-, and fourth-year students as electives.

Required Course

501. Principles of Epidemiology, Biostatistics, and Preventive Medicine. A course of lectures and discussions providing second-year students with an introduction to preventive medicine, epidemiologic analysis, and biometric methods. Subjects considered include: communicable diseases, health hazards of the workplace, the most common causes of death, environmental health, the role of government in health care, and health care financing. Emphasizes clinical preventive medicine. SPRING. *Dr. Schaffner and Staff.*

Psychiatry

CHAIRMAN Michael H. Ebert

EMERITI Otto Billig, Marc H. Hollender, Virginia Kirk, Warren W. Webb, Lavergne Williams PROFESSORS Virginia D. Abernethy, Thomas A. Ban, Leonard Bickman, Pietro Castelnuovo-Tedesco, Michael H. Ebert, Peter T. Loosen, John E. Pate, Oakley S. Ray, Howard B. Roback, Elaine Sanders-Bush, Fridolin Sulser, William O. Whetsell, Jr.

CLINICAL PROFESSOR Charles E. Wells

ASSOCIATE PROFESSORS David Michael Bear, Richard S. Burns, Miles K. Crowder, Volney P. Gay, William Guy, Steven D. Hollon, Robert D. Hunt, Robert M. Kessler, Peter R. Martin, James L. Nash, Pauline L. Rabin, Dennis E. Schmidt

ASSOCIATE CLINICAL PROFESSORS Robert W. Adams, Jr., David Barton, Charles Corbin, Jr., H. James Crecraft, J. Emmett Dozier, Jr., Joseph Fishbein, Kent Kyger, William M. Petrie, Robert M. Reed, Charles B. Smith, Frank W. Stevens, C. Richard Treadway

ASSISTANT PROFESSORS Judy Garber, Ronald F. Kourany, Joseph D. LaBarbera, William B. Lawson, Michael J. McLean, Leslie C. Morey, Cecilia Ann Peabody, Richard C. Shelton, Jackson B. White IV

ASSISTANT CLINICAL PROFESSORS Georgina Abisellan, Lori M. Adelson, Edward S. Arnold, Harvey Asher, Ralph I. Barr, Robert O. Begtrup, Jeffrey L. Binder, Henry B. Brackin, Jr., Richard G. Bruehl, Michael L. Campbell, Thomas W. Campbell, William E. Coopwood, Palmer Edwards, Terri L. Fehrman, John P. Filley, Fay M. Gaskins, Edmon L. Green, John J. Griffin, Philip F. Guinsburg, Frederick T. Horton, Robert A. Jack, Robert C. Jamieson, Harold W. Jordan, William D. Kenner, L. Douglass King, John Koomen, Albert R. Lawson, Sandra R. Leavell, Susan Lewis, Linda S. Lundin, James E. Martin, Aileen H. McAlister, James R. McFerrin, James B. McGehee, Leonard Morgan, Margaret Norris, Paula S. Nunn, Steven R. Nyquist, Thomas P. O'Brien, J. Kirby Pate, Samuel J. L. Pieper, Jr., Judith J. Regan, Jack O. Rice, David C. Ruck, Vernon H. Sharp, S. Steve Snow, Frank W. Stevens, Jr., Brian R. Swenson, Elisabeth Vorbusch, Jane R. Weinberg, W. Scott West, Brad Williams, Melbourne A. Williams, Nat T. Winston, David A. Yarian, Guy Zimmerman INSTRUCTORS Janet B. Rappaport, William M. Regan

CLINICAL INSTRUCTORS Lynn P. Barton, Earl Q. Parrott, Louis Sampson, William F. Sheridan, Jr., Hans Vorbusch, Dennis C. Workman ASSISTANTS Marvine S. Longwood, Dan Ramage, Linda Wirth LECTURER Agnes K. Sylte

*THE Department of Psychiatry instructs second-year students in the diagnosis, etiology, and treatment of basic psychiatric disorders. The department also presents a series of lectures on human behavior and the practice of medicine to first-year students. In the third year, students participate in a clerkship studying various psychiatric problems in both inpatient and outpatient settings.

A number of elective courses offered at various levels include such topics as: determinants of human behavior; human sexuality; school health programs; health and illness, doctors and patients; behavior therapy in a medical setting; and children's problems in contemporary society. A number of clerkships, offered to fourth-year students as electives, provide intensive clinical experience in both inpatient and outpatient settings.

Required Courses

501. Psychiatry. Second year. This course introduces the student to the concept of psychopathology with emphasis on etiology, diagnosis, and treatment of the basic psychiatric disorders. Case presentations and videotapes are used to demonstrate the major disorders discussed in the lecture series. SPRING. Dr. Crowder and Staff.

503. Psychiatry. A five-week block of time in which patients with various psychiatric problems are studied in inpatient and outpatient settings by third-year students. Students are active members of a treatment team and work closely with patients, gaining practical experience in evaluation and treatment of psychiatric patients. The delivery of patient care is a major focus of this experience. Seminars and case conferences complement the clinical work. Coordinator: Dr. Crowder.

504. Human Behavior and the Practice of Medicine. First year. This course, presented as a block within Neurobiology, provides a framework for the consideration of psychosocial factors in the practice of medicine, including modern neurobiological concepts. SPRING. Dr. Ebert and staff.

Radiology and Radiological Sciences

CHAIRMAN A. Everette James, Jr. VICE-CHAIRMAN Henry P. Pendergrass EMERITUS Joseph Mck. Ivie

PROFESSORS Joseph H. Allen, Jr., Richard M. Heller, Jr., A. Everette James, Jr., Jeremy J. Kaye, Sandra Kirchner, C. Leon Partain, Henry P. Pendergrass, Ronald R. Price, Charles E. Roos

ADJUNCT PROFESSORS Hirsch Handmaker, Viktor Hegedus, F. David Rollo

ASSOCIATE PROFESSORS Frank H. Boehm, Arthur C. Fleischer, S. Julian Gibbs, Thomas P. Graham, Jr., Robert M. Kessler, Marvin W. Kronenberg, Murray J. Mazer, James A. Patton, Martin P. Sandler, Max Israel Shaff, Alan C. Winfield

ADJUNCT ASSOCIATE PROFESSORS Gerald Stanley Freedman, Arnold W. Malcolm

ASSOCIATE CLINICAL PROFESSORS John H. Beveridge, Craig M. Coulam, Larry E. Kun,

Ronald E. Overfield, W. Faxon Payne

ASSISTANT PROFESSORS Frank E. Carroll, Jr., Dawson T. S. Chen, J. Michael Fitzpatrick, Mark P. Freeman, Michael L. Freeman, M. Reza Habibian, Alan J. Kaufman, Richard A. Margolin, E. Paul Nance, Jr., Kamal Oudjhane, Andrew J. Padgug, David R. Pickens III, Thomas A. Powers, Glynis A. Sacks, Anthony S. Wattleworth, William S. Witt

ADJUNCT ASSISTANT PROFESSOR R. Mitchell Bush

ASSISTANT CLINICAL PROFESSORS Ronald B. Addlestone, Daniel C. Geddie, Adrian Lamballe, James R. Moyers, John M. Tanner

ASSOCIATE Jeffrey A. Clanton

INSTRUCTORS Rashmi Chobe, Philippe Jeanty

ADJUNCT INSTRUCTOR David H. Dike

CLINICAL INSTRUCTORS C. Richard Arendale, Jr., Richard A. Belden, Michael C. Garovich, Henry C. Howerton, Patrick H. Moulton, Michael B. Seshul, Daniel L. Starnes, Richard Stewart, David S. Taber
ASSISTANT George E. Holburn

THE Department of Radiology and Radiological Sciences introduces the discipline of radiology to medical students during their first-year course in gross anatomy; a series of exhibits correlates radiologic anatomy with the corresponding anatomic dissection. The application of both ultrasound and computed axial tomography to the study of cross-sectional anatomy of the body is also introduced in the first year.

As part of the second-year course Methods in Clinical Science, department members conduct small group seminars correlating physical diagnostic signs with roentgen findings. In the third year students attend departmental presentations as a part of their clinical rotations and discuss the use of appropriate imaging modalities including computed axial tomography, nuclear medicine, magnetic resonance imaging, digital sub-

traction angiography, and ultrasound in diagnostic evaluation.

Fourth-year students have at their disposal a variety of audiovisual aids prepared for self-instruction and personally observe and participate in departmental procedures in a didactic lecture series. A clerkship in diagnostic radiology is offered as a fourth-year elective. Other electives available to students at various levels include computer applications in medicine principles in the use of radioisotopes in biology and medicine; clinical nuclear medicine; physics in diagnostic and therapeutic radiology; mammalian radiobiology; and neuroradiology. Clerkships in therapeutic radiology are also available.

Required Courses

501. Introduction to Radiology. A series of lectures to introduce the second-year student to conventional radiographic methods in the study of various organ systems. Basic princi-

ples of imaging and interpretation are emphasized along with indications, contraindications, and risk of the examinations. FALL. *Dr. Nance*.

502. Radiology. A series of lectures to acquaint the third-year student with the various imaging modalities of diagnostic radiology. As with 501, basic principles of imaging and interpretation are stressed along with indications, contraindications, and risks of the examinations. SPRING.

Section of Surgical Sciences

General Surgery

CHAIRMAN John L. Sawyers

DISTINGUISHED PROFESSOR John L. Sawyers

EMERITI Edmund W. Benz, W. Andrew Dale, James C. Gardner, Walter G. Gobbel, Jr., Louis Rosenfeld, H. William Scott, Jr.

PROFESSORS Naji Abumrad, R. Benton Adkins, Jr., Jack Davies, J. Raymond Fletcher, H. C. Meng, Robert E. Richie, Lester F. Williams, Jr.

CLINICAL PROFESSORS Benjamin F. Byrd, Jr., William H. Edwards, J. Lynwood Herrington, Jr., J. Kenneth Jacobs, Douglas H. Riddell

ASSOCIATE PROFESSORS Paul S. Auerbach, Achilles A. Demetriou, Philip J. Noel, Jr., Vernon H. Reynolds

ASSOCIATE CLINICAL PROFESSORS John L. Farringer, Jr., Herschel A. Graves, Jr., Jackson Harris, William D. Johnston, Malcolm R. Lewis, Joseph L. Mulherin, Jr., George Waterhouse

ASSISTANT PROFESSORS Ildefonso A. Alcantara, Jan Stallings DeLozier, Douglas A. Gentile, W. Brian Gibler, H. Keith Johnson, Patrick W. Meacham, John A. Morris, William A. Nylander, Jr., John R. Potts III, M. Kathleen Reilly, Charles E. Saunders, Kenneth W. Sharp, Barry E. Yarbrough

ASSISTANT CLINICAL PROFESSORS Jeanne F. Ballinger, Stanley Bernard, Harold C. Dennison, Jr., George E. Duncan, Parker Elrod, Steven J. Eskind, Carl N. Gessler, Robert W. Ikard, Fred T. Kimbrell, Jr., Jefferson C. Pennington, David R. Pickens, Jr., Robert N. Sadler, Harrison H. Shoulders, Jr., Bruce M. Smith

INSTRUCTORS Mahmoud Kulaylat, Gary D. Niblack

RESEARCH INSTRUCTORS Jonathan J. Lipman, Albert D. Moscioni, Phillip E. Williams

CLINICAL INSTRUCTORS Terry Allen, Robert C. Bone, Kenneth L. Classen, J. Michael Crane, J. Lucian Davis, Laura L. Dunbar, Benjamin Fisher, Roy G. Hammonds, Robert A. Hardin, James P. Lester, M. Charles McMurray, Joe M. Miller, Francis Michael Minch, I. Armistead Nelson, Roy J. Renfro, Lansdon B. Robbins II, Richard B. Terry, John K. Wright ASSISTANTS Anthony G. Disimone, Carolyn S. Watts

INTERIM CHAIRMAN H. David Hall

CHAIRMAN George S. Allen

CHAIRMAN H. David Hall PROFESSOR H. David Hall

CHAIRMAN Robert H. Ossoff

Dentistry

EMERITUS Fred H. Hall PROFESSOR H. David Hall ASSISTANT PROFESSORS S. Julian Gibbs, Bruce T. Greenwood, Jack Alexander Tyson ASSISTANT CLINICAL PROFESSORS Herbert Allen Crockett, Phillip E. Hutcheson, Robert C. Lineberger CLINICAL INSTRUCTORS George A. Adams, Jr., John L. Farringer III, Franklin William Taylor

Neurosurgery

EMERITUS William F. Meacham PROFESSOR George S. Allen CLINICAL PROFESSOR Cully A. Cobb. Jr. ASSOCIATE CLINICAL PROFESSORS Michael E. Glasscock III, Ray W. Hester ASSISTANT PROFESSORS Bennett Blumenkopf, Robert J. Maciunas, Noel B. Tulipan ASSISTANT CLINICAL PROFESSORS Arthur G. Bond III, Everette I. Howell, Jr., Charles D. Scheibert

CLINICAL INSTRUCTORS Vaughan A. Allen, Verne E. Allen, Rex E. H. Arendall II, Arthur Cushman, James W. Hays, Paul Raymond McCombs, Warren F. McPherson, Timothy P. Schoettle, Harold P. Smith

Oral Surgery

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THE Section of Surgical Sciences is composed of the departments of: Surgery, Dentistry, Neurosurgery, Oral Surgery, Otolaryngology, Pediatric Surgery, Plastic Surgery, Thoracic and Cardiac Surgery, and Urol-

ogy.

These departments contribute to the interdepartmental course in methods in clinical science. Third-year students participate in a clinical clerkship in which they are assigned to the surgical divisions of Vanderbilt Hospital and Veterans Administration Hospital. Third-year surgical clerks also participate in a series of clinical case presentations. Fourth-year students are required to have one month of senior clerkship in general surgery or another surgical specialty.

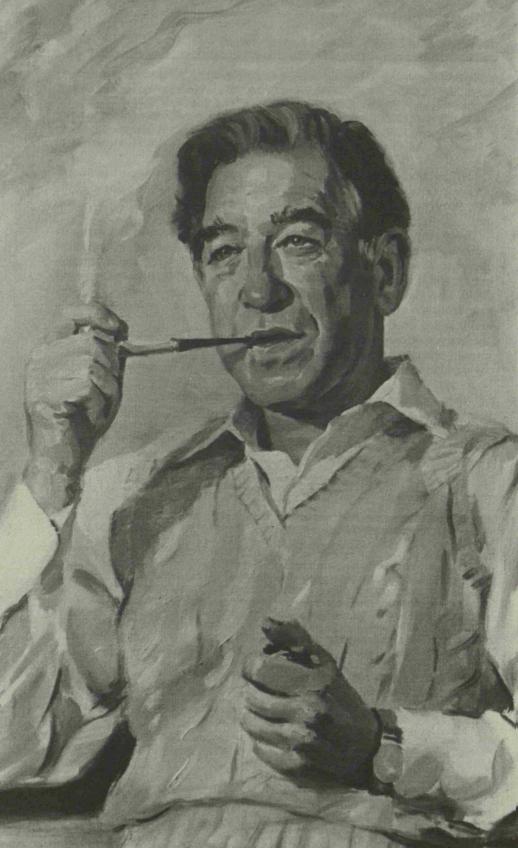
Electives offered to students at various levels include such courses as: human sexuality, and management of vascular surgical problems. Surgical clerkships are offered to fourth-year students as electives at affiliated

hospitals.

Other elective clerkships available to fourth-year students include: neurological surgery, cardiovascular surgery, urology, pediatric surgery, clinical oncology, plastic surgery, renal transplantation, and oral surgery. A laboratory research elective and a urology clinic seminar are also available to fourth-year students.

Required Courses

502. Clinical Clerkship. For ten weeks each student in the third-year class is assigned to the surgical divisions of the Vanderbilt University Hospital or Veterans Hospital. Under the direction and supervision of the staff, the student takes histories, does physical examinations and assists the staff in the diagnostic evaluation and clinical management of assigned patients. Half of each student's period of clinical work is in general surgery, including oncology, vascular, and pediatric services. The other five weeks of the clinical assignment provide concentrated rotations in two of the following services: neurosurgery, urology, ophthalmology, plastic, cardiac and thoracic surgery, and anesthesiology. These rotations provide exposure to a variety of patients with problems in general surgery and in the special fields of surgery. Teaching rounds are held daily by members of the staff. Students go with their patients to the operating rooms where they are observers and assistants to the staff in surgery, the surgical specialties, and anesthesiology. *Dr. Sharp and staff.*



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(B.S., Notre Dame)
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(B.A., Virginia)
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Lexington, Ky.

Memphis, Tenn.

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2000

Brentwood, Tenn.

Kenner, La

Antioch, Tenn.

Babylon, N.Y.

Wolsey, S.Dak.

Peshtigo, Wis.

Atlanta, Ga.

Erlanger, Kv.

Memphis, Tenn.

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Kingsport, Tenn.

Malibu, Calif.

Woodland Hills, Calif.

Pierre, S.Dak.

Wellesley, Mass.

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Leawood, Kans.

Jackson, Tenn.

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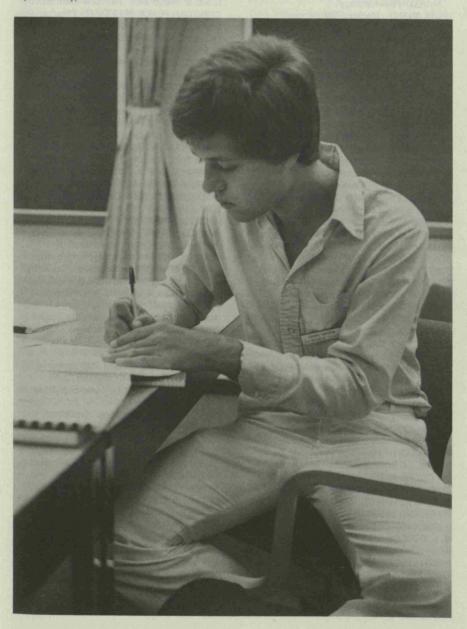
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Fellows

BESS A. ADKINS Molecular Physiology and Biophysics MOHAMMAD EL BAGIR K. AHMED Pharmacology VINITA ANAND Medicine (Nephrology) YASUHIRO ANDO Medicine (Nephrology) CATHERINE TANANES ANTHONY Pharmacology LOWELL B. ANTHONY Pharmacology ROBERT SCOTT APPLETON Pediatrics (Cardiology) MIDORI AWAZU Pediatrics (Nephrology) DAVID G. BABBITT Medicine (Cardiology) GISELA BACKFISCH Pathology ASHOK BAJAJ Medicine (Cardiology) CHRISTOPHER BARKER Biochemistry BRUCE BARON Pharmacology JOHN T. BEARD Medicine (Cardiology) PAUL B. BENNETT Pharmacology JOHN KELLEY BENTLEY III Pharmacology ITALO O. BIAGGIONI Pharmacology ELIZABETH BIRECREE Surgery JAMES N. BLACK Medicine (Cardiology) WILLIAM A. BLALOCK Pediatrics (Neonatology) DENISE F. BOTTIGLIERI Pharmacology GREGORY A. BRADEN Medicine (Cardiology) BEVERLY L. BRODIE Obstetrics-Gynecology ALAN D. CARTMELL Medicine (Oncology) THOMAS R. CARTWRIGHT Medicine (Pulmonary) FRANCESCA CATELLA Pharmacology CHRISTOPHER CATES Medicine (Cardiology) MICHAEL CHINKERS Pharmacology AMIT CHOSKI Medicine (Gastroenterology) JIM C. CHOW Medicine (Dermatology) BRIAN W. CHRISTMAN Medicine (Pulmonary) CHARLES P. COCHRAN, JR. Medicine (Pulmonary) CARL H. COGHILL Pediatrics (Neonatology) H. WADE COLLINS, Medicine (Cardiology) NEIL COOPER Radiology (Angiography) RAPHAEL COQUOZ Biochemistry THEODORE ALAN CRAIG Pharmacology TERRI DANIEL Radiology (Ultrasound) SWAPAN KUMAR DE Medicine (Dermatology) PRITHVIRAJ DHARMARAJA Medicine (Gastroenterology) M. L. DODSON Biochemistry RAGHVENDRA KRISNA DUBEY Pharmacology RYSZARD DWORSKI Pharmacology THEODORE E. EASTBURN III Medicine (Cardiology) BRADFORD O. FANGER Biochemistry PETER FETTEROLF Pharmacology

FRANK A. FISH Pediatrics (Cardiology) MARGARET L. FRANCE Pediatrics MARK FREEMAN Radiology (Neuroradiology) DAVID B. FRIEDMAN Medicine (Dermatology) CHRISTIAN FUNCK-BRENTANO Pharmacology MARY D. GADDY Neurology MICHELE GALDES-SEBALDT Pediatrics (Neonatology) ROBERT LEE GALLOWAY, JR. (Pulmonary) FERNANDO URIEL GARCIA Pathology HANY GHABRIAL Pharmacology WENDY GIBBONEY Pediatrics (Neonatology) C. DELP GIVENS Medicine (Pulmonary) BARBARA A. GRECO Medicine (Nephrology) THOMAS H. GROTE Medicine (Oncology) VIBHA RANI GUJRARTI Pharmacology RAMESH C. GUPTA Pharmacology STEPHEN DAVID HALL Pharmacology JAROSLAVA HALPER Cell Biology DAN J. HAWKINS Pharmacology JAMES L. HAYWOOD Pediatrics DARRELL L. HIRT Medicine (Nephrology) MARK ALLAN HORST Pharmacology TAKAYUKI HOSOI Medicine (Hematology) DAVID H. S. IANSMITH Medicine (Cardiology WENDOLYN INMAN Medicine (Dermatology) NUHAD ISMAIL Medicine (Nephrology) PHILIPPE JEANTY Radiology JAMES A. JOHNS Pediatrics (Cardiology) DAVID RAYMOND JONES Pharmacology THEMISTOCLIS C. KAMILARIS Medicine (Endocrinology) VENKATA R. KANTAMNENI Medicine (Gastroenterology) DOUGLAS S. KERNODLE Medicine (Infectious Diseases) CAROLYN KERR Pathology KAZUHIRO KIKUCHI Pediatrics (Gastroenterology) TOSHIKO KIKUCHI Pediatrics (Nephrology) JAMES C. KING, JR. Pediatrics (Infectious Diseases) MARSHA C. KINNEY Pathology LILIANA R. KOSSOY Obstetrics-Gynecology KEICHI KUBO Medicine (Pulmonary) HARTMUT KUHN Pharmacology TIM-TAK LAM Biochemistry PING LI Pharmacology RYK W. LINDEN Medicine (Cardiology) MARK DANIEL LINEBERRY Medicine (Cardiology) PEDRO P. LLANEZA Medicine (Gastroenterology)

SHI-QI LUO Neurosurgery RUSSETTE M. LYONS Cell Biology SUSAN G. McGREW Pediatrics (Cardiology) CHARLES D. McPHERSON Medicine (Pulmonary) ROBERT J. MACIUNAS Neurosurgery MARK A. MAGNUSON Medicine (Endocrinology) ANNA C. MAIO Medicine (Nephrology) MICHAEL D. MANGUM Medicine (Oncology) ANTHONY E. MARTIN Medicine (Gastroenterology) ELAINE D. MARTIN Pediatrics RAYMOND S. MARTIN III Surgery (Vascular) GAIL MAY Pharmacology ROBERT TAYLOR MEANS, JR. Medicine (Hematology) JUDSON MENEFEE Medicine (Endocrinology) ALEX M. MENENDEZ Medicine (Gastroenterology) WALTER JERRY MERRELL Pharmacology REETA MISRA Pediatrics (Endocrinology) DAVID C. MONTEFIORI Pathology ROSEMARY MURRAY Pharmacology C. AIMON NIKLASSON Pediatrics (Neonatology) HUBERT P. NOETZLI Orthopaedics KEITH B. NOLOP Medicine (Pulmonary) JACEK NOWAK Pharmacology AKAHIRO OHNISHI Pharmacology TOMOKO OHNISHI Ophthalmology BJARKI OLAFSSON Medicine (Cardiology) MARK KEVIN PARSONS Medicine (Oncology) WILLIAM C. PENLEY Medicine (Oncology) LISA A. PETERSON Biochemistry YVONNE F. POSEY Pathology CHARLES R. PRINCE Medicine (Cardiology) ALAN W. PURVIS Medicine (Pulmonary) RENGACHARI RAGHUNATHAN Medicine (Dermatology) C. S. RAMARAO Pharmacology KAREN H. RHEA Psychiatry WILLIAM O. RICHARDS Surgery

AUGUSTINUS RINALDY Biochemistry

WIESLAW ROCKI Pharmacology

D. PAUL ROBINSON Pediatrics (Adolescent

KEVIN SALHANY Pathology KEN-ICHI SAWADA Medicine (Hematology) WILLIAM H. SCHAEFER III Pharmacology STEPHANIE SCHULZ Pharmacology ROLF-JOCHEM SEBALDT Pharmacology REBECCA SHATTUCK Pharmacology YUJI SHIKI Pediatrics LYLE SIDDOWAY Medicine (Cardiology) DAVID J. SILBERSTEIN Pharmacology SUJAY K. SINGH Pharmacology LINDA LOU CROCKER SMITH Medicine (Infectious Diseases) THOMAS C. SMITH Medicine (Pulmonary) RUDOLF SNAJDAR Biochemistry CHARLES MARTIN STRNAD Medicine (Oncology) TAKESHI TAJIMA Pediatrics (Infectious Diseases) SIMPSON BOBO TANNER Medicine (rheumatology) RONALD F. TAYLOR Medicine (Pulmonary) ALBERT A. TEDESCHI Radiology KYI TOE THAM Pathology BARRY F. TILLMAN Medicine (Pulmonary) JONATHON D. TRUWIT Medicine (Pulmonary) RIAZ UL-HAG Biochemistry DIANE R. UMBENHAUER Biochemistry CINDY VNENCAK-JONES Pediatrics (Genetics) STEPHEN A. WARD Pharmacology TORU WATANABE Medicine (Endocrinology) DANIEL F. WENDELBORN Pharmacology PAUL W. WHEELER Medicine (Infectious Diseases) EDMUND WHELAN Pharmacology FREDERICK J. WHITE Medicine (Cardiology) JOHANN WOJTA Pathology TAI WAI WONG Molecular Physiology PATRICK E. WRIGHT Medicine (Pulmonary) AIDA YARED Pediatrics (Nephrology) YOSHIYUKI YOSHIDA Pediatrics (Nephrology) **FOSHIMASA YOSHIOKA Pediatrics** (Nephrology) KAREN A. ZABOY Pediatrics (Hematology) HONG HAO ZHOU Pharmacology DONNA ZIMMER Pharmacology WARREN ZIMMER Pharmacology

Class of 1986

Residency Assignments

BESS APPERSON ADKINS Vanderbilt University Medical Center, Department of Physiology (Biomedical Res	Nashville, Ter	nn.
NEWTON PERKINS ALLEN, JR.	Memphis, Ter	nn.
Vanderbilt University Affiliated Hospitals (Medicine) MARK WEBSTER ALLEY	Kingsport, Ter	nn.
University of Tennessee Memorial Hospital, Knoxville (Surgery) DOUGLAS CARLTON ALTENBERN, JR.	Nashville, Ter	nn.
Medical University of South Carolina, Charleston (Urology) JOHN EUGENE ANDERSON	Nashville, Ter	nn
Vanderbilt University Affiliated Hospitals (Medicine) KYLE RAYMOND ANDERSON	Fort Smith, A	
University of Oklahoma Memorial Hospital, Oklahoma City (Medicine)		
PHILIP BRADLY ANDERSON Vanderbilt University Affiliated Hospitals (Psychiatry)	Eugene, Ore	eg.
JACQUELYN VALERIE RAVAN ANDREWS Brigham and Women's Hospital (Harvard), Boston, Mass. (Surgery)	Atlanta, G	àa.
THOMAS CHARLES ANDREWS Brigham and Women's Hospital (Harvard), Boston, Mass. (Medicine)	Canton,	III.
ROBIN SUE ARCHER Jewish Hospital (University of Cincinnati), Ohio (Medicine)	Beavercreek, Oh	nio
JEFFREY LAWRENCE BALLARD	Fullerton, Ca	alif.
University of Arizona Affiliated Hospitals, Tucson (Orthopedic Surgery) JENNIFER LYNN BELL	Nashville, Ter	nn.
Medical University of South Carolina, Charleston (Family Practice) BETH JOAN BENSON	Parsippany, N	I.J.
Mary Imogene Bassett Hospital (Columbia Physicians and Surgeons), Coopersto (Medicine)	wn, N.Y.	
KATHERINE ALICE SWEANY BERTRAM Vanderbilt University Affiliated Hospitals (Medicine)	Cookeville, Ter	nn.
SCOTT EUGENE BINGHAM University of California, San Diego Medical Center (Medicine)	Santa Rosa, Ca	alif.
ELIZABETH ANN BIRECREE	Lake Grove, N	I.Y.
Vanderbilt University Medical Center, Department of Anatomy (Biomedical Rese PATRICIA ANN BRISCOE	Salem, Ore	eg.
Hospital of the University of Pennsylvania, Philadelphia (Surgery) DAVID HUNTER BROWN	Fort Myers, F	la.
Stanford University Medical Center, Palo Alto, Calif. (Obstetrics/Gynecology) Santa Clara Valley Medical Center (Stanford), San Jose, Calif. (Transitional-PGY)		
San Mateo Mental Health Center, Calif. (Psychiatry)	San Francisco, Ca	alif.
MARTIN ALAN BURNS Barnes Hospital (Washington University), Saint Louis, Mo. (Diagnostic Radiology) Mercer University Medical Center, Macon, Ga. (Transitional-PGY1)	Macon, G	ia.
ROBERT WILLIAM CAIN Medical University of South Carolina, Charleston (Medicine)	Damascus, M	۱d.
THOMAS HOWARD CALLAWAY Research Triangle, N.C. (Sabbatical)	Maryville, Ter	nn.
TERESA TWILA CHARNIGA	Scottsdale, Ar	riz.
Saint Paul Medical Center (University of Texas, Southwestern), Dallas (Family Promise MICHAEL STEPHEN CITAK	Park Forest,	III.
University of Louisville Affiliated Hospitals, Ky. (Surgery)		

CLAUDIA LOU CLOPTON	Jonesboro, Ark.	
University of Colorado Affiliated Hospitals, Denver (Psychiatry)	Contract Man	
GREGORY LLOYD COMBS Oregon Health Sciences University, Portland (Surgery)	Spring, Md.	
JOHN LEONARD COOPER	Hawthorne, Calif.	
Vanderbilt University Affiliated Hospitals (Medicine)	riawriomo, Gain.	
DEIRDRE HUNTER DONALDSON	Woodbridge, Conn.	
University of Colorado Affiliated Hospitals, Denver (Neurology)		
Baptist Hospital (University of Tennessee), Nashville (Medicine-PGY1)		
DOUGLAS WAYNE DOTHAGER	Godfrey, III.	
Tripler Army Medical Center, Honolulu, Hawaii (Medicine)	Holbrook, Mass.	
MARCIA JUNE EGLES Saint Louis University Hospital, Mo. (Medicine)	HOIDIOOK, IVIASS.	
BETH ANN EHRENFRIED	Rome, N.Y.	
University of California, Davis Medical Center, Sacramento (Pediatrics)		
MARY ANN ELLIS	Bend, Oreg.	
Vanderbilt University Affiliated Hospitals (Obstetrics/Gynecology)	THE PARTY OF THE PARTY.	
WILLIAM MYRON FERRIN III	Bend, Oreg.	
Deaconess Medical Center, Spokane, Wash. (Transitional)	Harrington Park, N.J.	
RANDALL PARKS FRAZIER Campbell Foundation (University of Tennessee), Memphis (Orthopedic Surgery)	mannington raik, IV.J.	
Methodist Hospital (University of Tennessee), Memphis (Transitional-PGY1)		
R EVERETT FRERICHS	Beatrice, Nebr.	
Vanderbilt University Affiliated Hospitals (Pediatrics)		
SUSAN GAY GLOVER	Tullahoma, Tenn.	
Emory University Affiliated Hospitals, Atlanta, Ga. (Psychiatry)	Describe Calif	
THOMAS JOSEPH GRABOWSKI, JR. University of Washington Affiliated Hospitals, Seattle (Medicine)	Roseville, Calif.	
DAVID WILLIAM GRAMBOW	Cudahy, Wis.	
University of Texas, Southwestern, Dallas (Medicine)		
JAMES RONALD GRAY, JR.	Oak Ridge, Tenn.	
MemorialSloan Kettering Cancer Center, New York, N.Y. (Therapeutic Radiology)		
University of Tennessee Memorial Hospital, Knoxville (Transitional-PGY1)	HERM ADTUM MARCH	
RICHARD MATTHEW GRAY	Lewisburg, Pa.	
Union Memorial Hospital (Johns Hopkins), Baltimore, Md. (Surgery) KELLI CHARNELL GREEN	Clinton, Tenn.	
University of Arizona Affiliated Hospitals, Tucson (Surgery)	Ollintori, iciiri.	
SANDRA KAY GUSTAD	Volin, S.Dak.	
Oregon Health Sciences University, Portland (Pediatrics)		
DANIEL MOYER HARTMANN	Franklin, Tenn.	
University of Colorado Affiliated Hospitals, Denver (Family Practice)	TOTAL LAW TRANSPORT	
MICHAEL JAMES HERHUSKY	Squaw Valley, Calif.	
Harbor-UCLA Medical Center, Torrance, Calif. (Anesthesiology) Harbor-UCLA Medical Center, Torrance, Calif. (Transitional-PGY1)		
ROLAND ARTHUR HESTER IV	Montgomery, Ala.	
University of Arkansas for Medical Sciences, Little Rock (Orthopedic Surgery)	Sarana da estada de la compansa de l	
STEVEN ELLIS HILL	Clinton, Tenn.	
Tripler Army Medical Center, Honolulu, Hawaii (Medicine/Pediatrics)	TATION SHOWS SHOW	
LINDA HUMPHREYS	Nashville, Tenn.	
University Health Center of Pittsburgh, Pa. (Psychiatry)	Mission Hills, Kans.	
THOMAS RUSSELL HUNT III Vanderbilt University Affiliated Hospitals (Surgery)	IVIISSIUTI FIIIIS, INAITS.	
STUART MARK JACOBSON	Poughkeepsie, N.Y.	
University of Texas, Southwestern, Dallas (Diagnostic Radiology)	MARY REPRESENTATION	
CHARLES WEST JACOCKS IV	Columbia, S.C.	
Wilford Hall Medical Center, Lackland Air Force Base, San Antonio, Texas (Medi	cine)	

ROBERT DOUGLAS BENJAMIN JAQUISS	New Harmony, Ind.
Barnes Hospital (Washington University), Saint Louis, Mo. (Surgery)	
JOHN AMIS JERNIGAN Vandarbilt University Affiliated Hespitals (Medicine)	Kingsport, Tenn.
Vanderbilt University Affiliated Hospitals (Medicine) JOYCE EVELYN JOHNSON	Nashville, Tenn.
Vanderbilt University Affiliated Hospitals (Surgery)	readly later was
AMY MEREDITH JOSEPH	Saint Louis, Mo.
Jewish Hospital of Saint Louis (Washington University), Mo. (Medicine) PAUL DOMINIC KOUNTZ, JR.	Constant of CO
Barnes Hospital (Washington University), Saint Louis, Mo. (Diagnostic Radiology)	Spartanburg, S.C.
JULIE ROBIN LANGE	Atlanta, Ga.
New York University Medical Center, N.Y. (Surgery)	
JILL JEAN LEGG	Tucson, Ariz.
University of California, San Francisco Medical Center (Family Practice) RACHEL KATHERINE LENOX	Beaver Falls, Pa.
University of Tennessee College of Medicine, Memphis (Pediatrics)	beaver rails, ra.
CHARLES EDWARD LEONARD II	Jackson, Miss.
Emory University Affiliated Hospitals, Atlanta, Ga. (Transitional)	
CRAIG HARRISON LINGER	Idaho Falls, Idaho
University of Alabama Medical Center, Birmingham (Medicine/Primary Care) ALEXANDER LOCKE III	Sacramento, Calif.
University of California, Davis Medical Center, Sacramento (Obstetrics/Gynecolog	
MATTHEW ALAN LOVITT	Pasadena, Calif.
Baylor University Medical Center, Dallas, Texas (Surgery)	
JERE WHITSON LOWE, JR.	Cookeville, Tenn.
Yale-New Haven Medical Center, Conn. (Urology) Yale-New Haven Medical Center, Conn. (Surgery-PGY1)	
STEVEN COURTNEY LYNCH	Morristown, Tenn.
Wilford Hall Medical Center, Lackland Air Force Base, San Antonio, Texas (Urolog	
JOHN WITHERSPOON MACEY, JR.	Nashville, Tenn.
Charlotte Memorial Hospital and Medical Center (University of North Carolina)	
(Obstetrics/Gynecology) JOHN VICTOR MARYMONT	Wichita, Kans.
University of Texas Medical School, Houston (Orthopedic Surgery)	Wichita, Kans.
ROBERT DEAN MATTHEWS	Jasper, Ala.
Naval Regional Medical Center, San Diego, Calif. (Urology)	
DANIEL CHARLES MAYES University of Virginia Medical Center, Charlottesville (Pathology)	Sacramento, Calif.
CYNTHIA ELIZABETH MAYFIELD	Cantrall, III.
Vanderbilt University Affiliated Hospitals (Medicine)	IAM ARTON MONAD
ROBERT WALLACE MCCLURE	Waverly, Tenn.
University of Texas, Southwestern, Dallas (Medicine)	
JOEL EMERY McCULLOUGH Medical College of Wisconsin Affiliated Hospitals, Milwaukee (Medicine/Primary C	Charlotte, N.C.
EDWARD JAMES McPHERSON	Bakersfield, Calif.
Medical University of South Carolina, Charleston (Orthopedic Surgery)	San A Suggister San
Kern Medical Center, Bakersfield, Calif. (Medicine-PGY1)	
GINNY MERRYMAN-HEBB	Upperco, Md.
Vanderbilt University Affiliated Hospitals (Medicine) DANIEL RICHARD MITCHELL	Topeka, Kans.
Naval Regional Medical Center, San Diego, Calif. (Medicine)	Topeka, Karis.
DIANE ELIZABETH OLIVER	Bethesda, Md.
Vanderbilt University Affiliated Hospitals (Medicine)	THE PERSON NAMED IN
CHRISTOPHER KENNERLY PAYNE Hospital of the University of Pennsylvania Philadelphia (Urology)	Charleston, W.Va.
Hospital of the University of Pennsylvania, Philadelphia (Urology) RAY STOKES PEEBLES, JR.	Concord, Tenn.
Vanderbilt University Affiliated Hospitals (Medicine)	Concord, Ionii.

MICHAEL GREGORY PIRKOWSKI	Linden, N.J.
Georgetown University Hospital, Washington, D.C. (Therapeutic Radiology)	
Saint Johns Mercy Medical Center, Saint Louis, Mo. (Transitional-PGY1)	
JEFFREY ROBERT PRINSELL	Houghton, N.Y.
Vanderbilt University Affiliated Hospitals (Surgery, Oral/Maxillofacial)	
MARK PUDER	Wichita Falls, Texas
Yale-New Haven Medical Center, Conn. (Pediatrics)	
RICHARD EPES RAINEY	Petersburg, Va.
Mayo Graduate School of Medicine, Rochester, Minn. (Pediatrics)	
NEAL EDWARD READY	Somerset, Mass.
Rhode Island Hospital (Brown University), Providence (Medicine)	AND DESCRIPTION OF THE PARTY.
JAMES BRUCE REDMON	Bowling Green, Ky.
University of Minnesota Hospitals, Minneapolis (Medicine)	
MAYME FLORENCE RICHIE	Nashville, Tenn.
University of Texas, Southwestern, Dallas (Orthopedic Surgery)	
CARLTON FRIEDRICH ROOS	Nashville, Tenn.
Medical College of Virginia, Richmond (Pediatrics) LAWRENCE RAYMOND SHOEMAKER	
	Huntsville, Ala.
University of Louisville Affiliated Hospitals, Ky. (Pediatrics) JON FOE SNIDER	Carlotte State of the last
	Fort Smith, Ark.
Vanderbilt University Affiliated Hospitals (Orthopedic Surgery) PRENTICE DAVID STEFFEN	THE PARTY NAMED IN
	Enid, Okla.
Tucson Hospitals Medical Education Program, Ariz. (Transitional) SCOTT ANDREW STRELOW	A PROPERTY OF SERVICE
	Saint Louis, Mo.
University of Florida Medical Center, Gainesville (Ophthalmology)	
Vanderbilt University Affiliated Hospitals (Medicine-PGY1) DEEANN MARIE HENSON STROOP	BATTE THE TANK T
	Fairfax Station, Va.
Moses H. Cone Memorial Hospital (University of North Carolina), Greensboro (FROGER LYNN SWINGLE, JR.	
Christ Hospital (Rush Medical College), Oak Lawn, Ill. (Emergency Medicine)	Athens, Ga.
GRACE ELIZABETH PORTERFIELD TEAL	APPROVED PROPERTY
Vanderbilt University Affiliated Hospitals (Medicine)	Lincoln, Nebr.
SALLY ANNE THOMAS	
Vanderbilt University Affiliated Hospitals (Obstetrics/Gynecology)	Tempe, Ariz.
ANNE MARIA TIMMERMAN	
Rhode Island Hospital (Brown University), Providence (Medicine)	Fort Thomas, Ky.
DAVID SCOTT TROCHTENBERG	
Jewish Hospital of Saint Louis (Washington University), Mo. (Medicine)	Saint Louis, Mo.
RHONDA RENEE VOSKUHL	Library Cold
University of Texas, Southwestern, Dallas (Neurology)	Hennessey, Okla.
Presbyterian Hospital (University of Texas, Southwestern), Dallas (Medicine-PGY	Manual Buedawy
JORY DAVID WILLIAMS	
Vanderbilt University Affiliated Hospitals (Ophthalmology)	Orlando Fla.
Washington Hospital Center, D.C. (Medicine-PGY1)	
JOSEPH JOHN WUJEK	0.17
University of California, San Diego Medical Center (Obstetrics/Gynecology)	Livermore, Calif.
LUCY LO-HWA YANG	Now York NIV
Emory University Affiliated Hospitals, Atlanta, Ga. (Ophthalmology)	New York, N.Y.
Emory University Affiliated Hospitals, Atlanta, Ga. (Ophthalmology)	
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Class of 1987

Residency Assignments

CLINTON MARK ANDERSON Knoxville, Tenn. Barnes Hospital (Washington University), Saint Louis, Mo. (Diagnostic Radiology) Vanderbilt University Affiliated Hospitals (Medicine-PGY1) MICHAEL ROBERT ARNSTEIN Rolling Hills Estates, Calif. University of Hawaii, Honolulu (Surgery) CHARLES GREGORY BANKS Jasper, Ala. University of Alabama Medical Center, Birmingham (Obstetrics/Gynecology) Bradenton, Fla. GREGG ANTHONY BARAN Saint Louis University Hospital, Mo. (Diagnostic Radiology) KIMBALL JOSEPH BECK Fort Myers, Fla. Tallahassee Memorial Regional Medical Center, Fla. (Family Practice) DAVID BRADLEY BERRY Washington, D.C. Vanderbilt University Affiliated Hospitals (Obstetrics/Gynecology) GREGORY EDWARD BLACKMAN Bossier City, La. University of Texas, Southwestern, Dallas (Surgery) JEFFREY BRENT BOND Carthage, Miss. Tulane University Affiliated Hospitals, New Orleans, La. (Ophthalmology) Tulane University Affiliated Hospitals, New Orleans, La. (Medicine-PGY1) GILBERT ERICH BOSWELL Fairfax, Va. Naval Regional Medical Center, San Diego, Calif. (Medicine) KAREN JEAN BOWEN Cadiz, Ky. Brooke Army Medical Center, San Antonio, Texas (Medicine) STEPHEN PAUL BRADLEY Tiburon, Calif. Barnes Hospital (Washington University), Saint Louis, Mo. (Medicine) STEVEN EDWARD BRAVERMAN Baltimore, Md. Walter Reed Army Medical Center, Washington, D.C. (Physical Medicine and Rehabilitation) Eisenhower Army Medical Center, Fort Gordon, Ga. (Transitional-PGY1) ANTHONY JOSEPH BURDEN Grants Pass, Oreg. Saint Vincent Health Center (Hahnemann), Erie, Pa. (Family Practice) WILLIAM CARROLL BURNETTE, JR. Celina, Tenn. Vanderbilt University Affiliated Hospitals (Medicine) MARTHA JEAN BUTTERFIELD Sheridan, III. Vanderbilt University Affiliated Hospitals (Medicine) MARY JANE BUTTERFIELD Sheridan, III. Vanderbilt University Affiliated Hospitals (Medicine) ANNE WINIFRED CAMP Sewanee, Tenn. Yale/-New Haven Hospital, Conn. (Medicine) DOMENIC MICHAEL CANONICO Ridge, Tenn. Madigan Army Medical Center, Tacoma, Wash. (Transitional) DAVID BRET CHALPIN Brookline, Mass. Cedars-Sinai Medical Center, Los Angeles, Calif. (Diagnostic Radiology) Methodist Hospital (Indiana University), Indianapolis (Transitional-PGY1) THEODORE PHILLIPS CHAMBERS Baltimore, Md. University Health Center of Pittsburgh, Pa. (Orthopaedic Surgery) KEVIN BERNARD CHURCHWELL Nashville, Tenn. Children's Hospital of Boston, Mass. (Pediatrics) DAVID ALLEN COOK Bountiful, Utah University of Wisconsin Hospital and Clinics, Madison (Orthopaedic Surgery) DAVID MARK COUSSENS Russellville, Ark. Vanderbilt University Affiliated Hospitals (Urology) JOHN ALLEN CROW Starkville, Miss. Vanderbilt University Affiliated Hospitals (Medicine) ROBERT DOUGLAS CULLOM, JR. Arcadia, Fla.

Naval Regional Medical Center, San Diego, Calif. (Medicine)

GREGORY GEORGE DAVIS	Hendersonville, Tenn.
Vanderbilt University Affiliated Hospitals (Pathology) BART JOSEPH DEBROCK	The second second
University of Kansas Medical Center, Kansas City (Urology)	Cape Girardeau, Mo.
MICHAEL THOMAS DEL VECCHIO University of Alabama Medical Center, Birmingham (Pediatrics)	Helena, Ala.
WILLIAM DAVID DENNEY	Milan, Tenn.
Vanderbilt University Affiliated Hospitals (Medicine) KURT RICHARD DENNINGHOFF	Merritt Island, Fla.
Louisiana State University Affiliated Hospitals, New Orleans (Surgery) RUSS DAVID ERMAN	Tucson, Ariz.
Cedars-Sinai Medical Center, Los Angeles, Calif. (Surgery) ROSEMARY FITZPATRICK	Little Rock, Ark.
Tripler Army Medical Center, Honolulu, Hawaii (Medicine) JENNY JO FRANKE	Edwardsville, III.
Vanderbilt University Affiliated Hospitals (Surgery) ROY TYLER FRIZZELL	Fort Myers, Fla.
University of Texas, Southwestern, Dallas (Neurosurgery) DAVID ANDREW FUCHS	Adelphi, Md.
West Suburban Hospital Medical Center (Rush), Oak Park, III. (Transitional) JOHN DAY GAZEWOOD	Fairview, Pa.
University of Missouri-Columbia (Family Practice) TIMOTHY GERARD GIVENS	Bowie, Md.
University of Cincinnati Affiliated Hospitals, Ohio (Pediatrics) CHRISTOPHER WALKER GRAHAM	Louisville, Ky.
Georgetown University Hospital, D.C. (Urology) BARBARA MARIE GRIPSHOVER	Columbus, Ohio
Case Western Reserve University Hospital of Cleveland, Ohio (Medicine) ERICH BRYAN GROOS, JR. Saint Joseph Mercy Hospital (University of Michigan), Ann Arbor (Transitional)	Nashville, Tenn.
MARK CHARLES HAIGNEY Johns Hopkins Hospital, Baltimore, Md. (Medicine)	Larchmont, N.Y.
JOHN CALDWELL HARRISON Baptist Memorial Hospital (University of Tennessee), Memphis (Pathology)	New Albany, Miss.
DOUGLAS LAMAR HILL Duke University Medical Center, Durham, N.C. (Medicine)	Columbus, Miss.
RICHARD LLOYD HOCK	Tampa, Fla.
University of Colorado Affiliated Hospitals, Denver (Medicine) SALLY SARA HARDISON HOUSTON	Silver Spring, Md.
University of South Florida Affiliated Hospitals, Tampa (Medicine) STEPHEN ALLEN HUTTO	Bellflower, III.
Vanderbilt University Affiliated Hospitals (Medicine) DANIEL ALAN ICHEL	Edison, N.J.
University of Virginia Medical Center, Charlottesville (Ophthalmology) Overlook Hospital (Columbia Physicians and Surgeons), Summit, N.J. (Transition	nal-PGY1)
JOHN HARLEM JOHNSON University Health Center of Pittsburgh, Pa. (Anesthesiology)	Millersville, Mo.
DAN TODD JOHNSTON Oregon Health Sciences University, Portland (Anesthesiology)	Fargo, N.Dak.
Sacred Heart Medical Center (University of Washington), Spokane (Transitional-KAREN SUE JOHNSTON	-PGY1) Saline, Mich.
University of California, Los Angeles Medical Center (Otolaryngology) JOHN EDWARD JORDAN III	Nashville, Tenn.
Vanderbilt University Affiliated Hospitals (Medicine) JAMES CENTRE KING III	Lexington, Ky.
Vanderbilt University Affiliated Hospitals (Medicine) STEPHEN CURTISS KLASSON	lowa City, Iowa
University of Arkansas for Medical Sciences, Little Rock (Orthopaedic Surgery) FRED WIGFIELD KNIFFIN	Canaan, Conn.
Medical Center Hospital of Vermont, Burlington (Medicine)	Odridan, Com.

NEIL WARREN KOOY	Lansing, III.
Vanderbilt University Affiliated Hospitals (Pediatrics)	
ROBERT PAUL LAGRONE	Statesboro, Ga.
Vanderbilt University Affiliated Hospitals (Medicine) RACHEL JANE LAMPERT	Princeton, N.J.
New York University Medical Center, N.Y. (Medicine)	Princeton, N.J.
JAMES SCOTT LANE	Dayton, Ohio
University of Cincinnati Affiliated Hospitals, Ohio (Ophthalmology)	Dayton, Onlo
Cleveland Clinic Foundation (Case Western Reserve University), Ohio (Medic	ine-PGY1)
LAURA LYNN LAYER	Sanford, Fla.
Children's Hospital Philadelphia (University of Pennsylvania) (Pediatrics)	
KEITH MICHAEL LEWIS	Cherry Hill, N.J.
North Shore University Hospital (Cornell), Manhasset, N.Y. (Medicine)	
ROBERT LUTHER LILE	Little Rock, Ark.
University of Colorado Affiliated Hospitals, Denver (Diagnostic Radiology)	
Greenville Hospital System (Medical University of South Carolina) (Transitional	The state of the same of the s
AMY LIBBY LLEWELLYN	Reno, Nev.
University of New Mexico School of Medicine, Albuquerque (Pathology) DOUGLAS WALTER LOWERY III	Saint Petersburg, Fla.
University of California, Los Angeles Medical Center (Emergency Medicine)	Saint Fetersburg, Fla.
JAMES EVANS LYNE	Nashville, Tenn.
North Carolina Baptist Hospital (Bowman Gray), Winston-Salem (Transitional)	radorvino, form.
ROBERT SCOTT MAHAN	Winter Park, Fla.
University of Chicago Medical Center, III. (Diagnostic Radiology)	AND THE PROPERTY.
CAROL JEAN MARTIN	Hoopeston, III.
University of Wisconsin Hospital and Clinics, Madison (Pediatrics)	
CULLEN ASHLEY McALLEN	Weslaco, Texas
Bexar County Hospital (University of Texas), San Antonio (Anesthesiology)	
Central Texas Medical Foundation, Austin (Transitional–PGY1)	
KRISTINA KOKUBUN McCAIN	South Pasadena, Calif.
Vanderbilt University Affiliated Hospitals (Obstetrics/Gynecology) ROBERT WILLIAMSON McCAIN	Fairfield, Conn.
Vanderbilt University Affiliated Hospitals (Medicine)	rainleid, Conn.
STEPHEN FRANKLIN MILLER	Danbury, Conn.
University of Arkansas for Medical Sciences, Little Rock (Diagnostic Radiolog	
Vanderbilt University Affiliated Hospitals (Pathology–PGY1)	and the same of the same
THEODORE TILLMAN MILLER	Scarsdale, N.Y.
The Mount Sinai Hospital, New York, N.Y. (Diagnostic Radiology)	
The New York Hospital (Cornell), N.Y. (Pathology-PGY1)	
EUGENE HARRIS NELSON	Nashville, Tenn.
Vanderbilt University Affiliated Hospitals (Pathology)	
ELIZABETH ANN NILLES	Edina, Minn.
University of Wisconsin Hospital and Clinics, Madison (Pediatrics) MICHAEL JOSEPH PAGNANI	Deleieb N.C.
Hospital for Special Surgery (Cornell), New York, N.Y. (Orthopaedic Surgery)	Raleigh, N.C.
Baylor University Medical Center, Dallas, Texas (Surgery–PGY1)	
MARK ALLAN PAVILACK	North Miami, Fla.
University of Michigan Affiliated Hospitals, Ann Arbor (Ophthalmology)	
Allentown Affiliated Hospitals (Hahnemann), Penn. (Transitional-PGY1)	
PAUL DANIEL PEARIGEN	Memphis, Tenn.
The Medical College of Pennsylvania, Philadelphia (Emergency Medicine)	
LEONARD ALAN PLUNKETT	Murfreesboro, Tenn.
University of Colorado Affiliated Hospitals, Denver (Diagnostic Radiology)	
Baptist Hospital (University of Tennessee), Nashville (Medicine–PGY1)	01 1 1 011
BARBARA ANAMARIE POCKAJ	Cleveland, Ohio
Case Western Reserve University Hospital of Cleveland, Ohio (Surgery) STEVEN BRYANT PORTER	Charlotte, N.C.
University of California, San Francisco Medical Center (Medicine)	Chanotte, N.C.
of wording of Camornia, Carri rancisco Medical Center (Medicine)	

PAUL MATTHEW RADOSEVICH University of California, San Francisco Medical Center (Diagnostic Radiology)	Martinez, Calif.
LAURA JEAN HIETBRINK RAMES	Brookings, S.Dak.
Medical University of South Carolina, Charleston (Psychiatry) ROSS ALAN RAMES	Wentworth, S.Dak.
Medical University of South Carolina, Charleston (Urology) RODNEY RENE REID	Columbia, S.C.
Cleveland Clinic Foundation (Case Western Reserve University), Ohio (Medicine) NEIL MARK RICHTAND University of California, San Diego Medical Center (Psychiatry)	Eggertsville, N.Y.
Hartford Hospital (University of Connecticut) (Transitional-PGY1) MICHAEL EARL RUFF	Bloomington, Ind.
Tripler Army Medical Center, Honolulu, Hawaii (Pediatrics) MARK WARREN RUSSO	Edwardsville, III.
Saint Louis Children's Hospital (Washington University), Mo. (Pediatrics) ERIC LAMAR SAUNDERS	Yorba Linda, Calif.
Vanderbilt University Affiliated Hospitals (Therapeutic Radiology) THEODORE JOHN SAWCHUK	Rolette, N.Dak.
University of Virginia Medical Center, Charlottesville (Urology) ROBERTA DIANE SCHLESINGER	Palm Springs, Calif.
Sheppard and Enoch Pratt Hospital, Towson, Md. (Psychiatry) MARY JANE SCHMIDT	Alpharetta, Ga.
Chandler Medical Center (University of Kentucky), Lexington (Pediatrics) KATHLEEN ANNE SCHWARTZ	Orchard Park, N.Y.
Vanderbilt University Affiliated Hospitals (Pathology) ROBERT ANTHONY SCIORTINO	Saint Louis, Mo.
Saint Louis University Hospital, Mo. (Orthopaedic Surgery) RICHARD STANLEY SHERRY	Seattle, Wash.
McGaw Medical Center of Northwestern University, Chicago, Ill. (Diagnostic Radi Virginia Mason Hospital (University of Washington), Seattle (Transitional–PGY1)	iology)
DANIEL EDWARD SMITH, JR.	Rose Hill, Miss.
University Health Center of Pittsburgh, Penn. (Child Psychiatry) JEFFREY SCOTT SPENCER	White Plains, N.Y.
National Naval Medical Center, Bethesda, Md. (Obstetrics/Gynecology) TROY FARR STOREY	Titusville, Fla.
Medical College of Virginia, Richmond (Diagnostic Radiology) JOHN STEWART SWANSON	Pine Bluff, Ark.
University of Colorado Affiliated Hospitals, Denver (Psychiatry) HAROLD MARK SWINDLE	Jasper, Ala.
Vanderbilt University Affiliated Hospitals (Medicine) DAVID EDMOND TAYLOR	Memphis, Tenn.
Medical College of Virginia, Richmond (Medicine) NICOLAS STEVEN VEACO	Nashville, Tenn.
Vanderbilt University Affiliated Hospitals (Surgery, Oral/Maxillofacial) TERRI JO VRTISKA	Table Rock, Nebr.
Mayo Graduate School of Medicine, Rochester, Minn. (Urology) VAN RUSSELL WADLINGTON McGaw Medical Center of Northwestern University, Chicago, Ill. (Diagnostic Rac	Nashville, Tenn.
Baylor University Medical Center, Dallas, Texas (Surgery-PGY1) MALCOLM HOUSTON WEATHERS III	Loretto, Tenn.
University of South Florida Affiliated Hospitals, Tampa (Diagnostic Radiology) DOUGLAS RAY WEIKERT	French Lick, Ind.
Vanderbilt University Affiliated Hospitals (Orthopaedic Surgery) THOMAS ALEXANDER SYMINGTON WILSON, JR.	Birmingham, Ala.
North Carolina Baptist Hospital (Bowman Gray), Winston-Salem (Neurosurgery) MARK THOMAS WORTHINGTON	Tempe, Ariz.
Johns Hopkins Hospital, Baltimore, Md. (Medicine)	
BENJAMIN CONRAD WOUTERS Vanderbilt University Affiliated Hospitals (Surgery)	Huntsville, Ala.



The School of Nursing

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School of Nursing



COLLEEN CONWAY-WELCH, Ph.D., C.N.M., Dean

JUNE C. ABBEY, Ph.D., Associate Dean for Research and Evaluation; Director of the Center for Nursing Research

BARBARA CHRISTMAN ADAIR, M.S.N., Interim Associate Dean for Academic Programs ELIZABETH KERR HAY, M.S.N., Interim Associate Dean for Community and International Programs and Faculty Practice

ROSAMOND GABRIELSON, M.A., Assistant Dean for Clinical Practice
JOYCE A. NORRIS, M.A., Assistant Dean for Veterans Administration Nursing Affairs
CAROL J. DASHIFF, Ph.D., Department Chair for Mental Health and Organizational Behavior
LARRY E. LANCASTER, M.S.N., Ed.D., Department Chair for Adult Health
CATHLEEN K. BRANNEN, M.B.A., Director of Finance and Administration
AMY HARSHMAN, M.P.A., Director of Marketing and Enrollment
PATRICIA L. PEERMAN, M.S., Director of Academic Administrative Affairs
SALLIE WAMSLEY, Registrar

Faculty Council 1987

JUDY JEAN CHAPMAN, Chair
CAROLYN J. BESS
SHIRLEY M. CALDWELL
JANE B. DADDARIO
MARY LOUISE DONALDSON, Chair Elect
LYDIA LUTTRELL GRUBB
JANIE C. MACEY
SUE MORGAN, Senior Senator

Standing Committees

The Dean is an ex officio member of all standing and special committees. Charges of committees are summarized. For more detailed descriptions of committee charges, see School of Nursing Bylaws, Article V.

Curriculum

(New members to be appointed in September 1987)

The Curriculum Committee has the responsibility of reviewing and evaluating the undergraduate and graduate curriculum.

Mary Louise Donaldson, Chair. Helen F. Bigler, Barbara Fox Grimes, Mary F. Haire, Janie Capps Macey, Annette Kirchner Sastry. Ex Officio: Barbara Christman Adair, Carol J. Dashiff, Virginia M. George, Larry E. Lancaster, Sallie Wamsley.

Faculty Promotion and Review

(New members to be elected in September 1987)

The Faculty Promotion and Review Committee has the responsibility of reviewing candidates for promotion and reappointment and making recommendations to the Dean. The committee assures periodic evaluation of faculty who would not otherwise be reviewed.

Elizabeth Kerr Hay, Chair. Adrienne Ames, Frances E. Carson, Mary Louise Donaldson, Joyce K. Laben, Diana P. Smith, Judy Taylor Sweeney.

Faculty Recruitment and Appointment

(New members to be appointed in September 1987)

The Faculty Recruitment and Appointment Committee has the responsibility of developing and maintaining a roster of potential faculty candidates, in accordance with the faculty plan. The committee coordinates all aspects of the appointment process including recruitment and recommends faculty appointments to the Dean.

Joyce K. Laben, Chair. Mary B. Eccard, Elizabeth Kerr Hay, Diana P. Smith. Ex Officio: Barbara Christman Adair, Carol J. Dashiff, Virginia M. George, Larry E. Lancaster.

Nominating

(New members to be elected in September 1987)

The Nominating Committee has the responsibility of preparing a slate from consenting candidates for chair-elect, secretary, parliamentarian, senator, vacant positions on the Faculty Council, and elected committees.

Virginia M. George, Chair. Gloria W. Calhoun, Mary Louise Donaldson, Joan E. King, Joyce K. Laben.

Student Recruitment, Admissions, and Affairs

(New members to be appointed in September 1987)

The Student Recruitment, Admissions, and Affairs Committee has responsibility for recruiting potential students; reviewing and acting upon applications for admission to the School of Nursing; selecting traineeship, honor scholarship, and other appropriate scholarship recipients; reviewing student progress and considering and acting on student petitions for waiver of policy; and recommending to the Faculty Assembly conferral of degrees designating appropriate honors.

Susan A. Morgan, Chair. Catherine E. Dennis, Chair-Elect. Lucille H. Aulsebrook, Carolyn J. Bess, Virginia M. George, Virginia Vaughn Sinclair. Ex Officio: Barbara Christman Adair, Amy Harshman, Patricia L. Peerman, Sallie Wamsley.

Tenure

The Tenure Committee has the responsibility of receiving and reviewing dossiers of persons to be promoted to Associate Professor or to be appointed to a rank holding tenure, and makes recommendations to the Dean.

Helen F. Bigler, Chair. June C. Abbey, Barbara Christman Adair, Lucille H. Aulsebrook, Virginia T. Betts, Judy Jean Chapman, Catherine E. Dennis, Mary Louise Donaldson, Virginia M. George, Barbara Fox Grimes, Elizabeth Kerr Hay, Joyce K. Laben, Larry E. Lancaster, Kenneth A. Wallston.



Nursing Education at Vanderbilt

ANDERBILT School of Nursing has an established reputation for excellence in nursing education and attracts students from across the nation and from several foreign countries. The program is designed to teach current nursing practice and lay the founda-

tion for further exploration of that practice.

The School of Nursing was founded in 1909 as the Training School for Nurses of Vanderbilt University Hospital, with a three-year program leading to eligibility for nurse licensure. Under University administration since 1930, the Nursing School became a part of the Vanderbilt Medical Center in 1985. This new relationship allows the school and the hospital nursing service to function more closely and offers greater opportunity for nursing faculty and students to interact with nursing staff, medical faculty, and medical students in the areas of teaching, research, and practice.

Accreditation. The school is approved by the Tennessee Board of Nursing. It was a charter member of the Association of Collegiate Schools of Nursing, which later was incorporated into the National

League for Nursing.

The program is accredited by the National League for Nursing. The undergraduate program was jointly accredited by the National League of Nursing Education and the National Organization for Public Health Nursing in 1945.

Philosophy of the School

The School of Nursing embraces the philosophy of Vanderbilt University, which is committed to freedom of inquiry into the natural, social, and human orders of existence and freedom to state the conclusions of that inquiry. Vanderbilt University and the School of Nursing foster excellence in both scholarship and service and accept and actively embody the philosophy that a liberal education must concern the whole person. To accomplish this goal, the educational program includes both professional and academic courses.

The faculty of the School of Nursing believe that the central concepts of nursing are person, environment, health, and nursing. These four concepts interact and serve as the basis for the practice of nursing. The faculty have defined these four concepts in the paragraphs that follow in ways compatible with their collective beliefs.

The faculty believe each person is unique, with intrinsic worth and dignity. We consider human beings as whole persons having interacting

and interdependent physical structures, minds, and spirits and actively

participating within their environments.

The environment consists of all conditions, circumstances and influences that exist outside the identified social system boundary. There is an intimate relationship between the constantly changing environment and the person. The environment in which we live determines, to a degree, lifestyle and state of health. Development of the individual occurs throughout the life span within a pluralistic and culturally diverse society.

Health is a dynamic state of being in which the developmental and behavioral potential of an individual is realized to the fullest extent possible. Individuals have the right to pursue that level of health perceived by them to be optimal, taking into account their social and cultural definition of health. The level of health that individuals can attain is directly influenced by the level of health of the families and communities of

which they are a part and with whom they coexist.

Nursing is a professional discipline that seeks to understand phenomena and predict circumstances that affect the health of individuals, families, groups, and communities across the age span. The discipline of nursing encompasses science, ethics, politics, and the heritage of nursing. The central focus of nursing is the diagnosis and treatment of the responses of individuals, families, and groups to actual or potential health problems. The practice of nursing is an art and a science that utilizes knowledge from the discipline of nursing to help individuals im-

prove their health potential.

The faculty believes that the professional nurse should have a liberal education and that a university provides the best possible environment for this kind of education. We are aware that a liberal education includes fine arts and humanities as well as social, biological, and physical sciences. Some of these components are prerequisites to the study of nursing. The synthesis of knowledge from these disciplines as well as from nursing will enhance the ability of nurses to understand self, relationships with others, the nature of communities, cultures other than their own, the physical world, current issues, and human values. The study of diverse disciplines contributes to the ability to think analytically, reason logically, and communicate effectively. Students are expected to continue their growth in intellectual and communication skills, as well as use their liberal education to understand the phenomena of nursing and health. University-wide interdisciplinary activities are actively sought for the intellectual exchange and stimulation they provide.

Sigma Theta Tau

The Iota chapter of Sigma Theta Tau, international honor society of nursing, was installed at Vanderbilt University on 3 June 1953. Election to membership in the society is limited to students who have shown marked qualities of character, leadership, and ability in nursing and who have maintained a high scholastic average. Students in the direct entry M.S.N. program are eligible for membership after having completed one-fourth of the required curriculum. Students in the Master of Science in Nursing with Multiple Entry Options (M.S.N./M.E.O.) program are eligible for membership after having completed 30 hours of the required "bridge" curriculum.

Graduate Student Affairs

The Graduate Nursing Council serves as a liaison between graduate and "bridge" students and the faculty and administration. Membership of the council is composed of two elected students from each specialty track and two M.S.N./M.E.O. students who serve for one calendar year from September through August. Officers of the council must be full-time students in good standing.

School Committees

Graduate students have representation on many school committees. These include, among others, the Curriculum Committee, Library Committee, Career Day Committee, and Alumni Association Board. Representatives are elected by the students to serve for one calendar year, September through August.

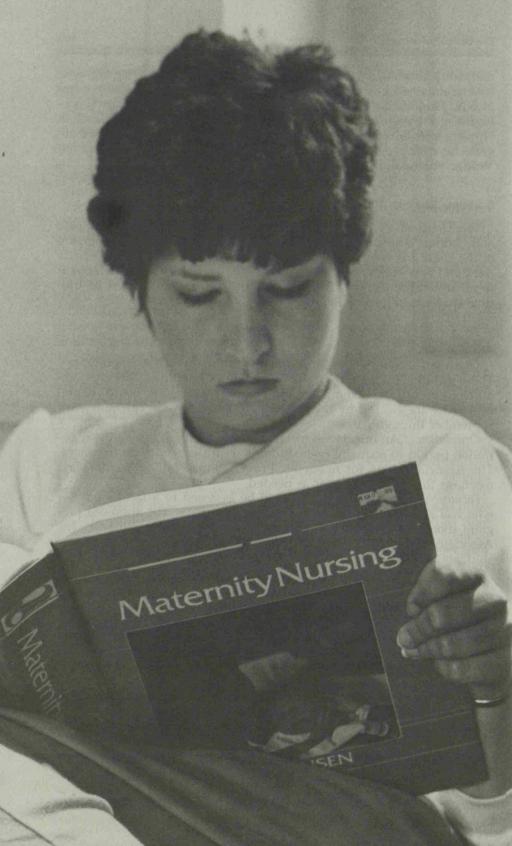
Orientation. An orientation meeting is held each fall during the registration period to acquaint new students with the school environment. The Associate Dean for Academic Programs may call additional class

meetings throughout the year as needed.

Faculty Advisers. Each student will be assigned to a faculty adviser who will assist with planning a program of studies. The approved program should be completed within the first semester of enrollment. The Associate Dean for Academic Programs serves as the adviser for special students.

Employment

Graduates of the master's program who are clinical specialists find job opportunities in secondary and tertiary care settings. Graduates who are nurse practitioners find job opportunities in primary care settings. Currently, clinical specialists begin at an average salary of \$26,000 a year.



The Undergraduate Program

HE undergraduate program in the School of Nursing leads to a Bachelor of Science in Nursing (B.S.N.) degree. The School will confer the B.S.N. degree until May 1989, when the transition to a

graduate school of nursing will be complete.

The program educates nurses for active professional careers that includes provision of care in hospitals and community agencies for clients and their families, participation in professional nursing organizations, generation of clinical nursing questions, and preparation for graduate education. Students learn the basic, applied, and nursing sciences upon which nursing knowledge is based, use that knowledge in clinical practice, use the process of inquiry to enhance current knowledge in the field, and analyze and develop strategies with which to face new problems. Students are encouraged to continue in personal growth and social understanding.

Students learn to assess health needs of clients, to act in ways that promote and restore health, and to initiate action that will enable clients

and their families to manage their own health concerns.

A graduate of the School of Nursing is expected to develop advanced skills in nursing and client care rapidly and be able to assume responsibility and exert leadership. The program serves as a foundation for graduate study in nursing.

The Graduate Nursing Program

HE purpose of graduate education in nursing is to prepare scholars and leaders. At the master's level, graduate study provides the opportunity for acquisition of in-depth theoretical knowledge upon which to base advanced clinical practice. There is opportunity for the student to acquire advanced research skills and knowledge of nursing and other theories. Master's education provides students with the knowledge and skills necessary for planning and initiating change in a health care system through leadership strategies. For those persons desiring to become a member of an interdisciplinary health care management team, the focus of master's level education is on leadership and management in order to guide and structure nursing organizations within a variety of health care settings. A master's degree is not sufficient preparation for the nurse educator, but learning is a life-long process, and post-master's education should be available for those desiring increased knowledge and skills in their selected specialty or in a new specialty area.

The first professional degree in nursing should be specialty related and offered at the post-baccalaureate level. The increase in knowledge and scope of nursing responsibilities as well as changes in roles, functions, and practice settings require a graduate nursing education built on a rich undergraduate liberal education and a baccalaureate in nursing or

its equivalent.

Due to the present diversity in nursing programs, educational opportunities must be made available to facilitate progression to the master's degree as the first professional degree. The Vanderbilt School of Nursing offers multiple entry options into a master's level program. The program, based on a variety of cognitive styles, life experiences, and professional backgrounds, allows all students to achieve the same goals. In addition to educating students, a master's degree program in nursing provides other benefits. Faculty members are engaged in the investigation of nursing practice and theory, innovative nursing care, and participation in national, state, and local activities related to nursing and health care delivery. Thus, they serve as a role model for students, the profession, and the public. The program constitutes an arena for excellence in nursing practice and research, as well as a forum for discussion and analysis of issues that affect health care, consumers, the nursing profession, and society.

Program Goal

The goal of this program is to prepare nurses who are:

1. (a) Clinical specialists or practitioners with expertise and advanced knowledge in a selected practice area who function independently and collaboratively with other health care team members in health promotion, illness care, and rehabilitation of clients, or (b) administrators with expertise and advanced knowledge in management who function in multiple roles as members of interdisciplinary health care management teams in a variety of settings.

2. Seekers of new knowledge by means of critical thinking, creative reasoning, and scientific investigation in relation to nursing practice and

theory.

3. Disseminators of nursing knowledge and research in both oral and written presentations.

4. Leaders capable of determining effective strategies that stimulate change within the profession and within the health care delivery system.

5. Decision-makers who utilize advanced knowledge and consider ethical principles in serving the needs of individuals and society.

6. Learners who possess the foundation for doctoral study.

The Clinical Nurse Specialist Track

The clinical nurse specialties are designed to allow students interested in advanced practice to gain and synthesize new knowledge and to expand their skills in critical thinking and independent decision making. This course of studies provides a clinical nurse specialist with a broad foundation of knowledge with which to practice in a variety of community and institutional settings.

Clinical Specialist in Acute/Critical Care

This specialty provides a broad foundation in advanced concepts of acute/critical care nursing and clinical expertise in a specific area of concentration. Possible areas include critical care (medical, surgical, and/or cardiovascular), trauma, burn, renal, or any general acute care setting. Additional areas of concentration may be based on individual student preferences and availability of resources. Students in this specialty take core courses that lay the foundation for individualized, in-depth study of acute/clinical care nursing.

Clinical Specialist in Oncology

This specialty offers a broad base of advanced concepts in oncology nursing and clinical expertise in primary, secondary, or tertiary care. Students in this specialty take didactic and practica courses as a basis for individualized, in-depth study of oncology nursing.

Clinical Specialist in Child and Adolescent Nursing

This specialty provides a broad theoretical and research foundation in advanced concepts of child and adolescent nursing. Students are trained to help children and adolescents and their families recover and/or adapt to acute or chronic illnesses or disabilities in a growth-producing manner. Students are prepared to provide comprehensive physical and psychosocial care in a variety of settings: hospital, long-term-care facility, clinic, and home. Clinical hours may be applied toward A.N.A. certification as a Child and Adolescent Nurse.

Clinical Specialist in Perinatal Nursing

Students in this specialty may choose the maternal-fetal or the neonatal focus. Practice settings include inpatient and outpatient areas in Level II and Level III institutions, with opportunities to participate in regularly scheduled clinical, ethical, and political conferences dealing with perinatal issues. On completion of an additional clinical experience, students can qualify for N.A.A.C.O.G. or A.N.A. certifying exams.

Clinical Specialist in Adult Psychiatric-Mental Health Nursing

Students study individuals, groups, and families experiencing moderate to severe psychiatric-mental health problems. Clinical placements are provided in both community and institutional settings. Opportunities exist for experiences with particular target populations, such as substance abuse, forensic services, and chronic mental illness.

Clinical Specialist in Child and Adolescent Psychiatric-Mental Health Nursing

Students study children and adolescents and their families as they are experiencing moderate to severe psychiatric—mental health problems. Clinical placements are provided in community and institutional settings. Opportunities exist for experiences with particular target populations such as eating disorders, substance abuse, attention deficits, conduct disorders, learning disabilities, and high-risk families.

Clinical Specialist in Family Abuse

Students study theoretical content specific to family abuse, including psychological and sociological theories of aggression and victimization.

Primary prevention is emphasized for early identification of families at risk. Various treatment modalities, including crisis intervention and short- and long-term therapy to decrease trauma and prevent the continuation of the abusive cycle, are practiced by the student.

The Nurse Practitioner Track

This track prepares nurses for roles in primary health care delivery. Two specialties are offered within the track: family nurse practitioner and gerontological nurse practitioner. Both specialties qualify graduates to take A.N.A. certification exams.

Family Nurse Practitioner Specialty

This specialty prepares nurses to provide comprehensive primary care to individuals, from infancy through adulthood. The focus is on health promotion and intervention in illness-related problems, with a family-centered approach to care. Students gain clinical experience in child and adult health care settings. The preceptorship permits students to select a clinical area of interest for further professional development.

Gerontological Nurse Practitioner Specialty

This specialty focuses on primary care of older adults. Emphasis is on acquisition of knowledge and skills necessary for health assessment, illness prevention, and health care management. Students learn to modify the treatment regimen to meet the physical and psychosocial needs of the aged.

Clinical experiences in institutional and community settings are required throughout the program. The final clinical experience, the preceptorship, takes place in a primary care setting. The preceptorship calls on the knowledge and skills acquired throughout the course of study.

Nursing Administration Track

This track is offered by the Department of Mental Health and Organizational Behavior, in collaboration with George Peabody College and the

Owen Graduate School of Management.

The Nursing Administration track provides a comprehensive study of nursing as a leading discipline in health care. The track is designed to prepare the student for multiple roles on an interdisciplinary health management team, with skills in planning, designing, managing, and evaluating programs and resources within a variety of health care settings.

Students in Nursing Administration will complete 39 hours of required course work, plus an administrative preceptorship. In the latter, the student will apply administrative theories and concepts in various tertiary, ambulatory, and chronic care facilities. The course offerings provide: (1) a foundation in theory development; (2) core courses in theoretical foundations of nursing management practice, including a practicum; (3) interdisciplinary administration courses in organizational theories and culture, health policy and law, financial management, personnel management, labor relations, and management information systems; and (4) a research and program evaluation sequence.

Curriculum Overview

Foundation Courses (6 Semester Hours)

Foundation Courses encompass those content areas essential for all master's degree students. These offerings allow students across clinical specialties to share experiences and learn together.

The Nursing Theory course provides a basis for nursing theory analysis and application to practice. Further application occurs in the clinical

specialty offerings subsequent to the foundation course.

Students address the nature and concerns of the profession in Issues and Strategies in Nursing, a course in which students identify forces affecting nursing and design strategies for change.

Specialty Courses (21–24 Semester Hours)

This aspect of the master's program consists of didactic and practicum courses in a selected clinical specialty. The didactic courses cover advanced nursing content; the practica place the student in the role of clinical nurse specialist, nurse practitioner, or nurse administrator. For detailed information about the specialty courses, see the section on Graduate Curriculum and the appropriate course descriptions.

Research Courses (9 Semester Hours)

The research component includes 6 hours of required didactic courses in research methods (Nursing 375 and 376) and a thesis or non-thesis option. The thesis option consists of 3 hours of thesis related to the student's specialty track.

The non-thesis option consists of 3 hours of research/scientific inquiry activity. A student selecting the non-thesis option will fulfill the requirement by addressing a question of significance related to his or her specialty culminating in a paper of publishable quality that answers the

proposed question. Students select a major adviser to assist them with the paper.

Electives

Students select electives of interest, based on their professional goals. Options include courses related to the clinical specialty, teaching, or management. Courses available in the School of Nursing, the Owen Graduate School of Management, and George Peabody College allow nursing students to interact with other professional students in the University.

Degree Requirements

For students entering with a B.S.N. degree, the M.S.N. degree is based on a minimum of 39 credit hours. All degree requirements must be completed within six years of first enrollment. The grade of B in each clinical course and an overall B average is required. No more than 9 hours of Pass-Fail credit may apply to the degree. No required core or specialty course may be taken Pass-Fail. No audit courses apply to the degree. Up to 6 hours may be transferred from other schools for graduate courses taken within the past five years. No credit is awarded toward the degree for courses designated as prerequisite for admission.

For students in the M.S.N./M.E.O., the M.S.N. degree is granted on the basis of 88 credit hours. In the generalist nursing or "bridge" component of the M.S.N./M.E.O. program, students must earn at least a C in each course. To progress from the generalist to the specialist component, students must meet the following criteria: (1) completion of 49 semester hours of the generalist nursing component, (2) B average in the generalist nursing component, and (3) cumulative grade point average of B. Students entering the M.S.N./M.E.O. program must complete all M.S.N. degree requirements within eight years of initial enrollment.

In addition to the ordinary course evaluations, the M.S.N. candidate may be required, at the discretion of the faculty, to take a final comprehensive examination. Such examination shall be completed no later than fourteen days before the degree is to be granted. The candidate for the degree must have satisfactorily completed the M.S.N. curriculum, have passed all prescribed examinations, and be free of indebtedness to

the University.

Program of Studies

During the first semester of study, a student must file an approved Program of Studies with the Nursing Registrar. When a change in the program or absence from the school for one or more semesters is anticipated, the student must file an approved Change in Program with the Registrar. The forms for programs of studies and subsequent changes are available from the Nursing Registrar. Copies are to be filed with the adviser and the Registrar's Office.

Students who wish to alter the required program of studies may petition to do so by giving justification for the request and proposing an

alternative program of study.

Post-Master's Studies

The purpose of the Post-Master's Studies Program is to provide, for nurses who already hold a master's degree in nursing, an educational route to respecialize in an area other than that obtained in their master's program. The program is designed to strengthen or broaden the clinical, teaching, or administrative capabilities of master's-prepared nurses who are planning a role expansion or role change.

Admission Requirements

1. A master's degree in nursing from an NLN-accredited program.

2. Completed application and official transcript documenting conferral of master's degree in nursing.

3. Current Tennessee nursing licence (not required for nursing educa-

tion program).

4. Requirements regarding letters of reference, nursing experience, interview, and prerequisite courses vary according to the area of specialization. Call the School of Nursing Registrar's Office (615-322-4718) for further details.

Nursing Education

Post-master's study in nursing education is offered by the Department of Mental Health and Organizational Behavior. The purpose of this 12-credit graduate level program is to provide the opportunity to study those educational concepts and principles applicable to the nurse faculty role in higher education. The three objectives of the program are to prepare the learner to (1) participate effectively in the curriculum building process, (2) design a course of study based on learning principles, and (3) analyze the nurse faculty role in higher education.

The program will be offered in the summer on selected weekends, with two offerings each summer. The four-course curriculum includes Nursing 301, Curriculum Development in Nursing; Nursing 302, Instructional Design; Nursing 303, Nurse Faculty Role in Higher Education; and Nursing 370, Independent Study on a selected nursing

education project. Upon completion of the 12 credit hours students will receive a transcript of courses taken; those with a grade of B or better in each course taken will receive a certificate of completion.

Clinical Nurse Specialist

Post-master's study programs are planned in acute/critical care, oncology, pediatrics, perinatal, and psychiatric-mental health nursing. For further information, call the School of Nursing Registrar's Office, 615-322-4718.

Nurse Practitioner

Post-master's Studies programs are planned for family nurse and gerontological nurse practitioners. For further information call the Department of Family and Community Health, 615-322-2816.

Nursing Administration

A post-master's study program is planned for nursing administration. For further information call the Department of Mental Health and Organizational Behavior, 615-322-2814.

Admission

IRECT admission to the Master of Science in Nursing (M.S.N.) program requires graduation from an N.L.N.-accredited baccalaureate program with an upper division major in nursing (B.S.N. degree). Applicants from unaccredited nursing programs will be considered on an individual basis. Admission without a B.S.N. degree requires entry via a generalist nursing "bridge" program. Qualified students without a B.S.N. degree enter the Master of Science in Nursing with Multiple Entry Options (M.S.N./M.E.O.) program.

Direct Admission to the M.S.N. Program

Admission is based on the following factors:

1. *Undergraduate Grade Point Average*. It is recommended that applicants have at least an average of B in nursing and a cumulative average of B.

2. Standardized Test Scores. Applicants are required to take either the Graduate Record Exam or the Miller Analogies Test. Tests must have

been taken within five years of the application date.

Graduate Record Examination Aptitude Test. Preferably, the applicant should have a composite score of 1000 or above for verbal and quantitative portions. Those with scores below 1000 may be asked, upon faculty request, to provide additional evidence of aptitude. Applicants are reminded to take the test early to meet application deadlines, since it is often six weeks before scores are reported. Information on the GRE may be obtained by writing Educational Testing Service, Princeton, New Jersey 08540, or by calling 1-800-241-3865.

Miller Analogies Test. It is recommended that the applicant have a score of 50 or above. Information on the Miller Analogies Test can be obtained from the Vanderbilt Psychological and Counseling Center, 300 Oxford House, 1313 21st Avenue South, Nashville, Tennessee 37212 or from the Psychological Corporation, 7500 Old Oak Boulevard, Cleveland,

Ohio 44130 (telephone 512-299-1061).

3. Official Transcripts. Applicants must submit one from each post-sec-

ondary institution attended.

4. *Ř.N. License*. Current licensure in Tennessee is required at the time of matriculation with the exception of individuals who have taken the licensing examination but have not received the results. Individuals admitted pending examination results are subject to immediate withdrawal from clinical courses, and withdrawal from the program by the end of the semester, if the examination is not passed; once the license is obtained the individual may reapply for admission.

5. Letters of Recommendation. Three letters of recommendation are required.

6. Personal Interview. An interview is required. A personal interview

is desirable, but a telephone interview can be arranged.

7. Prerequisite Course. A course in physical (health) assessment that includes laboratory experience in physical examination and history-taking skills must be completed prior to admission. Individuals who have not had formal credit for this course but who have proficiency in the area may request to demonstrate proficiency by challenge examination. The challenge examination will be scheduled by appointment. A course will be offered at Vanderbilt during selected semesters.

8. Health History. Students are required to submit documentation of a negative tuberculin skin test or chest X-ray, Rubella antibody titer, and

appropriate immunizations before beginning clinical practice.

Admission to the M.S.N./M.E.O. Program

Applicants with one of the following qualifications are eligible for the Master of Science in Nursing with Multiple Entry Options program: graduation from an N.L.N.-accredited A.D.N. or diploma program with at least 72 semester hours of transferable credit, a baccalaureate degree from an accredited college, or 72 semester hours of liberal education courses from an accredited school. Prior to admission, all applicants to the M.S.N./M.E.O. program must have completed 72 semester hours of prerequisite courses, including the following:

English. 6 hours

Humanities. 6 hours

Humanities courses are those concerned with human thought, including literature, classics, drama, fine arts, history, philosophy, and religion. Technical courses are not acceptable.

Mathematics. 3 hours. A statistics course is required.

Social Sciences. 9 hours

Social Sciences include psychology, sociology, anthropology, political science, and economics.

Natural Sciences. 11 hours

Natural Sciences *must* include courses in human anatomy and physiology and microbiology.

The remaining hours of prerequisites may consist of prior college-level nursing or elective courses, *except* physical education courses, pass/fail courses, courses with grades lower than C, courses taken at unaccredited schools, and nursing courses taken at diploma schools.

Admission to the M.S.N./M.E.O. program is based on the following

factors:

1. Undergraduate Grade Point Average. It is recommended that the applicant have at least a B average in nursing and a cumulative average of B.

2. Standardized Test Scores. Applicants are required to take either the Graduate Record Examination or the Miller Analogies Test within five years of application date. See Direct Admission to the M.S.N. Program for recommended scores and additional details.

3. Official Transcripts. Applicants must submit one from each post-sec-

ondary institution attended.

4. Letters of Recommendation. Three letters of reference must be submitted on the approved forms.

5. Personal Interview. An interview is required, preferably in person,

but a telephone interview could be arranged.

6. Writing Proficiency. Applicants will complete a writing proficiency ex-

ercise at the time of their interview.

7. Current Licensure. Registered Nurse students must be licensed to practice in Tennessee. Individuals admitted pending examination results are subject to immediate withdrawal from clinical courses, and from the program by the end of the semester, if the examination is not passed. Once the license is obtained, the individual may reapply for admission.

8. Health History. Students are required to submit documentation of a negative tuberculin skin test or chest X-ray, Rubella antibody titer, and

appropriate immunizations before beginning clinical practice.

Applicants who do not meet all the listed criteria will be considered on an individual basis.

Admission Criteria for Nursing Administration Track

Admission criteria for the Nursing Administration program are the same as the general admission criteria, with the following additional requirements:

A minimum of two years of full-time experience as a Registered Nurse in an organized nursing setting are required for regular admission into the program. An applicant with one year of full-time experience, however, may matriculate as a part-time student while maintaining a job in a clinical setting.

Application Procedure

Application forms for the M.S.N. and the M.S.N./M.E.O. programs may be secured from the Registrar of the School of Nursing. A \$50 non-refundable fee is required when the application is submitted. Applications for the fall semester should be received by 15 February and for the spring semester by 15 October. Applications received after the published deadlines will be accepted provided space is available. Admission decisions are made as soon as all application materials are received. Applications are considered current for one year; applicants who do not enroll during that time must reapply for admission.

At the time of registration, the student must present evidence of the following:

1. Current Tennessee licensure as a Registered Nurse.

2. Personal liability insurance coverage.

- 3. Negative results of either tuberculin skin test or chest X-ray taken within one year of matriculation.
 - 4. Rubella antibody titre.5. Current CPR certification.

Full-time and part-time study is possible. Students may be admitted for any term during the year. Full-time students in the M.S.N. program carry at least 9 credit hours per term. Full-time students in the M.S.N./M.E.O. program carry at least 12 hours per term. Students desiring to take courses in the program without working toward a degree may enroll as special students for up to 7 credit hours.

Transfer Credit

Students admitted to the M.S.N./M.E.O. program can receive transfer credit for N231, Introduction to Nutrition, and for N236, Principles of Growth and Development throughout the Life-Span, if the course presented for transfer covers equivalent content and the grade earned was at least a C. Registered Nurse students receive credit for N200, Basic Nursing Skills, based on transfer credit from their associate degree or diploma nursing program. If transfer credit is granted for N200, N231, or N236, the hours count toward the 49 hours of generalist nursing or "bridge" component and cannot be counted toward the 72 hours of prerequisites required for admission.

Transfer credit is considered for post-baccalaureate courses taken elsewhere within five years of admission, upon request on the application form. If approved by the Academic Director before registration, 6 semester hours may be transferred. No credit is awarded toward the degree for courses designated as prerequisite for admission.

Credit by Examination

Registered Nurse students in the M.S.N./M.E.O. program are required to take at least 14 hours of the generalist nursing component and all 39 hours of the specialist nursing component in residence. They may, however, earn credit by examination for up to 32 hours of the generalist nursing component. Credit by examination may be obtained for the following generalist nursing courses: 202, 220, 230, 231, ,236, 237, 240, 250, 260, and 270. In addition, students may satisfy the prerequisite in Human Anatomy and Physiology by obtaining credit by examination for 160 ab.

Credit by Examination tests vary according to the course being challenged. The 2- or 3-credit-hour didactic courses (202, 231, 236, 237, and

270) involve successful completion of objective tests. The 4-credit-hour clinical courses (220, 230, 240, 250, 260, and 270) involve objective testing and demonstration of clinical competency in the content area. Tests are either midterm or final course examinations or standardized tests such as N.L.N.

Study packets that include a course syllabus and bibliography are available to students accepted in the M.S.N./M.E.O. program. Packets may be obtained from the Registrar's Office, 103 Godchaux Hall, Vanderbilt University, Nashville, Tennessee 37240.

Part-time students (taking fewer than 12 hours) who are being charged by the credit hour will be charged one-half tuition for each course for which they receive credit by examination. In addition, a \$50 administration fee will be charged for a 2- or 3-hour course and a \$150 fee for a 4-hour course.

Full-time students will be charged the regular rate of tuition and will

not be charged an administration fee for credit by examination.

Student who make a *D* or *F* grade in an attempt to earn credit by examination must take the course. When the course is successfully completed, the *D* or *F* grade will be designated an *RC* (repeat course) and will not count in hours earned or in the grade point average. Schedules for the credit by examination tests are posted one semester in advance. Students register then for the courses they intend to take the following semester. Administration fees will be refunded upon cancellation up to two weeks prior to the test.

Students entering the graduate program with a B.S.N. degree may earn up to 6 hours of credit by examination in the research courses and/

or Nursing 306, Advanced Physiology.

International Students

Vanderbilt has a large international community representing almost ninety countries. The University welcomes the diversity that international students bring to the campus, and encourages academic and social interaction at all levels.

Admissions. Students from other countries are required to complete all the normal admission requirements of the University. Applicants whose native language is not English must present the results of the Test of English as a Foreign Language (TOEFL) with their application. The minimum suggested TOEFL score for admission to the School of Nursing is 550. Students who score below 550 may be required to enroll in an intensive English language program prior to beginning work on their degree. Vanderbilt offers such a program. It is recommended, though not required, that students who have demonstrated competence while attending an American institution should take the TOEFL to enhance the possibility of admission. Inquiries and requests for application forms should be addressed to TOEFL, Box 899, Princeton, New Jersey 08541-0008, USA.

Entering students whose proficiency in English is low should consider enrolling in an intensive English language program before beginning academic studies. In some cases the course may be required. Vanderbilt

offers such a program.

Before Vanderbilt can document visa status, applicants who have been offered admission must demonstrate that they have sufficient financial resources to meet the expected cost of their entire educational program. Vanderbilt has no special funds allocated for aid to foreign students. Foreign students should not expect to meet the cost of their education by working while enrolled at Vanderbilt.

A booklet with detailed information for foreign students is available on request from the Office of International Services, P.O. Box 507, Peabody

College, Nashville, Tennessee 37203.

Prior to admission, foreign student applicants must have taken two examinations, which are 1) Commission on Graduates of Foreign Nursing Schools and 2) Tennessee licensing exam. Information on the Commission on Graduates of Foreign Nursing Schools exams may be obtained by writing 3624 Market Street, Philadelphia, Pennsylvania 19104 or by calling (215) 349-8767. The Commission on Graduates of Foreign Nursing Schools exam is given in April and October in thirty-five different countries and five U.S. cities, not including Nashville. Information on the Tennessee licensing exam may be obtained from the Tennessee Board of Nursing, 283 Plus Park Boulevard, Nashville, Tennessee 37219-5407.

Graduate Student Classification

The following classifications apply to bridge and graduate students: Regular Student. Enrolled full time or part time in the School of Nurs-

ing, having met admission requirements.

A full-time student in the M.S.N. program normally will enroll for 9 to 15 credit hours of study a semester. Full-time students in the generalist nursing component of the M.S.N./M.E.O. program enroll for 12 to 18 credit hours. Part-time students in the M.S.N. program carry fewer than 9 credit hours per semester; part-time students in the M.S.N./M.E.O. program carry fewer than 12 hours per semester.

Students entering the M.S.N. program with a B.S.N. degree must complete all degree requirements within six years of first enrollment. Students in the M.S.N./M.E.O. program must complete all degree re-

quirements within eight years of first enrollment.

Special Student. Enrolled in one or more bridge or graduate courses but not working toward a master's degree in the School of Nursing. A limit of 7 credit hours is permitted in this status. Successful completion of courses taken as a special student does not guarantee admission to the bridge or graduate program.

To be considered as a special student, an applicant must submit a

completed application form with transcripts. Acceptance into a course is dependent upon availability of space and facilities after full-time and part-time graduate students have been registered.

Registration as a special student requires approval by the Associate Dean for Academic Programs. Special students who desire to change to regular student status should make application for admission to a clinical major following regular procedures.





Courses of Study



Explanation of Symbols

200-level courses are generalist nursing component or "bridge" courses for the M.S.N./M.E.O. program. 300-level courses are graduate courses.

SECOND DIGIT in 300-level course number indicates:

0—general offerings: required or elective

1-required in Child-Adolescent Clinical Nurse Specialist track

2—required in Gerontological Nurse Practitioner track 3—required in Perinatal Clinical Nurse Specialist track

4—required in Adult Health Clinical Nurse Specialist track

5—required in Psychiatric-Mental Health Clinical Nurse Specialist track 6—required in Family Nurse Practitioner track

7—advanced general offerings: required or elective

8—required in Nursing Administration track

The University reserves the right to change the arrangement or content of courses, the texts and other materials used, or to cancel any course on the basis of insufficient enrollment or for any other reason.

Master of Science in Nursing With Multiple Entry Options

Curriculum

The M.S.N./M.E.O. Program consists of three components: 72 semester hours of general education courses, 49 hours of generalist nursing courses, and 39 hours of graduate nursing courses. All applicants must have completed the 72 hours of general education courses prior to entering the program. See Admission to the M.S.N./M.E.O. Program.

The generalist nursing component consists of 49 hours of undergraduate level nursing courses. Registered Nurse students must take 14 hours in residence; they may, however, earn credit by examination for up to 32 hours. The generalist nursing component can be completed in three semesters (one calendar year) of full-time study. A sample curriculum plan for this component follows:

First Seme	ster	Hours
200	★ Nursing Skills	3
202	*Responses to Alterations in Health	2
210		4
220	₹ Adult Health I	4
231	>* Nutrition	2
236	>* Principles of Growth and Development	3 18
Second Ser	mester	
204	▶ Dimensions of Professional Nursing	2
230		4
237	*Drug Therapy	2
240	₹ Pediatric Nursing	4
250	* Psychiatric and Mental Health Nursing	4 16
Third Sem	iester	
254	▶ Law, Ethics, and Politics	3
260	*Community Health	4
270	* Adult Health II (didactic only)	3
280	∑ Nursing Practicum	2
286	► Nursing Leadership and Management	3 15

- * RNs receive automatic credit
- > Transfer credit accepted
- * RNs can obtain credit by examination
- ▶ Required course
- Z Course taught in a 7-week module

After successful completion of the generalist nursing component, students will enter directly into the specialty master's component. The specialty master's component can be completed in three semesters (one calendar year) of full-time study. This component of the M.S.N./ M.E.O. program follows the same curriculum plan as the direct entry M.S.N. program—39 hours of credit including foundation, clinical specialty, and research courses. Please refer to the Graduate Curriculum for the sample curriculum plan in the various specialties.

Graduate Curriculum 1987/88

308 374	Foundation Courses Nursing Theory Issues and Strategies in Nursing	3 3 6
375 376	Research Courses Research Methods I Research Methods II Thesis or non-thesis option	3 3 3 9
	Specialty Courses	9
	Child-Adolescent Clinical Nurse Specialist	
*304 *305 306 *311 *312 *313 *314	Child and Adolescent Developmental and Physical Assessment Theoretical Foundations of Family Counseling and Parent Education Advanced Physiology Theoretical Foundations of Child and Adolescent Nursing I Theoretical Foundations of Child and Adolescent Nursing II Practicum in Child and Adolescent Nursing I Practicum in Child and Adolescent Nursing II	2 3 3 2 4 3 1
	Elective	3 24
Required co	urse for Post-Master's Studies	
	Gerontological Nurse Practitioner	
306		
*307 *320 *361 *321 *322 *323 *324	Advanced Physiology Clinical Pharmacology for Primary Care Theoretical Foundations in Health Care Management of the Aged Theoretical Foundations in Adult Primary Care Nursing Psychosocial Aspects of Aging Practicum in Aged Health Care I Practicum in Aged Health Care II Preceptorship	3 2 3 3 3 3 4 24
*307 *320 *361 *321 *322 *323	Clinical Pharmacology for Primary Care Theoretical Foundations in Health Care Management of the Aged Theoretical Foundations in Adult Primary Care Nursing Psychosocial Aspects of Aging Practicum in Aged Health Care I Practicum in Aged Health Care II	2 3 3 3 3 4
*307 *320 *361 *321 *322 *323	Clinical Pharmacology for Primary Care Theoretical Foundations in Health Care Management of the Aged Theoretical Foundations in Adult Primary Care Nursing Psychosocial Aspects of Aging Practicum in Aged Health Care I Practicum in Aged Health Care II Preceptorship	2 3 3 3 3 4

*332b *333 *334	Theoretical Foundations of Perinatal Nursing II (Neonatal) Practicum in Perinatal Nursing II Preceptorship in Perinatal Nursing	3 4 4 24
	Adult Health Clinical Nurse Specialist (Oncology or Acute/Critical Care)	
306 *340 *341 *342 *343	Advanced Physiology Theoretical Foundations of Adult Health Nursing Psychosocial Foundations of Adult Health Nursing Practicum in Adult Health Nursing I Practicum in Adult Health Nursing II Students select either the Oncology or Acute/Critical Care Specialty	3 4 2 3 3
*344a *344b	Theoretical Foundations of Oncology Nursing I Theoretical Foundations of Oncology Nursing II OR	3
*345a *345b	Theoretical Foundations of Acute/Critical Care Nursing I Theoretical Foundations of Acute/Critical Care Nursing II Elective	3 3 3 24
*Required cou	urse for Post-Master's Studies (pending faculty approval)	24
	Psychiatric-Mental Health Clinical Nurse Specialist	
*350	Theoretical Foundations of Advanced Psychiatric–Mental Health Nursing I	2
*351 352	Advanced Psychiatric–Mental Health Nursing Practicum I Neurophysiological Foundations of Advanced Psychiatric–Mental Health Nursing	2
*353a	Theoretical Foundations of Subspecialty Practice I:	2
*353b	Adult Psychiatric-Mental Health Nursing OR Theoretical Foundations of Color in the Position of	2
*3530	Theoretical Foundations of Subspecialty Practice I: Child and Adolescent Psychiatric—Mental Health Nursing Theoretical Foundations of Advanced Psychiatric—Mental Health	2
*355a	Nursing II Theoretical Foundations of Subspecialty Practice II:	2
*355b	Adult Psychiatric-Mental Health Nursing OR Theoretical Equipolations of Subspecialty Psychiatria.	2
*356 *357	Theoretical Foundations of Subspecialty Practice II: Child and Adolescent Psychiatric—Mental Health Nursing Advanced Psychiatric—Mental Health Nursing Practicum II Theoretical Foundations of Advanced Psychiatric Mental Health	2 3
*358	Theoretical Foundations of Advanced Psychiatric–Mental Health Nursing III Advanced Psychiatric–Mental Health Nursing Practicum III	3
	Elective	3 24

^{*}Required course for Post-Master's Studies (pending faculty approval)

3

3

24

		Family Nurse Practitioner	
*	304 305 306 307	Child and Adolescent Developmental and Physical Assessment Theoretical Foundations of Family Counseling and Parent Education Advanced Physiology Clinical Pharmacology for Primary Care	2 3 3 2
*	360	Theoretical Foundations of Child and Adolescent Primary Care Nursing	2
*	361	Theoretical Foundations of Adult Primary Care Nursing	3
*	362	Practicum in Primary Health Care of the Child and Adolescent	2
*	363	Practicum in Primary Health Care of the Adult	3
*	364	Preceptorship	4 24
		Nursing Administration*	
nun	dation	i Courses	
*	<380	Theoretical Foundations of Nursing Administration I	3
*	<381	Theoretical Foundations of Nursing Administration II	3
*	<385	Health Care Financial Management I	2
*	<386	Health Care Financial Management II	2
*	<387	Health Law and Policy	2

*Required course for Post-Master's Studies (pending faculty approval)

Students Select a Course in each Content Area

Health Care Analysis

*389

Generalist Nursing Component

Organizational Culture or other course option (taken at Peabody)

*Personnel Management/Labor Relations (taken at Peabody or Owen)

*Organizational Theory and Behavior (taken at Peabody)

- 200. Basic Nursing Skills. An opportunity to learn and practice nursing techniques in a simulated patient care area. Students should acquire the manual ability and theoretical knowledge to perform common nursing skills safely and accurately, and comfortably for the patient. Printed material, multimedia resources, lectures, and supervised and independent practice are provided. Prerequisite: Human Anatomy and Physiology. FALL. [3] Ms. Bess and Staff.
- **202.** Responses to Alterations in Health. A focus on common psychosocial and physiological responses to alterations in health and nursing interventions to assist the patient and/or family experiencing responses to health changes. FALL. [2] Ms. Richie and Ms. Hay.
- **204. Dimensions of Professional Nursing.** A focus on the evolution of nursing as a health care profession and discipline. SPRING. [2] *Ms. Donaldson.*
- 210. Health Assessment and Nursing Process. A seven-week module, prerequisite to clinical nursing courses, focusing on the nursing process, health assessment, interpersonal

relationships, therapeutic communication, and patient teaching, with laboratory experiences for application of content areas and practice of basic skills. FALL, SPRING. [4] Ms. Sawyer.

- **220.** Health Promotion of the Adult I. A seven-week module focusing on the nurse's role in health promotion of adult patients with common major health problems. Co-requisite or prerequisite: 200. Prerequisite: 210. FALL, SPRING. [4] *Ms. Grimes*.
- **230.** Health Promotion during the Childbearing Experience. A seven-week module focusing on the nurse's role in health promotion during the childbearing experience. Corequisite or prerequisite: 200. Prerequisite: 210. FALL, SPRING. [4] Ms. Macey.
- 231. Introduction to Nutritional Health. Introduces the student to the role of nutrition in health and illness across the life span. FALL. [2] Ms. Adair.
- **236.** Principles of Growth and Development throughout the Life Span. A didactic course focusing on principles of growth and development, beginning with conception and ending with death. Emphasis is on normal states of cognitive, psychological, social, and biological development. The individual will be studied as a member of a larger social unit such as a family or community. This knowledge serves as a foundation for the practice of health care providers. Health issues related to particular age stages will be identified. FALL. [3] *Ms. Burbach.*
- **237. Drug Therapy.** An introduction to pharmacological knowledge, providing a basis for understanding the therapeutic use of drugs in health care. Presents the major drug classifications, with prototypes from each group, to provide a framework for continued study and integration of new drug information. Includes the role of the nurse in drug therapy. Emphasis on drugs frequently encountered in the practice of nursing. SPRING. [2] *Ms. Grimes and Ms. Sastry.*
- **240.** Health Promotion of the Child. A seven-week module focusing on the nurse's role in promoting the health of children with common health problems through adolescence. The student will develop the ability to practice health promotion of the child and family, utilizing the nursing process. Co-requisite or prerequisite: 200. Prerequisite: 210. FALL, SPRING. [4] *Ms. Carson.*
- **250. Psychiatric and Mental Health Nursing.** Focuses on psychiatric and mental health needs of clients and families across the life span. Includes deriving individual, family, and milieu-oriented interventions from selected theoretical frameworks. Clinical experiences provide a variety of psychiatric and mental health care experiences in acute and community mental health settings. Growth of the nursing student as an individual and as a professional is emphasized through a group process component. FALL, SPRING. [4] *Ms. Bigler and Staff.*
- **254.** Law, Ethics, and Politics in Nursing. Introduces legal, ethical, and political issues in nursing and the health care system. FALL, SPRING, SUMMER. [3] Ms. Laben.
- **260. Community Health Nursing.** An introduction to the scope and practice of community health nursing. Emphasis on community health nursing as an integral part of organized efforts to promote and maintain the health of individuals and families. Focus is on family health care or aggregates in the community, with field experience in a community health agency, home health care agency, and various other health care agencies. FALL, SPRING, SUMMER. [4] *Ms. Dennis.*
- **270.** Health Promotion of the Adult II. A seven-week module that focuses on the nurse's role in health improvement and maintenance of adult patients with complex health problems. FALL, SPRING, SUMMER. [3] *Ms. Grimes*.
- **280. Nursing Practicum.** A seven-week module designed to provide experience in the practice of nursing. Focus is on providing holistic health care in selected areas. Beginning leadership skills emphasized. Offered on a pass/fail basis only. FALL, SPRING, SUMMER. [2] *Ms. Peerman.*

286. Introduction to Nursing Leadership and Management. Designed to provide student with a conceptual understanding of leadership and management processes. Students apply didactic content related to leadership styles and administrative challenges through a group process component. The course also discusses evaluative and controlling functions of nurse managers such as conflict resolution and the utilization of computer systems. FALL, SPRING, SUMMER. [3] *Ms. Sinclair.*

Graduate Nursing Courses

- **301. Curriculum Development in Nursing.** An exploration of the major influences on curriculum formation, the inherent issues and trends, and the process of curriculum development. [3]
- **302.** Instructional Design. The systematic matching of learning strategies and learning assessment tools with objectives to plan a course of study. [3]
- **303.** Nurse Faculty Role in Higher Education. Seminar focusing on the higher education system and its impact on nurse faculty relative to administration, faculty governance, promotion and tenure, feminism, politics, legal matters, finance, and policy making. [3]
- **304. Child and Adolescent Development and Physical Assessment.** Didactic and clinical course that focuses on the principles of growth and development of infants and children through adolescence. Skills of developmental and physical assessment are acquired in the course. Prerequisite: Physical Assessment (Adult) course. [2]
- **305. Theoretical Foundations of Family Counseling and Parent Education.** A focus on the theoretical basis for promoting health and well-being in the family and among its members. Theories of family development are considered along with theoretical concepts from family dynamics. Family systems assessment, interactional patterns, parent education, and intervention with families are major areas of study. [3]
- **306.** Advanced Physiology. Normal physiological processes explored in depth. Prerequisite: basic knowledge of anatomy, physiology, chemistry, and biochemistry. [3]
- **307. Clinical Pharmacology for Primary Care.** The pharmacologic effects and clinical uses of specified drug groups as related to primary health care. Pharmacological mechanisms in association with drug interactions, incompatibilities, side effects, contraindications, and patient education discussed as a basis for clinical judgments in the nursing management of individual clients. Meets the State Board of Nursing requirements for pharmacology for nurse practitioners whose work requires them to generate prescriptions. [2]
- **308. Nursing Theory.** An overview and rationale for theory analysis and use in systematic practice. An introduction to professional nursing practice, including the multiple roles of clinical specialists, practitioners, and administrators. Also discussed are: the historical evolution of theories in nursing; conceptual models in nursing; and a comparison of models, approaches to theory analysis, and problems in the application of theory. [3]
- 311. Theoretical Foundations of Child and Adolescent Nursing I. A focus on the theoretical basis for child development, emphasizing the development of the child as an individual within the context of family and society. Considers factors and techniques that facilitate or interfere with healthy development, as well as issues in developmental assessment and consultation. Students will develop competence in developmental screening and in promoting positive child development through child and parent education and counseling. Prerequisite or co-requisite: 308, 309. [2]

- **312. Theoretical Foundations of Child and Adolescent Nursing II.** A focus on the nursing care of ill children. Includes embryonic development, developmental physiology, and pathology, as well as nursing interventions for children of all ages. Emotional components of care will be considered for children and their families, building upon knowledge developed in 311. An in-depth study of a content area of the student's choice will be required. Prerequisite: 305, 306, 311. [4]
- **313. Practicum in Child and Adolescent Nursing.** Emphasis on development of the clinical specialist roles of practitioner, teacher, and collaborator in providing care. Students define individual interests and write individual objectives for their clinical experiences, write short papers on selected nursing problems, and apply nursing theory to patient care. Prerequisite: 305, 306, 311. Prerequisite or co-requisite: 312. [3]
- **314. Practicum in Child and Adolescent Nursing.** Building upon previous course work, students add the clinical specialist roles of manager, researcher, and change agent in a setting of their choice. Prerequisite or co-requisite: 313. [3]
- **320. Theoretical Foundations in Health Care Management of the Aged.** Focuses on the acquisition of knowledge and skills necessary for primary health care management of elderly persons. Emphasis is on recognition of the abnormal as opposed to what is considered the normal aging process. Major disease conditions affecting the aged and their management are covered. Students learn illness prevention, health maintenance measures, and treatment regimens to meet the needs of the elderly. Identification and interpretation of common dianostic and laboratory tests are included. A clinical component takes place in a community setting. Prerequisite or corequisite: 306. [3]
- **321. Psychosocial Aspects of Aging.** Psychosocial theories of aging are compared and contrasted. Attitudes toward aging and the aged and factors affecting life satisfaction are explored. Changes in personality, intellectual function, and perception from middle age to old age are discussed with emphasis on comparison of normal and abnormal. Particular attention is paid to the interrelatedness of the self, family, and community, and the multi-disciplinary organization and delivery of health services and practices. Problems of transportation, housing, finance, and medical care are identified and specific strategies for need attainment are discussed. Legislation and economic and social trends affecting the aged are included. [3]
- **322. Practicum in Aged Health Care I.** Designed to enable students to utilize and build upon the principles of primary care. Focuses on health care of the older adult with emphasis on early detection of problems, preventive and restorative care, and management of common acute and chronic health problems. Students will be assigned to selected clients in health care facilities. Prerequisite: 306, 320, 321, 363 (may be taken concurrently). [3]
- **323.** Practicum in Aged Health Care II. Clinical experience in a primary health care setting. Students strengthen and apply the knowledge and skills necessary for health assessment and health care management of older adults. Explores the organization and delivery of health care and social services in the community. Prerequisite: 306, 320, 321, 322, 363. [3]
- **324. Gerontological Nursing Preceptorship.** A culminating clinical experience in a primary health care setting with a preceptor. Students and faculty cooperatively select clients, facilities, and preceptors. Students function with increasing independence, utilizing health care and social services in the community, and are expected to apply theory, demonstrate leadership and management skills, and focus on their role as change agent to improve quality of care to the aged. [4]
- **330. Theoretical Foundations of Perinatal Nursing I.** The physiologic, psychologic, and sociologic basis of perinatal nursing, emphasizing the adaptations of the normal pregnancy and the newborn. Attention paid to providing high quality prenatal care, including physiologic assessment as well as counseling and education to assist the family in addapting to parenthood. [3]

- **331. Practicum in Perinatal Nursing I.** Clinical experience used to survey the various clinical sites available to the student and to begin the application of theoretical knowledge in the clinical setting. [1]
- **332a.** Theoretical Foundations of Perinatal Nursing II (Maternal/Fetal). The pathophysiologic and psychosocial basis for nursing identification, assessment, and intervention with high-risk mothers. The collaborative role of the nurse working with high-risk patients is emphasized. High-risk situations during conception, prenatal, intrapartal, and postpartal periods are covered in detail, using the most current information. Prerequisite: 306, 330. [4]
- **332b. Theoretical Foundations of Perinatal Nursing II (Neonatal).** The pathophysiologic and psychosocial basis for nursing identification, assessment, and intervention with highrisk infants. The collaborative role of the nurse in the neonatal intensive care unit and the transport settings are stressed. Principles of neonatal care, including counseling, education, and technological skills are emphasized. Prerequisite: 306, 330. [4]
- **333.** Practicum in Perinatal Nursing II. The nursing process used to apply pathophysiologic and psychosocial concepts to the care of high-risk mothers and/or infants. Students select a maternal and/or neonatal focus. Components of the clinical nurse specialist role are discussed and implemented in the clinical setting. Prerequisite: 306, 330, 331. Prerequisite or co-requisite: 332a, 332b. [3]
- **334. Preceptorship in Perinatal Nursing.** Clinical laboratory under direction of clinical mentor. Implementation of the clinical specialist role, oriented toward meeting the expressed needs of individual students. Students select a maternal and/or neonatal focus. Prerequisite: 306,330, 331, 332a or 332b. Prerequisite or co-requisite: 333 [4]
- **340. Theoretical Foundations of Adult Health.** Explores the nursing process, nursing diagnoses, and pathophysiology of health changes related to vital organ systems. Students employ the nursing process in the clinical area with patients experiencing complex alterations in health. Prerequisite or co-requisite: 306. [4]
- **341. Psychosocial Foundations of Adult Health.** Concepts from anthropology, psychology, sociology, and nursing related to care of adult patients with complex health changes are examined in depth. Prerequisite: 340 preferred but not mandatory. [2]
- **342.** Adult Health Practicum I. Clinical practice and conferences with emphasis on practice within a selected conceptual nursing framework in a selected area of concentration. Development of the roles of the clinical nurse specialist. Prerequisite: 308, 340. co-requisite: 344a or 345a. [3]
- **343.** Adult Health Practicum II. Clinical practice and conferences enabling each student to implement the roles of the clinical nurse specialist at an advanced level in a selected area of concentration. Prerequisite: 308, 340, 341, 344a or 345a. co-requisite: 344b or 345b. [3]
- **344a. Theoretical Foundations of Oncology Nursing I.** Focuses on advanced content related to nursing care of adult patients experiencing cancer and its related problems. Prerequisite: 306, 308, 340. Co-requisite: 342. [3]
- **344b. Theoretical Foundations of Oncology Nuring II.** Continuation of 344a, Theoretical Foundations of Oncology Nursing I. Prerequisite: 306, 308, 340, 342, 344a. co-requisite: 343. [3]
- **345a. Theoretical Foundations of Acute/Critical Care Nursing I.** Focuses on advanced content related to nursing care of adult patients experiencing acute/critical alterations in health. Prerequisite: 306, 308, 340. co-requisite: 342. [3]
- **345b. Theoretical Foundations of Acute/Critical Care Nursing II.** Continuation of 345a, Theoretical Foundations of Acute/Critical Care Nursing I. Prerequisite: 306, 308, 340, 342, 345a. co-requisite: 343 [3]

- **350. Theoretical Foundations of Advanced Psychiatric–Mental Health Nursing I.** Course focuses on the mastery of concepts from various theoretical perspectives, e.g., psychology, sociology, anthropology, and nursing, that form the foundation for assessment of clients and are integral to the practice of advanced psychiatric–mental health nursing. Emphasis is on the integration of selected concepts into a nursing theoretical or conceptual perspective. Lectures and small group discussions are led by clinical specialist faculty. Prerequisite or corequisite: 352. [2]
- **351.** Advanced Psychiatric—Mental Health Practicum I. Course provides faculty-supervised clinical experiences with selected individuals and families in outpatient settings. The student assesses, plans, implements, and evaluates sessions with a case-load of clients, with particular emphasis on the initial and working phases of the relationship. Analysis of process dynamics and nursing interventions takes place under supervision. The course provides students with the opportunity to use the concepts of N350 in clinical practice. The student will collaborate with other members of the mental health team. Prerequisite: 350 and 352. [2]
- **352.** Neurophysiological Foundations of Advanced Psychiatric–Mental Health Nursing. Course presents the theoretical basis for the biologic aspects of advanced practice in psychiatric–mental health nursing. Concepts from neurophysiology and neuropsychology are examined for their applications to practice. Proficiency in conducting and recording the neurological exam is achieved. Lectures, discussion, and laboratory practice are led by faculty and expert practitioners in various areas. [2]
- **353a.** Theoretical Foundations of Subspecialty Practice I: Adult Psychiatric–Mental Health Nursing. Provides the theoretical content for diagnosing, assessing, and intervening in functional and dysfunctional patterns of adults and their families. Case material is provided for use in applying theory, practicing assessment skills, projecting interventions, and evaluating outcomes. Seminar discussions are led by faculty and/or students. Prerequisite or corequisite: 350 and 352. [2]
- **353b.** Theoretical Foundations of Subspecialty Practice I: Child and Adolescent Psychiatric–Mental Health Nursing. Provides the theoretical content for diagnosing, assessing, and intervening in functional and dysfunctional patterns of children, adolescents, and their families. Case material is provided for use in applying theory, practicing assessment skills, projecting interventions and evaluating outcomes. Seminar discussions are led by faculty and/or students. Prerequisite or corequisite: 350 and 352. [2]
- **354.** Theoretical Foundations of Psychiatric–Mental Health Nursing II. Course focuses on the mastery of concepts from group, family, consultation, management, and nursing theories that are the foundation of clinical specialist practice roles. Increasing attention is given to the indirect practice roles of consultation and management and the direct practice roles of group and family psychotherapy. Emphasis is on the integration of related theories into CNS practice and a nursing conceptual framework. Prerequisite or corequisite: 350 and 352. [2]
- **355a.** Theoretical Foundations of Subspecialty Practice II: Adult Psychiatric–Mental Health Nursing. Provides the student with a theoretical overview of various group approaches in current use by investigating their philosophical and theoretical origins, their methods and techniques, and examples of their application to advanced nursing practice. Prerequisite or corequisite: 354. [2]
- **355b.** Theoretical Foundations of Subspecialty Practice II: Child and Adolescent Psychiatric–Mental Health Nursing. Provides the student with a theoretical overview of various group approaches to intervention and prevention with parents and childrenUNadolescents. Students explore a variety of group approaches in current use by investigating their philosophical and theoretical origins, their methods and techniques, and examples of their application to advanced nursing practice. Prerequisite or corequisite: 354. [2]

- **356.** Advanced Psychiatric-Mental Health Nursing Practicum II. Course builds on the first advanced practicum course by extending the student's ability to identify and apply concepts, theories, and principles to larger and more complex groups. In addition, the student gains skill in implementing planned intervention with individuals, families, and groups so that patterns in self and others are identified accurately and with regularity. Caseload management skills are further developed. Prerequisite or corequisite: 354 and 355a or 355b. [3]
- **357. Theoretical Foundations of Advanced Psychiatric—Mental Health Nursing III.** Focuses on the societal, legal, and systems factors that influence Clinical Nurse Specialist practice and the delivery of mental health services to subspecialty populations. Increased emphasis is placed on current practice issues in the subspecialty populations. Increased emphasis is placed on current practice issues in the subspecialty, including legal and ethical issues and the utilization of standards for the evaluation of practice. Prerequisite or corequisite: 354 and 356. [3]
- **358. Advanced Psychiatric—Mental Health Practicum III.** Provides the student with the opportunity to synthesize theory and Clinical Nurse Specialist practice roles in a selected setting. Increasing emphasis is placed on the critical analysis of clinical problems and needs of specialty populations. Prerequisite or corequisite: 357. [3]
- **360. Theoretical Foundations of Child and Adolescent Primary Care Nursing.** A didactic course including the principles of primary health care and focusing on wellness, patient education, and management of common acute and chronic health problems of children and adolescents. The role of the nurse as primary health care provider is emphasized. [2]
- **361. Theoretical Foundations of Adult Primary Care Nursing.** A didactic course including the principles of primary health care, focusing on wellness, patient education, and management of common and chronic health problems of adults. The role of the nurse as primary health care provider is emphasized. [3]
- **362. Practicum in Primary Health Care of the Child and Adolescent.** Focuses on the physical and psychosocial aspects of health from infancy through adolescence, with emphasis on wellness, management of common health problems, and health education. In the clinical setting, the student applies knowledge acquired in prerequisite courses to assessment of the health status of the child or adolescent and formulation of a plan of care. Clinical conferences explore patient health problems to enhance decision-making ability. Prerequisite: 304, 306, 360. [2]
- **363. Practicum in Primary Health Care of the Adult.** Focuses on the physical, psychological, and sociocultural aspects of adult health, with emphasis on wellness, health education, and early detection and management of common health problems of adults. In the clinical setting, the student may apply knowledge acquired in prerequisite courses to assessment of the health status of the adult patient and formulation of a plan of care. Clinical conferences explore patient health problems to enhance decision-making ability. Prerequisite: 306, 361. [3]
- **364.** Preceptorship in Primary Health Care. Focuses on maintaining wellness in the individual and/or family and on formulation of a comprehensive plan of intervention when illness is experienced. Students select a clinical area of interest or specific patient population in this culminating clinical experience. [4]
- **370. Independent Study, Non-clinical.** Content varies according to individual needs and interest. A contract is made between the student and the faculty sponsor, with copies for the student, the sponsor, the department chairman, and the student's record. [Variable credit: 1–6 each semester]
- **371. Independent Study, Clinical.** A program of independent study in a selected area of nursing practice under direction of a faculty sponsor. A contract is made between the student and the faculty sponsor, with copies for the student, the sponsor, the department chairman, and the student's record. [Variable credit: 1–6 each semester]

- **372. Independent Study, Research.** A program of independent study in a selected area of nursing research under direction of a faculty sponsor. A contract is made between the student and the faculty sponsor, with copies for the student, the sponsor, the department chairman, and the student's record. [Variable credit: 1–6 each semester]
- **374. Issues and Strategies in Nursing.** Explores social, political, and economic forces affecting the professional practice of nursing. Analyzes and synthesizes strategies and tactics for problem solving and making changes in clinical practice as well as in health care institutions, health education, and government. [3]
- **375. Research Methods I.** Use of scientific knowledge and methods to analyze and reformulate nursing practice problems. Emphasis on generating and testing research questions or hypotheses. Concepts of probability, sampling, measurement, and computer skills for data analysis will be applied to nursing research (lecture/laboratory). [3]
- **376. Research Methods II.** Use of scientific knowledge and methods to analyze and reformulate nursing practice problems, with emphasis on concepts of design, conceptual framework, review of literature, and reporting findings. Elements of research critique are sought to promote research utilization (lecture–laboratory). [3]
- **377. Master's Project.** Topic must be related to student's specialty track. Prerequisite: 375. [Variable credit: 1–3]
- 378. Clinical Paper. Not open to students admitted after Fall 1985. Prerequisite: 309. [1]
- 379. Thesis. Topic must be related to student's specialty track. Prerequisite: 375. [3]
- **380. Theoretical Foundations of Nursing Administration I.** An introductory seminar designed to synthesize advanced concepts of organizational theories and management models for effective performance and productivity within a health care system. Role preparation of the nurse administrator will be studied, with emphasis on a systems approach to leadership styles, interpersonal skills, ethical decision-making processes, strategies, and group process within a health care setting. Also includes application of management information systems concepts to select health care projects. [3]
- **381. Financial Management.** An introduction to basic financial and accounting concepts relating to health care management. Prepares students to apply these concepts to programming, budgeting, and controlling processes in health care organizations. Topics include the sources of capital utilized by health care organizations; the cost of capital; basic accounting concepts related to income statements, balance sheets, and budgets; and current reimbursement issues related to third party payments. The differences in public, not-for-profit, and investor-owned organizations will be highlighted. [3]
- **382. Theoretical Foundations of Nursing Administration II.** A combined seminar/practicum providing conceptual understanding of management information systems and computer application to the areas of budgeting, staffing, and patient classification systems. Also offers ethical frameworks for decision making in clinical practice, personnel management, and health care policies for the nurse manager in a variety health care settings. [3]
- **383. Health Law and Policy.** Aids the nurse administrator in delineating the area and concepts of law that affect nursing and health care delivery in various settings. A working knowledge of specific aspects of contract, tort, constitutional, administrative, and insurance law is needed to act or lead practice in the work setting and to prevent or respond appropriately to legal issues in nursing practice. The course will help the nurse administrator identify public policy and its impact on health care in organized nursing services. Public health care policy will be correlated with organizational challenges and constraints, especially at the federal and state policy level. Ethical considerations, in light of law and public policy, will be highlighted. [2]
- **384.** Practicum in Health Care Delivery Analysis. A combined seminar/practicum that analyzes and designs information and control systems in the regulation of health care deliv-

ery systems. Includes: (a) setting of nursing standards, (b) quality assurance, (c) financial management/management information concepts, (d) risk management, and (e) health care planning. Offers experiential learning activities and assignments through carefully selected research and evaluation projects in various community health care organizations. A synthesis project paper, combining scholarly and research activities, is a final requirement of the course. Experts in health care management serve as guest faculty. [4]

Related Courses

Students in the Nursing Administration Track use a menu approach to select one course in each of the following areas: Organizational Culture, Organizational Theory, and Personnel Management/Labor Relations. Courses are interdisciplinary and taken either at Peabody College or the Owen Graduate School of Management.

Organizational Culture

Peabody EDLS 359/3590. Symbolism in Organizations. This course is designed as a small advanced seminar. Its purpose is to create, adapt, and apply ideas drawn widely from across disciplinary boundaries. Readings are selected from diverse disciplines: psychology, sociology, anthropology, political science, religion, the arts, and professional literature. Lectures and class discussions will focus on symbols, myths, ritual, ceremony, metaphor, stories, fairy tails, humor, and play. Although the course is largely conceptual, the ideas have powerful practical application. [3]

Organizational Theory: Select One

Peabody EDLS 3500. Organizational Operations/Processes. Survey course in administration. Includes the organization as a social system and the organization and structure of public education. Supervision and curriculum in organization, control, authority, change, planning strategies, organizational dynamics, types of instructional programs. [3]

Peabody EDLS 3480. Human Processes and Administration. Introductory course in administration. Topics include stress, administrative change, and group process; school and community leadership; supervisory principles; communication, goal development, implementation, and evaluation; and leadership styles. [3]

Peabody EDLS 3490. Administrative Theory. Investigates major administrative theories and their impact on administration and the organization. Behavioral science theories and historical, philosophical, psychological, and sociological perspectives are applied to administrative processes. [3]

Owen Mgt. 341. Organizational Management and Human Resources. Examination of the management of work organizations—strategic adaptations to changing environments, organization structures, work and task design, dynamics of small groups, and management of individual performance. Particualr attention is paid to issues of organization design, human resource staffing and motivation, leadership, communication, and decision making, all withing the context of managing for effective performance and improved productivity. [3]

Personnel Management/Labor Relations: Select One

Peabody ESLS 3540. Personnel Administration. Primary focus on selection phenomenon. Most functions of personnel administration can be subsumed under selection, recruitment, initial hire, assignment, transfer, promotion, and dismissal. Ed. 3540 assumes that selection is the most important personnel function. [3]

Peabody EDLS 3550. Negotiations. Concepts, understandings, processes, and skills of labor relations and negotiations. The simulated experience is used primarily for building "table" skills and secondarily as a way to relate practice to theory. Appropriate for experienced or inexperienced negotiators, whether labor or management oriented. [3]

Peabody EDLS 3551. Personnel Management and Negotiations. Concepts, understandings, and behaviors related to public organizations that have, as part offheir mission, responsibility for education others. Core topics are the selection phenomenon and employer/employee relations, including negotiations and legal implications for managers and supervisors. [3]

Owen Mgt. 447. Labor Relations and Workforce Governance. Examination of issues in governance of the workforce—employment contracts, work rules, wage systems, grievance settlement—and alternative systems of governance, such as collective bargaining, works councils, worker participation, and collegial systems. Analysis of likely consequences for workforce cooperation and productivity. Prerequisite: Owen 341. [3]

Elective Opportunities

A complete list of elective courses offered by the School of Nursing can be found in the *Undergraduate Catalog*. The following 200-level nursing courses have been approved for graduate credit.

- **242.** Issues in Women's Health. Explores women's health issues across the age span. The didactic presentation includes female reproduction, gynecology, communication, and health care alternatives. Designed for individuals in all schools of the University who are interested in women's health. Limited to juniors, seniors, and graduate students. [3] *Ms. Jones.*
- **241.** Courses Offered Jointly with the School of Medicine. Schedule of courses available in the School of Nursing Registrar's Office. Prerequisite: consent of the instructor. [Variable credit]
- **244.** International Perspectives in Nursing and Health Care. A three-week course offering learning experiences in nursing education, practice, and health care delivery in a variety of foreign settings. Lectures, discussion groups, and field trips emphasize comparison and contrast of current health problems and issues. Students are responsible for all academic and personal expenses. Open to juniors, seniors, graduate students, and community nurses. MAY TERM or SUMMER. [3] *Ms. Morgan and staff.*

NOTE: The following course is offered to meet the prerequisite to the graduate program. Credit does not apply toward the M.S.N. degree.

296. Methods of Health Assessment. For RN's only. Basic principles and techniques of data collection through patient health history, developmental assessment, and physical examination. Emphasizes knowledge of physiological and pathophysiological processes related to findings. Data collection skills are developed in laboratory practice. SUMMER. [2]





Academic Regulations

HE School of Nursing operates under the honor system. All work submitted as a part of course requirements is presumed to be the product of the student submitting it unless credit is given in the manner prescribed by the course instructor. Cheating, plagiarizing, or otherwise falsifying results of study are prohibited. The student, by registration, acknowledges the authority of the Nursing School Honor Council.

Students are expected to familiarize themselves with the *Student Handbook*, available at registration, which provides information about University services, policies, and procedures, including reference to the Honor Councils of the schools of the University, the Graduate Student Conduct Council, the Appellate Review Board, and related regulations.

Graduate Nursing Honor Council

The Honor Council is an organization that seeks to preserve the integrity of the Honor Code. The membership consists of one elected representative from each clinical track. Representatives serve for one year from September through August. Officers of the council must be full-time students in good standing. One alternate from each clinical track is elected to serve in the absence of the representative.

Registration

Formal registration takes place at the beginning of each semester. Preregistration for subsequent semesters takes place at mid-semester for enrolled students. A student who reports to preregister or register off schedule is charged a \$30 late registration fee.

Out-of-town students may register by mail for required thesis credit per semester until the thesis is completed. Students are responsible for writing the School of Nursing Registrar each semester to request registration materials.

Change of Course

The first five class days of the semester are allocated for necessary changes of course. A fee of \$5 is charged for each course change during that period. After the change period, the fee is \$10.

Courses may be dropped without entry in the final record within two weeks of the first day of classes. After that time, and until two weeks before the last class, courses may be dropped only after consultation with the adviser and the course instructor. Students must withdraw from courses according to the date published in the University Calendar. If the course in question is a nursing course, the student will receive the grade of W. If the course is taken outside the School of Nursing, grade regulations of the appropriate school will apply.

Pass-Fail Courses

Graduate students are permitted to take up to 9 hours on a Pass-Fail basis. No more than 9 hours graded Pass will be accepted toward the degree. Only elective courses may be taken Pass-Fail. Grades of B or above are recorded as Pass.

Grades of Pass are not counted toward quality point averages. The grade of F applies as in any other course; although an F earns 0 hours, the hours attempted are counted in calculating the quality point average. If the student has a choice about taking a course for a grade or Pass-Fail, she or he may register on a Pass-Fail basis or may change to Pass-Fail basis within one month of the first day of classes. After this time, one may change from a Pass-Fail to a letter grade basis prior to the final two weeks of classes, but not vice-versa.

No-Credit Courses

A student taking a course on a no-credit basis is required to attend class, take examinations, and do all the work of the course. The student's grade is recorded with the notation that no credit toward graduation is received. No-credit courses do count in computation of the student's academic load and in the computation of tuition.

Audit Courses

Students may wish to audit courses in the School of Nursing for which they will receive no credit. Auditing courses requires registration and payment of tuition, and is subject to the following conditions:

1. Permission of the instructor must be obtained.

2. The instructor sets the conditions under which a course may be audited. Failure to meet those conditions is justification for withdrawal of the audit designation.

3. Audits carry no credit.

Class Attendance

At the beginning of the semester the instructor will explain the expectations regarding attendance and participation for a course and their influence on the evaluation process. Attendance will not affect the evaluation of the student unless the instructor announces otherwise at the beginning of the semester.

Academic Status

Students admitted to the M.S.N./M.E.O. program are classified as juniors until they have earned 87 semester hours, when they will be classified as seniors. To progress from the generalist nursing component to the specialist nursing component, students must meet the following criteria: (a) completion of 49 hours of the generalist component with the minimum of a C grade in each course; (b) 3.0/4.0 grade point average in the generalist component; and (c) 3.0/4.0 cumulative grade point average.

A student in the generalist nursing component of the M.S.N./M.E.O. program may repeat any course creditable toward the degree, with the following exceptions: a course taken in the School of Nursing may not be repeated outside the School for credit toward the degree, and nursing courses may be taken only twice. Courses taken for a letter grade may not be repeated on a Pass-Fail basis, nor may a grade indicating withdrawal or incomplete work be counted in place of a letter grade. Only the latest grade counts in calculation of the grade point average and progress toward a degree.

A student in the generalist nursing component may be placed on probation only once. If the student's record in another semester warrants probation, the student will be dismissed. When a student is placed on or removed from probation, letters are sent to the student and the student's

adviser.

Students in the specialist nursing component must earn a 3.0/4.0 grade point average each semester and at least a B in each course that contains a clinical component. A student in the specialist component who has not met these requirements may be placed on probation if the faculty has reason to expect successful performance in succeeding work. A student in the specialist component may be placed on probation only once.

For students entering with a B.S.N. degree, progression in the graduate program is dependent upon at least a B average each semester and at least a B in each course with a clinical component. A student who has not met these requirements may be placed on probation, one time only, upon faculty recommendation. The student receives written notice of probationary status; copies are sent to the track director and the School of Nursing Registrar.

Grading System

A =Excellent 4 quality points

B = Good 3 quality points

C = Minimum pass 2 quality points

W = Withdrew

F = The grade of F indicates failure. All F grades are counted in the computation of quality point ratio, except if the course in which the grade of F is earned is subsequently retaken with a passing grade.

Abs = The designation of Abs (absent) will be given to a student absent from the final examination who has communicated with the instructor or academic director about the absence. A grade of F will be given if the student could not have passed the course even with a passing grade on the final examination or if the instructor or academic director had not been notified. The final examination must be taken at a time designated by the instructor.

I= Students for whom an extension has been authorized by the instructor receive the grade of I (incomplete). The grade of I will stand until the work is completed at a time designated by the instructor, but no later than the day of grade reporting of the next semester. An I grade not removed by this deadline will become an F. When an I grade is authorized, an agreement for completion of work must be signed by the student and instructor. Copies of the agreement are given to the student, the instructor, and the Registrar.

Examinations

Examination policies are determined by the individual instructor. A record of all grades given during the course, and all final examinations and major papers, are kept on file by the instructor for one year following the conclusion of the course.

Grade Reports

Students are notified of mid-semester deficiencies by conference and in writing; copies of the notice are sent to the Academic Director and the Registrar of the School of Nursing.

A final grade recorded in the books of the University Registrar may be changed only upon written request of the instructor.

Program Evaluation

Students are expected to participate in program evaluation activities while they are enrolled in the program and after they have left Vanderbilt. These data will be used for research purposes only and procedures to protect individual confidentiality will be followed.

Leave of Absence

Leaves of absence are granted for one semester or one year; application forms and information are available from the office of the School of Nursing Registrar. Leaves must be approved by the Academic Director and the Associate Dean for Academic Programs. The student files a Change in Program form and exchanges the regular Identification Card for a special Leave of Absence Identification Card. At the end of the leave of absence, the student must notify the Registrar in writing of the intent to return or not return. A student failing to register at the conclusion of the stated leave period will be withdrawn from the University and must reapply for admission unless the leave is extended by the Associate Dean for Academic Programs. Those without authorized leave who do not register are dropped from the rolls and are not considered students. If they wish to resume graduate study, they must reapply for admission.

Withdrawal from the University

Students planning to withdraw from the University must report to their Academic Director to initiate proper clearance procedures.

Calendar

The calendar on page 5 is the official calendar of the School of Nursing. A detailed calendar for each semester is distributed at registration. Students are expected to be familiar with these dates and to conform to them. The Vanderbilt *Register*, issued weekly by the Office of News and Public Affairs, contains all events and announcements pertaining to the University community. It is the responsibility of the student to keep informed of any event or announcement applicable to the School of Nursing. Failure to know of an officially required event is not an excuse for non-attendance.

Transportation

Students are responsible for their own transportation to and from clinical facilities and field trips.

Uniform

The requirement for uniform varies by clinical track. The faculty designates appropriate professional dress for students in each track.

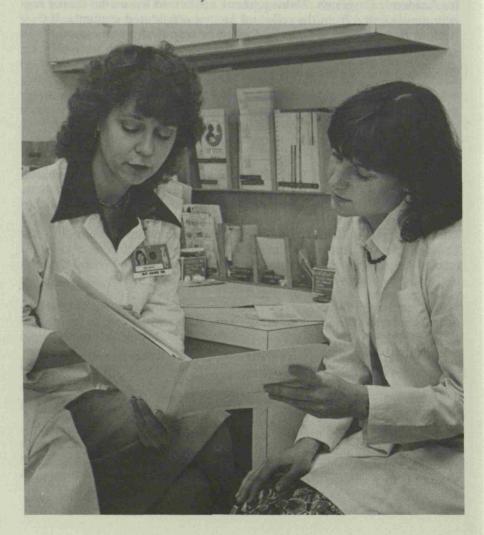
A name pin available through the School of Nursing is worn when the student is in a clinical area.

Change of Address

Students who change either their local or permanent mailing address are expected to notify the School of Nursing Registrar immediately. Candidates for degrees who are not in residence should keep the Nursing School Registrar informed of their current mailing address.

Graduation

Degree candidates must have satisfactorily completed all curriculum requirements, have passed all prescribed examinations, and be free of all indebtedness to the University.



Financial Information



Tuition and Fees

The Master of Science in Nursing degree is a three-semester program entered directly; entered through the bridge it is a six-semester program. Bridge and M.S.N. students attend fall, spring, and summer sessions. Bachelor of Science in Nursing students attend fall and spring sessions. Tuition is itemized as follows:

M.S.N. \$5,000 per semester, fall, spring, or summer session, for 12 to 18 hours. Students enrolled for fewer than 12 hours are charged \$417 per credit hour.

B.S.N. and Bridge. \$5,250 per semester, fall, spring, or summer session, for 12 to 18 hours. Students enrolled for fewer than 12 hours are charged \$438 per credit hour.

Rates for tuition and fees are set annually by the Board of Trust and are subject to review and change without further notice.

Tuition, fees, and all other University charges should be paid by registration. Students who withdraw officially or who are dismissed from the University for any reason after the beginning of a term may be entitled to a partial refund in accordance with a schedule available in the Office of Student Accounts. No refund will be made after the eighth week of classes in any semester.

Deferred Payment Programs

Deferred payment programs are available through two independent agencies, the Tuition Plan and Richard Knight New Insured Tuition Payment Plan. Pamphlets describing these plans are available on request from the Office of Accounts Receivable, the Office of Financial Aid, or the Office of Undergraduate Admissions.

Late Payment of Fees

Charges not paid by registration or when otherwise due will be automatically deferred (the Office of Accounting may refuse to allow a deferment of charges if in its judgment the deferment is unwarranted) and the student's account will be assessed a monthly late payment fee at the following rate: \$1.50 on each \$100 that remains unpaid after registration (\$5 minimum). An additional monthly late payment fee will be assessed un-

less payment is received in full on or before the 25th day of the following month; and late payment fees will continue for each month thereafter, based on the outstanding balance unpaid as of the 25th day of each month. All amounts deferred are due not later than 25 November for fall semester, 25 April for spring semester, and 25 July for May Term and summer session.

Financial Clearance

Students will not be allowed to register for any semester if they have outstanding unpaid balances for any previous semester. No transcript, official or unofficial, will be issued for a student who has an outstanding debit balance at the time the transcript is requested; transcripts will be released when the account has been paid. Degrees of graduating students will be withheld until all bills are paid.

Required Fees (1987/88)

Application	\$ 50
Matriculation for direct entry M.S.N. program	100
Matriculation for M.S.N./M.E.O. program	200
Student Activities for direct entry M.S.N. program	61
Student activities for M.S.N./M.E.O. program	229
Thesis binding (per copy)	12

Other Academic Fees (1987/88)

Hospitalization insurance, undergraduate (estimate)	\$220
Hospitalization insurance, (graduate)	294
Late registration	30
Change of course during change period	5
Change of course after change period	10
Preceptorship (per credit hour)	417

Expenses for books and supplies will vary by clinical major. Equipment, such as tape recorders and diagnostic sets needed during the program, will be required for certain majors.

Hepatitis B vaccine is available, at student expense, for students who select patients in Hepatitis B high-risk settings for their clinical experience.

Activities Fee

The \$61 activities fee paid by students in the M.S.N. program entitles them to use the facilities of Sarratt Student Center. By payment of an additional fee, graduate students may have their identification cards validated for admission to athletic events. There is a specific and announced

period at the beginning of the semester during which cards may be validated. The activities fee in summer is \$6.

Students in the M.S.N./M.E.O. program are classified as undergraduate students during the generalist nursing component and, therefore, pay the undergraduate activities fee of \$229, entitling them to certain athletic, social, and cultural events. The undergraduate identification card, accompanied by a validation card for the current semester, serves as an admission ticket to University activities.

Transcripts

Academic transcripts are supplied by the University Registrar on the basis of request in the form of written authorization from the student. One transcript is provided free of charge; a fee of \$2 per transcript is charged thereafter. Transcripts are not released for students with delinquent accounts.

Liability Insurance

Graduate students must obtain their own professional liability insurance coverage.

Preceptorship

Students and faculty share the responsibility for locating preceptorship sites. Guidelines for selecting an appropriate site are available from the Academic Director. Students register for a 4 hour preceptorship at the beginning of the semester.

Thesis

Students are required to register for thesis credit each semester from the time of committee selection until final approval of the completed thesis. The graduate is expected to publish the thesis by having it microfilmed. A fee is charged for this service.

Students who fail to register each semester will automatically be withdrawn from the University and will have to reapply for admission.

Students are required to complete their thesis within six years of registering for their first course.

Honor Scholarships

Vanderbilt's highly competitive Honor Scholarship program is based on academic merit. Honor Scholarships are awarded in recognition of exceptional accomplishment and high promise in the field of nursing. The ap-

plicant's total record is considered, with particular attention to academic performance, standardized text scores, and recommendations.

M.S.N./M.E.O. Program

THE C. W. KEMPKAU SCHOLARSHIP is awarded to an outstanding student in each entering class. The yearly stipend continues for the second year of study, subject to satisfactory academic performance.

THE DEAN'S HONOR SCHOLARSHIPS are granted each year to selected students entering the School of Nursing. The yearly stipend continues for the second year of study, subject to satisfactory academic performance.

M.S.N. Program

HAROLD STIRLING VANDERBILT (HSV) SCHOLARSHIP honors the memory of the greatgrandson of Commodore Cornelius Vanderbilt and president of the University's Board of Trust from 1955 to 1968. The scholarship covers full tuition for three semesters. Selection is based on academic excellence and potential for contribution to the Nursing profession; financial need is not a criterion.

THE DEAN'S GRADUATE HONOR SCHOLARSHIP is awarded to a full-time graduate student each year. The stipend covers full tuition for three semesters. Selection is based on academic excellence and potential for contribution to the nursing profession; financial need is not a criterion.

THE LILLIAN CARY SCHOLARSHIP is awarded to a graduate student in the Nurse Practitioner Track. Selection is based on academic merit.

THE FRANCES HELEN ZIEGLER TUNNELL GRADUATE HONOR SCHOLARSHIP was endowed through the will of this former dean of the School of Nursing.

THE JULIA HEREFORD ALUMNI SCHOLARSHIP FUND. Open to School of Nursing alumni, non-Vanderbilt alumni admitted to a graduate program of the School of Nursing, or School of Nursing faculty members who have made a contribution to the school and are expected to return to Vanderbilt. Recipients are selected by a committee of faculty members and alumni. Direct inquiries to the president of the Nursing Alumni Association, Registrar's Office, School of Nursing.

Financial Aid

Financial aid is available from several sources for both full- and parttime students. Students receiving financial assistance are bound by the requirements of the funding source as to credit hours and employment policies.

Students in the M.S.N. program who wish to apply for need-based financial aid should complete a Graduate Financial Aid Application and a Graduate and Professional School Financial Aid Statement (GAPSFAS).

Students wishing to obtain a loan apply directly to the Financial Aid Office, 232 Alexander Hall, Vanderbilt University, Nashville, Tennessee 37240. Those wishing to be considered for a Federal Traineeship through the School of Nursing must file a Graduate Financial Aid Statement and a GAPSFAS. The Graduate Financial Aid Statement and GAPSFAS forms are available through the Financial Aid Office and the School of Nursing Registrar's Office

Students in the M.S.N./M.E.O. or "bridge" program wishing to apply for aid based on need are required to complete the Undergraduate Financial Aid Application and a College Scholarship Service Financial Aid Form (FAF). These forms should be submitted by 15 February for the next academic year. Additional information about aid to undergraduate students is available from the Financial Aid Office (address above).

No special application is required for consideration for awards on the basis of academic merit. To be considered, however, applications for ad-

mission must be on file by 1 May for the next academic year.

Registered Nurse students are encouraged to explore funding available through various professional organizations and through tuition reimbursement benefits offered by their employers. Professional organizations that may offer funding for graduate education include the Nurses' Educational Fund, American Cancer Society, American Lung Association, State Nurses Associations, American Association of Operating Room Nurses, Nurses Association of the American College of Obstetricians and Gynecologists, and the National Association of School Nurses.

In addition to a variety of sources of student aid, reductions in excess of fifty percent of full-time and part-time tuition are available for a lim-

ited number of qualified Tennessee residents.

Faculty

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B.S. in N. (Medical College of Georgia); M.S.N. (Vanderbilt)

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B.S.N. (Loyola [Chicago]); M.S.N. (Medical College of Georgia)

DEBRA M. WUJCIK, Adjunct Instructor in Medical-Surgical Nursing B.S.Nsg., M.S. (Pittsburgh)

SARAH C. YEAGLEY, Adjunct Instructor in Maternity Nursing B.S.N., M.S.N. (Vanderbilt)

RICHARD M. ZANER, Professor of Medicine (Philosophy); Ann Geddes Stahlman Professor of Medical Ethics; Professor of Philosophy; Professor of Medical Ethics, Divinity School, Divinity School; Professor of Health Ethics in Nursing

B.S. (Houston); M.A., Ph.D. (New School for Social Research)

Class of 1986

Adult Health Clinical Nurse Specialist

NANCEE ANN BAYSINGER

Baltimore, Md.

B.S.N., Vanderbilt

Thesis: The Reliability of Clinical Signs to Judicate the Presence of Tracheobronchial Secretions to Patients Who Have Had Myocardial Revascularization

KATE BRASFIELD BURRUS

Nashville, Tenn.

B.S.N., Vanderbilt

Thesis: Sound Levels in Critical Care Area in Relation to Postcardiotomy Psychosis
SUSAN LAYNE CRUTCHFIELD
Nashville, Tenn.

B.S., Middle Tennessee State

Thesis: Comparison of Intra-Arterial and Ausculation-Cuff Blood Pressure Measurements in Postoperative Coronary Artery Bypass Graft Patients

ELIZABETH GREENFIELD

Nashville, Tenn.

B.S., St. Anselm's

Thesis: Health Belief Behaviors as a Predictor of Satisfaction with Dialysis Location and Compliance with a Therapeutic Regimen

MARY CORRINE NACE

Nashville, Tenn.

B.S.N., Vanderbilt

Thesis: Development and Formative Evaluation of a Computer-Assisted Instructional Program for Cancer Chemotherapy Patients

ELAINE CURTIS SHRUM

Lafayette, Tenn.

B.S.N., Western Kentucky

Thesis: The Effect of Life Review on Death Anxiety

ANDREA LEA STUPKA

Nashville, Tenn.

B.S.N., Central State (Oklahoma)

Thesis: Physical symptoms and Distress Associated with Chemotherapy

Family Nurse Practioner

DONNA FINTO BURKS

Hendersonville, Tenn.

B.S.N., Vanderbilt

Thesis: Orthopedic Accident Victims: Coping Style, Desire for Control, Anxiety and Depression

ERIN KATHLEEN BYRNE

Oak Ridge, Tenn

B.S.N., Vanderbilt

Thesis: The Effects of Social Support and Parent Support Groups on the Mother's Parental Sense of Competence

NANCY ANNESS HOSKINS

Springfield, Tenn

B.S.N., Western Kentucky

Thesis: Patient's Perceptions of Spiritual Needs

Perinatal Clinical Nurse Specialist

LYNDA SUE DeBEE

Chattanooga, Tenn-

B.S.N., Northern Michigan

Thesis: The Effect of Fetal Ultrasound Visualization on Women's Adjustment and Attitude® during Pregnancy

MARY KATHERINE MULLOY

Nashville, Tenn-

B.S.N., Vanderbilt

Thesis: Comparative Efficacy of Bedrest vs. Oral Ritodrine for the Treatment of Uterin

Printability and Early Cervical Change

SARAH COLES YEAGLEY

B.S.N., Vanderbilt

Thesis: Siblings at Birth: Long Term Stress Effects

Nashville, Tenn.

Child and Adolescent Nurse Specialist

KAREN THERESE FERGUSON

Clarksville, Tenn.

B.S.N., Portland

Thesis: A Comparative Study of Fetal Movement Perceptions in the Third Trimester of Multigravidas and Primigravidas

Psychiatric-Mental Health Clinical Nurse Specialist

JULIE JEAN FOSS

Nashville, Tenn.

B.S.N., Iowa

Thesis: The Relationship among Changes in Body Cathexis, Weight, and Sense of Well-Being in Women as a Function of Chronological Age



The University Hospital

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Patient-Centered Care: Hallmark of Vanderbilt Hospital

ROM concept through construction, inside and out, the new Vanderbilt University Hospital was designed with the patient in mind.

A twelve-story structure whose windows reflect the sun from many angles, the hospital has been planned to promote relaxation and healing. Growing plants, comfortable furnishings in warm colors, and works of art humanize its environment. The University Hospital sponsors a closed-circuit television station that broadcasts programs to lessen stress and lift the spirits of patients and staff alike.

The hospital's lower floors house the emergency area (serviced by special elevators that convey patients directly to the operating rooms or to labor and delivery), ancillary services (such as EEG and EKG), radiology, twenty operating rooms, an obstetrical floor with nurseries, surgical intensive care units, the pharmacy, the supply distribution system, the

clean supply room, and the mechanical support systems.

Each of the inpatient towers has a nursing core, so that no room is far from the nurses' station. The building is designed to provide every patient an outside view. A central core, connecting the two patient towers, contains elevators, conference rooms, and waiting rooms for visitors.

Medically-related areas have been placed in careful proximity, so that patients needing specialized care can be grouped to best advantage, as in the Neurosurgical Step-Down Unit. Because of Vanderbilt's role as a tertiary care center, specialized treatment and diagnostic facilities have been included in the building. The Doppler laboratory utilizes an ultrasound device that can "listen" to the flow of blood and determine from the sound the site of arterial blockage. The Magnetic Resonance Imaging (MRI) system in use in the Department of Radiology and Radiological Sciences is one of the most powerful of such devices in the U.S. and was one of the first in clinical use. The system uses a powerful magnetic field, rather than radiation, to look inside the body. The evoked-response laboratory conducts noninvasive tests for diagnosing nerve and brainstem conditions.

Communication and distribution systems in the new hospital were developed to help provide quality care on a cost-efficient basis. When a patient pushes the nurse-call button, vital information about her or his condition appears on the CRT screen at the nurses' station, enabling the nurse to respond appropriately without delay. The hospital employs the unit-dose system of medication, which is safer, more economical, and

more efficient. The Spectra, pneumatic tube, and telelift systems facilitate communication and distribution.

Patient-centered care is the nursing philosophy that governs the hospital. A specific nurse is assigned to each patient, assuming total responsibility for that patient's care from admission through discharge from the unit. Patient-centered care insures continuity in the patient/nurse relationship and helps to alleviate the stress of hospitalization.

Ambulatory Surgery

Ambulatory surgery may be ideal for patients with limited anesthetic and surgical risks who require relatively short procedures. Such operations are performed without overnight hospitalization, decreasing the cost but not the quality of care. Currently, such procedures are performed in the VUH operating suite. The Ambulatory Care Center, now under construction, will have both operating rooms and recovery suites designed for ambulatory care.

Children's Hospital

Contained within the University Hospital on the fourth, fifth, and sixth floors is Vanderbilt Children's Hospital, designed and built to meet the special needs of children. This facility provides a complete range of medical services and treatment for children from birth through adolescence. Children's Hospital was founded in 1970 with a small staff and limited space. Now, in its new facilities, it has 164 beds and a staff of nearly 500 members.

Children's Hospital includes a nursery and neonatal intensive care unit, pediatric intensive care and stepdown units, surgical units, a psychiatric program, the Junior League Home for long-term care, and outpatient clinics and medical specialties covering virtually all diseases that affect children. Parents are encouraged to remain with their children, and facilities in the new hospital allow them to do so in comfort. Each

room has a day-bed or sleeper chair.

Vanderbilt Children's Hospital is the only facility of its kind in the mid-South and serves as a referral center for the region. More than half its patients come from outside Nashville, some from distant states and foreign countries. Children's Hospital is also an important educational resource for medical students and residents in pediatrics and pediatric

Angel III, a neonatal intensive care unit on wheels, makes well over five hundred trips a year to pick up critically ill newborn infants at regional hospitals and bring them to Vanderbilt where they can receive life-

saving specialized medical treatment.

The combined concentration of pediatric research, education, and patient care has led to new techniques and discoveries. Children's Hospital was one of the first hospitals to use artificial ventilation on a newborn. Procedures allowing cardiothoracic surgery for infants were pioneered at Vanderbilt. Other discoveries have come as a result of research in nutrition, infant metabolism, and infectious diseases.

Burn Center

The Vanderbilt University Burn Center is a 20-bed specialized facility dedicated solely to the treatment and rehabilitation of burn victims. A highly-trained multidisciplinary team of burn specialists provides the latest methods for treating and caring for the burned adult or child. The Burn Center is located on the fourth floor of the Round Wing, in Medical Center North.

Cooperative Care Center

The Cooperative Care Center is a 50-bed specialized inpatient unit, whose goal is to help patients and their families learn more about health care needs and medications, broaden their health knowledge, and develop skills to return home independent and self-assured. A homelike atmosphere promotes self-care and a feeling of wellness. Patients are urged to administer their own medications and assist in their own care. All patients are encouraged to bring a care partner with them. Nurses, pharmacists, social workers, nutritionists, and educational coordinators provide individualized educational programs for patients during their stay in the Cooperative Care Center. It is located on the sixth and seventh floors of the Round Wing, in Medical Center North.

Rehabilitation Center

The Rehabilitation Center is a unit of Vanderbilt Hospital serving both inpatients and outpatients, located in Medical Center North, on the third

floor of the Round Wing.

The primary objective of the Rehabilitation Center is to provide comprehensive medical evaluation and treatment programs that help restore physical, social, and vocational capabilities to people with severe physical handicaps. This is accomplished by offering appropriate medical and surgical care, training in independence techniques, emotional adjustment, pre-vocational evaluation, and post-discharge planning, which includes close liaison with family and community resources.

Vanderbilt Institute for Treatment of Alcoholism

The Vanderbilt Institute for Treatment of Alcoholism (VITA) is a 14-bed treatment unit for alcoholics. Minor detoxification is performed in the unit, and patients enter a three-week inpatient rehabilitation program

with six months of after-care. Family members are included in the program to help them develop a positive lifestyle for the patient and the family as a whole. Residents and students are assigned to treatment groups as part of the training program. The Institute occupies space in the Zerfoss Building of Medical Center North.

LifeFlight

The LifeFlight helicopter ambulance service is designed to provide quick access to medical care in emergencies. The landing site is a helipad on the roof of the hospital, directly over the operating area. The service operates within a 130-mile radius of Nashville and is staffed by a team of four pilots and ten nurses.

Emergency Room and Trauma Center

The Emergency Room and Trauma Center, at the south end of the hospital, is available to deal with medical emergencies 24 hours a day, seven days a week. In addition to being the base for LifeFlight, it contains the regional poison control center for Middle Tennessee.

Vanderbilt Clinic

Construction is underway on the new Vanderbilt Clinic building, to be located south of the present emergency room entrance. Scheduled to open in January of 1988, the building will house, in addition to the ambulatory care areas, a new cafeteria and food service facility, new diagnostic laboratories, elements of the Comprehensive Cancer Center, and the Stallworth Rehabilitation Center.

The Division of Allied Health Professions

Vanderbilt University Hospital conducts training programs in eight technical areas of allied health professions. One of these, the program in Hearing and Speech Sciences, offers the master's and Ph.D. degrees through Vanderbilt Graduate School. The other programs are generally post-baccalaureate programs leading to certification in an allied health field or an associate degree program conducted jointly by Vanderbilt and Aquinas Junior College.

Program in Cardiovascular Perfusion. The year-long program in cardiovascular perfusion and perfusion technology prepares graduates for positions as perfusionists on open-heart surgery teams. It is designed for students who have completed a minimum of two years of college, or are registered nurses, or already work in a discipline of medical technol-

ogy. The program meets the criteria established by the American Board

of Cardiovascular Perfusion.

The Department of Cardiac and Thoracic Surgery directs the program in coordination with the Division of Allied Health Professions. Following satisfactory completion of course work and clinical experience, graduates are eligible to apply for board examinations in cardiovascular perfusion.

Program in Diagnostic Sonography. The year-long sonography program offers training in the technical and clinical aspects of sonographic imaging. Applicants must have at least two years' experience in a medically-

related field, preferably radiology technology:

Course work covers the areas of physics and instrumentation of sonographic imaging; the bio-effects of ultrasound; anatomy, physiology, and pathology pertinent to diagnostic imaging; supervised scanning in obstetrical, gynecological, abdominal, renal, pediatric, and other applications; and daily case review and discussion. Clinical experience is offered at Vanderbilt University Hospital, Baptist Hospital, and in a private outpatient surgical center.

Program graduates are eligible to take the Sonographers Registry ex-

amination.

Dietetic Internship Program. The forty-four-week dietetic internship program is designed for the generalist practitioner. It provides an opportunity for practical experience in food service systems management, acute and ambulatory nutritional care, and community nutrition.

Through diverse learning opportunities provided by Vanderbilt's Department of Nutrition Services and specialty units, and several area hospitals and community agencies, the dietetic intern achieves an

understanding of the dietitian's role in a variety of settings.

Program applicants must have a baccalaureate degree from an accredited college or university and have completed Plan IV requirements established by the American Dietetic Association. Upon completion of the dietetic internship, the intern will be eligible to take the national registration examination to become a registered dietitian.

Program in Medical Technology. The one-year medical technology program operates in the Department of Clinical Pathology under the supervision of a medical director, a program director, and an educational coordinator. Lectures, laboratory exercises, and clinical laboratory rotation in the areas of chemistry, hematology, coagulation, immunology/serology, blood bank, Red Cross, urinalysis, microbiology, and venipuncture constitute the program.

Applicants must have a baccalaureate degree from an accredited college or university or be eligible to receive their degree after successful completion of the clinical year. Program graduates are eligible to take national and state examinations conducted by certification agencies for

clinical laboratory personnel.

Program in Nuclear Medicine Technology. The year-long training program in clinical nuclear medicine methodology is designed primarily for students who have completed a minimum of three years of pre-radiologic technology work in an accredited college or university. The program is approved as the fourth-year externship in a baccalaureate degree program at Austin Peay State University, Clarksville, Tennessee, and at Belmont College in Nashville.

Students receive training in atomic and nuclear physics, radiochemistry, patient care and nursing, radiation safety, radiobiology, instrumentation, and computer applications, as well as clinical nuclear medicine (both imaging and *in vitro*). A lecture series and clinical laboratory rota-

tions are integral parts of the program.

Program graduates are eligible to take national examinations conducted by certification agencies for nuclear medicine technologists.

Program in Radiation Therapy Technology. Facilities for the one-year radiation therapy program are located in the Center for Radiation Oncol-

ogy.

Students, who must be graduates of an accredited two-year radiologic technology program, spend approximately 1,200 hours in clinical education. Another 800 hours are divided between courses and participation in

conferences, tumor boards, and chart rounds.

Following completion of the program, students are eligible to take the national examination for certification conducted by the American Registry of Radiologic Technologists. The certified technologist works under the general supervision of a radiation oncologist, applying ionizing radiation in the treatment of malignant disease.

Program in Radiography. The two-year associate degree program in radiologic technology is designed to train students to perform the many varied diagnostic imaging procedures utilizing x-ray and other forms of ionizing radiations. It is conducted by Aquinas Junior College in association with the Division of Allied Health Professions.

Clinical education begins the first semester and continues throughout the two-year program. Baptist Hospital, Saint Thomas Hospital, and

Vanderbilt Hospital are all affiliated as clinical sponsors.

Graduates receive an Associate of Science degree from Aquinas and a certificate of completion from Vanderbilt University and are eligible to take the national examination given by the American Registry of Radiologic Technologists.

Staff Officers of Vanderbilt Clinic



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James S. Kennedy Lloyd E. King John P. Kinnard Howard Knapp Otto M. Kochtitsky Mark J. Koury William Kovacs Sanford B. Krantz Marvin W. Kronenberg Michael E. Kuzur Dana L. Latour John Lee Lewis B. Lefkowitz Russell B. Leftwich John M. Leonard Michael J. Lichtenstein James E. Loyd Michael Magee John J. Marini Samuel R. Marney, Jr. Ralph W. Massie James M. May Michael E. May William R. McDaniel Wallace R.G. McGrew Lonnie C. McKee, Jr. Alexander C. McLeod John R. McRae Cullen R. Merritt Alvin H. Meyer, Jr. Paul R. Michael Michael E. Miller Michael P. Miller Fernando T. Miranda Douglas P. Mitchell John H. Nadeau John H. Newman Daryl Nichols Michael Niedermeyer Nancy Olsen David N. Orth Harry L. Page, Jr. John G. Pearson Thomas G. Pennington James M. Perry William H. Pettus Theodore Pincus Lester L. Porter James S. Powers Ann H. Price Robert W. Quinn William B. Ralph, Jr. Lloyd H. Ramsey Frank M. Rembert Samuel S. Riven Lyman J. Roberts II David Robertson Rose Marie Robertson Kenneth S. Robinson Roscoe R. Robinson Dan M. Roden Howard E. Rosen Marvin J. Rosenblum

Sol A. Rosenblum Joseph C. Ross William D. Salmon, Jr. Howard Lee Salyer William Schaffner Stephen Schillia Richard P. Schneider Herbert J. Schulman John R. Schweikert John S. Sergent James R. Sheller Harrison J. Shull Harrison J. Shull, Jr. Lucien C. Simpson Paul E. Slaton Murray W. Smith Raphael F. Smith James R. Snapper James D. Snell, Jr. W. Anderson Spickard, Jr. Richard S. Stein Stanford J. Stewart William J. Stone

William David Strayhorn III Paul R. Stumb James N. Sullivan Craig R. Sussman Jerome Tannenbaum Paul E. Teschan George B. Theil Charles B. Thorne Stephan T. Ticaric Aubrey L. Tucker Frank K. VanDevender Clarence Vere James W. Ward, Jr. Ann Wehr Dennis K. Wentz W. Carter Williams, Jr. James P. Wilson Eugene P. Winter Lawrence K. Wolfe Steven N. Wolff Alastair J.J. Wood Raymond L. Woosley Robert J. Workman

Dermatology

LLOYD E.KING, JR., Dermatologist-in-Chief Robert N. Buchanan Raymond Dufresne Darrell L. Ellis James P. Fields James R. Hamilton

William B. Harwell, Jr. Dana N. Latour Alvin H. Meyer, Jr. Howard Lee Salyer Clarence Vere Frank G. Witherspoon

Neurology

GERALD M. FENICHEL, Neurologist-in-Chief
Richard S. Burns
Alfred S. Callahan III
William M. Clark
Mary Ellen Clinton
Gary W. Duncan
Anthony W. Kilroy
Howard S. Kirshner
Patrick J. Layin

Michael McLean Karl Misulis Georgia D. Montouris Patricia M-E Moore Barbara J. Olson Bertram E. Sprofkin John S. Warner Harry T. Whelan Ronald G. Wiley

Obstetrics and Gynecology

LONNIE S. BURNETT, Obstetrician & Gynecologist-in-Chief Jean R. Anderson Roger Guiller Harry T. Arnold Guiller Harry Baer Benjar Donald R. Barnett Peter S. D. Scott Bayer Jill F. C. Robert R. Bendt Jackson Michael R. Bishop George Frank H. Boehm Angus James M. Brakefield James M. Brakefield Phillip Bressman Pouglas H. Brown Makbit

n-Chief
Roger B. Burrus
Guillermo Cadena
Benjamin H. Caldwell
Peter S. Cartwright
Jill F. Chambers
Jackson D. Cothren
George B. Crafton
Angus M. Crook
James F. Daniell
Richard J. Davis
Makbib Diro

Robert T. Dodd B. Stephens Dudley Joe M. Edwards Stephen S. Entman Frederick L. Finke Henry W. Foster Charle M. Gill Bruce R. Goodman Paul A. Green, Jr. Marvin G. Gregory Erich B. Groos James H. Growdon, Jr. Larry Gurley Joel T. Hargrove Carl M. Herbert George A. Hill Martin B. Hirsch Charlie J. Hobdy James W. Johnson Howard W. Jones III Orrin L. Jones, Jr. Ralph R. Kling Horace T. Lavely, Jr. John Link Salvatore Lombardi

Donald R. Lovelace Harold N. Lovvorn Marcia Ann Montgomery V.Tupper Morehead Betty S. Neff H. Clay Newson III Roy W. Parker C. Gordon Peerman, Jr. Richard E. Pressley Ron N. Rice Jacqueline L. Rodier Gilmore M. Sanes, Jr. Madison H. Sarratt Dinesh M. Shah Mary A. Snowden Stephen M. Staggs Wilborn Strode William D. Sumpter, Jr. Robert H. Tosh Anthony E. Trabue John E. VanHooydonk Ramona Walsh Anne Colston Wentz Norman E. Witthauer Carl W. Zimmerman

Ophthalmology

Karla J. Johns

JAMES H. ELLIOTT, Ophthalmologist-in-Chief Steven R. Anderson Edwin D. Batchelor John B. Bond Joseph E. Boone, Jr. George W. Bounds James Edmund Burnes Abraham P. Cheij James F. Conrad Meredith A. Ezell Roy C. Ezell Wallace H. Faulk James W. Felch Stephen S. Feman Walter W. Frey Stephen E. Grinde Robert R. Henderson Gary W. Jerkins

Bruce E. Jones James P. Loden Reginald S. Lowe, Jr. Philip L. Lyle Denis M. O'Day John M. Omohundro III Yeshawant B. Paranjape Carolyn A. Parrish Howard Rosenblum Deborah S. Ruark Joseph W. Scobey Clive H. Sell Charlie R. Smith K. Shannon Tilley Willard O. Tirrill III Joseph W. Wahl Gates J. Wayburn, Jr. Ralph E. Wesley

Orthopaedics and Rehabilitation

DAN M. SPENGLER, Orthopaedist-in-Chief Dave A. Alexander, Jr. Allen F. Anderson Gregory W. Brick John C. Brothers John Bruno III George K. Carpenter, Jr. Michael J. Christie Wesley L. Coker Shannon R. Curtis Harold A. Ferguson Michael C. Ferrell S. Benjamin Fowler Donald L. Gaines William M. Gavigan David W. Gaw Neil E. Green Charles M. Hamilton Marion C. Harper Robert K. Johnston David S. Jones
Frank E. Jones
John W. Lamb
Lawrence P. Laughlin
Thomas J. Limbird
A. Brant Lipscomb
John C. McInnis
Michael A. Milek
Andrew H. Miller
Charles G. Norton
John W. Oglesby

Thomas F. Parrish Eugene M. Regen, Jr. Barrett F. Rosen Robert V. Russell Roy Sanders Robert B. Snyder Robert E. Stein Marc Swiontkowski E. Dewey Thomas Thomas E. Tompkins John M. Wampler

Pathology

WILLIAM H. HARTMANN, Pathologist-in-Chief Mary C. Abram James Atkinson Jere W. Baxter William J. Boyd Robert D. Collins John B. Cousar, Jr. Anh H. Dao Ben W. Davis Carla M. Davis Carla M. Davis Thomas C. Delvaux, Jr. Alan D. Glick Fred Gorstein Louis S. Graham George F. Gray, Jr. Mary Louise Guerry-Force

Jerry K. Humphreys Alfred G. Kasselberg Virgil S. LeQuire Fred V. Lucas Thomas E. Mason Thomas L. McCurley III William M. Mitchell David L. Page Adelisa L. Panlilio Fritz F. Parl Charles W. Stratton John B. Thomison Renu Virmani Charles H. Wallas William D. Whetsell, Jr. Sona W. Wona Stephen Woodward

Pediatrics

Susan A. Halter

Charles W. Harlan

WILLIAM A. ALTEMEIER, Acting Pediatrician-in-Chief Amin Y. Barakat Luther A. Beazley Eugene L. Bishop Lindsay K. Bishop Janet G. Blackwell Robert J. Boucek A. Scott Brooks Merlin Butler Robert M. Campbell Sam W. Carney, Jr. Norman M. Cassell Eric M. Chazen Robert B. Cotton Lisa Craft William M. Doak William D. Donald Paul Douthitt Ray L. Dubuisson Mary Catherine Dundon Kathryn M. Edwards Barbara Engelhardt John P. Fields William F. Fleet, Jr. Lee Ann Freeman James C. Gay

Fayez K. Ghishan Paul C. Gomez Johnny E. Gore Thomas P. Graham Roland W. Gray John W. Green Ralph M. Greenbaum Harry L. Greene William C. Gruber Thomas A. Hazinski James P. Henderson Douglas C. Henry Gerald B. Hickson Charles S. Hirshberg Donna S. Hummell lekuni Ichikawa John O. Jackson Robert L. Janco Margreete Johnson David T. Karzon Barbara Kennedy Kathleen Kennedy Mary E. Keown Lowry D. Kirby Leonard J. Koenig

Valentina Kon Elizabeth D. Krueger Alexander R. Lawton Howard B. Leeper Joseph F Lentz Ruth B. Long William R. Long Rodney A. Lorenz John N. Lukens Robert C. MacDonell Robert E. Mallard George C. Martin Raymond L. Meneely Ronald V. Miller Gordon A. Moreau David Moroney Jennifer L. Najjar Dewey G. Nemec John T. Netterville Steven Neubauer Kenneth T. North Susan M. O'Connor John A. Phillips III Elizabeth P. Pierce Diane J. Pincus John Plonk James S. Price Patricia F. Robinson Jorge Rojas Dan S. Sanders, Jr. Dan S. Sanders III

Sarah H. Sell E. Conrad Shackleford, Jr. Michael R. Sharpe Javant P. Shenai William T. Slonecker Charles N. Spencer Mildred T. Stahlman Joseph Steranka Charles A. Stilwell, Jr. Joe M. Stravhorn Hakan W. Sundell Steven M. Tate David D. Thombs Julia Thompson Elizabeth Triggs Dorothy J. Turner Earl E. Vastbinder Larry B. Vogler William B. Wadlington Ethel Walker Arville V. Wheeler Thomas C. Whitworth Bernard A. Wiggins Erle E. Wilkinson Melissa Will George W. Wood Peter F. Wright Kenneth Wyatt Aida Yared Thomas Yeager Thomas B. Zerfoss, Jr.

Psychiatry

MICHAEL H. EBERT, Psychiatrist-in-Chief Georgina A. Abisellan Lori M. Adelson Edward Arnold Harvey Asher Thomas A. Ban Ralph I. Barr David Barton Robert O. Begtrup Otto Billig Henry B. Brackin, Jr. Thomas W. Campbell Pietro Castelnuovo-Tedesco Charles Corbin, Jr. James H. Crecraft Miles K. Crowder Jesse E. Dozier Palmer Edwards Terri L. Fehrman Joseph H. Fishbein Fay M. Gaskins Edmon L. Green Marc H. Hollender Frederick T. Horton, Jr. Robert D. Hunt Robert A. Jack Harold W. Jordan William D. Kenner John C. Koomen Ronald-Frederic C. Kourany

Kent Kyger William B. Lawson Linda Lundin Peter R. Martin Aileen McAlister James R. McFerrin James B. McGehee James L. Nash Margaret S. Norris Paula S. Nunn J. Kirby Pate William M. Petrie Pauline L. Rabin Judith J. Regan Jack O. Rice Richard Shelton Vernan H. Sharp William F. Sheridan, Jr. S. Steve Snow Frank W. Stevens, Jr. Frank W. Stevens, Sr. Brian R. Swenson C. Richard Treadway Charles E. Wells Jane R. Weinberg William S. West Jackson B. White **Brad Williams** Melbourne A. Williams Dennis C. Workman

Radiation Oncology

ARNOLD W. MALCOLM, Radiation Oncologist-in-Chief Subir Nag Ronald K. Setzkorn

Radiology

A. EVERETTE JAMES, JR., Radiologist-in-Chief Joseph H. Allen Frank E. Carroll Neil Cooper Charles Currie Terri Daniel Joseph Diggs Arthur C. Fleischer Mark Freeman Samuel Julian Gibbs Richard M. Heller Alan J. Kaufman

Robert M. Kessler Sandra G. Kirchner Murray J. Mazur E. Paul Nance C. Leon Partain William F. Payne Henry P. Pendergrass Glynis Sacks Martin G. Sandler Max I. Shaff Albert A. Tedeschi Alan C. Winfield

Surgical Sciences

Surgery

Jeremy J. Kaye

JOHN L. SAWYERS, Surgeon-in-Chief Naji N. Abumrad Robert B. Adkins, Jr. Jeanne Ballinger Stanley Bernard Robert L. Bomar, Jr. Benjamin F. Byrd, Jr. Kenneth L. Classen Joseph M. Crane John Lucian Davis Harold C. Dennison, Jr. William H. Edwards Steven J. Eskind John L. Farringer, Jr. J. Raymond Fletcher Walter G. Gobbel, Jr. Herschel A. Graves, Jr. Lynwood Herrington, Jr. George W. Holcomb, Jr. Robert W. Ikard William D. Johnston Fred T. Kimbrell, Jr. James P. Lester

Patrick Meacham F. Michael Minch John A. Morris Joseph L. Mulherin, Jr. Wallace W. Neblett Philip J. Noel, Jr. William Nylander Jefferson C. Pennington, Jr. David R. Pickens, Jr. John B. Pietsch John R. Potts III Vernon H. Reynolds Robert E. Richie Douglas H. Riddell Lansdon B. Robbins II Louis Rosenfeld H. William Scott, Jr. Kenneth W. Sharp Bruce M. Smith Richard B. Terry George Waterhouse Lester Williams John K. Wright

Oral Surgery

Malcolm R. Lewis

H. DAVID HALL, Oral Surgeon-in-Chief Samuel Banks Elmore Hill Samuel McKenna

James W. Nickerson, Jr. Stanley C. Roddy, Jr. Jack C. Schmitt Anthony P. Urbanek

Neurological Surgery

GEORGE S. ALLEN, Neurosurgeon-in-Chief Vaughan Allen Verne E. Allen Rex E. Arendall, Jr. Bennett Blumenkopf Arthur G. Bond Cully A. Cobb, Jr. Arthur R. Cushman James W. Havs

Ray W. Hester Everette I. Howell Robert J. Maciunas Paul R. McCombs III Warren F. McPherson William F. Meacham Timothy Schoettle Harold P. Smith Noel B. Tulipan

Otolaryngology

ROBERT H. OSSOFF, Otolaryngologist-in-Chief J. Clyde Alley Ronald C. Cate Jerrall P. Crook William G. Davis William L. Downey James A. Duncavage Edwin B. Emerson Michael E. Glasscock

Hiranya C. K. Gowda Perry F. Harris Daniel R. Hightower Charles G. Jackson James L. Netterville Warren R. Patterson William R. Ries John D. Witherspoon

Pediatric Surgery

WALLACE W. NEBLETT III, Pediatric Surgeon-in-Chief George W. Holcomb, Jr. John B. Pietsch

Plastic Surgery

JOHN B. LYNCH, Chief of Plastic Surgical Service David G. Bowers Glenn S. Buckspan Reuben A. Bueno James H. Fleming

Kevin F. Hagan James J. Madden, Jr. Riley Rees Greer Ricketson Robert B. Shack

Thoracic and Cardiac Surgery

HARVEY W. BENDER, JR. Chief of Thoracic and Cardiac Service William C. Alford, Jr. Phillip P. Brown George R. Burrus William H. Frist David M. Glassford John William Hammon, Jr. Robert A. Hardin

Jackson Harris J. Kenneth Jacobs Walter H. Merrill Michael Petracek William S. Stoney Clarence S. Thomas, Jr.

Urological Surgery

W. SCOTT McDOUGAL, Chief of Urology Service Robert B. Barnett H. Victor Braren John W. Brock III Oscar W. Carter William B. Crenshaw Charles W. Eckstein Robert H. Edwards Robert B. Faber John R. Furman Keith Hagan David Hill Albert P. Isenhour, Jr.

Frederick K. Kirchner, Jr. Robert E. McClellan David H. Morgan Tom E. Nesbitt Tom E. Nesbitt, Jr. Phillip P. Porch Robert A. Sewell John D. Trapp John M. Tudor Bruce I. Turner John J. Warner Claude H. Workman III

House Staff 1986-87



Figures in the right-hand column indicate the current level of the residency.

Byron C. Abels, Jr. Brian M. Aboff Steven R. Abram Richard K. Adkins Royce T. Adkins Judith B. Akin Albert I. Alexander Preston Clay Alexander Newton Perkins Allen, Jr. Bryan K. Anderson John E. Anderson Philip Bradly Anderson Ellen Andrews Michael B. Andrews Pablo Antonio Arevelo John H. Arnold Maria del Carmen Arzubiaga	General Surgery Medicine Neurosurgery Anesthesiology Obstetrics-Gynecology Psychiatry General Surgery Obstetrics-Gynecology Medicine Ophthalmology Medicine Psychiatry Pediatrics Medicine Neurology General Surgery Medicine	L-2 L-2 L-2 L-2 L-1 L-3 Chief Resident L-1 L-3 L-1 L-1 L-2 L-2 L-2 L-4 L-1
Henry W. Baggett Carolyn L. Baker Jack R. Baker Robert H. Ball Dennis R. Banducci Patrick A. Barnett R. Steve Bass Philip D. Bates Laurie J. Beach S. Kenn Beeman Calvin A. Bell Debra Ann Benator Robert J. Berkompas Katherine A. Bertram Ulrika M. Birgersdotter Edward L. Bitseff, Jr. Frank J. Block III Clifford W. Bogue	Anesthesiology Obstetrics-Gynecology Radiology Obstetrics-Gynecology Plastic Surgery Radiology Radiation Oncology General Surgery Anesthesiology General Surgery Medicine Medicine Medicine Medicine Medicine Medicine Plastic Surgery Allergy/Immunology Pediatrics	L-4 L-2 L-2 L-1 Chief Resident L-3 L-2 L-2 L-2 L-3 L-1 L-1 Chief Resident L-5 L-2
Thomas J. Boland Roger A. Bonau H. Jay Boulas Barrett D. Brantley Edward N. Brin Nancy J. Brown Patricia R. Brown Peggy J. Brown Sarah J. Brown John S. Bruch Kastytis L. Buitkus Andrew G. Bullard John C. Bullington Christopher P. Bunce	Oral Surgury General Surgury Orthopaedics Pathology Anesthesiology Medicine Medicine Neurology Psychiatry Medicine Allergy/Immunology Medicine Anesthesiology Medicine	Chief Resident L-4 L-3 L-3 L-4 L-1 L-3 L-2 L-4 L-2 Chief Resident L-1

Daniel J. Burch	Medicine	L-3
Charles D. Burger	Medicine	L-2
Daniel S. Burrus	General Surgery	L-1
Jay C. Butler	Medicine/Pediatrics	L-2
Anne Woodham Byars	Pediatrics	L-1
John W. Cain II	Psychiatry	L-3
James T. Callis	Psychiatry General Surgery	Lab
Jeffry A. Canter	Medicine	Chief Resident
Terence T. Casey	Pathology	
Robert D. Cebul	General Surgery	L-6 L-3
David G. Chaffin	Obstetrics-Gynecology	L-3
Joseph W. Chance	Anesthesiology	L-3
James Patrick Chanev	Obstetrics-Gynecology	L-2
William C. Chapman	General Surgery	L-3
Geoffrey D. Chazen	General Surgery Medicine	L-3
James W. Cheek	Pediatrics	1-3
Andrew L. Chern		L-1
	Obstetrics-Gynecology	Chief Pasidant
Bradford E. Clayton	Obstetrics-Gynecology	
Dennis G. Colbert	Medicine	L-3
Ross E. Collins	Child Psychiatry	L-3
Raoul S. Concepcion	Urology	L-3
Michael P. Conrad	Psychiatry	L-2
John F. Cooper	Medicine	L-2
John L. Cooper	Medicine	5. L-1 x 10
Kathryn E. Cramer	General Surgery	ounder A norm 1-1 tab
Nancy J. Crowley	General Surgery	L-2
Charles M. Dalfastada	Control of the contro	Company Mrs.
Stephen M. Dalhstedt	General Surgery	L-1
Michael S. Dale	Medicine	L-3
Marc S. D'Angelo	Neurology	L-3
Robert M. DaSilva	Orthopaedics	L-3
Elizabeth A. Daubner	Nuclear Medicine	L-1
Joseph F. Davies	Orthopaedics	Chief Resident
Karen F. Davis	Obstetrics-Gynecology	L-1
Thomas L. Davis	Neurology	L-2
Karon Dawkins	Psychiatry	rought 18 col
Roy Whit Deal	Psychiatry	L-2
Rafael A. deHaro	Pediatrics	L-1
John R. Dein	General Surgery	L-4
Steven D. Deitch	Neurology	L-2
Dominique Delbeke	Nuclear Medicine	L-3
Joseph B. DeLozier III	Plastic Surgery	Lab
Rodney L. Dennis	Plastic Surgery Urology	Chief Resident
Steven C. Dennis	Orthopaedics	Chief Resident
Kenneth R. DeVault	Medicine	L-1
John H. DeWitt	Psychiatry	L-3
Bradley C. Diner	Psychiatry	L-2
Jeffrey A. Ditesheim	General Surgery	L-2
Debra Ann Dodd	Pediatrics	L-3
Tracey E. Doering	Medicine	L-2
William S. Domin	Medicine/Pediatrics	L-4
Kevin L. Donovan	Anesthesiology	L-2
John F. Dunn	General Surgery	L-4
Philip L. Dutt	Pathology	L-2
	The state of the s	
Scott Alan Eastin	Psychiatry	L-2
Palmer Edwards	Child Psychiatry	L-6
William H. Edwards, Jr.	General Surgery	Chief Resident
Alan D. Eisenberg	Radiology	L-3
Mary Ann Ellis	Obstetrics-Gynecology	L-1

Thomas J. Failinger	Madiaina	1.0
Randall M. Falk	Medicine Urology	Chief Resident
David A. Faris	Ophthalmology	L-3
Paul R. Fassler	Orthopaedics	L-3
Brian D. Fellmeth	Radiology	Chief Resident
Erol Fikrig	Medicine	L-2
Donn S. Fishbein	Neurosurgery	L-5
Kyle S. Fisher	Anesthesiology	L-4
William F. Fleet III	Medicine	L-1
Robert E. Fleming	Pediatrics	L-3
Mark D. Flora	General Surgury	L-2
Agnes B. Fogo	Pathology	Chief Resident
Howard W. Follis	General Surgury	L-2
Lesa D. Fraker	General Surgery	L-2
R. Everett Frerichs	Pediatrics	L-1
Maria Frexes-Steed	General Surgury	Lab
Gottlieb C. Friesinger D. Catherine Fuchs	Medicine	L-3
Randy C. Fullerton	Child Psychiatry	L-5
harldy C. Fullerton	Medicine	L-3
Mary C. Gamache	Medicine	L-2
Maria Garber	Ophthalmology	L-3
Jose M. Garmendia	Medicine	L-2
Daniel R. Garst	Psychiatry	L-4
Randy A. Gaw	Neurology	L-3
Richard J. Geer	General Surgery	Lab
Paul J. Gentuso	Medicine/Pediatrics	L-3
Edward B. Gerhardt	General Surgery	Chief Resident
James L. Gildner	Obstetrics-Gynecology	Chief Resident
Herman C. Gist	Medicine	L-1
Gary M. Goldstein	Medicine/Pediatrics	L-2
Richard E. Goldstein	General Surgery	Lab
Thomas Golin	Obstetrics-Gynecology	Chief Resident
Mario H. Gomez	Psychiatry	L-4
Julia C. Goodin	Pathology	L-4
Andrew Gottehrer	Medicine	L-2
Daniel A. Green	Orthopaedics	L-2
Elliot B. Greenberg	Obstetrics-Gynecology	L-3
Steven T. Gremillion Joe A. Griffin III	Medicine	<u>[1</u>
Debra Grove-Mahoney	Plastic Surgery	L-4
Michael E. Guerra	Pathology Ophthalmology	L-2
Timothy Lee Guitierrez	Oral Surgery	L-2 L-1
Timothy Lee Guitleffez	Oral Surgery	
David W. Haas	Medicine	Chief Resident
Curtis J. Hagenau	Neurology	Chief Resident
Eddie D. Hamilton	Pediatrics	L-2
Charles E. Hanson	Anesthesiology	L-2
Michael B. Harding	Medicine	L-2
Norman C. Hardman, Jr.	Medicine	L-2
Carroll McW. Harmon	General Surgery	Lab
H. Courtenay Harrison, Jr.	Medicine	L-3
Mary E. Harrison	Pediatrics	L-2
James R. Hart	Psychiatry	L-4
Waring M. Hazlehurst, Jr.	Anesthesiology	L-2
Dean A. Healy John W. Henson IV	General Surgery	Chief Resident
Steve J. Herrin	Neurology	L-3
Shannon L. Hersey	Psychiatry	L-2
Stephen J. Heyman	Anesthesiology	L-1
Anna L. Hicks	Medicine Pediatrics	L-3
L. HICKS	1 culatiles	L-1

Barry A. Hicks	General Surgery	L-3
Patricia J. Hicks	Pediatrics	L-3
	Anesthesiology	L-3
Patricia A. Hill Benjamin G. Hines	Urology	L-5
Alice A. Hinton	Radiology	L-3
	Medicine	L-3
Roger A. Hodge Catherine C. Hoff	Pediatrics	The second second
	General Surgery	[3]
Steven J. Hoff	Oral Surgery	Actual Print Sept of Street
James A. Hoffman	Orthopaedics	1-4
John L. Holbrook		Chief Resident
Thomas J. Holbrook, Jr.	Neurosurgery	L-1
Larry R. Holder	Radiology	Chief Resident
Charles H. Holloway	Radiology Psychiatry	L-3
Jeffrey P. Holmgren	General Surgery	Chief Resident
Benjamin T. Hoxworth		L-1
Margaret M. Hubbard	General Surgery	L-7
Charles B. Huddleston	Thoracic Surgery	District Association of Participation
Linda K. Hudson	Medicine	to Constitute Date
Mark A. Hughes	Psychiatry Pediatrics	1-1
Robert S. Humphrey		
Thomas R. Hunt	General Surgery	Turned a
Terry A. Hurlbut III	Pathology	all and the second
George Ivanovskis	Medicine	L-2
Susan M. Jacobi	Medicine	L-1
John E. Jayne	Medicine	L-2 L-1
Robert N. Jenkins	Medicine	L-3
Roy A. Jensen	Pathology	
John A. Jernigan	Medicine	L-1
Kenneth H. Joel	Anesthesiology	L-2
Janet A. Johnson	Nuclear Medicine	Chief Resident
Joyce E. Johnson	General Surgery	L-1
Larry N. Johnson	Medicine	L-2
Mahlon D. Johnson	Pathology	L-5
Claudia K. Jones	Pathology	L-2
Clement Jones	General Surgery	L-2
Jace S. Jones	General Surgery	
Patrick A. Juneau III	General Surgery	L1
Douglas W. Kane	Medicine	The same of the same
Edward M. Karl	Pathology	L-4
Jeffrey A. Keenan	Obstetrics-Gynecology	L-3
Frank G. Keller	Medicine/Pediatrics	L-1
Robert E. Kelly, Jr.	General Surgery	L-2
William F. Kelly	Pathology	L-1
Theodore C. Kerner, Jr.	Radiology	L-2
Travis E. Kidd, Jr.	Pathology	L-2
Naresh J. Kikaganesh	Neurology	L-2
William R. Kilgore III	Medicine	L-3
Michael A. King	Neurosurgery	L-3
Rita E. King	Medicine	L-2
Wesley W. Kinney	Anesthesiology	L-3
Michael O. Koch	Urology	Chief Resident
Elizabeth A. Koonce	Pediatrics	L-3
Richard Krumdieck	Medicine	L-1
Kris E. Kuhn	Medicine	L-3
Dana A. Kumjian	Medicine	L-2
John F. Kuttesch, Jr.	Pediatrics	L-2
Darlene J. Kwee	Dermatology	Chief Resident

The second second second second second	Name and Address of the Owner, where	
Peter M. Lake	Povehiste.	
Thomas L. Lambert	Psychiatry	L-1
	Medicine	L-1
D. Wayne Laney, Jr.	Pediatrics	
Gregory B. Lanford	Neurosurgery	
James L. Lawhorn	Anesthesiology	L-2
Larry H. Lee	Radiation Oncology General Surgery	L-4
Robert B. Lee	General Surgery	Lab
C. "Chip" W. Legerton III	Medicine Medicine	L-1
Laura Jo Lehmann	Medicine	L-3
Thomas C. Lewis	Anesthesiology	1-4
George H. Lien	Neurosurgery Psychiatry	L-3
Mari L. Lilly	Psychiatry	L-3
James J. Link	Oral Surgery	L-1
MacRae F. Linton	Medicine	L-2
Kevin J. Liudahl	Orthopaedics	Chief Resident
Ronald W. Luethke	General Surgery	
Juan C. Luis-Jorge	Radiology	L-4
F. Mark Lupinetti	Radiology	L-3
1. Mark Eupinetti	Thoracic Surgery	Chief Resident
Michael E. McCadden	Dermatology	Chief Resident
David J. McClain	Pediatrics	Chief Resident
Barry M. McCook	Radiology	1-3
Gregory S. McGee	General Surgery	Lab
Stacey W. McKenzie	Medicine	L-2
Mary L. McMaster	General Surgery Medicine Medicine	L-3
Marin S. S. H. C. S. V. S.	Liberto esta yerotorrianza en	
William R. Macon	Dathalass	
Randolph A. Malone	Pathology	L-3
Hamid Mani	Pediatrics	L-2
	Ophthalmology	Chief Resident
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