UNIVERSITY OF OREGON MEDICAL SCHOOL A history of the years 1904-1909

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By Charles N. Holman, M.D.

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FORWARD

Dr. Charles Holman, fifth dean of the University of Oregon Medical School, was scheduled to retire in the summer of 1974. At that time, the Schools of Dentistry, Medicine and Nursing were joined to become Oregon's first university devoted to health sciences. To accommodate Dr. Louis Blumle, the new president, Dr. Holman remained as acting dean in 1974 and 1975 to assist until a new dean could be chosen.

Following the appointment of Dr. Robert Stone to the dean's position in August 1975, Dr. Blumle asked Dr. Holman if he would consider developing a formal written history of the medical school. Dr. Holman undertook that effort at his own expense in late 1975 and 1976. The project was cut short by Dr. Holman's untimely death in University Hospital in the spring of 1977.

To those of us who knew him well, Dr. Holman's continued effort on behalf of the medical school was characteristic of his devotion to the university, and to the medical profession. As the following chapters demonstrate, Dr. Holman's commitment was strong even in his brief years of retirement.

-- Dr. Michael Baird 1987 PREFACE

The nearly nine decades since the founding of the University of Oregon Medical School in 1887 have seen unparalleled advances in medical science. The preponderance of the basic science foundation of clinical medicine as well as the burgeoning technology that helped create the necessary equipment, skills and techniques, have been developed during this period. Much of this knowledge originated from the laboratories, hospitals and clinics of the nation's medical schools. It is through medical schools and the men and women they graduate that this knowledge is translated into better health for the people of this nation.

The purpose of this volume is to trace one of the University of Oregon Medical School's interesting historic periods: from 1904 to 1909. In this brief period, the school, the Oregon Board of Medical Examiners and others were locked in controversy over the quality of medical education, the school's national reputation and the strict practice of licensing Oregon's medical school graduates.

The medical school arrived at the last quarter of the 20th century with a record of steady growth and service to its state. As its leaders face the difficult problems of the future, they can take heart in the fact that although the problems may have different names, they will be but versions of those faced and overcome in the past.

-- Charles N. Holman, M.D. 1977

OREGON'S MEDICAL SCHOOLS - THE BEGINNING

The University of Oregon Medical School was officially authorized by action of the Board of Regents of the University of Oregon on June 16, 1887. This action was taken in response to a petition by 16 Portland physicians asking that a medical department of the University be located in Portland. Willamette University had conducted a medical school since 1867. The school was located in Salem until 1878 when it was moved to Portland because the opportunities for clinical experience and instruction were deemed more advantageous. The history of Willamette University Medical School, from its founding in 1867 until it was merged with the University of Oregon Medical School in 1913, is described in considerable detail in "Milestones in Medicine" by Thelma Cook and in the "Doctor in Oregon" by Olaf Larsell.

The first attempt to found a medical school in Portland was on February 9, 1878, when articles of incorporation for the "Oregon Medical College" were drawn up by eight individuals: Rodney Gilsan, Philip Harvey, William Watkins, William B. Cardwell, R. G. Rex, Orland P. S. Plummer, Matthew P. Deady and William H. Saylor. All were physicians except Deady, a lawyer. This school was not to be affiliated with any existing educational institution. Operation was vested in the corporation with complete authority to conduct the school, prescribe standards and confer diplomas upon its graduates. In order to avoid conflict between the Willamette Medical School and the new Oregon Medical College, meetings were arranged between committees of the two organizations to study the possibility of coordinating their interests and operating only one medical college in Oregon. As a result of these meetings, a plan was developed to move the Willamette Medical School to Portland and to add the incorporators of the Oregon Medical College to the Willamette faculty. This achieved two purposes: The incorporators of the Oregon Medical College would become faculty members of a medical school, and a rival institution to Willamette Medical School would not be founded in an area of meager medical resources. On June 7, 1878, the Oregon Medical College was formally disincorporated, and a new era of medical education was launched.

The July 1904 issue of "Northwest Medicine," then in its second year of publication, revealed a proposal to establish a two-year preliminary medical school at the University of Washington. The journal vigorously opposed this proposal, its editors cited the extremely high costs of a "modern" medical school; the need for full-time, highly salaried and competent instructors; and the many schools already in existence (many of them of poor quality). They concluded the need was for fewer — not more — medical schools, that only one good school on the Pacific Coast was needed, and that it should be located in San Francisco. At the faculty meeting of March 2, 1905, a projectascope for the use of Dr. Ernest E. Tucker, professor of gynecology, and Dr. J. Allen Gilbert, lecturer in dermatology, was approved. The purchase of additional microscopes was also approved. The rest of the meeting dealt with plans for the annual commencement and final examinations. A letter from the Honorable W. D. Fenton, tendering his resignation from the lectureship in Medical Jurisprudence, was also read and accepted. The faculty also decided to assume financial support of purchasing the Saylor Medal 'and directed that Mrs. Saylor be advised to this effect.

The 26 students approved for the degree of Doctor of Medicine in April 1905 included Joseph B. Bilderback, who would be associated with the medical school for many years in the future. After his internship, he was to spend four years of study on the east coast, specializing in pediatrics, after which he returned to Portland. He was the first welltrained pediatrician in the area and was known as the father of pediatrics in Oregon.

At the May 1, 1905 meeting, the annual reorganization of the faculty was taken up. Although Dr. Simeon F. Josephi served as the school's dean for 25 years, he was elected to the position annually, as were the other officers.

Dr. Albert E. MacKay was elected to the professorship of genitourinary diseases, replacing Dr. W. H. Saylor, who had held the position since the school was organized and who had died during the last year. This made Dr. MacKay a member of the voting faculty. The faculty also acted to give each faculty member an additional allowance of \$15 from surplus funds available as compensation for time expanded in the final examination of the students. The lecturers were to also be compensated for their efforts in the final examination. The procedure was for the dean to recommend to the faculty the details of disposition of funds available and the amount of payments to the faculty for their services. These recommendations had to be voted on and approved by the faculty and then were always turned over to an auditing committee of faculty members for review. A committee of the faculty was appointed to report on the advisability of the school continuing its membership in the Association of American Medical Colleges. At the next meeting on June 6th the minutes contained the following statement:

> "The report of the committee on the question of the School retaining its membership in the Association of . American Medical Schools was read and adopted."

The report evidently favored continuing membership, as the payment of annual dues appears in subsequent financial reports to the Board of Regents. At this meeting Dr. Ralph Matson was re-elected to the lectureship in bacteriology and Dr. Ray Matson was elected to the lectureship in histology, from which Dr. Robert C. Yenney had resigned.

2

The 1905-06 faculty roster gave evidence of the growth of the school's instructional staff. While the number of professors stayed the same, the lecturers, demonstrators, adjunct lecturers and clinical assistants increased from 14 to 21. The 1905-06 session's annual announcement mentions clinics to be held at the Outpatient Department downtown. For the first time, the subject of embryology is mentioned with the announcement that the professors of obstetrics, gynecology, anatomy and physiology would be involved in the presentations.

The four-year curricula provided 1,185 hours of clinic time. The curriculum now provided that third- and fourth-year students were to spend Saturday afternoons in clinics at the Multnomah County Hospital. In addition, the third-year class spent some portion of each weekday afternoons and the fourth-year class spent parts of Tuesday, Wednesday and Thursday afternoons in clinics at the Outpatient Department.

At the faculty meeting of August 30, 1905, a report of the faculty committee on outdoor clinics was read and approved. It's contents were not mentioned. At the faculty meeting of January 9, 1906, the possibility of charging for medicines at the outdoor clinic was discussed. It was agreed to let the subject rest until future meetings. Addition of the clinics resulted in a marked increase in the assigned hours, particularly for the third- and fourth-year classes. First-year students had 40 assigned hours the first semester, 46 the second; the second-year class had 47 the first semester, 45 the second; the thirdyear class had 48 hours, and the fourth-year class 47 throughout the year. The four-year course of instruction now provided for a total of 4,026 hours. Of this amount, 1,803 hours were in didactic lectures, 1,038 in laboratory, and 1,185 in clinics.

The Lewis and Clark Exposition was held in Portland the summer of 1905 and aroused a great deal of interest in the medical profession. The American Medical Association held its annual meeting in Portland in conjunction with the fair and this brought many visiting physicians from all over the United States. An emergency hospital was erected on the exposition grounds. Dr. Kenneth A. J. Mackenzie was appointed medical director of the Lewis and Clark Exposition and placed in charge of the emergency hospital. The headquarters for the AMA meetings was in the Portland Armory.

At the October 30, 1905, meeting the resignation of Dr. Holt C. Wilson as professor of principles and practice of surgery was read. Dr. Wilson had served in this position since the school was organized in 1887. At this meeting it was moved and seconded that the faculty appoint a committee of two to interview the State Board of Medical Examiners and request them to submit to the faculty of the University of Oregon Medical School the papers of candidates at the last examination held by the board. This was a rather unusual request and there is nothing in the minutes to indicate its motivation.

The resignation of Dr. Holt Wilson set in motion a general reassignment of faculty positions. The names of Drs. Mackenzie, professor of the principles and practice of medicine, and George F. Wilson, professor of military and operative surgery, were placed in nomination to replace Dr. Holt Wilson. After eight ballots, neither one was able to obtain the necessary 11 votes required for faculty approval, so the meeting was adjourned to the following week. Neither Drs. Mackenzie nor Wilson attended that meeting. Professor Bell withdrew Dr. Mackenzie's name, where upon Dr. Wilson was approved for the position. It was then moved and passed that the professor of military and operative surgery be given additional didactic lecture time and a clinical period that would be transferred from a period now assigned to the professor of medicine. This was approved. Dr. Mackenzie was transferred to the chair of operative surgery, formerly held by Dr. Wilson. Dr. James F. Bell, professor of materia medica, was then nominated for the chair of principles and practice of medicine, replacing Dr. Mackenzie. Dr. J. C. Sand was subsequently appointed to the professorship of materia medica therapeutics.

At each of several recent meetings, there was reference in the minutes to the report of the committee appointed to meet with the State Board of Medical Examiners, but there was still no clue as to what the meetings were about. At the January 9, 1906, faculty meeting, the dean read a letter from the state's attorney general in which he gave his opinion that the papers of candidates up for examination by the state board are open to public inspection by those interested in them, and that persons examined might see the markings and be informed in which subjects they failed. Dr. Otto Binswanger was elected treasurer of the faculty to replace Dr. Wilson.

At the April 27, 1906, faculty meeting it was proposed and seconded that the Building Association be requested to make necessary additions to the medical school building, and that the medical school should pay as rent for these improvements. The large addition was to be erected at a cost of \$10,000, thus giving increased room for work which was necessitated by the growing attendance. The new portion of the building will adjoin the present building at the rear and will correspond with it in appearance. It will be the same height as the present building, which is three stories, but will have only two floors. The lower floor of the addition will contain a large lecture hall in amphitheater style, with seats rising in a semi-circle around the platform. The platform will be fitted with operating and dissecting tables, so that the teachers can demonstrate in full view of a large class. The second floor will contain two laboratories. The enrollment had increased nearly three times since the building was opened and the new developments in basic sciences greatly expanded the teaching requirements in relation to those of 1892.

At the annual faculty meeting on May 7, 1906, the receipts for the prior year were distributed. All appointments for lecturers, demonstrators, and assistants were made for the succeeding year. Faculty

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voted to establish a non-returnable fee of \$2.00 for each laboratory course and to authorize the dean to make the decision whether a chair of pathology should be established. Such action would raise the title of the instructor from lecturer to professor. Most faculty meetings were held in the office of the dean in the Dekum Building. On rare occasions, they were held in the offices of other faculty members.

At the October 6, 1906, faculty meeting, the dean read a report on the outdoor clinics. The faculty involved in operation of the clinics advised the closure of the clinic at the Pilgrim Chapel and recommended that it be held at the school building. This recommendation was adopted.

Quite a stir was created in Oregon medical circles by the publication of an article in the fall of 1905 in the Journal of the American Medical Association by Dr. Joseph N. McCormack of Bowling Green, Kentucky who was chairman of the Committee on Organization of the AMA. Dr. McCormack had spent considerable time in Oregon during the 1905 World's Fair and had visited all of the component medical societies in the state. While acknowledging the high personal qualities of many Oregon physicians and expressing great appreciation for the many kindnesses and the hospitality he had received while here, the tone of his article was quite critical. He stated:

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"Factionalism in the profession in the City of Portland by rival surgeons and other specialists is almost entirely responsible for this demoralization in the State. In my opinion, there is no hope for improvement until this is recognized and a strong and excellent profession can be harmonized and united for its own public good in accordance with the modern 'spirit of organization."

He stated that outside of Astoria, in Clatsop County, there was very little real organization in Oregon. He stated that the energies of the physicians were so taken up with rivalry among factions that little opportunity existed to enlist the support or to command the confidence of the rank and file of the profession. This was an effective bar to progress.

> "There were a few good men everywhere, but the average grade of the profession was low and the spirit non-progressive. Their law is weak and is so administered as to give quacks and pretenders no trouble. There was evidence on every hand that the schools of Oregon did not have high standards or (were) equipped for (meeting) requirements and that their state examinations are such as to make this the dumping ground for low grade men who fail to pass in neighboring or even distant states."

Dr. McCormack went on to make several other statements to support his thesis that Oregon lacked proper medical ethics and of the advantages of coming from a well-organized profession. He then extolled the virtues of the organization in Astoria and expressed deep appreciation for the way he and his wife have been treated while in Oregon.

The January 3, 1906, meeting of the Portland City and County Medical Society had a very large attendance. The members came to discuss Dr. McCormack's article. Speakers were highly critical and disputed the accuracy of his statements. Dr. S. E. Josephi addressed himself to the criticisms Dr. McCormack launched against the medical schools in Oregon. He said that Dr. McCormack made no personal investigations to warrant his criticisms and that he obtained all of his information second hand. Dr. Josephi added that,

> "The Medical Department of the State University has kept well abreast of the advances made by other schools in requirements for admission, curriculum, and facilities for doing work. Clinical facilities are ample, there is no superficial work done in the School."

The doctor moved that a committee be appointed to draft resolutions and made rejoinder to Dr. McCormack's article. The committee was to consist of Dr. Kenneth Mackenzie, second vice president to the AMA; Dr. George F. Wilson, president of the State Society; Dr. Henry Waldo Coe, president of the Portland City and County Medical Society; and Dr. Walter E. Carll, chairman of the Oregon State Board of Medical Examiners. This motion was approved by the society. One of the best statements at the meeting was made by Dr. Mackenzie who said that there was some truth in Dr. McCormack's statements; that there is factionalism in the profession, but that he felt this was a healthy rivalry and good for the society and the profession. He stated that Dr. McCormack owed the society an apology for his statement that the best elements of the profession in Oregon are outside the membership of the medical society. There was no qualification for a man to get into the society other than that he be half-way decent.

> "When he states that the average of the profession was low and nonprogressive, he states that which is untrue and libelous."

Dr. Mackenzie stated that the average graduate from the schools in Kentucky, the home of Dr. McCormack, had a much lower average of intelligence than the graduates of the schools in Oregon. There was nothing in Dr. McCormack's article or in the discussion that took place at the Portland City and County Medical Society meeting which could serve as a basis or an editorial in the January issue of Northwest Medicine that indicated the basic source of the trouble was between the physicians on the medical school faculty and those who were not. This was an assumption on the part of the editor of Northwest Magazine. The editorial entitled "The Oregon Situation" follows:

> "A profitable lesson can be drawn by the profession of every state from the unpleasant relations existing among the physicians of Oregon, especially of the distinguished City of Portland as are related by Dr. McCormack in a recent issue of the Journal of the AMA. Such an unfortunate condition will come as a shock to hundreds of men and women who were so magnificently entertained by the Portland profession last summer and who failed to observe any family skeletons disclosed to the public gaze. Although not familiar with the details of jealousies and frictions among the brethren of that City, we cannot believe the situation is quite so dark and forbidding as described by Dr. McCormack. But, with a liberal discount for unintentional exaggeration the fact is lamentable enough that the physicians of any city should present such a striking lack of harmony as to constitute a legitimate topic of public comment.

"While not intending to pass judgment on the medical schools of Oregon, we venture the ascertion that the existing factions and discords had their origin, to a great extent, in the inherent jealousies centered about those institutions. The existence of the first impelled the establishment of a second for the benefit of the men with faculty ambitions who had been previously overlooked. Naturally, this served to further magnify hostilities between the outs and the This has been the history of the professional relations in all cities of the land in which the mania for more medical colleges has possessed the over-ambitious doctor. The realization of such inevitable results has been one of the leading arguments among the physicians of Washington who have been most active in opposing the perennial agitation among the authorities of the State University for the establishment of a medical school in Seattle. They have held that harmony among their fellows is of more value than the passing notoriety of a medical school appointment with the ensuing jealousies and quarrels.

"The disorganized state of the general profession of Oregon, as a consequence on the conditions in Portland is vividly portrayed by Dr. McCormack. He takes comfort, however, in the exceptional organization in Clatsop County, which he says is a model for the whole country. The physicians of Washington and Idaho, who are now busily engaged in the attempt to get together in a compact body, can well scrutinize these two pictures presented from their sister state. While unity is the ultimate end in view, it should be attained through harmony and as ' in all pulling together who have like interest."

In the July 1906 examinations conducted by the State Board of Medical Examiners, there were 44 applicants, of whom only 19 were successful in obtaining licenses to practice. Northwest Medicine had also stated that Oregon stands near the head of the list of states with a high percentage of rejected applicants for medical licenses. This is in distinction to 10 years before when just the reverse was true and Oregon was considered a dumping ground for those who could not be licensed elsewhere. These facts would indicate that Dr. McCormack's information on the licensing procedure in Oregon was also about 10 years out of date.

The January 13, 1906, issue of the Journal of the AMA published a letter from Dr. Josephi in which he took exception to Dr. McCormack's statements regarding the medical school. Dr. Josephi had reviewed this letter with the faculty and had received their approval. In the letter he outlined the history of the school, the successive steps taken by its faculty to improve the caliber of instruction and keep the school in compliance with the recommendations of the Committee on Medical Education of the AMA and the Association of American Medical Colleges and went on to state:

> "The School does not pretend to approach the equipment of the great endowed medical schools where the attendance is so much greater and where specialties are thoroughly taught. But it does maintain equipment equal to the needs of the members of its classes and its facilities enable us to teach well and thoroughly. It presents an instance of the small . unendowed school doing enormous, faithful and efficient work notwithstanding that it is overshadowed and belittled by its great and haughty brother, the endowed school. But the small school has its work to do and always will have. Further, you will find that the small colleges of the country have given as many or more great men to the world as have the great schools. As in all schools great or small, some poor students gain entrance and even



graduate, so exceptionally such cases may have occurred here. But even if so, no fair-minded man would think of making such rarely exceptional cases the standard of the school.

"What was Dr. McCormack's duty before publishing his conclusions regarding the school? Clearly to hear both sides of the question? Had he come to me or to any other member of this faculty for information, it would have been furnished to him gladly.

"I met and talked with Dr. McCormack on the evening of his visit and address to the Portland City and County Medical Society, but to me he said never a word about investigating medical schools or reporting on them, nor wishing information as to what he had heard of them or of their operations."

The Journal of the AMA had referred Dr. Josephi's letter to Dr. McCormack for his comment. Dr. McCormack's letter of reply followed Dr. Josephi's. Dr.' Mccormack stated that for nearly five years he had been engaged in a critical study of professional conditions, customs, and prospects in every section of the country and that Dr. Josephi was the only one who had ever questioned the accuracy of any statement that he had every made. He then used statements from Dr. Josephi's letter to substantiate his own original statement regarding the low level of medical education in Oregon.

The February, 1906 Medical Sentinel commented on this exchange of letters. The editor indicated that it was a little hard to believe that this was the first time in five years that any of Dr. McCormack's statements had been questioned.

> "This is a remarkable statement - so remarkable that one is inclined to take with a good many grains of salty anything that the good doctor may say hereafter."

The editor commented further,

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"Whatever may be done in Oregon to lessen friction among members of the profession will not be as a result of Dr. McCormack's visit, but in spite of it.

"Presumably, desire to do even-handed justice prompted the editor of the Journal to send Dr. Jospehi's letter to Bowling Green so that Dr. McCormack might have a rejoinder in the same issue. It is a pity that the same desire for evenhanded justice and fairness did not prompt the editor to send Dr. McCormack's article of December 9th to the deans of the colleges attacked so that their replies could have appeared in the December 9th."

The agenda for the February 7, 1906, meeting of the Portland City and County Medical Society consisted of receiving and approving the report of the Special Committee previously appointed to reply officially to Dr. McCormack's article in the Journal of the AMA. The report was published in the AMA Journal of March 3, 1906, and methodically reviewed each of Dr. McCormack's statements, disagreed with them and gave the supporting data for the disagreement. In relation to his criticism of the medical schools, the report called attention to Dr. Josephi's letter published in the January 13 journal and endorsed its sentiments.

The editor of Northwest Medicine had evidently come full-circle since his January editorial, because the June, 1906 issue contained the following statement:

> "To error is human. To acknowledge one's errors and make suitable amends seems sometimes beyond human nature. The history of Dr. McCormack's difficulties with the profession of Oregon discloses a serious error of judgment on his part at the outset, which was not later admitted in the presence of reliable proof of its existence. His sweeping condemnation of the profession of the state published some six months ago and clinched editorially by the Journal of the AMA appears to have resulted from evidence secured without adequate investigation as to its accuracy. When a denial was presented that such a state of discord and strife existed as it was charged, signed by physicians of Portland, whose professional standing and authority are established, not only in Oregon, but throughout the land, this was held as of apparently little value and the charges were reiterated on the testimony of a few scattered individuals. Neither the denials of the strictures on the Examining Board nor the evidence that the arraignment of the medical schools was unjust had been accepted as reliable or true.

> "Dr. McCormack seems to have been misled and misinformed at the outset and has insisted that this judgment was correct, in spite of facts to the contrary, accepted by other observers.



"Our sympathy is with the Oregon profession. We believe they have been misjudged and misrepresented. A spirit of courtesy and fair-mindedness should impel both Dr. McCormack and the Journal of the AMA, who equally spread abroad the calumny on our fair neighbor, to present a suitable explanation and refutation of the exaggerated charges."

Two days after the San Francisco earthquake and fire of 1906, Dr. Kenneth Mackenzie organized a party of physicians and nurses and went to San Francisco to assist in the work of caring for the sick. The following physicians went with him: Drs. Bowles, Marius B. Marcellus, Ralph Matson, Marie D. Equi, Ferdinand A. Dammasch, W. C. McKechnie, John R. Barber, Walter V. Spencer, Kauffman, Jospeh B. Bilderback, Clarencé J. McCusker, Robert H. Ellis, Albert Berkeley and John G. Swensson.

The December 1906, issue of the Medical Sentinel announced the founding of the Portland Academy of Medicine, with Dr. S. E. Josephi as its first president and Dr. A. E. MacKay as secretary. It was established for the purposes of scientific work and research. It was announced as the intention to limit the membership to five members, with charter members having practiced in Portland for at least 15 years. The constitution required members to have practiced for at least five years in the United States or to have taught in a medical institution. Regular meetings are to be held on the second Thursday of each month. One of the objectives of the academy was the founding of a medical library. It was the intention not to conflict in any way with the work of the city and county medical societies.

At the February 8, 1907, faculty meeting a motion was passed not to advance the requirements of preliminary education of students. In view of actions already taken by the faculty regarding the requirements for entrance to the medical school, it must be assumed by this section that there had been some discussion of requiring more than a high school graduation for admission. A letter was also read from the AMA concerning instruction in medical ethics being given to medical students. It was the sense of the faculty that this subject was being dealt with adequately at the present time.

At the March 16, 1907, meeting Dr. William Jones reported on the suggestions of Professor A. D. Bevan, chairman of the Committee on Medical Education of the AMA, who was then investigating the teaching facilities of medical schools. The suggestions included a higher standard of preliminary education with a minimum of one year in the state university or its equivalent and state aid for the medical school. Dean Josephi then read two letters written by him to President P. L. Campbell of the university and President Campbell's answer. A motion

was made and approved that a faculty committee of five be appointed to wait on the Board of Regents of the university to interest them in endeavoring to secure financial aid for the medical school. The committee appointed consisted of the dean and professors Holt Wilson. Ernest Tucker, Mackenzie, and Edmund Labbe. A motion was also passed that a committee be appointed to arrange entertainment to be held after the commencement for the teaching core of the medical school, the president of the university and the Board of Regents. At the next faculty meeting on April 26, letters of response to the invitation were read with President Campbell and Trustee Gear accepting and the rest declining. A letter to the dean was also read from a committee of three students representing the freshman and sophomore classes concerning the \$2 fee to be charged for laboratory work. It was ordered that the dean answer this letter stating that no change would be made in the fee. Evidently, student protest of tuition and fee increases has a long history in this state.

Dean Josephi's annual report on May 7, 1907, included the recommendation that Dr. James C. Zan be appointed by the Board of Regents as professor of materia medica and therapeutics, a position which he had filled for the last year and a half on a temporary basis. He also stated.

> "During the past year, the school added very materially to its teaching facilities by new equipment for laboratories and the occupancy of the addition to the building erected by the owners, at a cost of about \$4,000. This school is much in need of greatly increased appropriations for the payment of fixed salaries in some departments. The faculty has appointed a committee to take this matter up and present it to you and the Regents at the proper time."

The request for funds to support the salaries of full-time instructors is the first indication that the school and its faculty were beginning to realize that the increasingly rapid development of scientific medical knowledge, particularly in the basic sciences, was creating an instructional problem with which physicians, primarily dependent on private practice, could no longer cope. They could also observe the example of the programs and their quality developed by some of the eastern schools who had now employed full-time faculty for more than a decade.

The 1907 financial report noted that the item for rent of the school building increased from \$1,200, which it had been since the building was occupied in 1892, to \$2,340.62.

At the September 3, 1907, faculty meeting, the faculty received a proposal from a Seattle newspaper that one of the students admitted, a

Mr. Canfield, be given a scholarship; in turn, the Seattle newspaper would give the medical school advertising of equal value to the tuition and fees the student would otherwise pay. Response of the faculty was to make a counter-proposal to the paper that one-half of the tuition be paid in cash and the other half, plus the additional fees, be paid in advertising. The faculty also decided that they would not establish a chair in life insurance examinations.

At the September 9, 1907, faculty meeting, a rather major change was made in the organization of surgical teaching. William Jones, professor of clinical surgery, resigned and rather than appoint his replacement, it was decided to change the position held by Dr.' Kenneth Mackenzie as professor of military, operative and clinical surgery to the chair of clinical and operative surgery with responsibility for the teaching, formerly conducted by the two chairs and to appoint a lecturer to assist Dr. Mackenzie. This in effect made Dr. Mackenzie responsible for the overall instruction of clinical surgery. The lectureship program on the principles and practices of surgery was still under the direction of Dr. George F. Wilson.

At the October 14 faculty meeting, Dr. A. M. Baird was appointed to the lectureship in surgery. The question of resignation from the Association of American Medical Colleges was also thoroughly discussed. A faculty committee of the dean and Professors Story, George B. Labbe, and Otto Binswanger was appointed to consider the matter and report back to the faculty. At the next meeting on November 13, the committee reported and their report was adopted. It recommended resignation from the AAMC. There is no information as to why the faculty took this action. The faculty also decided against holding on-campus quiz classes conducted by physicians who were not on the faculty of the school. It would be interesting to know the reason behind this action. Evidently, other physicians in the community wished to participate in the instructional program without benefit of faculty appointment.

A number of interesting items were taken up at the March 13, 1908, faculty meeting. A response to the school's letter of withdrawal from the Association of American Medical Colleges was read from the secretary of the association, Dr. Fred C. Zapffe. The letter to Dr. Josephi follows.

> "I wish to acknowledge receipt of your favor of November 13th, the resignation of your college from the membership in this association. I regret that you felt compelled to take this step, but presume that you had reasons for doing so.

> "Permit me to inform you that the Willamette University was suspended from membership recently for not complying with the rules of the Association."

Letters from the secretary of the Board of Regents of the University of Oregon and from President Campbell of the university were read. The purpose of this correspondence was to direct the medical school to report the names of the students completing the requirements for graduation to the Executive Committee of the Board of Regents for their approval before the degrees were conferred. Approval was given to the recommendation that Dr. Robert C. Yenney be recommended to the Board of Regents for appointment as professor of pathology to take effect the ensuing academic year. This was the first professorial designation to the instructor in pathology. The faculty also instructed the dean to communicate with Professor Emeritus Holt C. Wilson, asking him if he is still connected with the National Hospital Association. If so, it is the intention of the faculty to request the Board of Regents of the state university to drop his name from the faculty.

The essence of the faculty action which culminated in the instructions for Dean Josephi to write Dr. Wilson'a letter is contained in the following portion of the dean's extremely diplomatic letter of March 16, 1908.

> "More than a year ago, your connection with the National Hospital Association was, as you know, widely commented upon in local medical circles, especially in connection with your proposed membership in the Portland Academy of Medicine, then in process of formation and as involving, as was thought by others than yourself, a great breach in medical ethics by one who heretofore had been looked upon as an exemplar of what an ethical medical practitioner ought to be. Members of this faculty formally discussed the matter as it related to certain acting members of our teaching corps who were guietly informed that the school could not consistently have in its teaching body men whose professional conduct. in connection with hospital insurance associations, could not be commended to the students attending its Whereupon the teachers referred to cheercourses. fully withdrew from the hospital association.

> "While the members of the faculty do not think for a moment of denying to yourself the right to your opinion and freedom of action in this or any other matter, the faculty is impressed still more to the duty it owes to the School to be consistent and fair to its students and others, even at the risk of giving offense by having its motives misunderstood.

"The faculty has directed me to communicate with you and inquire as to whether or not you are still associated with hospital associations and to inform you that, if so, the faculty will no longer publish your name as Emeritus Professor of Surgery and the Regents of the University be so advised.

"Sincerely trusting that the tenor of your reply will remove any reason for severing the heretofore pleasant association with yourself and this faculty."

The reply from Dr. Wilson was shorter and to the point. He suggested to Dean Josephi that the faculty go ahead and remove his name from the list of faculty and in rather precise language stated that he hoped in the future he would be allowed to mind his own business and it might be well for the faculty to do the same.

Dr. Wilson was the president of the National Hospital Association. It was one of the first organizations in the U.S. to offer a prepaid medical and hospital service for a designated fee. The feature of association to which the practicing profession took violent disagreement was the requirement that patients enrolled in the plan could only be treated by physicians who were on the association's physician panel. The patient did not have free choice of physicians. The relation of practicing physicians to hospital associations was to be a source of contention in local medical circles for the next 30 years. It is also an example of the impingement of medical society problems upon the operation of the medical school which is inevitable with a faculty almost entirely dependent on private practice for their livelihood.

Also at the March 13 meeting, it was decided to charge the City Board of Health \$50 per month for the use of the school's laboratories. It was ordered that students who continue in school after their four years of study are to pay a fee of \$50 per year. There was evidently some concern about the effects of withdrawal from the Association of the American Medical Colleges upon the ability of the graduates of the school to be licensed by State Board of Medical Examiners. It was decided to reaffirm the requirements for admission to the school published in the 1907-08 catalog and the dean was authorized to make such minor modifications as were necessary to fit the independence of the school from the Association of American Medical Colleges as long as the modifications did not decrease admission requirements in any way. A letter was read from the Secretary of the Council on Medical Education of the AMA, calling attention to the requirements for admission after January 1, 1910. The faculty adopted the requirement as expressed in the letter.

A letter from Dr. Esther Pohl, the City Health Officer, stated that an agreement to pay \$50 per month for use of the school's laboratories was unauthorized and as a majority of the Board of Health were involved in the medical school, it would be illegal for the board to rent the school laboratory. The board promised they would vacate the school's premises and remove their apparatus, excepting that which was attached to the building.

Lastly, at the March 13 meeting, the dean reported on the requirements for admission to medical schools in accordance with the instructions of the faculty given at the previous meeting. Requirements for admission to the school were now:

- 1. Bachelor's Degree from an approved college or university.
- Diploma from an accredited high school, normal school or academy; requiring for admission evidence of completion of an eight-year course in primary and intermediate grades, which listed in its requirements for graduation specified courses in foreign languages, mathematics, English, and laboratory sciences.
- 3. An examination. To pass this examination, completion of a high school course was necessary. The examination had to be given by a recognized official of an academic institution or of the State Board of Education. It could not be given by anyone having any interest in or relationship to the medical school. The applicant was also required to furnish a satisfactory certificate of good moral character signed by two reputable physicians of his locality.

At the May 15, 1908, meeting, the faculty recommended that steps be taken to place bacteriology earlier in the curriculum than the fourth year. It authorized the dean, in conjunction with Dr. Ralph Matson, to arrange the course to carry out this recommendation. On October 13, a committee of Drs. Mackenzie, Labbe and Tucker was appointed to interview the regents of the university and obtain additional aid for the school and "make proper representation to the regents of the conditions attached to medical education."

There were now eight one-year appointments for graduates of the medical school, five at Good Samaritan Hospital, two at St. Vincent's, and one at St. Joseph's in Tacoma.

Several scheduling changes were introduced in the curriculum for the 1908-09 school year. Classes for both freshmen and sophomores now started at 8 a.m. rather than at 9 a.m.. For the freshman class, the hours 10 a.m. to noon each day throughout the year were divided into three parts. The first third of the year was devoted to clinics and microscopy in the histology laboratory under Dr. Ray W. Matson; the second third to physiology laboratory under Dr. Clarence J. McCusker; and the last third to embryology under Dr. Labbe. The same period in the second year was about equally divided between physiology under Dr. McCusker and a pathology laboratory by Dr. Yenney. In accordance with faculty instructions, Dr. Matson's laboratory in bacteriology was transferred from the fourth to the third year from 3 to 6 p.m. on Mondays and Fridays.

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In his presidential address to the Oregon State Medical Society at its annual meeting in July of 1908, Dr. Robert C. Coffey touched on a number of subjects including medical education. He commented on the reduction of the number of medical schools in the country since organization of the Council on Medical Education of the AMA and its policy of publishing the percentage of failures of graduates of the schools in the examinations of the various state boards of medical examiners. He recommended that the two schools in the northwest (both in Oregon) should be combined into one and that the profession in the area should have more to say regarding school policies. A committee of the society was appointed to report on the president's address. The committee consisted of Dr. Charles J. Smith, William J. K. Kuykendall, and Noble Wiley Jones. Their report stated:

> "Consolidation of the medical schools of this state appeals to us as one of the most urgent needs of the hour. The demand for higher efficiency in our schools is so great that something must be done. Probably, consolidation is the best remedy for existing conditions. We therefore recommend that a committee of five be appointed from this association of which one member shall be selected from the faculty of each school to consider the advisability of consolidating and plans therefore."

The committee appointed consisted of Drs. E. Barton Pickel (Chairman), K. Mackenzie, Walter T. Williamson, W. J. Kuykendall and Nicholas, Molitor.

The same meeting was addressed by Dr. Andrew C. Panton, president of the Oregon State Board of Medical Examiners. Dr. Panton, one of the organizers of the University of Oregon Medical School, reviewed the need for high standards of medical licensure. He decried the fact that many so-called medical schools were not following proper standards of admission and instruction and that it was the responsibility of the State Board of Medical Examiners to see that such graduates were not licensed. He indicated that he personally as well as the board had been under severe criticism for setting standards so high that some applicants could not pass their examinations. The following statement is from his address:

> "Up to the time that I became a member of the Oregon State Board of Medical Examiners, no graduate of an Oregon medical school had ever been refused a license by the Board, all being simply endorsed and turned loose upon the people, although those with diplomas



from outside colleges were often rejected. There has never been any controversy about these outsiders, many of whom like some others, were unspeakably bad. When they failed to qualify there was no protest. But when an Oregon graduate failed, it was otherwise and raptures of indignation were usual. This, to my mind, is all wrong. As I believe that we should treat all applicants for license alike, no matter whence they come, welcoming the best and turning back those who are found lacking. Our first duty being to protect the people and profession of our State. There is no gain saying the fact that our local medical schools were being conducted very loosely and it will take more than a quarter of a century to live down the bad work which has been done by them.

"The failure of Oregon graduates before our Board has been charged up to me and I have never tried to shirk this responsibility. I said that I would leave the Board and make my reasons public, if grossly incompetent applicants were not rejected indiscriminantly as a plain matter of duty, and the Board took the alternative of coinciding with me.

"I have not intended to belittle some honored members of our profession who are Oregon graduates. Such men as the Matson Brothers, Dr. J. O. C. Wiley and others well known to us. Nobody has ever made a better showing before our Board than Dr. Hoffman who graduated from the Medical Department of the University of Oregon a couple of years ago.

"Reforms have been made by the Medical Department of the University of Oregon and if others such as disincorporating as a stock concern and getting a State endowment for teaching, be carried out, it should have a legitimate future. Some of the professors of the Salem school have said to me that their school should not exist. It would seem to me, that holding such an opinion, they should resign and thereby cease to endorse it, and perhaps bring about the accomplishment of their expressed desires. I believe that the graduates of our local schools who have been rejected by the Board, are almost all practicing in our state at present and ought to be restrained."

The August 1908 issue of the Medical Sentinel commented at length on the meeting of the Oregon Medical Society. There had evidently been some disagreeable confrontations at the meeting between the President, Dr. Robert C. Coffey, and other members of the profession. Dr. Coffey had been setting up a group practice with members of the groups specializing in different areas of practice. Other members of the local profession felt Dr. Coffey and his associates were exceeding the bounds of propriety in promoting their professional status. Papers under Dr. Coffey's signature were appearing almost monthly in medical journals. All members of his group were on programs for the state society and they were felt to be actively seeking places on the programs of other component county societies. There were some questions as to whether the small number of graduates of Oregon schools passing state board examinations could be attributed to Dr. Coffey's presence on the board. The Medical Sentinel stated:

> "Either the medical colleges of Oregon ought to improve or disband or else there should be a change in the state medical examining board by the removal of one or more members. At the present time there is either thoroughly bad management of the schools or spite on the part of Dr. Coffey and others. There is a great imposition upon the unfortunate students who are spending money and time at these institutions now to be turned out impotent to practice in their own state.

> "Following the several strictures upon these schools by the President in his address, at an examination of students by the State Board of Medicine, of which Dr. Coffey is Secretary, but one of the Willamette students passed, and this student had been in California at Cooper Medical College for some months after being once rejected by the Oregon Board. None of the recent Willamette graduates passed.

> "Of some 16 graduates at the recent commencement of the State University, but 6 of the picked graduates faced the Board and but 3 of these passed. That the other 10 earnestly desired the Oregon certificate is certain. Three out of 16! Something is wrong somewhere. The school may be somewhat at fault, but at this range it does not seem possible that it all lies with the school.

 "The reflection on Oregon is nationwide. A reflection upon two good universities and a splendid body of old graduates. "The Medical Sentinel will take up this matter in a following issue and treat it from other standpoints. Truth is what we want."

The following editorial appearing in the Portland Telegram was reprinted in the Medical Sentinel of September, 1908. It brought to public attention the controversy between the medical school and the State Board of Medical Examiners.

"Do Young Doctors Lack Qualifications?"

"It is said that the 'ins' are trying to keep out the 'outs'. As to the 'ins', they are putting it all on the examinations and allege that the failures are entirely due to lack of ability of those examined to stand the examinations. The 'outs' are saying that the examinations include spelling, punctuations, English, the way the papers are gotten up and things that are more or less extraneous to the real things at issue.

"There is the local medical college for instance whose standing comes very largely, if not solely, from the advertised fact that it is the Medical Department of the State University, which it is somewhat less than more, because it is, after all, a private institution and not a state institution. But of the gleeful graduates from the Medical College, 12 attempted to get State Certificates so that they might begin to practice their profession within the State of Oregon. Of these only 3 passed. It is a well known fact that the doctor, as a rule, is the best able to stand such an examination immediately after his graduation, for then, the theory of medicine is clearest in his mind. But 75% of them failed.

"Now it is being said that the examiners are prejudiced, that they will not allow more than a certain number to begin business here, and that they arbitrarily hold down the list. This is a serious charge. Are those young men fully qualified to begin the practice of medicine in this state? It is supposed that they are when they get their sheepskins from the Medical College. If they are not, they have a real grievance against the college, or those who run it for their personal profit. If after paying their money, they are permitted no way to negotiate the knowledge for which they had paid where do they get off and what right have they to a diploma?

"Either the college falls short of what should reasonably be expected of it, or the Board of Medical Examiners are a set of ogres who are trying to keep good men down. There is a growing curiosity as to where the fault if there be a fault lies, but the speculation so far has developed very little satisfying information. Meantime the young graduates have the worst of it to a very liberal degree, and it is surprising that they have accepted an intolerable situation with so much philosophy."

The September issue of the Medical Sentinel also included three letters written by the editor to Dr. Coffey, secretary of the State Board of Medical Examiners, asking for the questions asked of graduates of the University of Oregon Medical School and their answers at the last Oregon Board of Medical Examiners' meeting at which only three of the Oregon graduates had passed. The Sentinel did not gain access to the questions or the answers. One of the Sentinel's letters included the following statement:

> "It is doubtless known to many physicians as it is to us that you hold certain Portland Medical College professors responsible for your rejection for membership by the Medical Academy and also the social club, and it is thought natural that you should feel somewhat bitter toward them. It therefore seems to us as though you have a special reason to exert yourself in securing for us for publication questions and answers made by the three University of Oregon graduates rejected by you recently. Their names can be withheld. This is the crux of the whole situation."

The Medical Sentinel also contained another editorial from the Evening Telegram:

"The young medics who recently graduated and got their sheepskins from the local Medical College, which claims to be the Medical Department of the State University are still inquiring what the education for which they paid and to which they devoted so much of their time amounts to. If they are given diplomas by so-called state institutions, then those diplomas not only permit, but authorize them to practice their calling, while at the same time they purport to be evidence of the graduate's fitness to do so, how is it that 75% fail to get a certificate which will permit them to practice in the State from the State Board of Medical Examiners?

"Is the State Board too exacting and arbitrary? Does it make unreasonable demands upon the students, asking questions which do not directly affect their fitness to practice medicine, while at the same time effectually debarring from this means of making a livelihood? Or, on the otherhand, does the sheepskin which the young doctor so highly prizes represent anything more than so much money spent and so much time put in without special reference to the actual ability or qualifications of the man who holds it? What share of responsibility, if any, does the State University assume in the premises? Does the granting of the diploma impose any obligation upon the college itself, even though to see that its graduates are sufficiently qualified to be permitted to practice medicine in their own state? On the otherhand, does the failure of 75% of these graduates to get a certificate which will permit them to practice in Oregon carry with it any reflection upon the institution which turns them forth? In other words, it is simply a factory or what it purports to be, mainly a college?

"The matter is not of much consequence except perhaps to the confiding young student who pays his money and gets much less than he expects in return. But surely he is entitled to some little consideration and ought to be permitted to rise up and make some inquiries before being cast permanently into the outer darkness. Where then does he stand? Does anyone know or care?"

The inability of the majority of graduates of the University of Oregon Medical School to become licensed in their own state was of course a matter of great concern to the school and its faculty. The matter was now a subject of widespread debate, not only in medical circles, but in the public press. The October 1908 issue of the Medical Sentinel had further discussion of the matter. It contained a letter from Dr. William Jones of the school's faculty to Dr. Coe, the editor of the Medical Sentinel, in which Dr. Jones canceled his subscription to the Sentinel because of "Your attitude of hostility assumed in the recent number of the Sentinel toward the Medical Department of the Oregon State University." The Sentinel published Dr. Coe's response to Dr. Jones' letter, pointing out that Dr. Coe felt he had been fair in presenting all sides of the matter. It included this quotation:

> "You must acknowledge that with 23 graduates this year from the two Oregon schools and only 3 of them having certificates to practice when the Board is passing students from other institutions, including 2 osteopaths, there is something wrong somewhere and those unfortunate students are not getting a square deal. They need other friends than those whom they have found."

The final paragraph in Dr. Coe's letter:

"If there is trouble with the school, let us raise a sum of money and equip it in better shape than it is now. I would here formally propose to you that I will head a list of 10 doctors who should each give \$2,500 toward the sum of \$100,000 with which sum to add equipment and very much enlarge the school for the qualifications and usefulness of the school. It is our own school, the Medical Department of the University of our own State. I made this proposition some time ago to Dr. K. A. J. Mackenzie."

Dr. Coe reiterated this statement in an accompanying editorial in the same issue.

The November 1908 issue of the Medical Sentinel contained a paper prepared by W. Carlton Smith, professor of anatomy of the Willamette University Medical School. He reviewed a study of seven of the school's graduates who had repeatedly failed the Oregon examination. He pointed out that all of the seven applicants had received satisfactory grades from their examinations in subjects given by four of the five members of the board and had failed quite badly in the examinations given by the remaining member of the board. This was consistently true, even though the subjects given by this examiner varied in the different examinations. He also pointed out that all of these graduates had taken the exams in three other states and had passed and been licensed in all of them.

At the faculty meetings on December 18 and 30, 1908, the faculty was concerned with the criticisms of the medical school which had been published in the Evening Telegraph. These were felt to be disparaging of both the school and its faculty. At the meeting of the 18th, the dean presented to the group his letter to be published in the December 20th Oregonian, refuting the criticism. However, the faculty decided instead to appoint a committee of two to get advice of attorneys as to

whether the Telegraph's statements could be considered libelous. Professor Binswanger voted against this motion and requested that his vote be made a matter of record. The faculty had decided to appoint another committee of two to draft a personal statement setting forth the claims of the medical school to be considered efficient and refutable and the report to be brought back to the faculty for approval. They also approved a motion to invite all of the teaching staff to the faculty meeting so that the reports of these committees could be considered. The dean was also instructed to invite University of Oregon President Campbell to be present at an early date to confer with the faculty on At the December 30 meeting, the opinion of the medical matters. attorneys was presented and accepted. The nature of the opinion was not mentioned. Evidently, it was decided not to publish a statement in the paper as a motion was passed that the student body be advised as to why the faculty did not publish a statement in their defense.

An editorial in Northwest Medicine reported from a correspondent who was acquainted with the activities of both the Washington and Oregon Boards of Medical Examiners in which he stated that graduates of the University of Oregon Medical School compared most favorably with the graduates of the best schools in the country who appeared before the Washington board for licensure.

> "There has never been so far as I know a graduate of the Oregon school on the Washington Board so that there is no reason to suppose the Oregon men have been treated differently from the rest. There is food for thought in this report. The percentage of failures of the Oregon graduates before the Oregon Board is many times greater than before the Washington Board. What is the deduction? Some members or members of the Oregon Board are being grossly unfair to the Oregon graduate and no matter what the motive there is great harm being done and it should be stopped."

Criticism was also mounting over the lack of public support by the Oregon medical school and its faculty for its own activities and for its graduates. Faculty and students were not publicly speaking out; on the contrary, they directed their wrath at the Medical Sentinel and other publications which were publishing on the matter.

At the March 17, 1909, faculty meeting, Professor Bell reported that he had addressed the students and they expressed their satisfaction of the interest taken in their welfare by the faculty. It is assumed that this related to the public controversy over licensure of the school's graduates.

At the April 30, 1909, meeting, \$225 of breakage fee funds were approved for the repairing of microscopes and it was decided to take enough funds from the next year's income to purchase additional microscopes so that each student would have one.

At the May 10, 1909, faculty meeting, the dean and Professor Giesy were asked to interview Judge Webster about using the County Hospital for teaching purposes. This probably referred to the new hospital being established in southwest Portland in a former dwelling house.

At the August 6, 1909, meeting, Professor Story read the report of the Committee on Outpatient Clinics. The committee had been in contact with the People's Institute and the faculty decided they would be glad to cooperate with the People's Institute in setting up clinics in the institute's facilities, but they would not be able to help financially in the clinic's operation. It was suggested that the city be asked to defer the expense of the caretaker, drugs and the equipment and that the clinic could then be used by the city as an emergency hospital. Professor Mackenzie reported for the committee on appropriations from the University Board of Regents. He reported "Progress". He asked the committee to work towards securing funds for an instructor and an assistant. The dean also reported on the committee relating to the County Hospital. He reported that they had met with Judge Webster and the faculty suggested that he arrange for clinics to be given by the staff of the County Hospital and to interview the commissioners to this end.

The school catalog for the year 1909-10 had been the first to include this statement:

"Beginning with the session 1910-11, the minimum requirements for admission will be increased by the addition to the present requirements of a four-year high school's education of one year of nine months to be devoted to physics, chemistry, biology and one modern language (preferably German)."

The catalog also noted that the County Hospital had been moved from its former site on Canyon Road to south Portland where it was easily reached by streetcars. The announcement stated that all laboratory students would be required to furnish their own microscopes and that those not possessing instruments could rent one from the college, one microscope to each two students with a rental charge of \$5 per student, payable in advance.

At the October 26, 1909, faculty meeting, the committee appointed to work with the county authorities regarding medical student instruction in the County Hospital was increased. It was instructed to "secure for the Medical School the exclusive control of the clinical material in the County Hospital during the session of the school." This is the first time the phrase "exclusive control" has appeared in relation to teaching in the County Hospital. Correspondence from the People's Institute was read. Professors Story, Tucker and Mackenzie were appointed to a committee to confer with the People's Institute to secure a nurse for the clinic from either the Visiting Nurses Institution or from some of the Portland hospitals. If this could not be done, the committee was authorized to pay \$25 a month for seven months to the People's Institute, or if necessary, to pay the \$25 per month for the entire year. At the November 1934 meeting, the committee recommended that \$25 per month be paid to an attendant by the school and that three members of the faculty be appointed to the trustees of the People's Institute representing the medical school. The three trustees appointed were Professors Story, Tucker and Mackenzie to hold office until the next annual meeting of the faculty. The secretary was ordered to inform the People's Institute accordingly.

The controversy between the medical school and the Oregon State Board of Medical Examiners regarding the examination experience of the school's graduates continued into 1909. The January 1909 issue of the Medical Sentinel decried the fact of this controversy was being aired extensively in the public press and noted that Dr. Andrew C. Panton, chairman of the state board, a leader in the controversy, had resigned from his position.

While it is difficult many years later to judge the merits of this controversy between the medical school and the state board, there does seem to be evidence that graduates of the Oregon schools were being treated differently by the Oregon board than by the boards of examiners in adjacent states. There is also adequate evidence that the University of Oregon Medical School was experiencing difficulty in keeping abreast of the advances in medical education in other areas of this country. Examples are the faculty's recognition that the school needed additional non-tuition financial resources to support full-time instruction in the basic sciences and to purchase laboratory equipment, and the pressure the school was facing to accelerate the adoption of constantly higher admission standards. However, it is clear that this is also an example of the school and its students being affected adversely by the resentments of other physicians in the area of the non-school actions of faculty members who were playing a dominant role in local medical activities.

EDITOR'S NOTE

In the 10 years since Dr. Holman's death, the Oregon Health Sciences University has continued its tradition of excellence in education, research and patient care. In just the past few years alone, the university has seen tremendous growth -- physically and programmatically.

Today it includes 5,200 people dedicated to Oregon's health in a variety of areas. Occupying 26 major buildings on 116 acres atop Portland's Marquam Hill, The OHSU includes the Schools of Dentistry, Medicine and Nursing; the new Vollum Institute for Advanced Biomedical Research; the new Center for Occupational Disease Research; University Hospital and Clinics; Doernbecher Children's Hospital; and the Crippled Children's Division.

In addition, new centers of excellence are being planned. These include the new regional eye center, with ground breaking scheduled for 1987; and a computerized Biomedical Information Communication Center, which will be the library of the 21st century.

Although the university's basic mission is to educate tomorrow's health professionals, it is also a place where education, patient care and research unite to strengthen and save human life. These principles flourish today, as they did during Dr. Holman's service as dean of the School of Medicine from 1968 to 1975.