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Meanwhile Dr. John Pomeroy, for many years the leading physician of Burlington, began around the turn of the century to take pupils. In 1804 he was appointed Lecturer in Chirurgery and Anatomy and, in 1809, Professor of Physic, Anatomy and Surgery at the University. The position carried no stipend nor did the institution even provide a room in which to give instruction. By 1814 Pomeroy had so many students he could no longer accommodate them in his home and he consequently rented an empty store in which he lectured to a class of 12. His son, John N. Pomeroy (not a physician), added a course of lectures in chemistry in 1816 and to these the townspeople occasionally came out of interest in the demonstrations.

In 1822 a faculty of 5 professors including John Pomeroy and Nathan R. Smith was assembled and the Trustees of The University of Vermont ruled that the president might “confer medical degrees on such persons as shall attend the medical lectures and are recommended by the medical professors and lecturers of the University.” Dr. Smith’s father, the more famous Dr. Nathan Smith and the founder of the medical colleges of Dartmouth, Bowdoin, and Yale, is said to have helped in the organization of the Vermont school.

In the early years of the 19th century only a small portion of medical education took place in the universities. The part-time doctor of colonial times had given way to the full-time professional physician but there was no legal regulation of the practice of medicine. Most degrees and certificates, if they were obtained at all, were granted by the medical societies after the candidate had served as an apprentice.

William Beaumont, the Army Surgeon whose experiments on the physiology of digestion as performed on the person of the French Canadian youth, Alexis St. Martin, formed the basis of this science, began his medical career in Vermont. While still a school teacher in Plattsburgh, N.Y., he is said to have paddled a
canoe across Lake Champlain to read in the library of Dr. Pomeroy and later was apprenticed to Dr. Benjamin Chandler of St. Albans. The minutes of the Third Medical Society of Vermont record that on the second Tuesday of June, 1812 Beaumont “presented himself for examination in the different branches of the medical profession” and was approved.

In the late 1820's a group of local physicians interested some philanthropically-minded residents of Burlington in buying land for a medical college building adjacent to the University campus and in 1829 a two-story brick building was built. In 1828 Benjamin Lincoln, the grandson of the famous revolutionairy general of the same name, was invited to Burlington to give a course of lectures in anatomy. Lincoln had had a classical education at Bowdoin and had been apprenticed to the fashionable and distinguished Dr. George Shattuck of Boston. Rustic and educationally unprepared as most of the Vermont students were, they were evidently entranced by Dr. Lincoln’s beautiful demonstrations and the clarity of his presentations. He was offered the chair of anatomy and although the Universities of Maryland and Bowdoin both solicited him he chose Vermont, perhaps because he “hoped to realize . . . . his idea of a medical school in this University without the hindrance of encrusted organic remains from old formations.” Lincoln soon became the leading light of the school which flourished for a few years. Unfortunately he became ill and in 1834 went back to his home in Maine to die. There were now two other medical schools in the State and an economic depression was developing. In 1836 after having granted 116 degrees in course and 24 honorary ones, the College of Medicine closed its doors.

There was a lapse until 1853 when after many tribulations, most of them financial, Drs. W. S. Thayer of Northfield and Walter Carpenter of Randolph succeeded in re-organizing the Medical College. Subscriptions were solicited from the medical professors and the Burlington townspeople and Mrs. Thayer held a “fair” which netted $450.00. The University provided a building (the same one which had been used by Dr. Lincoln and which still is in use, although for different purposes) on the academic campus. In spite of competition from the schools in Woodstock and Castleton in Vermont, and Hanover, N.H., courses were started
and the school remained viable largely through the efforts and personal and professional distinction of Drs. Thayer and Carpenter, both of whom served successively as Dean. The average student attendance from 1859 to 1878 was about 65. Then under the deanship of Dr. A. P. Grinnell there was a period of rapid expansion reaching a high tide in 1884 when 101 young men were graduated in Medicine.

The University of Vermont College of Medicine was then, as were most others of the day, essentially a proprietary institution. The University provided some amenities and it was to a considerable extent responsible for the success with which the College outlasted many of its competitors. The medical faculty was, however, a closed corporation collecting its own fees and providing its own administration. That this was not an ideal situation was apparent to the profession and in fact it was a movement toward reform of medical education proposed by the Vermont State Medical Society in the 1840's which led to a national convention which later evolved into the American Medical Association. In 1899 the Trustees of the University, although as yet only dimly aware of the enormous responsibility, financial and otherwise, which this was to entail, took over complete control of the College of Medicine.

Medical education in the 19th century was didactic but clinical teaching, a rare luxury at first, became progressively more important. In 1879 the Mary Fletcher Hospital was built in Burlington and in 1924 the DeGoesbriand Memorial Hospital began to admit patients. Both have become centers of clinical instruction and in December of 1966 the Trustees of the two institutions voted to merge and to form even closer association with the Medical College, thus providing the community with the advantages of a university hospital while at the same time retaining long traditions of service to the sick.

During the post-World War II deanship of Dr. William E. Brown, the faculty of the College of Medicine began a period of exponential growth, adding a national and then international flavor to the academic medical community. Under Dean George A. Wolf, Jr., and then Dean Robert J. Slater, the responsibility of American medicine toward the developing nations of the world has been implemented, research has flourished, and the material resources of the institution have increased, culminating in the construction of a new medical college building which when completed, probably in 1968, will permit an entering class of 75 as compared with the present 55.
REQUIREMENTS FOR ADMISSION

Applicants to The University of Vermont College of Medicine are expected to hold a Bachelor's degree from an accredited college or university by July 1 preceding the September admission date. They should have completed one year each of the following college level courses: biology, English, mathematics, physics, general chemistry, organic chemistry, a satisfactory one-semester course in quantitative chemistry or physical chemistry. The College of Medicine prefers candidates who have concentrated in one or more fields of interest, not necessarily in the life or physical sciences; and who present a background of active participation in the life of their college or university.

Students must complete satisfactorily all requirements for admission to the College of Medicine in any given year by July 1 preceding the September admission. Eligibility of an applicant for admission is determined by the Admissions Committee of the College of Medicine on the basis of the following:

The scholastic record of the applicant in his premedical work.

Personality and general fitness of the applicant for the study and practice of medicine as determined by recommendations of the applicant's college teachers and others, and by personal interview with the Admissions Committee.

The applicant's scores on the Medical College Admission Test. Such scores are taken into consideration but are not used as a final determinant in accepting students. If a majority (all but one or two) of the required courses have been or will be completed by the end of the third year in college, applicants are urged to take the Medical College Admission Test in May of that year.

All applicants are required to submit a health report completed by their college or university health service. (Not by their personal physician.)

A maximum of fifty-five students will be admitted to the entering class in the fall of 1967, and seventy-five students in the fall of 1968 when a new medical unit will be available.

Preference for admission is according to the following priorities:

Qualified residents of Vermont.

Qualified residents of other New England states having contractual arrangements with the College of Medicine through the New England Board of Higher
Regulations for College of Medicine Students

Education. Contracts are presently in force with the states of Maine, New Hampshire, Massachusetts and Rhode Island.

Qualified residents of other areas.

Sons and daughters of alumni of the College of Medicine are given special consideration within the framework of the above policy.

Applications for admission to the class entering in September of any year will close January 1 preceding the September admission. Application is advised by December 1 for early consideration.

An application fee of ten dollars (not refundable), payable to The University of Vermont, must accompany all applications.

When an applicant who is not a Vermont resident is offered admission to the College of Medicine and wishes to accept this admission, a deposit of $100 must be paid not later than two weeks following notice of acceptance in order to reserve a place in the entering class. This deposit is refundable up to January 15 preceding admission, should the student release his place in the class. The deposit is applied toward the student's tuition in the first semester upon matriculation in the College of Medicine. Checks should be made payable to The University of Vermont and sent to the Admissions Office, College of Medicine, University of Vermont, Burlington, Vermont 05401.

ENROLLMENT

All entering and returning students will register and be formally enrolled shortly after the opening of classes the week following Labor Day each September. Payment of tuition and fees for the first semester is required at this time. Residents of those states having contractual arrangements with the College of Medicine will be required to establish proof of residence prior to registration. A late registration fee will be charged students who fail to register on the day designated for registration.

Regulations for College of Medicine Students

Students are governed by the regulations as stated in the Bylaws of the College of Medicine. Some of the more pertinent regulations in these Bylaws are as follows:
ATTENDANCE

a. Attendance upon the exercises assigned for the year is obligatory. Failure to attend 80 per cent of the exercises of any course constitutes a failure in that course.

b. Students must wait 10 minutes for an instructor or lecturer who is tardy. In case of examination, students are expected to remain at least 30 minutes.

c. No student is eligible for a medical degree who has not been registered in medical school four complete consecutive years unless a leave of absence has been granted by the Executive Committee. Resumption of study after other absences greater than the time allowed for absence will be permitted only on majority vote of the Faculty of the College of Medicine upon the recommendation of the Admissions Committee.

ADVANCEMENT

a. The work of each year is final, and students are advanced when they have completed satisfactorily the work assigned for the year.

b. The standing of each student in his class at the end of the session is based upon the general character of his work in the different laboratories and other practical exercises, upon the character of his recitations, and upon the results of all examinations held during and at the end of the session.

c. The work of students is evaluated on the basis of 100 per cent. The lowest passing grade is 75 per cent.

d. Any student who has failed in 25 per cent or more of the major courses in any year will not be allowed to advance with his class. Neither shall he be allowed to repeat the work of that year, except upon recommendation of the Committee on Advancement and by vote of the faculty.

e. Students who fail in less than 25 per cent of the major courses in the first, second, or third years may be re-examined in the subjects failed at the regular examination period preceding the opening of the next school year. The highest final grade allowed for a course passed on re-examination shall be 75 per cent.

f. A student who, upon re-examination in any subject, again fails will be dismissed from the College. Such student may, however, petition the faculty to repeat the year.
g. In a repeat performance of the work of any year, a student must have an average of at least 80 and must not fail any courses whether major or minor.

h. A student, whose grade average for the year is less than 80, may be required, after review of his status by the Committee on Advancement and formal approval of the faculty, to withdraw from the College.

i. A student who has been a member of either the first, second, or third-year class for two school years, and has failed to fulfill the requirements for advancement, or a student who has been a member of the fourth-year class for two school years and has failed to fulfill the requirements for graduation will not be enrolled again as a student of the College of Medicine.

j. The Faculty may recommend the dismissal at any time of a student who is considered to be unfit for a career in medicine.

k. A student who fails to present himself at the appointed hour for any examination at which he is due to appear will be treated as having taken the examination and failed to pass it, unless he is excused from such examination by the chairman of the department or division.

l. The scholastic records of all students shall be reviewed by the Committee on Advancement at the end of the course work, and may be reviewed at any time.

m. Students shall not be apprised of their grades in any course or examination, nor of their exact standing in their class and they shall not have access to their grades from the files of the College or of the University.

n. Final written examinations shall not be returned to students. If a student receives a failing grade in any final written examination or in any course, final written examination shall be filed in the Dean's Office.

o. Final examinations may or may not be held, at the option of the departmental chairmen, with the approval of the Dean.

p. Final course marks are to be reported to the Dean's Office; if a course terminates in mid-term, final marks shall be reported to the Dean's Office within two weeks after such termination.

q. No student of the College, assigned to extra-mural duty, shall absent himself from such assignment except with Dean's permission.
Special rules affecting each class:

(1) 1st year: Rules regarding failures apply, except that the Committee on Advancement is empowered to review cases of failure and make such recommendations to the Dean and the Faculty as it may see fit.

(2) 2nd year: At the completion of the second year's work students may be required to take a comprehensive examination upon recommendation of a department chairman, subject to the approval of the Committee on Advancement and the Dean. At the end of the second year, students are advised but not required, to take Part I Examinations of the National Board of Medical Examiners.

(3) 3rd year: The third-year students shall be judged on the basis of course work, present rules regarding failures to hold except that the Committee on Advancement is empowered to review cases of failure and make such recommendations to the Dean and Faculty as it may see fit.

(4) 4th year: Fourth-year students may be required to take a comprehensive examination upon recommendation of a department chairman unless excused by the Dean of the College. They are advised, but not required, to take Part II Examinations of the National Board of Medical Examiners.

Correct English usage is demanded by all departments in the University. Written work of any kind which is unsatisfactory in manuscript form, grammar, punctuation, spelling, or effectiveness of expression may be penalized regardless of contents. Students whose written work falls below the standard of correct usage may be remanded to the English Department for additional instruction, even though the freshman course in English has been passed.

REQUIREMENTS FOR GRADUATION

Candidates for the degree of Doctor of Medicine must have reached the age of twenty-one years and must be of good moral character. All the requirements of this college in regard to preliminary education must have been met, and the candidate must have attended regularly and completed satisfactorily the prescribed work of the four courses of instruction. Students must have discharged all current indebtedness to the University.

The degree of Doctor of Medicine is granted by the Board of Trustees of The University of Vermont to candidates only upon recommendation of the Com-
Fees and Expenses

Committee on Advancement and the Faculty of the College of Medicine to the University Senate.

While internship is not required for graduation, graduates are expected to serve at least a one-year internship in a hospital approved by the Council on Medical Education and Hospitals of the American Medical Association.

All candidates for degrees must be present at Commencement unless excused by the Dean of the College.

Fees and Expenses

<table>
<thead>
<tr>
<th>Item</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>Application fee</td>
<td>10.00</td>
</tr>
<tr>
<td>Deposit fee</td>
<td>100.00</td>
</tr>
<tr>
<td>Required of all non-residents admitted to the entering class, and applicable toward tuition.</td>
<td></td>
</tr>
<tr>
<td>Tuition</td>
<td>600.00</td>
</tr>
<tr>
<td>For Vermont residents and bona fide residents of other states having contractual arrangements entitling them to resident tuition rates.</td>
<td></td>
</tr>
<tr>
<td>For non-residents</td>
<td>1,800.00</td>
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<td>Athletic fee</td>
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<td>Medical Student Activity fee</td>
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<td>Locker fee</td>
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<tr>
<td>Locker key deposit (refundable end of year)</td>
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<tr>
<td>Books and supplies (estimated)</td>
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<td>Microscope rental (required 1st, 2nd year)</td>
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<tr>
<td>Room Rent</td>
<td>550.00</td>
</tr>
<tr>
<td>Board</td>
<td>700.00</td>
</tr>
</tbody>
</table>

A complete supply of medical textbooks, outlines, student supplies and equipment are available at the University Bookstore.

Medical students may, by paying the student activity fee of $15, become entitled to the benefits other University students receive by payment of that fee. This includes free admission to home athletic contests.
In the event of withdrawal from college, refunds are made as follows: During the first week of any semester the full tuition is refunded. Thereafter 20 percent of the tuition is deducted for each week that has elapsed. Students temporarily absent from the University are charged as if present.

A student who has been dropped into a lower class because of deficiency in his work, or for other reason, will be required to pay his bills for the additional year or years in which he may be in attendance at the University.

HOUSING
The University does not have housing available for medical students, but the Housing Office located in the Military Science Building on the University’s campus will be pleased to try to assist medical and other students in locating suitable housing.

DINING SERVICE
Any medical students who wish to do so may purchase contracts to take their meals in one of the University dining halls, or may purchase meals singly in the dining halls by paying the guest rate. Current meal contract cost is $235 per semester for 20 meals per week.

Scholarships and Loan Funds
A scholarship fund of three thousand dollars was established by the late Mrs. May D. Carbee of Haverhill, N. H., in memory of her husband, Moses Dyer Carbee, M.D., of the class of 1873. The income derived from the investment of this fund is given annually to a deserving student in the College of Medicine. Vermont residents in real need of financial assistance may receive up to $800 in state scholarships.

Small scholarships, as well as loan funds, are available for students:
A loan fund of four thousand dollars was established by the late Mrs. May D. Carbee of Haverhill, N. H., in memory of her husband, Moses Dyer Carbee, M.D., of the class of 1873. Students in the College of Medicine in need of financial assistance may apply for loans from this fund.
Scholarships and Loan Funds

The Dr. H. C. Tinkham Scholarship Fund was established by the will of Dr. Tinkham, the income to be used for scholarships for deserving students in the College of Medicine.

The John W. and John Seeley Estabrook Scholarship Fund was established by the will of John W. Estabrook, the income to be used for scholarships for students in the College of Medicine from Rutland County, with preference given to students from the town of Brandon.

The Edith Blanche Kidder Scholarship Fund was established by the late Joseph W. Kidder. This is for students in the College of Medicine, preference being shown to legal residents of Barre, Vt. The amount of each scholarship is determined annually by the income from the invested fund.

The Edward Everett Hawes Fund, founded in 1946 by bequest of Dr. Edward Everett Hawes of Hyannis, Mass., provides scholarship aid for medical students.

The Elizabeth D. and Clifford R. Proctor Loan Fund, established in 1953 for students from the College of Medicine.

The Dr. Joseph E. Lumbard Loan Fund, established in 1946 by the gift of Mr. J. Edward Lumbard, Jr., for students in the College of Medicine.

The Dr. James A. Singiser Loan Fund, established by Dr. James A. Singiser to aid needy medical students.

The John Ordronaux Scholarship Fund, established in 1909 for students in the Academic and Medical Colleges.

The Medical College Loan Fund is available for loans to students enrolled in the College of Medicine.

Student loan funds are available through the Health Professions Educational Assistance Act of 1963, under which a scholarship program was established in 1966. Details regarding eligibility are available in the office of the Dean.

The W. K. Kellogg Loan Fund was established in May, 1942 by a gift of $10,000 from the W. K. Kellogg Foundation. It provides loan funds for students of ability in the College of Medicine who may be in need of financial assistance.

A scholarship has been made available in the amount of $1,000 by the Pfizer Laboratories Division of Chas. Pfizer and Company, Inc., to apply toward the academic and subsistence expenses of one medical student during the 1966-67
college year. Selection of the recipient is made by the Committee on Prizes and Awards on the basis of scholastic record, financial need, or both.

The G. Stedman Huard Medical Student Loan Fund is available first to students residing in Winooski, Vt.; next to students residing in other areas of Vermont.

A medical scholarship fund was established in 1962 by Dr. Aldo J. Leani and is available for medical students.

The Mrs. Harold T. White Medical Student Loan Fund.

In 1963 The Quarter of a Century Loan Fund for the benefit of medical students was established by the Class of 1938. Contributions will be made annually at the twenty-fifth reunion of each class.

A loan fund was established in 1963 by Dr. Thomas R. Plowright, class of 1946, for sons of Congregational ministers who are residents of the State of New Hampshire and who are students in the College of Medicine.

The Dr. Thomas Harman Denne Memorial Scholarship Fund was established in 1963 by relatives and friends of the late Dr. Thomas H. Denne, class of 1905, the income to be used for deserving students in the College of Medicine.

The American Medical Association has established the Medical Education Loan Guarantee Program whereby loans are available to medical students who are residents of the United States.

The Century Club Scholarships of the Alumni Association of The University of Vermont College of Medicine were established in 1965. Awards are made to deserving students who are not residents of Maine, New Hampshire, Vermont, Massachusetts or Rhode Island.

The New York Life Insurance Company Medical Student Scholarship Program was established in 1966. The primary purpose of the program is to assist young men and women of ability who would otherwise have serious financial problems attending a medical school. Each annual scholarship is intended to cover tuition, room, board, fees, books and equipment. Citizens of the United States or Canada are eligible for the scholarship.

The Student American Medical Association Emergency Loan Fund was established in 1966 for medical students.

Certain special and endowed scholarships and funds, including the Wilbur Fund,
Scholarships and Loan Funds

are available to students of any college in the University. See the catalogue number of this Bulletin. All requests for student aid should be made through the Dean’s Office.

Application forms for scholarship and loan funds may be obtained from the Dean’s Office and should be submitted by April 15 prior to September entrance.

STUDENT RESEARCH FELLOWSHIPS

The Summer Student Fellowship Program offers an unusual and important opportunity: that of the medical student joining with a single member of the faculty in a learning experience in a research setting. While this program is not a part of the regular curriculum and is offered on a basis that is entirely elective, it is apparent that this type of learning experience can have an important formative influence on the academic development of the student. It should be further emphasized that this opportunity, while cast in a research setting, should not be looked upon solely as an apprenticeship for a research career; rather, it should be seen as a training experience which can have broad application in all fields of medicine. These fellowships are supported by grants received from various sources and carry a stipend of $75 per week. The student will choose the faculty member with whom he would like to work and apply to the Department Chairman for the fellowship.

There are also several post-sophomore fellowships available for students who wish to take a year’s leave for advanced study in a basic science department. Students who have completed their first or second year are eligible. The annual stipend is $3,200 per year. Under this plan, some students complete work for the Master’s degree.
Burlington, looking east to Green Mountains

Flying Scotts at Malletts Bay
Scholarships and Loans Funded

The catalog of the University of Green Mountain provides information on scholarships and loans funded through the University. These funds are awarded based on academic merit, financial need, or specific criteria as outlined in the catalog.

Important opportunities for students include scholarships that offer financial assistance for academic and extracurricular activities. The catalog highlights various funding sources, including state and federal grants, private scholarships, and University-endowed funds.

One noteworthy scholarship is the Green Mountain Scholar Award, which provides financial support to exceptional students who demonstrate academic excellence and leadership potential. This award is available to both in-state and out-of-state students.

For more information on eligibility criteria and application procedures, students are encouraged to consult the catalog or contact the Financial Aid Office directly.
Medical College Program and Objectives
Beginning in the fall of 1967 The University of Vermont College of Medicine will inaugurate a new and dramatically different curriculum. This new curriculum is the result of five years of careful study and deliberation on the part of the entire faculty. This change stems from recognition of the fact that patterns of medical practice are changing and that medical education must change accordingly.

In the past, virtually all physicians were in general practice. Today, there is still a need for the general practitioner or family physician. In addition, the increasing complexity of modern medicine has required the development of a large number of medical specialties. Physicians must also be trained as investigators and teachers. Some medical schools have attempted to train one type of physician, for example the teacher-investigator, while neglecting the education of the other types of physicians.

The University of Vermont has attempted to develop a curriculum that will be suitable for the training of family physicians, medical specialists, and teacher-investigators. Obviously, the needs of these three groups are different and, therefore, in the new curriculum students will be allowed to pursue several different courses of study after first receiving a general grounding in the basic sciences and medical practice.

All classes currently enrolled in the College of Medicine will complete their education under the old curriculum, details of which are published in prior issues of the Bulletin. The new curriculum will begin with the class entering in the fall of 1967. This class will follow the new curriculum for all four years as will all subsequent classes.

GENERAL PLAN OF THE NEW CURRICULUM

The new curriculum will consist of three parts: the basic science core, the clinical core, and the major program.

BASIC SCIENCE CORE

The basic science core program includes the entire freshman year and the fall of the sophomore year. The class schedules for this instruction appear on the following pages. During this period students will be instructed in the medical sciences which form the basis for medical practice. The objective of the basic
science core is to present that body of knowledge common to all types of medical practice and to avoid minute details which are relevant only to individual medical specialties. From the very outset students will be exposed to patients in the comprehensive clinics, the aim of which is to present the broader perspectives of medical practice.

CLINICAL SCIENCE CORE

The clinical core will extend from January of the sophomore year until December of the junior year. During this twelve-month period each student will receive twelve weeks of instruction in medicine, twelve weeks of instruction in surgery, eight weeks in pediatrics, eight weeks in obstetrics and gynecology, and eight weeks in psychiatry. There will be a brief summer vacation. During this year students will work within the hospitals and clinics and instruction will be based on the care of patients.

MAJOR PROGRAM

The major program will extend from January of the junior year of medical school until graduation in May of the following year. During this period each student will pursue a course of study which is tailored to his individual interests and objectives. For example, students interested in family practice will pursue one course of study while students interested in surgery or a surgical specialty will pursue another. The senior major program will commence with a return to the basic sciences which are related to the student's area of interest. This return will constitute both a review and an extension of the material covered in the basic science core. Following this basic science study, students will take blocks of clinical work related to their interests. The basic science work will consist of approximately one-quarter and the clinical work approximately three-quarters of the major program.

The major program is not designed to supplant or duplicate any portion of residency training but is designed rather to prepare students more adequately for subsequent training for family practice, a medical specialty, or teaching and research. In this last regard the faculty is considering the option of allowing students to spend the entire period of time in a basic science department. The final details for the major program are currently under active development.
### BASIC SCIENCE CORE PROGRAM
#### FIRST YEAR HOUR PLAN — Fall, 1967 — 14 weeks

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* First seven weeks only. Statistics last 6 weeks.
* Once a month Comprehensive Clinic.

### FIRST YEAR HOUR PLAN — Winter, 1967-68 — 10 weeks

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<td>GENETICS</td>
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<td>NEUROANATOMY</td>
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* Comprehensive Clinic once each month.
FIRST YEAR HOUR PLAN — Spring, 1968 — 10 weeks

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<td>PHYSIOLOGY DEMONSTRATION</td>
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<td>MICROBIOLOGY*</td>
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<td>COMPREHENSIVE CLINIC</td>
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* Microbiology laboratory first 8 weeks. Physiology laboratory last 2 weeks.
* Once each month, 4:30 P.M.

SECOND YEAR HOUR PLAN — Fall, 1968 — 14 weeks

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<td>Intro. to Clinical Disciplines*</td>
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* Alternate weeks.
INTERNERSHIP AND RESIDENCY

An internship in an approved hospital is considered an essential in the preparation of the physician for the practice of medicine. Graduates of The University of Vermont College of Medicine are regularly offered internships at major hospitals and medical centers throughout the country. A listing of the Internship Appointments accepted by members of the Class of 1966 may be found on page 89. It should be added that the College's Internship Committee assists students in obtaining appointments, beginning consultation with students in the third year to provide information regarding available internships, and counselling in the selection of hospitals with a view to the future training interests of each student. The College of Medicine is a participant in the National Internship Matching Program.

Completion of the internship is ordinarily not the final step in the formal education of the physician who is training to enter practice. Today, most physicians undertake one or more periods of residency in which they elect to specialize in one of the several fields of medical practice. Graduates of The University of Vermont College of Medicine have won a reputation of merit in those medical centers around the nation which offer residency programs; many elect to return to Vermont to take their residency in one of the programs offered by the University at the Hospital Medical Center here.

The College of Medicine prides itself on maintaining a close interest in and offering its continued support to its graduates as they seek advanced training or staff appointments.

RESEARCH

The primary responsibility of the College of Medicine is the teaching of well-qualified men and women the science and art of medicine. This teaching cannot go on, however, isolated from the progress being made in expanding medical knowledge, techniques, equipment. Thus many faculty members of the College of Medicine, often working with faculty or other colleges of the University, are engaged in a wide-ranging number of research projects supported by private and federal grants.
The activities of the College of Medicine take place in a number of buildings on The University of Vermont campus. The Library, administrative offices, and laboratories of the Departments of Anatomy, Physiology and Biophysics, and Biochemistry are located in the original College of Medicine building. The Department of Psychiatry and the teaching laboratories of Pharmacology occupy the Annex. Part of the animal quarters are located adjacent to this area.

Teaching and research facilities of the Department of Pathology, teaching facilities of the Department of Medical Microbiology, and laboratories for clinical research are contained in Phase I of the new College of Medicine building which forms part of the eastern boundary of the University campus. Phase II, first wing of the Medical Sciences building, completed in 1962 provides additional research space for the Departments of Biochemistry, Medical Microbiology, Pharmacology and Animal Care.

The Department of Community Medicine occupies Mansfield House.

Following the completion of Phase III in the fall of 1967, all Departments of the College of Medicine will be housed in the new building.

DURFEE MEMORIAL CLINIC. The Clinic is located in the Mary Fletcher Hospital. Approximately 14,165 patient visits are made each year to twenty-five general and specialty clinics. Patients must be referred by practicing physicians. Under the supervision of Medical College staff specialists, the student receives a major portion of his training in the fourth year through this outpatient service.

DEGOESBRIAND MEMORIAL AMBULATORY PATIENT SERVICE. A total of 12,439 patient visits were made to the outpatient division during the past year. A new clinic area has been built, greatly expanding the facilities for teaching and patient care. A new emergency room area is now completed. Fourth-year medical students receive a wide outpatient experience under the supervision of Medical College staff specialists.

The College of Medicine maintains a museum with a collection of pathological specimens for use in teaching.

In addition to the teaching laboratories of the College of Medicine, the laboratories of the Vermont Department of Health are available for bacteriological, diagnostic, serological, medico-legal, food and water testing.
HOSPITALS

MEDICAL CENTER OF VERMONT HOSPITAL. For a medical school, a hospital provides the essential element for the training of doctors: the opportunity to observe illness and disease, and to learn diagnosis and treatment through the experience gained under the supervision of the faculty.

A teaching hospital must be of a certain size to be able to render a full range of services and means of treatment, particularly the special requirements for the rarer diseases. As 1967 began, Burlington’s two hospitals, the DeGoesbriand Memorial and the Mary Fletcher, became legally merged into the Medical Center Hospital of Vermont.

This unique consolidation of a Catholic-oriented and a non-sectarian institution, accomplished in little more than a year’s time, brought into existence in Burlington the third largest non-governmental hospital in New England. Now offering a combined total of well over 550 beds and 70 bassinets, the new institution’s bed capacity will grow to more than 750 adult beds in 1968 with the completion of a $5.5 million 7-story wing at the Mary Fletcher.

The Mary Fletcher has been associated with the College of Medicine as a teaching hospital since 1879. The DeGoesbriand Memorial, founded in 1924, has in more recent years also played an important teaching role in association with the medical college. Now that the two hospitals are merged—an accomplishment which had the strong support of the Dean and faculty of the College of Medicine—the quality of teaching, research and patient care is certain to find upgrading in consonance with broadening of the physical size and goals of the College of Medicine.

In the past year, the Mary Fletcher registered more than 100,000 patient days, while the DeGoesbriand Memorial recorded about 70,000. At the new Medical Center Hospital, all diseases—without limitation—will be treated. Recent developments have included open-heart, cerebrovascular, cryosurgery and microsurgery, and these patients are available for teaching purposes.

Physicians on the staff of the Hospital are also faculty members of the College of Medicine, while medical college department chairmen also head up the corresponding departments at the Hospital. Medical students and house staff are both under the close supervision of this attending staff.
The hospitals are approved by the American Medical Association for intern training and joint-residency programs affiliated with the College of Medicine. There are approved residencies in anesthesia, medicine, neurology, neurosurgery, obstetrics-gynecology, orthopedic surgery, otolaryngology, pathology, pediatrics, psychiatry, radiology, general surgery and urology.

Besides medical teaching, educational programs are conducted in nursing, x-ray technique, laboratory technology, social service, hospital administration and physical therapy. Special facilities are available such as a cinefluoroscopy unit in Radiology, a cardiopulmonary laboratory performing cardiac catheterizations as well as routine heart and lung studies, a radio-isotope laboratory, and deep therapy treatment by means of cobalt and linear generator. Research is an important part of the hospital program, carried on both in conjunction with the College of Medicine and by means of private grants made directly to the Hospital.

THE VERMONT REHABILITATION CENTER. The Vermont Rehabilitation Center is a 20-bed rehabilitation center operated by the State of Vermont through a Governing Committee which is appointed by the Governor of the State. The Rehabilitation Center is affiliated with the University of Vermont College of Medicine and is one of the teaching units of the College.

The purpose of the State Rehabilitation Center is to provide broad and complete rehabilitation services for all types of disability; to provide Center-based services for the disabled in other areas of the State, and to provide in-service and on-the-job training programs for personnel in the health professions who are concerned with the evaluation and diagnosis of disability. The staff, in addition to physicians, consists of vocational counselors, a hospital administrator, physical therapists, occupational therapists, rehabilitation nursing specialists, a general nursing service, psychologists, industrial arts specialists and a social worker.
THE DEPARTMENTS IN THE COLLEGE OF MEDICINE
First-year courses for medical students are given in gross anatomy, histology (including embryology) and neuroanatomy.

**BASIC SCIENCE CORE**

**GROSS ANATOMY** The core course in Gross Anatomy covers approximately 145 hours during the first fourteen weeks of the freshman year. It is designed to give the student a grasp of the fundamental principles of structure of the human body, together with as much selected detail as can be assimilated in the time assigned for the course, which is slightly less than half the hours heretofore available for lecture and laboratory work (300 hours).

The student will be expected to make a fairly complete dissection of the head, neck, thorax, abdomen and pelvis but will have time enough for a cursory display only of the back, upper limb and lower limb. Where complete dissections are not feasible he will utilize adjunct materials such as prosections, preserved dissections of limbs and other items, skeletal material, models, x-ray plates, charts, color slides and occasional movies. He will thus acquire an understanding of basic principles and a working knowledge of the major items of which the body is composed. This should give him an adequate background for his other course work, for future general use or for further specialized work in anatomy.

Elective courses for the senior year are planned to include more detailed lectures, careful dissections and further study in depth of regions of particular interest to the individuals concerned. Courses already projected are: (1) The Head and Neck, for those interested in Ophthalmology, Otolaryngology, Neurosurgery and the like, (2) The Back and Limbs, for future general surgeons, orthopedists, etc., and (3) The Thoracic and Abdominal Viscera, for those interested in the surgery of these regions as well as for individuals who are planning to become internists, family physicians and so on.

Other specialized courses covering selected regions, parts or organs may be given as the need arises. Thus the student who is particularly interested in aspects of gross anatomy may obtain as broad a background in this subject as his elective time and effort will allow.
HISTOLOGY The aim of the course in histology is to help the student acquire useful and meaningful concepts of cell and tissue morphology, and the structural organization of selected organs; an appreciation of structure as the locus of function; and an introduction to the methodology of histologic examination of tissues. Histochemistry and electron microscopy are emphasized when they illuminate structural and functional concepts. Two hours of lecture and four hours of laboratory each week during the first trimester.

NEUROANATOMY The core course of instruction in neuroanatomy will consist of seventy hours of instruction in the second trimester of the first year. There are twenty-four lectures and forty-six hours of laboratory work. The course covers the histology and histogenesis of nerve tissue, embryology of the nervous system, the gross anatomy of brain and cord, the blood supply and primary pathways of the somatic sensory and motor systems, as well as the visual, auditory, olfactory and limbic systems.

The course is offered in conjunction with neurophysiology.

The functional significance of structure is emphasized throughout, in order to prepare the student for intelligent diagnosis and localization of neural disturbances in the clinical neurological sciences.

MAJOR PROGRAM

The Department of Anatomy plans to offer a course in Surgical Anatomy for students majoring in the field of Surgery. The possibility of offering advanced work in Neuroanatomy is also under consideration.

GRADUATE COLLEGE COURSES

Work in several branches of Anatomy leading to credit for a Master of Science degree can be arranged.

PREREQUISITE — Permission of the Department Chairman.

301 GROSS ANATOMY. Study of the gross structure of the human body by means of general dissection, cross sections and special dissections. Lectures and laboratory, 300 hours. Fourteen credit hours.

311 MEDICAL HISTOLOGY. The microscopic study of cells, tissues and organs using routine techniques. Lectures and laboratory, 120 hours. Four credit hours.

322 NEUROANATOMY. Gross and microscopic study of the central nervous system, by means of dissection of the brain, accompanied by microscopic examina-
ination of stained sections and reconstructions of the principal nervous pathways. Lectures and laboratory, 71 hours. Four credit hours.

331, 332      SURFACE AND RADIOLOGICAL ANATOMY. This is a course in Living Anatomy in which all available landmarks are studied and utilized in the placement of internal structures. A complete series of radiological plates is used to correlate radiological landmarks with the positions of deep structures. Prerequisite: 301. Lectures and laboratory. Two credit hours.

341, 342      SPECIAL DISSECTIONS IN GROSS ANATOMY. Dissections of particular regions of the human body, utilizing either adult or fetal material or investigative work designed to advance knowledge of some special structure or relationship. Prerequisite 301. Laboratory, special readings and discussions. Hours and credit as arranged.

351, 352      SPECIAL TECHNIQUES IN HISTOLOGY. Specific work as agreed upon by the instructors and the graduate student. A study of selected cells, tissues or organs by means of special techniques. Prerequisite: 311. Credit as arranged.

361, 362      SPECIAL DEVELOPMENTS IN EMBRYOLOGY. Specific work as agreed upon by student and instructor. The study of some particular embryological problem utilizing special techniques, with directed reading. Prerequisite: Undergraduate course in Comparative Embryology (such as Zoology 111 at Vermont) and in particular cases, in Experimental Embryology (as Zoology course 222). Hours and credit as arranged.

371, 372      SPECIAL INVESTIGATIONS IN NEUROANATOMY. The study of some particular phase of Neuroanatomy, as selected by mutual consent, including minor investigations designed to serve as an introduction to research. Prerequisite: 322 or its equivalent. Credit as arranged.

SEMINARS IN ANATOMY 381, 382 Gross Anatomy; 383, 384 Histology; 385, 386 Embryology; 387, 388 Neuroanatomy.

Attendance at departmental or sectional seminars. Designed to review the more recent literature and findings in one or another of the various branches of Anatomy. Prerequisite: Graduate standing. Hours and credit as arranged.

THESIS RESEARCH IN ANATOMY 391, 392 Gross Anatomy; 393, 394 Histology; 395, 396 Embryology; 397, 398 Neuroanatomy.

Investigation of a research topic under the direction of an assigned staff member, designed to culminate in an acceptable Master's thesis. Credit as arranged.
Professor Melville (Chairman); Associate Professors Gjessing, Lamden and Schein; Associate Professor (Clinical) E. Sims; Assistant Professors Meyer and Woodward; Instructor (Clinical) Kunin; Research Associates Ishikawa and Israel; Postdoctoral Associates Messiha and Tan.

The primary objective of the teaching program is to impart a knowledge of fundamental biochemistry which will permit an understanding of present applications and future developments in relation to medicine. In order to provide the biochemical information needed by other basic sciences, Biochemistry is offered at the beginning of the first year. Emphasis is placed on fundamental biochemical principles, and applications to medicine are introduced whenever feasible. Members of the Department are also available for participation in other courses in the medical curriculum when the subject matter is related to biochemistry.

**BASIC SCIENCE CORE**

**MEDICAL BIOCHEMISTRY** Lectures, conferences, and assigned reading in biochemistry, particularly as it relates to medicine. The first part of the course stresses the area of molecular biochemistry: chemistry, structure, and metabolism of proteins, amino acids, carbohydrates, lipids, and nucleic acids, and the properties and functions of enzymes. The second part is concerned with the biochemistry of the whole organism, with special reference to man: respiration, hemoglobin, iron metabolism, and plasma proteins; acid-base balance and mineral metabolism; vitamins; hormones and control mechanisms. The laboratory work is designed to demonstrate important principles and to illustrate methods and techniques of modern biochemistry.

**GRADUATE COLLEGE COURSES**

Opportunities exist for additional training in both the theoretical and practical aspects of biochemistry. Graduate courses offered by the Department as part of its Ph.D. program are available to qualified medical students as part of their elective program. Participation in the research activities of the Department is possible as an elective and also during the summer. Subject to the approval of the Department and to the regulations of the Graduate College, it is possible for qualified students to apply credit obtained in graduate courses and research toward an M.S. degree in biochemistry.

**PREREQUISITE** — Permission of the Department Chairman.
301 BIOCHEMISTRY I. Lectures, conferences, and assigned reading in the area of molecular biochemistry: chemistry, structure, and metabolism of proteins, amino acids, nucleic acids, lipids, and carbohydrates; enzymes. Three credit hours.

302 BIOCHEMISTRY II. Lectures, conferences, and assigned reading in the area of biochemistry of the whole organism, with special reference to man: respiration, hemoglobin, plasma proteins, and iron metabolism; acid-base balance, water balance, and mineral metabolism; vitamins; hormones. Three credit hours.

303-304 BIOCHEMISTRY LABORATORY. Experimental work designed to demonstrate important principles and to illustrate methods and techniques of modern biochemistry. Two credit hours per semester.

311, 312 BIOCHEMICAL PREPARATIONS. Isolation, synthesis, and characterization of compounds of biochemical interest. Two credit hours per semester.

320 GENERAL ENZYMEOLOGY. A general consideration of enzyme nomenclature, purification, assay, introductory kinetics, mechanisms, cofactors, active sites, and the relationship of enzyme structure to the biological control of activity. Two credit hours.

321 ENZYME KINETICS AND MECHANISMS. Topics include kinetics, specificity, inhibitors, enzyme-substrate interactions, and their relation to enzyme structure. Two credit hours.

331 NUCLEIC ACIDS. The structure, metabolism, and function of ribonucleic acids and deoxyribonucleic acids. Two credit hours.

371 PHYSICAL BIOCHEMISTRY. Protein interaction, solubility and fractionation, electrophoresis, sedimentation, phase rule study, diffusion, viscosity, spectrophotometry, and related subjects. Two credit hours.

381 through 389 SEMINAR. Discussions of recent developments and current literature in the various fields of biochemistry. One hour per week.

391 through 399 MASTER'S THESIS RESEARCH. Investigation of a research topic under the direction of a staff member, culminating in an acceptable Master's thesis. Credit as arranged.

491 through 499 DOCTORAL THESIS RESEARCH. Original research under the direction of a staff member, culminating in an acceptable doctoral dissertation. Credit as arranged.
The Department of Community Medicine

Professor Houston (Chairman); Visiting Professor Smillie; Associate Professors Aiken, Babbott, F. Falck (Speech Pathology), Mabry and Mandel; Assistant Professors Culver, Gibson, Hill and Sylwester; Instructors (Clinical) D. Brown, Crane (Family Medicine), Friedman, D. Gray, Lantman (Family Medicine) and Levine (Family Medicine).

The Department of Community Medicine offers students information and principles which will help them fulfill their future responsibilities as practitioners. This Department shares with the Department of Medicine a deep concern for improvement of continuing comprehensive care for the whole patient. Toward this end, monthly comprehensive clinics are provided in the first year and a limited preceptorship program is run for fourth-year students. Relevant aspects of medical statistics and community medicine are also included in the first-year curriculum.

The Department is deeply involved in regional medical planning, and research activities include the social and economic aspects of health practices, medical statistics and computer use, environmental health problems and infectious disease epidemiology.

**BASIC SCIENCE CORE**

COMMUNITY MEDICINE. During the spring of the first year an introductory course in Community Medicine is offered. It includes a consideration of social science in medicine, environmental health problems, community health services, and the application of epidemiologic principles and techniques to selected infectious and non-infectious diseases. Lectures, demonstrations and seminars. 40 hours.

MEDICAL STATISTICS. This course provides practical instruction in the principles, logic and techniques of statistics as applied to everyday problems in medicine. It includes a consideration of random sampling, frequency distributions, probability and significance testing, as well as the place of computerized data processing in medical record keeping and research. Lectures, seminars, use of statistics laboratory. 18 hours, first semester.

COMPREHENSIVE CLINICS. At monthly intervals during the first year, comprehensive clinics will be offered. The purpose of these clinics is early introduction of students to the medical application of basic sciences, clinical management of patients and the broader social implications of human disease. These
clinics are sponsored by the Department of Community Medicine, but will include participation by other appropriate departments.

**MAJOR PROGRAM**

For selected senior students, an opportunity will be provided to spend a limited time with clinical instructors in private or group practice around the State.
The Department of Medical Microbiology

Professors Gallagher (Chairman) and D. B. Johnstone; Associate Professor Forsyth and Phillips; Assistant Professor Gump.

The Department of Medical Microbiology teaches in the Basic Science Core of the Medical College.

**BASIC SCIENCE CORE**

**MEDICAL MICROBIOLOGY.** The course will be given to the first-year class during the last 10 weeks of the academic year.

The primary objective of the course in Medical Microbiology is to impart to the student an understanding of the relationship of microorganisms to disease in man. To this end, the student needs an understanding of the basic life processes of microorganisms, as well as knowledge of how they cause disease and how the body reacts toward them. After a brief survey of the general biological characteristics of bacteria and of essential laboratory technics, a detailed consideration is then given to the general principles of infection and resistance.

The remainder of the course is devoted to studies of the various groups of infectious agents. Laboratory exercises are designed to reinforce the didactic material by observation and handling of the individual species of bacteria, fungi and viruses. Certain basic serologic technics and the separation and identification of bacteria from "unknown" mixtures further round out the laboratory sessions.

**GRADUATE COLLEGE COURSES**

The Department offers programs of graduate study leading to the Master of Science and Doctor of Philosophy degrees.

**PREREQUISITE — Permission of the Department Chairman.**

201 MEDICAL MICROBIOLOGY. First semester, 7 credit hours.

301 SPECIAL PROBLEMS IN BACTERIOLOGY. Minor investigations in bacteriology designed to serve as an introduction to research. Prerequisite: Medical microbiology or its equivalent. Two credit hours.

302 SPECIAL PROBLEMS IN IMMUNOLOGY. Minor investigations in immunology and serology designed to serve as an introduction to research. Prerequisite: Medical microbiology or its equivalent. Two credit hours.
312 GENETICS OF MICROORGANISMS. Three credit hours. Prerequisite: Permission of the instructor.

322 ADVANCED IMMUNOLOGY AND IMMUNOCHEMISTRY. Two credit hours. Prerequisite: Permission of the instructor.

324 ADVANCED IMMUNOLOGY AND IMMUNOCHEMISTRY LABORATORY. One credit hour. Prerequisite: Permission of the instructor.

381 through 389 SEMINAR. Attendance at the departmental seminar. One credit hour.

391 through 399 MASTER'S THESIS RESEARCH. Investigation of a research topic under the direction of an assigned staff member. Prerequisite: Permission of the department. Credit as arranged.

491 through 499 DOCTORAL THESIS RESEARCH. Original research under the direction of an assigned staff member, culminating in an acceptable doctoral dissertation. Credit as arranged.
The Department of Medicine

Professors E. L. Amidon, Lepeschkin and Tisdale (Chairman); Associate Professors Allen (Associate Chairman), Bland, Forsyth, Gibson, Hanson, E. Sims, Tabakin and Welsh; Associate Professors (Clinical) O'Brien and Terrien; Assistant Professors Beeken, Bouchard, Burns, Caldwell, Kelleher, Kunin, Levy, Lipson and Phillips; Assistant Professors (Clinical) R. W. Amidon, Eddy, E. E. Johnson, Medivetsky and Sawabini (Oral Hygiene and Dental Medicine); Instructors Gump, MacDonald and Moynihan; Instructors (Clinical) Albright, Alden, Fitzgerald, Gluck, Graveline, Holden, Milne, Mongeon, Pratt, J. C. Twitchell, Van Buren and Wallace; Clinical Associates Colombo, Corley, Friedman, Heininger, Moisan, Sia, Uzsoy, Wainer and Walsh; Research Associates Herrlich and Zao.

The Department of Medicine has as its three-fold mission the investigation of human disease, scholarly instruction in the disciplines of clinical medicine and the comprehensive care of patients.

Members of the Department have had advanced training in the broad field of internal medicine, and most have additional research or special clinical skills that provide balance and strength throughout the areas of departmental responsibility in hospitals, clinics and laboratories.

As attending or consulting staff physicians at the two affiliated hospitals, members of the Department of Medicine provide daily patient care and bedside instruction and supervision for students, house staff, clinical trainees and other physicians. As clinical and laboratory investigators, they bring refined and quantitative methods to bear on problems of human disease, often working as units or teams in laboratory areas within the Medical School complex. Included within the Department of Medicine are the divisions of Dermatology and Neurology.

The many formal and informal departmental conferences, ranging from weekly Medical Grand Rounds to daily bedside rounds, are attended by students, house staff, senior staff and visiting physicians.

BASIC SCIENCE CORE

INTRODUCTION TO THE CLINICAL DISCIPLINES. This course is intended to be a bridge between the basic science core curriculum and the bedside. The primary purpose is to teach the student to elicit a history and perform a physical examination with adequacy and sophistication. Equal in importance is the emphasis on correlation of anatomic, physiologic and biochemical data with clinical findings. It is desired that the student will be able to use in a thoughtful way
the simple laboratory investigations which are appropriate and required. There is no specific intent in this course to cover pathologic detail but rather to emphasize disordered mechanisms and their elicitation by bedside and laboratory methods. Emphasis is to be placed on practical teaching and supervision at the bedside with the use of illustrative cases. Correlated interdisciplinary seminar teaching will be emphasized also.

**CLINICAL SCIENCE CORE**

**CLINICAL CLERKSHIP IN MEDICINE.** This consists of a 12-week period designed to provide maximum clinical experience in the hospital setting, with primary emphasis on ward work. The student is now able to apply the principles and methods taught in the core curriculum. The purpose of this clerkship is to involve the student directly in the day-to-day work of a medical unit in conjunction with careful and continuing supervision by attending physicians and house staff. He is encouraged to visualize the patient as not only a pathologic process and disorder of function but also as a social, environmental and psychological entity. He will attend weekly interdisciplinary conferences on common problems in medicine. He will also be encouraged to attend the regular subspecialty conferences and Grand Rounds.

**MAJOR PROGRAM**

**MAJOR PROGRAM IN MEDICINE.** The intent of the Major Program is to give the student an opportunity to obtain additional experience in the area of his intended career in medicine, whether this be a primary family physician, a practicing internist or an academic physician. The structure of the major period will be designed by the student and his faculty advisers. The first portion will consist of a review of applied basic sciences and seminar teaching on the history, ethics and philosophy of medicine. The remainder will consist of appropriate elective courses. These will be offered in general medicine, cardiology, respiratory disease, rheumatology, dermatology and allergy, hematology, neurology, metabolism, endocrinology, renal diseases, infectious diseases, oncology, gastroenterology and research methodology. The student will be encouraged to take part in a research project in any relevant field and write a thesis on the topic of his choice. In conjunction with the elective periods there will be considerable outpatient experience both in the general and subspecialty clinics.
Division of Dermatology

Professor Daly (Chairman); Associate Professor (Clinical) Flower; Instructors Epinetette and Madison.

During the Introduction to the Clinical Disciplines course, the student becomes familiar with the methods of history taking and special studies which are unique to this medical discipline, usually by means of case presentations that demonstrate typical secondary and consecutive lesions of the skin.

Case presentations, informal student-instructor seminars and case-centered consultations serve to demonstrate the scientific and bedside aspects of dermatology to the student during his clerkship.

The senior student may elect periods of ambulatory dermatology experience, evaluating patients with skin diseases and discussing them in detail with the attending dermatologist.

Division of Neurology

Professor Schumacher (Chairman); Associate Professor (Clinical) Martin; Instructors (Clinical) Elwell and Engisch.

The Division of Neurology provides instruction to undergraduate students in diseases of the nervous system and sponsors a graduate residency training program in Neurology at the affiliated hospitals. Interns rotate through the neurological services at both hospitals, resident physicians assist in the instruction of students, and specialty conferences concerned with selected disorders of the nervous system are scheduled weekly.

The staff consists of the Chairman, three part-time clinical teachers and four resident neurologists. The Division is concerned with primary and consultative patient care, clinical research, teaching at undergraduate and postgraduate levels and participation in clinics and regional hospitals as consultants.

BASIC SCIENCE CORE

In the context of the integrated course "Introduction to the Clinical Disciplines," members of the staff provide a brief review of neurophysiology, demonstrate and explain methods of neurological diagnosis, discuss ancillary laboratory techniques, and supervise student performances of bedside neurological examinations.
CLINICAL SCIENCE CORE

During the clinical clerkship on Medicine, the student is assigned in rotation patients admitted to the neurological service. Patients with nervous system disease are presented by students at a weekly neurological case presentation conference held for clinical clerks on the floors of either the Mary Fletcher or DeGoesbriand Memorial Hospitals.

MAJOR PROGRAM

An elective period of research or clinical work in Neurology is available to senior students. Instruction in Neurology is carried out in the Neurology Outpatient Clinics where small groups of students are assigned, performing complete neurological examinations on new patients. At this time the student records his complete diagnostic formulation and plan of management, his clinical study being closely supervised by members of the staff. Students attend regular weekly joint neurosurgical conferences.
Professor Maeck (Chairman); Associate Professors Durfee (Associate Chairman), Eastman, Mary J. Gray and Slavin; Assistant Professors Boardman, Howe, Meeker and Schwalb; Assistant Professors (Clinical) B. F. Clark and W. F. Sims; Instructors (Clinical) Cannon, Taber and W. Thabault; Consultant Solomon.

CLINICAL SCIENCE CORE

The core program in obstetrics and gynecology will be offered during the second and third years. The course consists of 8 weeks of intensive academic and practical experience in the classroom and in the hospital. Emphasis is placed on the fundamentals of female reproduction, the physiology, pathology and therapy of obstetric and gynecologic problems commonly met by physicians in many branches of medicine. In keeping with the philosophy of a core program, the detailed technique of delivery room and operating room procedure will not be stressed. Those students who show special aptitude and interest may elect to take the Senior Major Program in Obstetrics and Gynecology which will supplement the fundamentals and give adequate added clinical experience. It is deemed important, however, to expose each medical student to the birth process and to ensure an understanding of reproductive physiology and its implications. Frequent tutorial sessions will supplement the major lecture series and serve to evaluate the progress of each student. The technique of basic history and physical examination will be taught by the attending staff and each student's work will be individually evaluated. Subjects of major importance will be given to one-half of the class over a span of 24 weeks in the form of a weekly one-hour lecture. This lecture series is repeated twice a year. At the end of his experience in the core program, it is expected that the student will be completely able to take a history and perform a general obstetric and gynecologic physical examination, to evaluate the normal and abnormal breast and pelvis, to take smears for cytology correctly, and to diagnose pregnancy and understand common obstetric and gynecologic problems.

MAJOR PROGRAM

The Department of Obstetrics and Gynecology is currently developing a major program.
Division of Ophthalmology
Professor Cunningham (Chairman of Department and Division); Associate Professor Twitchell; Instructors (Clinical) Guiduli, Irwin and Kleh.

Division of Otolaryngology
Professor R. C. Morrow (Chairman); Associate Professor Vilma Falck (Audiology); Assistant Professors (Clinical) Karmody, Heisse and Reed; Instructor (Clinical) Goldsborough; Consultant F. J. Falck (Audiology).

CLINICAL SCIENCE CORE
The Divisions of Ophthalmology and of Otolaryngology participate in the course on Introduction to Clinical Disciplines in the second year.

In the third year each student is assigned for a full week to Ophthalmology and to Otolaryngology, involving outpatient care, hospital rounds and procedures, conferences, intensive individual instruction and assigned reading.

MAJOR PROGRAM
In the Major Program, elective courses will be offered. These courses involve interdisciplinary arrangements with other departments as needed. An elective course may be individualized to the needs of the student, but among the possibilities offered are: Ear, nose and throat problems in general practice; pediatric otolaryngology; otology and audiology in children; basic audiology; head and neck oncology; neuro-otology; broncho-esophagology; radiographic interpretation in the head and neck; eye problems in general practice; pediatric ophthalmology; facial and temporal bone injuries; office practice in ophthalmology; and neuro-ophthalmology.
The Department of Pathology and Oncology

Professor Coon (Chairman); Associate Professors Andrews (Dean), Clemmons, Korson, Kusserow, Luginbuhl, Naeye, Stark and Helene Toolan (Experimental Pathology); Assistant Professors Bottles, Couch, Flory, Kaye, M. D. Miller, Picoff, Taylor and Trainer; Instructor (Clinical) German; Instructors (Medical Technology) Breen and Fisher; Postdoctoral Associate Wilson.

The interests and responsibilities of the Pathology faculty include teaching, research, and the practice of both anatomic and clinical pathology in the affiliated teaching hospitals. The diversity of interest and variety of responsibility within the staff as represented by these activities create an ideal atmosphere for the introduction of students and residents to the study of disease in all of its manifestations.

The Department has responsibilities for the instruction of medical students, undergraduate medical technology students, graduate students, and for residents, fellows, and trainees.

BASIC SCIENCE CORE

The major course in Pathology is presented as a part of the Basic Science Core and is designed to present a concentrated, yet comprehensive view of disease in sufficient depth to prepare the student adequately for subsequent clinical studies. Fundamental principles are emphasized and the structural, functional, and clinical correlations are stressed.

Although the organization of the course involves the traditional division into general and special pathology, the emphasis is considerably modified. Pathophysiological correlations are stressed. The teaching format varies, ranging from formal lectures to small informal discussion groups. A student is encouraged and assisted to develop for himself a pattern of self education. Extensive use is made of clinical case studies, frequently in lieu of "loan set slides." Extensive use is made of gross material, both fresh and preserved. In addition to the loan slide collection, visual aids are used extensively in the classroom and laboratory.

Instruction in clinical pathology is closely correlated with the work in general and special pathology. Instruction in clinical pathology is designed to acquaint the student with laboratory medicine, including the tests available in the clinical laboratory, the value of limitations of these tests, and the interpretation of results. Emphasis is based on the clinical application of laboratory data and the integration of the data obtained with other clinical findings.

CLINICAL SCIENCE CORE

During the Clinical Science Core portion of the curriculum, the Department of
Pathology cooperates with other clinical departments in providing instruction. This includes collaboration and presenting departmental and specialty conferences, clinical pathological conferences, consultation on clinical problems, and supervision of laboratory tests performed by medical students on patients assigned to their study.

MAJOR PROGRAM

The Major Program for the Department of Pathology is currently under development. We anticipate developing appropriate courses in pathology both for "majors" in Pathology and for those of other clinical departments. Some will be primarily to provide greater in-depth instruction in areas of particular interest to various clinical groups, whereas those students particularly interested in pathology will have an opportunity for a greater exposure to the field while at the same time continuing their in-breadth education as physicians.

GRADUATE COLLEGE COURSES

PREREQUISITE — Permission of the Department Chairman.

201 HISTOCHEMISTRY. A survey of techniques used for chemical identification of cellular and tissue components, including discussion of underlying theories. Prerequisite: an acceptable course in cell structure (e.g., Anatomy 311, Botany 256); Chemistry 131-132; permission of the department. A course in biochemistry is strongly recommended. Credit as arranged.

301-302 GENERAL AND SPECIAL PATHOLOGY. This is similar to the course for second-year medical students except it does not include the course work in clinical pathology. It may be taken by graduate students who have proper prerequisite training. Lectures and conferences: total for year, 80 hours. Laboratory: total for year, 160 hours. Ten credit hours total.

By special arrangement, properly qualified graduate students may be permitted to enroll for the first portion of the course only with credit hours to be arranged.

310, 311, 312 ADVANCED PATHOLOGY. Supervised practical experience in handling, processing, and diagnosis of pathological materials. Participation in departmental seminars and conferences. Prerequisite: 301-302; permission of department. Credit as arranged.

391, 392, 393, 394 THESIS RESEARCH. Investigation of a research topic under the direction of a staff member, culminating in an acceptable Master's thesis. Prerequisite: Courses 301 and 302. Credit as arranged.
The Department of Pediatrics

Professor McKay (Chairman); Associate Professor Lucey; Associate Professors (Clinical) P. D. Clark and Sussman; Assistant Professors Hodgkin* and Yu; Assistant Professors (Clinical) McKee, Dorothy Morrow and Paxson; Instructors (Clinical) Bergner, Elizabeth Clark, Gentry, Narkewicz and Stackpole; Clinical Associate Friedman.

The Department seeks through its required course to give each student a grounding in pediatrics which will enable him or her to handle children successfully in whatever branch of medicine is eventually practiced by the student. Particular emphasis is put on doctor-child-parent relationships. Emphasis is also placed on giving the student some perspective on the practical aspects of pediatrics through exposure to the teaching of an active practitioner during one of the two months of clinical clerkship.

The Department also takes the responsibility for pediatric training of interns and residents in the Medical Center Hospital of Vermont in Burlington.

CLINICAL SCIENCE CORE

CLINICAL PEDIATRICS. A two-month clinical clerkship with daily teaching rounds on the pediatric floors of the Medical Center Hospital of Vermont. Each student participates actively in the care of inpatients, spends under supervision one afternoon a week seeing patients in an outpatient clinic, one afternoon a week seeing patients in a child-health clinic, and one day at Brandon Training School.

MAJOR PROGRAM

341-342 MAJOR PROGRAM IN PEDIATRICS. Sixteen months during which, in order to provide continuity, the student will participate on a monthly or bi-monthly basis in each of the following clinics: allergy, birth defects, child development, child health, congenital heart, pediatric diagnostic, pediatric follow-up (chronic disease), pediatric psychiatry, school health, and speech and hearing.

There will also be monthly basic science seminars to stimulate in-depth study and discussion of the basic science aspects of particular pediatric problems brought up by the clinical experience of the students. The time not devoted to these continuing experiences will be distributed as follows: 1 month, clinical microbiology; 4 months, inpatient clinical clerkship; 2 months, clinical clerkship on nursery

* On military leave.
service; 1 month, preceptorship with a pediatric practitioner; 8 months, elective or electives (after discussion with and approval of the Chairman of the Department of Pediatrics).

ELECTIVE COURSES. (For students not taking pediatric major)

351-352 OUTPATIENT PEDIATRICS. Clinical clerkship in outpatient facilities of the University of Vermont Medical Center or other approved pediatric departments. Attendance at daily inpatient rounds also, with assignment to detailed work-up of cases of particular interest. Students work closely with senior resident. One or two months.

353-354 HOSPITAL PEDIATRICS. Clinical clerkship in inpatient facilities of the University of Vermont Medical Center or other approved pediatric departments. One or two months.

355-356 NEONATAL PEDIATRICS. Clinical clerkship on nursery service of University of Vermont Medical Center or other approved pediatric department. Two months.

357-358 RESEARCH PEDIATRICS. Supervised work in an approved pediatric research laboratory at the University of Vermont or other medical center, or the carrying out under supervision of an approved specific clinical research project. One to four months.

359-360 PRACTICE OF PEDIATRICS. Assignment to work with an approved pediatrician in his practice. One month.
The Department of Pharmacology

Professors Smith (Chairman) and Macmillan; Visiting Professor Maxwell; Associate Professor Jaffe; Assistant Professors Doremus (Director of Animal Services), Eckhardt, McCormack, MacDonald (Clinical Pharmacology) and Reit; Instructor Wallace (Clinical Pharmacology).

BASIC SCIENCE CORE
The pharmacology course for medical students is taught in correlation with the course sequence of the Department of Pathology during the first period of the second year. The course considers a study of the basic mechanism of action of therapeutic agents, their pharmacological actions, their fate and toxicology. The course consists of lectures, medical motion picture teaching films, discussion groups, demonstrations, and laboratory exercises. Demonstrations and laboratory experiments in pharmacodynamics are designed to emphasize accurate observation, careful recording, and biological variations in drug action.

GRADUATE COLLEGE COURSES
The Department of Pharmacology offers graduate programs leading either to the degree of Master of Science or Doctor of Philosophy. Facilities are available for properly qualified students and others for research either independently or in cooperation with members of the staff.

PREREQUISITE — Permission of the Department Chairman.
301 PHARMACOLOGY. This is the course given in the medical curriculum, with such modifications for the individual graduate student as are required. Lectures, conferences and demonstrations, 10 hours; laboratory, 56 hours. Eight credit hours.
372, 374, 376 SPECIAL TOPICS IN PHARMACOLOGY. Topics of current interest and importance in pharmacology are considered in depth through presentations by graduate students and staff. During each year a specific theme of study will be developed. Prerequisite: Permission of the Department. One credit hour per semester.
381, 383 SEMINAR. General topics are presented by students, staff members and visiting scientists. Organized surveys of selected fields may be presented upon
request. One x 1 hour per week. Offered both first and second semesters. Open to all properly qualified graduate students. One credit hour per semester.

391 through 399  MASTER'S THESIS RESEARCH. Investigation of research topic under the direction of an assigned staff member, culminating in an acceptable Master's thesis. Credit as arranged.

491 through 499  DOCTORAL THESIS RESEARCH. Original research under the direction of an assigned staff member, culminating in an acceptable doctoral dissertation. Credit as arranged.
The Department of Physical Medicine and Rehabilitation

Professor Shields (Chairman): Assistant Professor Gillette.

Program of Instruction: Instruction in physical medicine and rehabilitation for medical students and other students in the health professions is at present conducted in association with other departments in the College of Medicine.

The Department of Physical Medicine and Rehabilitation was established in the College of Medicine of the University of Vermont in February 1966. Department offices are presently at the Vermont Rehabilitation Center, which is operated by the State of Vermont in association with the College of Medicine. The purpose of the Department is to establish patient services in physical medicine and rehabilitation in the University teaching hospitals and the Rehabilitation Center; to teach students in the health professions, and to conduct research in this area of medical practice.

During the early stages of growth, major consideration and support will be given to expansion and development of the services at the Vermont Rehabilitation Center. The prevention and early recognition of disability will be stressed in the patient care and teaching programs of the Department.

The Department will utilize the resources of various departments in the College of Medicine and other areas of the University. It will complement the diagnostic and therapeutic efforts of other departments in the College of Medicine by establishing a diagnosis of disability. Treatment and counseling relative to the disability will be emphasized employing the talents of counselors and therapists, as well as physicians. Included among the health professions which participate are specialists in vocational counseling, hospital administration, physical therapy, occupational therapy, speech pathology, psychology, industrial arts, rehabilitation nursing and social work.

Among the objectives of the State Rehabilitation Center is the development of out-of-hospital services that will be available throughout the State and the provision of training for health professionals in rehabilitation in Vermont and the "health region" served by the University of Vermont.

Liaison is maintained with the official and voluntary agencies which are interested in rehabilitation.

The Department of Physical Medicine and Rehabilitation is concerned with the development of a service to evaluate human function that is diminished or lost through congenital or acquired disability. It offers therapy and counseling services designed to shorten the period of convalescence following acute illness or injury; to render a diagnosis of disability and to evaluate its effect on the individual, his
family and his community; to return disabled people to work or to school, or to the highest level of self-care that is possible.

Summer Fellowships in Rehabilitation: The Vocational Rehabilitation Administration of the Department of Health, Education and Welfare supports a number of Summer Fellowships in Rehabilitation. These are available for periods of two or three months, during which time the student receives an appropriate stipend. The student is associated with members of the faculty and house staff in the Department of Physical Medicine and Rehabilitation. Students become acquainted with the types of patients that are referred to a Physical Medicine and Rehabilitation Service and with the techniques and methods used by the allied health professions, official and voluntary community health and welfare agencies and with the large number of other services which are needed by patients with long-term illness and disability.

It is hoped that some of the Summer Fellows will become interested in rehabilitation medicine to the extent of selecting it as a career. More important, an effort is made to develop a broad understanding of this field of medicine so that students who participate will be better physicians and will understand that rehabilitation services are an essential part of good medical care.

MAJOR PROGRAM

An elective in Physical Medicine and Rehabilitation is offered during the major program. The duration of this elective is four weeks. During this period the student is associated with members of the faculty in the Department of Physical Medicine and Rehabilitation. He is introduced to the mission and some of the techniques of rehabilitative medicine. He is associated with department staff when rehabilitation goals for patients with disabilities are established. He will attend ward rounds, Case Conference and other departmental activities. Case Conference is conducted once weekly at which time the physicians in the Department and the Directors of the various sections discuss the goals of rehabilitation for Rehabilitation Center patients. Participants in these conferences include the Chief of Physical Therapy, Occupational Therapy, Nursing, Social Work, Vocational Counseling, Prosthetics and other sections.

It is anticipated that the student who completes this elective will have a good idea of rehabilitative medicine and will have some understanding of the use of the allied health sciences which are associated with rehabilitation. The role of official and voluntary health agencies which are concerned with rehabilitation and long-term medical care is stressed.
Professors Alpert (Chairman) and Sichel; Associate Professor A. H. Chambers; Assistant Professors Howe, McCrorey and Webb.

**BASIC SCIENCE CORE**

**MEDICAL PHYSIOLOGY AND BIOPHYSICS.** Physiology and Biophysics is taught as a science to the first-year medical students, with emphasis being placed on the broad physical, chemical and biological principles underlying the function of the main organ, tissue and subcellular systems. Special stress is placed on those phases which are the scientific basis of clinical medicine and research. The core course consisting of 153 hours is made up of lectures, demonstrations, conferences and laboratories.

**MAJOR PROGRAM**

There is a vigorous graduate and research program in the Department. Medical students may participate in the advanced seminar type course work, as well as in the various research projects.

**GRADUATE COLLEGE COURSES**

Under special circumstances medical students may take advantage of the opportunity for graduate study leading to a Master of Science or a Doctor of Philosophy degree. For further details on the graduate program see the catalogue of the Graduate College or write for the Department's brochure. A number of fellowships are available for summer research or graduate study.

**PREREQUISITE — Permission of the Instructor of course.**

301-302 **PHYSIOLOGY AND BIOPHYSICS.** This course is taught as a science to the first year graduate students, with emphasis being placed on the broad physical, chemical and biological principles underlying the function of the main organ, tissue and subcellular systems. Special stress is placed on those phases which are the scientific basis of clinical medicine and research. The core course consisting of 153 hours is made up of lectures, demonstrations, conferences and laboratories.

303 through 306 **SPECIAL PROBLEMS IN PHYSIOLOGY.** These courses, open to qualified students by arrangement with the staff, will cover various special problems by means of lectures, seminars and directed reading. Hours and credit as arranged.
308  BIOMETRICS AND APPLIED STATISTICS. This course is designed as an introduction to the rational use and evaluation of statistical methods in the planning of experiments and the interpretation of biological data. Topics include measures of central tendency and dispersion; "t"-test and analysis of variance; correlation and regression; chi-square; non-parametric methods; experimental design. The course includes a biometrics laboratory. Course limited to ten students. Prerequisite: Math. 110 or equivalent. Five hours credit. 1966-67.

Dr. McCrorey

309  THE PHYSIOLOGY OF SYNAPTIC AND CONDUCTING MEMBRANES. The mechanisms of synaptic transmission and nerve and muscle conduction will be explored, with particular emphasis on molecular structure and function. Prerequisites: Physiology 301-302, Biochemistry 301-302. Three hours, one semester. Alternate years. 1967-68.

Dr. Webb

310  THE MOLECULAR BASIS OF BIOLOGICAL MOTILITY. This is an advanced course dealing with the molecular basis of muscle contraction and biological movement. The problems of energetics, mechanics and chemistry of biological motility will be considered in detail. Special emphasis will be given to the contraction of skeletal muscle. There will be some discussion of pathology, pharmacology and the comparative physiology of muscle related to the areas designated above. Lectures and conferences. Three hours, one semester. Prerequisites: Physiology 301-302, Biochemistry 301-302. Alternate years. 1966-67.

Dr. Alpert

311  NEUROENDOCRINOLOGY. This is a graduate seminar in which the interrelationships between the endocrine and neural communications systems are discussed in detail. The experimental and philosophical basis for currently accepted ideas in the field will be critically evaluated. Lecture-conference. Prerequisite: Physiology 301-302, Neuroanatomy 332, Biochemistry 311-312. Three hours, one semester. Alternate years. 1967-68.

Dr. W. Chambers

312  SPECIAL SENSE RECEPTORS. Function of receptor cells from the standpoint of stimulation and response. Specific sense receptors will be considered. Assigned reading in the research literature with seminar discussions. Prerequisite: Physiology 301-302. Three hours. Alternate years. 1967-68.

Dr. A. Chambers

313  THE PHYSIOLOGY AND BIOPHYSICS OF THE CIRCULATION. This course deals with the principles underlying the regulation of circulation. Special
emphasize will be given to a consideration of the physiological adjustments to exercise. The course will consist of reading and discussing articles, monographs and reviews. It will be a seminar type course limited to ten students. Three hours, one semester. Alternate years. Prerequisites: Physiology 301-302. 1967-68. Drs. Tabakin, Hanson and Levy

314 EXPERIMENTAL ENDOCRINOLOGY. This is an advanced course dealing with integrative endocrinology with emphasis upon the interrelationships between the various endocrine glands. The aspects of hormonal biosynthesis and activity upon various target organs, interactions between specific hormones, and homeostatic control on total body physiology will be considered in detail. Special emphasis will be given to laboratory techniques applicable to endocrine research. Lectures and laboratories. Three hours, one semester. Prerequisites: Physiology 301-302 or Endocrinology 271. Alternate semesters. 1967-68. Dr. Howe

321-322 CELLULAR PHYSIOLOGY AND BIOPHYSICS. Fundamental physical and physicochemical properties of living cells. The reading of original scientific papers in the area covered will be stressed. Hours and credit as arranged.

381 through 389 SEMINAR. These courses are designed to review recent developments and literature. Topics are presented by students, staff, and by visiting scientists. Hours and credit as arranged.

391 through 394 THESIS RESEARCH. Investigation of a research topic under the direction of an assigned staff member, culminating in an acceptable Master's thesis. Credit as arranged.

491 through 499 THESIS RESEARCH. Investigation of a research topic under the direction of an assigned staff member, culminating in an acceptable Doctor's thesis. Credit as arranged.

Division of Biophysics
Professor Sichel (Chairman); Associate Peterson.

GRADUATE COLLEGE COURSES

PREREQUISITE — Permission of the Division Chairman.

311 through 314 SPECIAL PROBLEMS IN BIOPHYSICS. These courses, open to qualified students by arrangement with the staff, will include lectures,
seminars and directed readings on current problems in biophysics and medical physics. Hours and credit as arranged.

331 ELECTRIC EXCITATION OF PHYSICAL AND BIOLOGICAL SYSTEMS. The relation between stimulus and response in physical and in excitable biological systems will be considered in terms of membrane parameters. Prerequisites: Physiology 301-302, permission of Division Chairman. Three hours credit. Alternate years.

371 through 379 SEMINAR. These courses are designed to review recent developments and literature. Topics are presented by students, staff, and by visiting scientists. Hours and credit as arranged.

395 through 399 THESIS RESEARCH. Investigation of a research topic under the direction of an assigned staff member, culminating in an acceptable Master's thesis. Credit as arranged.

491 through 499 THESIS RESEARCH. Investigation of a research topic under the direction of an assigned staff member, culminating in an acceptable Doctor's thesis. Credit as arranged.
The Department of Psychiatry

Professors T. J. Boag (Chairman) and Chittick; Associate Professor Huessy; Associate Professors (Clinical) Bloch, Brooks, Cohen and Young; Assistant Professors Agras, Chase, McAreer, Mitchell (Anthropology), Nies, Ravaris, Vispo, Weaver (Psychology) and Woodruff; Assistant Professors (Clinical) Agnew, W. N. Deane (Sociology), Forest, Leopold, McGinniss, Tompkins and J. M. Tooian; Instructors (Clinical) Lorna Boag, Caron, Covey, Eldred (Psychology), Marshall, Sharpe, Sommer and J. N. Stark.

While the primary and most obvious responsibility of this Department is the teaching of Psychiatry as a special discipline of Medicine dealing with the diagnosis and treatment of emotional disturbance and mental illness, its task is not confined to this. It also includes the presentation of the behavioral sciences as part of the basic science preparation in the preclinical years and the application of behavioral sciences to disturbed behavior, i.e., Psychopathology. Its teaching also has relevance to medical practice overall. It includes presentation of a body of knowledge concerning human behavior, and techniques for understanding and managing interpersonal relationships, which are utilized by all physicians, whatever their field of endeavor.

The staff is composed of 32 members. Some of these practice Psychiatry privately and supervise the Psychiatric Outpatient Clinics. Others specialize in psychiatric problems of children, psychological techniques, psychiatric social service, community psychiatry, and the care of patients in psychiatric hospitals.

A residency program, approved for three years of training by the Council on Medical Education of the American Medical Association is carried on by the Department in conjunction with the affiliated hospitals. Residents rotate through the general hospitals and state hospital, and affiliations with other mental health agencies are available in the later years of the residency. In addition to the regular clinical teaching and conferences in the hospitals, an academic program of seminar instruction is carried on within the Department during the academic year.

BASIC SCIENCE CORE

311-312 BEHAVIORAL SCIENCE. Part I. Overview of Contributions to the Understanding of Behavior. This course surveys the knowledge of human behavior which has been compartmentalized by the establishment of separate disciplines. The course points up their contributions to the broad base of knowledge on which the study of medicine must rest, and indicates areas of collaboration with these disciplines by the future physician.

Part II. Medicine and the Nature of Man. This course presents a review of the
processes of human development and aging in social and cultural context, encompassing infancy, childhood, adolescence, maturity, declination and death.

321-322 PSYCHOPATHOLOGY. This course concerns itself with the understanding of personality problems as they occur in patients suffering from psychical and mental disorders. Emphasis is placed on giving the student a clear understanding of terminology, systems of classification, and the basic concepts of dynamic psychiatry. Examples of the major approaches to the study of disturbed behavior are presented, drawing upon the contributions of clinical, social and biological sciences. Audio-visual aids and case presentations with small group discussions are utilized.

CLINICAL SCIENCE CORE

331-332 PSYCHIATRY. This is the principle clinical course in psychiatry and consists of an eight-week block of time. The main assignment is as a clinical clerk on the psychiatric service of the Mary Fletcher or DeGoesbriand Memorial Hospital, studying inpatients and outpatients and participating in all regular teaching exercises and conferences. In addition to clinical exercises, students participate in didactic and seminar instruction. Additional assignments offer clinical experience in mental hospitals and visits to other mental health agencies so that the student sees an extended range of patients.

MAJOR PROGRAM

341-342 PSYCHIATRY. Detailed plans for the senior major in psychiatry are still in preparation. It is anticipated that this will be chosen by students who intend to pursue a career in psychiatry. The general format will be:

a. A basic science block emphasizing those disciplines which most contribute to the preparation of a psychiatrist, e.g., physiology, biochemistry, neurophysiology, neuroanatomy, behavioral and social sciences, and so forth.

b. Additional clinical assignments on the psychiatric service.

c. Additional assignments on other clinical services, e.g., medicine, pediatrics, neurology.

d. Elective assignments.

PSYCHIATRY AS PART OF OTHER MAJORS. Courses in clinical psychiatry will be offered as part of Senior Majors in other departments.

351-352 PSYCHIATRIC ELECTIVES. A range of elective placements will be available and also a variety of opportunities for summer work in either a clinical or a research position.
The Department of Radiology

Professors Soule (Chairman) and Roth (Electrical Engineering); Associate Professors Janney (Radiologic Physics), Ring (Neuroradiology and Radiologic Anatomy) and Tampas (James Picker Foundation Scholar in Radiological Research); Associate Professors (Clinical) Foley, Peterson and Van Buskirk; Assistant Professor Kupic; Associate Professors (Clinical) Guare and Hunziker; Instructors Bannister (X-ray Technique) and Harwood (Radiologic Physics); Instructors (Clinical) W. H. Johnston and Saxby; Clinical Associate Holm; Tutor Kassenter.

The Department of Radiology provides special services to local teaching hospitals and to community hospitals in central and northwestern Vermont. In addition, medical students, residents, nurses and x-ray and isotope technicians receive instruction by members of this Department.

Eleven staff members work full time in radiology in the teaching hospitals and the College of Medicine.

The teaching of radiology extends through the entire four years. In conjunction with the Department of Anatomy, lecture-demonstrations of the normal roentgen anatomy are given during the first year. In conjunction with the Department of Physiology, fluoroscope demonstrations of the chest and alimentary tract are conducted at the hospitals. During the first part of the second year, students are instructed in the principles of diagnostic and therapeutic radiology. Third-year students receive sectional instruction in film analysis. Third- and fourth-year students attend weekly radiology conferences. A month's elective in radiology is offered to fourth-year students.

A fully accredited residency program is available and utilizes the facilities of the College of Medicine and cooperating hospitals. Staff members participate in nearly all of the teaching conferences of the College of Medicine.
The Department of Surgery

Professor Mackay (Chairman); Associate Professors (Clinical) Gladstone, Page and Truax; Assistant Professor Mackenzie; Assistant Professors (Clinical) Barney (Plastic), Cain, Haines (Oncology), Keller, McGill and Shea; Instructors (Clinical) Caccavo, Crandall, Linton (Plastic), McSweeney and L. G. Thabault.

The Department offers training in disciplines leading to a knowledge of the science of surgery.

The Department concerns itself also with training personnel in the approved intern appointments of both local hospitals and their residency program, which latter is a four-year approved program and is conducted jointly by the College of Medicine and the hospitals. The completion of this residency program leads to full qualification for admission to examination by the American Board of Surgery, and, indirectly, to experience completing qualification for fellowship in the American College of Surgeons.

Postgraduate courses are given in conjunction with other departments under the guidance of the Committee on Postgraduate Education.

BASIC SCIENCE CORE

322 INTRODUCTION TO CLINICAL SURGERY. In the first period of the second year, the staff of the Department of Surgery take part in the interdisciplinary course presented as "The Introduction to Clinical Disciplines" which includes the surgical principles to be elucidated and is described in greater detail elsewhere.

CLINICAL SCIENCE CORE

The core course in clinical surgery is presented in an intensive twelve-week course at the termination of which examinations are held. The course consists of approximately three parts, the first of which consists of basic surgical principles applicable to all surgical fields. This part is given by various members of the basic and specialty surgical staffs designated in accordance with their particular skills and interests. The second part of the course embraces the principles of general surgery and traumatic surgery; the third part, the principles of the surgical specialty.

This material is presented in an early-morning seminar five days a week from 8:00 to 9:00 a.m. following which one third of the students are assigned to their specialty services and two thirds of the students are assigned to specific surgical
The Department of Surgery

wards in either teaching hospital. On assigned wards the student is responsible for the work-up and observation of specific patients, becoming an integral part of a clinical team made up of the intern and resident staff members, who are responsible for review of the student's clinical work.

Three days a week the student is responsible for the presentation of cases to a staff surgeon from 10:30 to 12:00 noon at the bedside or in seminar room. These case presentations are mandatory and are chosen by the resident surgeon for presentation to the attending staff, the case presentation being accompanied by a review of surgical text material and current surgical literature on the subject of the patient's disease.

The student shall accompany his patient to the operating room whenever this provides an essential part of the continuity of care. The student shall not be expected to scrub, but may do so if he shows particular interest.

Afternoon time is largely free for thorough patient work-ups and readings. When the student is assigned to specialty surgery, his immediate responsibilities will vary with the specialty in question. This specialty assignment will include one tour of duty in the emergency department of the hospital.

Student progress is evaluated each month by the Surgical Faculty.

At the conclusion of the twelve-week course, written and oral examinations are given and evaluated for course credit and honors.

MAJOR PROGRAM

The Department of Surgery is currently developing a Major Program which may be elected by medical students at the completion of the Clinical Science Core. This Major, as presently contemplated, will include a period of basic science instruction in surgical anatomy, surgical pathology, experimental surgery, physiology and biochemistry. Clinical work included under the Major Program will consist of elective periods in the various surgical specialties and in related clinical areas. It is contemplated that this Program will be a suitable background for general surgery or any of the surgical specialties.
Division of Anesthesiology

Professor Abajian (Chairman); Assistant Professors (Clinical) Dente, Mazuzan and Mills; Instructor (Clinical) Street; Clinical Associates R. S. Deane and Lucia; Research Associate Shinozaki.

The third year instruction will be confined to intensive, small-group, operating room didactic and practical experience. A two-week elective program for fourth-year students is available on the surgical rotation.

A full month of elective may be taken with special permission. Weekly anesthesia conferences are open to students. The resident training program consists of the appointment of six residents for two years.

Division of Neurosurgery

Professor Donaghy (Chairman); Professor (Clinical) Wallman; Assistant Professor Numoto (Experimental); Assistant Professor (Clinical) Flanagan.

The Division of Neurosurgery exists for four main purposes: research, teaching, therapy of neurological conditions by surgical measures, and aid to all regional practicing physicians via the medium of consultation.

Third-year students during the rotation on surgery meet in small clinical conferences and share in combined conferences on neuropathology and neuroradiology.

They serve as clinical clerks and gain experience in the presentation of patients in conference, the preparation of patients for presentation and the preparation of a bibliography.

They are welcomed to the daily neurosurgical rounds and the weekly staff conference, as well as to the Monday noon teaching hour for residents.

Fourth-year students work in the combined neurology-neurosurgery outpatient clinics. An elective in neurosurgery is offered to those fourth-year students who are certified by the Dean of Medicine to be in the upper third of the class and who have demonstrated aptitude for both neurology and general surgery. This
may be taken in clinical or experimental neurosurgery.
Those who choose clinical neurosurgery make complete daily ward rounds, work-up selected patients, assist in the operating room, perform ward duties under direction such as lumbar punctures and dressings both by the neurosurgical technique and spend time in the offices of attending neurosurgeons watching the combined neurological and surgical approach to problems.
Those who select experimental neurosurgery will take part in current research projects and obtain experience in surgery in the laboratory, principles of research and statistics. A full-time neuro-chemist and a full-time neuro-physicist are available to the beginning researcher for consultation.
A four-year residency program is offered.
Neurosurgical services are maintained in both local teaching hospitals.

Division of Orthopedic Surgery
Associate Professor Bell; Assistant Professors (Clinical) Kuhlmann and Rust (Acting Co-Chairmen); Assistant Professor (Clinical) Simpson; Instructor (Clinical) Davis; Clinical Associate Molloy.
The Division of Orthopedic Surgery is currently undergoing reorganization and is seeking a full-time Chief to head the Division. Undergraduate teaching is carried on throughout four years of school, with major interests in the second, third and fourth years. In the second and third years the student actually participates during his clinical clerkship. In the fourth year, orthopedics is offered as an elective. The approved residency in orthopedics and the rotating internship broadens the experience of the student.

Division of Pediatric Surgery
Associate Professor Mellish (Chairman); Postdoctoral Associate Ty.
The Division of Pediatric Surgery aims to provide optimum surgical care for children in the hospitals of the University of Vermont Medical Center. A consultative service for other departments, practicing physicians and the State Department of Health is being developed.
The teaching program complements the general surgical courses with demonstrations and lectures for the third-year students designed to enable them to recog-
nize pediatric surgical problems. Tutorial sessions one morning a week are held at alternate hospitals. These are directed toward case presentation by the student. Pediatric surgical rounds are made at each hospital once a week. In the fourth year, weekly tutorial seminars with patient presentations are held, utilizing patients from both hospitals.

An active research program is under way with particular stress on problems of the newborn infant. Third-year students are given the opportunity to develop their interests in summer research fellowships.

The service is integrated with the general surgical residency program and works closely with the Department of Pediatrics in the care of patients.

Division of Thoracic and Cardiac Surgery
Professor Blair (Chairman); Associate Professor (Clinical) D. B. Miller; Assistant Professor Christie.

The thoracic surgeon is a specialist in disease within the chest, who also performs surgery. The teaching program of Thoracic and Cardiac Surgery emphasizes the dynamic interplay of medical sciences and humanities in achieving optimal patient care. Sponsored formal meetings include a weekly Thoracic Surgery Conference, a monthly thoracic X-ray review, a monthly Thoracic Surgical Pathology Conference, combined conferences with the Cardiopulmonary Division, and cardiac surgery workshops. Formal lectures are kept to a minimum, with preferential teaching on rounds, "spot seminars," and student tutorials. The students participate actively in work-up and presentation of patients, in surgery (including open-heart) and in postoperative management.

Diagnostic activities include the more sophisticated assessment of coronary and other heart disease, as well as conventional procedures in thoracic and cardiovascular problems. Techniques in diagnosis and in disease evaluation are under constant research and development. The clinical program includes all phases of thoracic and cardiovascular disease in the two affiliated hospitals, as well as related consultative programs at the Vermont Sanitorium in Pittsford, and at the Barre Chest Clinic. Operative programs, in addition to conventional thoracic procedures, include cardiopulmonary bypass for open-heart surgery. Postoperative care involves the required attention to customary problems and, in addition, intensive postoperative management of serious problems, including Special Care Unit.
The research program is concerned with all facets of cardiovascular pulmonary disease and shock. Both experimental and clinical investigative problems relate to open-heart surgery, to postpump syndromes, the modification of existing and development of new prosthetic valves, postoperative assessment of cardiac and pulmonary function after surgery and shock. A broad program in coronary surgery integrated with other departments within the medical school, is under development. Summer student fellowships are available each year in all programs.

Division of Urology

Associate Professor (Clinical) Powell (Chairman); Assistant Professor (Clinical) Fagan; Instructor (Clinical) Esposito.

The teaching program is directed at the third and fourth years. Didactic lectures usually levelled at the third-year group, are largely supplemented by tutorial sessions with smaller groups, briefly reviewing and clarifying puzzling aspects of material to be covered.

Patient material is used to assist in this effort. Third- and fourth-year teaching is carried out almost entirely in the hospital where the students are particularly active on the wards and in the outpatient departments. They are occupied with patient study, weekly urological rounds, intravenous pyelography conferences, observation in cystoscopy and operating rooms. Students in their senior year may take an elective month in urology, and in some instances, carry on research projects throughout the year.

A three-year approved urological residency program has been operational for a number of years with clinical and research material gathered from both teaching hospitals and the College of Medicine research unit. Research projects in recent years have been carried out in cineluorography, hypertension, microsurgery of ureter and vas deferens, and so forth.

Interns are assigned to urology in both hospitals and participate in teaching and conferences.
The Medical Library

Medical Librarian Hunter; Assistant Librarian Gillies.

The present Medical Library is located on the second floor of the old Medical Building. The hours are from 8:30 to 11 p.m., Monday through Friday; 9 to 6 p.m., Saturday; and 2 to 11 p.m., Sunday.

The collection includes some 30,000 volumes and provides current data in all fields of medical research through its subscriptions to 1,002 journals.

A new Medical Library is under construction and will be available in January, 1968. It will have a seating capacity of 250, of which a good portion will be individual carrels. A collection of 105,000 books and journals is planned, and further expansion of library services will be possible in more attractive, spacious and centrally located quarters.

Even before moving into the new building, however, a project is underway for providing faster, more accurate and more complete library service. The Computation Center and the Medical Librarian are setting up a program for automating many library functions. As a beginning step, book catalogs of the Library's holdings will be made available to UVM Medical departments, hospital libraries and institutes throughout northern New England. Those who wish to use the Medical Library facilities will then have in their own offices a complete list of the book and journal collection. The acquisitions, cataloging and serials department of the Library, as well as its bookkeeping activities, will be brought under computer control.

A TWX or teletype service will soon be in operation. Communication with other libraries for interlibrary loans can be made in a few minutes in printed form. The facilities of larger medical libraries such as the Yale Medical Library and the National Library of Medicine will then be made speedily available to the students and faculty. The University of Vermont Medical Library is actively participating in current planning for library cooperation on a local, regional and national basis.
Regional Medical Program

Director Coon; Assistant to the Dean for Regional Medical Affairs Struthers; Associate Director for Institutional Affairs Huston; Assistant Director for Nursing Demers; Assistant Director for Allied Health Professions Breen; Editorial Assistant Linney; Consultant in Systems Engineering McDonald.

In June, 1966 the University of Vermont College of Medicine was among the first five institutions in the country to be awarded a three-year grant by the National Institutes of Health to plan a Regional Medical Program for Heart Disease, Cancer and Stroke (P.L. 89-239). The overall goal of the Program is to improve the care of patients with these three diseases. Specific objectives of the Program include:

- Devising ways of making the latest medical knowledge available to the practicing physicians and allied health personnel as rapidly as possible;
- Promoting cooperation among individuals and agencies involved in health care;
- Stimulating local initiative in planning for the health care needs of northern New England.

The staff of the Regional Medical Program is working closely with the Department of Community Medicine, the Office of Continuing Medical Education and the State Health Department to meet the objectives of the Program.

Division of Photography

Director Mallory; Medical Photographer Woon.

The Division of Photography will be moving into a modern photo section with the completion of the new medical college building. This Division has a full-time staff whose services are available to all Departments of the College of Medicine for patient photography, photomicrography and teaching aids in both black and white, and in color.
Honors and Prizes

Certain students who have been top-ranking during the entire four years' course of study in the college may be graduated as Doctors of Medicine, cum laude, upon recommendation of the Advancement Committee and the Faculty.

Prizes for general high standing for four years shall be awarded only to students who have been enrolled for four years at this college.

Clinical prizes may be awarded to any student who has spent the third and fourth years at this college.

Alpha Omega Alpha, Honor medical society: Students are elected to this national society by faculty and student members. Selection is based not only upon high academic records but also upon evidence of individual scholarship and promise for a medical career.

The Governor Woodbury Prizes: The income from a fund of one thousand dollars, augmented by funds from the Century Club of the UVM Medical Alumni Association, provides two prizes annually. The first is awarded at graduation to the student who has shown the greatest proficiency in clinical work. The other is awarded to the sophomore having the highest standing in the subjects of the first two years. The amount of each prize is determined by the income obtained from the investment of the fund.

The Carbee Prize: A prize fund of three thousand dollars was established by the late Mrs. May D. Carbee of Haverhill, N. H., in memory of her husband, Moses Dyer Carbee, M.D., of the class of 1873. The annual income from the investment of this fund provides a prize to be awarded annually to that student of the Senior class who has shown the greatest proficiency in the field of Obstetrics. The Department of Obstetrics makes the award.

The Helaine Mesch Memorial Award: This award is presented annually by the class of 1961 to the most deserving senior, the recipient to be selected by his classmates.

Lamb Foundation Prizes: This award is based on excellence in understanding the patient-physician relationship. Details regarding this award may be obtained from the Dean's Office.

The UVM Century Club Prizes for Scholarship: These prizes are awarded annually to the two students attaining the highest scholastic rank in their class during four years at the University of Vermont.
The UVM Century Club Prize for Undergraduate Research: This is an annual award presented for performance of a research project with outstanding competence.

The William Eustis Brown Alumni Prize: This award is presented annually to a graduating student on the basis of broad cultural interests and loyalty to the College of Medicine. The award was established by an annual grant from the Century Club of the UVM Medical Alumni Association.

The Ernest Hiram Buttes Century Club Prize: This award is presented annually to the second-year student selected by the Department of Pathology for outstanding performance in that subject.

HONORS AND PRIZES, 1966

Carbee Prize, for greatest proficiency in Clinical Work in senior year, Richard Jay Falk, B.A.

Woodbury Prizes in Medicine, for greatest proficiency in Clinical Work in senior year, Howard William Meridy, B.A.; to the sophomore having the highest standing for two years of Medical Work, Charles Michael D'Angelo, B.A.

Helaine Mesch Memorial Award, George Millard Simmons, Jr., B.S.

Cum Laude:

- Richard Jay Falk, B.A.
- Joseph Anthony Guzzetta, B.S.
- William Harris Likosky, B.A.

Alpha Omega Alpha, National Honor Medical Society:

- Stephen Hart Dyke, B.A.
- Richard Jay Falk, B.A.
- Joseph Anthony Guzzetta, B.S.
- William Harris Likosky, B.A.

The William Eustis Brown Alumni Prize, awarded to a senior on the basis of broad cultural interests and loyalty to the College of Medicine, Joseph Roger Beauregard, B.A., M.S.

The UVM Century Club Prizes for Scholarship, awarded to the two students attaining the highest scholastic rank based on four years completed at the University of Vermont College of Medicine. 1st Prize, Brian Machanic, B.A.; 2nd Prize, Joseph Anthony Guzzetta, B.S.
The Ernest Hiram Buttles Century Club Prize, awarded to the sophomore selected by the Department of Pathology for outstanding work in that subject, Earl Stanley Perrigo, B.S.

The Roche Award, given in recognition of an outstanding student who has successfully completed the first two years of medical school, Charles Michael D'Angelo, B.A.

The Pfizer Award, awarded annually to a student on the basis of scholastic record, financial need, or both, Robert Howard Lenox, B.S.

The UVM Century Club Prize for Undergraduate Research, Richard Jay Falk, B.A.

The Lamb Foundation Prize, given to the student showing the greatest comprehension and appreciation of the Doctor-Patient relationship, Ellen Mansell, B.S.

The Sheard-Sanford Research Award, given by the American Society of Clinical Pathologists for meritorious research in pathology, Richard Jay Falk, B.A.
Lectureships

Lawrence Barnes Hayward Memorial Speakership in Medical Rehabilitation: In 1956, through the generosity of Mrs. Fray N. Hayward of Burlington, a lectureship was established for the purpose of obtaining speakers in the field of medical rehabilitation.

Clarence H. Beecher Memorial Lecture: In 1960 the Vermont Heart Association established this memorial lecture in honor of one of its founders and past president, Dr. Clarence H. Beecher.

Wayne Griffith Memorial Lecture: In 1960 the Vermont Division of the American Cancer Society established a memorial lecture for Wayne Griffith, M.D., formerly of Chester, Vt.

Organizations

STUDENT COUNCIL
Two elected representatives from each class, and the president of each class ex-officio, form a student council which meets with the Dean and the Assistant Dean for Student Affairs regularly during the academic year.

ALPHA OMEGA ALPHA
A chapter of the national medical honor society was installed at this College on November 21, 1952.

BEAUMONT MEDICAL CLUB
The Beaumont Medical Club was formed for the enjoyment of the history of medicine. Informal meetings are held through the year, and there is an annual formal lecture. The Medical Alumni Association provides financial support.

MEDICAL FRATERNITIES AND SOCIETIES
Beta Pi Delta Mu Chapter of Nu Sigma Nu (Founded 1880).
Alpha Gamma Sigma (for women, founded at University of Vermont, 1924).
Alpha Chapter of Phi Chi (Founded at University of Vermont, 1889).
Phi Delta Epsilon.

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THE OSLER CLINICAL SOCIETY
The Osler Clinical Society, which was organized in 1929, is composed of all undergraduate students in the College of Medicine.

MEDICAL STUDENTS WIVES CLUB
Wives of medical students meet frequently during the year for social activities and other projects. They share a lounge on the second floor of the Medical Alumni Building.

UVM MEDICAL ALUMNI ASSOCIATION
The University of Vermont Medical Alumni Association, whose membership is made up of all graduates of the College of Medicine, is increasingly active in its support of the school and the student body.

Each fall the Alumni Association sponsors a Century Club banquet, at which time all members of the senior class are entertained and recent graduates of the medical school help prepare the prospective graduates for their years of postgraduate education. The Alumni Association also sponsors many awards and prizes which are given to outstanding students.

At Commencement the Medical Alumni Association sponsors an annual alumni banquet on Alumni Day, at which time the senior class members and their guests attend with all alumni who are returning for Commencement.

In addition, the Alumni Association through its Century Club sponsors many student and faculty endeavors during the year. This includes such activities as the sponsorship of visiting professors, the support of students who are doing research, and of studies of educational methods in medicine.

For the year 1966-67 the following alumni serve as officers of The University of Vermont Medical Alumni Association:

President—Walter M. Glass, '43, Great Neck, N.Y.
President-Elect—Joseph N. Russo, '45, Hartford, Conn.
Vice President—John C. Cunningham, '35, Burlington
Secretary-Treasurer—Ralph D. Sussman, '38, Burlington
Executive Committee—Edward S. Irwin, '55, Burlington; John P. Tampas, '54, Burlington; A. Bradley Soule, Jr., '28, Burlington
The Board of Trustees

Lyman Smith Rowell, M.S., President
Philip Henderson Hoff, B.A., LL.B., Governor

Woodhull Stanton Hall, M.D.
Elmer Lyle Nicholson, B.S.
Lawrence Harland Marvin, B.S.

March, 1963-March, 1969
Allan Beham Angney, Jr., B.S.
Bartholomew Francis Garrity, B.S.
Sanborn Partridge, LL.B., M.S.
Ellery Redfield Purdy, B.S., M.Ed.

March, 1964-March, 1970
Lawrence James Doolin, B.S.
Floyd Merle James, B.S.
Robert Fleming Patrick, B.S., M.B.A.

March, 1965-March, 1971
William Thomas Burns, B.S.
Edward Richardson Eurich
Leo O'Brien, Jr., B.A.
Walter Cabot Paine, A.B.

March, 1966-March, 1972
John Luther Beckley, Ph.B.
Leon Donald Latham, Jr., Ph.B., LL.B.
Kenneth Nash Scott, B.S.

March, 1967-March, 1973
Peter Giuliani
Ellwyn Edward Miller, B.S.
Robert Emmett O'Brien, B.S., M.D.
George Howard Sloan, M.A.

Ex-Officio
Bennington, Vt.
Newington, Conn.
Essex Junction, Vt.
Arlington, Vt.
Burlington, Vt.
Proctor, Vt.
Mendon, Vt.
West Hartford, Conn.
Burlington, Vt.
Dorset, Vt.
Waitsfield, Vt.
South Burlington, Vt.
Woodstock, Vt.
Montclair, N.J.
Burlington, Vt.
Detroit, Mich.
Montpelier, Vt.
Putney, Vt.
Winooski, Vt.
Rutland, Vt.
Academic Divisions of the University of Vermont

Lyman Smith Rowell, M.S. 
President of the University

Clinton Dana Cook, Ph.D. 
Vice-President for Academic Affairs

THE COLLEGE OF ARTS AND SCIENCES
George Vincent Kidder, Ph.D., Dean
A general four-year program is provided leading to the degree of Bachelor of Arts with the opportunity for concentration in one or more of the following studies: botany, chemistry, commerce and economics, English, French, geology, German, Greek, history, Latin, mathematics, music, philosophy, physics, political science, psychology, sociology, Spanish, speech, and zoology. Pre-professional programs for students who plan to continue their education in professional schools may be planned.

THE COLLEGE OF AGRICULTURE AND HOME ECONOMICS
Thomas Whitfield Dowe, Ph.D., Dean
Four-year curricula are offered leading to the degrees of Bachelor of Science in Agriculture, in Agricultural Engineering and in Home Economics. Also offered is a two-year program in pre-veterinary science which prepares students for admission to other institutions for professional training.

THE COLLEGE OF TECHNOLOGY
Warren Orvel Essler, Ph.D., Dean
Included in this college are curricula in civil, electrical, mechanical and management engineering; professional chemistry and medical technology.

THE COLLEGE OF EDUCATION AND NURSING
Thomas Clair King, Ed.D., Dean
Four-year curricula are offered leading to the Bachelor of Science degree in the fields of elementary, secondary, business and music education; and a four-calendar-year curriculum leading to the degree of Bachelor of Science in Nursing.
THE COLLEGE OF MEDICINE

*Edward Clinton Andrews, Jr., M.D., Dean

The College of Medicine offers a four-year graduate program leading to the degree Doctor of Medicine and provides facilities for a limited number of candidates for other graduate degrees to take courses in its departments.

THE GRADUATE COLLEGE

William Hooper Macmillan, Ph.D., Dean

Opportunities for graduate study are offered in academic fields in which University resources have made sound graduate programs possible. Doctoral programs have been inaugurated in several areas and Master’s programs are available in nearly all departments. The Graduate College administers all studies beyond the Bachelor’s degree with the exception of the program of the College of Medicine leading to the degree Doctor of Medicine.

THE SCHOOL OF DENTAL HYGIENE

Wadi I. Sawabini, D.D.S., Director

A two-year program is offered which leads to a Certificate in Dental Hygiene. Recipients of the certificate are eligible to take all state board examinations for licensing as dental hygienists.

THE SUMMER SESSION

Raymond Virgil Phillips, Ph.D., Dean

Courses are offered on both the graduate and undergraduate level in many subjects under the regular staff, as well as special classes given by visiting instructors.

*Appointed Dean as of January 1, 1967.
STANDING COMMITTEES—1966-67

Executive Committee—*Edward C. Andrews, Jr., Chairman
Norman R. Alpert
Thomas J. Boag
Stanley L. Burns, Jr.
Robert W. Coon
John C. Cunningham
Fred W. Gallagher
Charles S. Houston
William H. Luginbuhl
Admissions Committee—Stanley L. Burns, Jr., Chairman
W. Stewart Agras
Dewees H. Brown
Advancement Committee—Stanley L. Burns, Jr., Chairman
Members of Executive
Committee, and
Emil Blair
John F. Daly
Animal Facilities Committee—Henry M. Doremus, Chairman
Julian J. Jaffe
Awards and Fellowships Committee—Ellsworth L. Amidon, Chairman
Albert G. Mackay
John Van S. Maeck
Robert W. Coon
Building Committee—Donald B. Melville, Chairman
Clinical Research Center Advisory Committee—
Edward C. Andrews, Jr., Dean, Chairman
Richard L. Naeye, Director
Ellsworth L. Amidon
Robert W. Coon
Thomas C. Gibson
* Appointed Dean as of January 1, 1967.
† Appointed Associate Dean as of January 1, 1967.
STANDING COMMITTEES—1966-67

Continuing Medical Education Committee—R. W. Paul Mellish, Chairman
Frank L. Babbott, Jr. James W. Russell
Warren L. Beeken Louis J. Wainer Raymond V. Phillips
Victor E. Chase Edward C. Andrews, Jr. (ex-officio)
Rex D. Couch (ex-officio)
C. Irving Meeker David H. Gray (ex-officio)

Curriculum Development Committee—William H. Luginbuhl, Chairman
Frank L. Babbott, Jr. Jerold F. Lucey Elmer M. Reed
Herbert A. Durfee H. Lawrence McCrorey B. Albert Ring
Fred W. Gallagher R. W. Paul Mellish Durwood J. Smith
Thomas C. Gibson Donald B. Melville M. C. Twitchell
Roy Korson Chester A. Newhall William A. Woodruff

History of College of Medicine Committee—Lester J. Wallman, Chairman
Paul K. French Chester A. Newhall A. Bradley Soule, Jr.
George H. Hunter Harold B. Pierce

Intern Advisory Committee—Robert J. McKay, Chairman
Frank L. Babbott, Jr. Mary J. Gray R. W. Paul Mellish
Warren L. Beeken Philip C. Kelleher James W. Stackpole
Stanley L. Burns, Jr. Arthur S. Kunin John C. Twitchell
Stanley G. Christie Arthur M. Levy Henry C. Van Buren
Stokes Gentry Jerold F. Lucey

Joint Executive Agency
Lyman S. Rowell, President, The University of Vermont
Edward C. Andrews, Jr., Dean
Robert F. Patrick, President, The Mary Fletcher Hospital
Lester E. Richwagen, Administrator, The Mary Fletcher Hospital

Joint Residency Committee—Edward C. Andrews, Jr., Chairman
Thomas J. Boag Robert J. McKay John F. Berry,
Robert W. Coon Lester E. Richwagen, Administrator, Mary DeGoesbriand Memorial Hospital
John C. Cunningham Administrator, Mary DeGoesbriand Memorial Hospital
Albert G. Mackay Fletcher Hospital
John Van S. Maecck A. Bradley Soule, Jr.
Herbert L. Martin W. Allan Tisdale

Library Committee—Bert K. Kusserow, Chairman
Warren L. Beeken Burton S. Tabakin
William L. Meyer

University-Hospitals Liaison Committee
Lyman S. Rowell, President, The University of Vermont
Edward C. Andrews, Jr., Dean
Thomas B. Wright, Jr., President, The DeGoesbriand Memorial Hospital
John F. Berry, Administrator, The DeGoesbriand Memorial Hospital

(ex-officio)

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Index of Faculty

EMERITI

David Marsh Bosworth, A.B., University of Vermont, 1918; M.D., 1921. Consultant in Orthopedic Surgery.

Thomas Stephen Brown, M.D., University of Vermont, 1904. Professor of Anatomy.


Oliver Newell Eastman, M.D., University of Vermont, 1908. Professor of Obstetrics and Gynecology.

J. Louis Philippe Forest, A.B., Laval, 1920; M.D., University of Montreal, 1925. Assistant Professor of Clinical Psychiatry.

Paul Kendrick French, Ph.B., University of Vermont, 1920; M.D., 1923. Professor of Clinical Medicine. P. 75.

Elizabeth Kundert, B.S., University of Wisconsin, 1920; M.S., 1924; M.D., Women's Medical College of Pennsylvania, 1926. Assistant Professor of Clinical Psychiatry.

Peter Paul Lawlor, M.D., University of Vermont, 1920. Assistant Professor of Otolaryngology.

Edward Douglas McSweeney, A.B., University of Vermont, 1919; M.D., 1922. Assistant Professor of Gynecology.


Harold Barnard Pierce, B.S., Massachusetts State College, 1917; M.S., Pennsylvania State College, 1921. Chairman and Professor of Biochemistry. P. 74, 75.

Wilhelm Raab, M.D., University of Vienna, 1920; M.D., German University of Prague, 1926. Professor of Experimental Medicine.

Richard S. Woodruff, B.A., Yale, 1922; M.D.C.M., McGill, 1928. Assistant Professor of Pathology.

PROFESSORS


Emil Blair, M.D., Medical College of Georgia, 1946. P. 61, 74.

Thomas Johnson Boag, M.B., Ch.B., University of Liverpool, 1944; Diploma Psychiatry, McGill, 1953. P. 54, 74, 75.

Rupert Addison Chittick, B.S., University of Nebraska, 1923; M.A., 1924; M.D., Harvard, 1929. P. 54.

Robert William Coon, B.S., North Dakota State College, 1942; M.D., University of Rochester, 1944. P. 42, 64, 74, 75.

John Charles Cunningham (Shipman Professor of Ophthalmology), A.B., University of Vermont, 1931; M.D., 1935. P. 41, 74, 75.
John Fidlar Daly, B.S., Knox College, 1926; M.D., University of Pennsylvania, 1930. P. 38, 74.
Raymond Madiford Peardon Donagby, B.S., University of Vermont, 1933; M.D., 1936. P. 59, 74.
Fred Williams Dunihue, A.B., Wabash College, 1929; M.S., New York University, 1931; Ph.D., 1934. P. 27.
Fred W. Gallagher, A.B., Western Reserve, 1929; M.A., Ohio State, 1936; Ph.D., 1939. P. 34, 74, 75.
Donald Boyce Johnstone, B.S., Rhode Island State College, 1942; M.S., Rutgers, 1943; Ph.D., 1948. P. 34.
Eugene Lepeschkin (National Institutes of Health Research Career Award), M.D., University of Vienna, 1939. P. 36.
Albert George Mackay, B.S., University of Vermont, 1929; M.D., 1932. P. 57, 74, 75.
John Van Sicklen Maeck, B.S., University of Vermont, 1936; M.D., 1939. P. 40, 74, 75.
Donald Burton Melville, B.S., University of Illinois, 1936; M.S., 1937; Ph.D., 1939. P. 30, 74, 75.
Chester Albert Newhall (Thayer Professor of Anatomy), A.B., North Central College, 1924; M.D., University of Vermont, 1928. P. 27, 74, 75.
Wilfred Roth (Electrical Engineering), B.S. in E.E., Columbia, 1943; Ph.D. in Physics, Massachusetts Institute of Technology, 1948. P. 56.
George Adam Schumacher (National Institutes of Health Career Professorship Award), B.S., Pennsylvania State University, 1932; M.D., Cornell, 1936. P. 38, 74.
*Robert James Slater (Clinical), M.D., University of Toronto, 1946; B.Sc., 1948. P. 6.
Durwood James Smith, A.B., Syracuse, 1938; M.D., 1941. P. 46, 74, 75.
Arthur Bradley Soule, Jr., A.B., University of Vermont, 1925; M.D., 1928. P. 56, 74, 75.
Lester Julian Wallman, A.B., Yale, 1934; M.D., 1938. P. 59, 74, 75.
* Resigned as of December 31, 1966.
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ASSOCIATE PROFESSORS

Robert Bascom Aiken, Ph.B., University of Vermont, 1931; M.S., 1933; M.D., 1937; M.P.H., Harvard, 1948. P. 32.


Frank Lusk Babbott, Jr., B.A., Amherst, 1947; M.D., New York State University, 1951; M.P.H., Harvard, 1953; M.S. in Hygiene, 1954. P. 32, 75.


Donald Alan Bloch (Clinical), B.S., College of the City of New York, 1943; M.D., New York University, 1947; Washington Psychoanalytic Institute, 1957. P. 54.

George Wilson Brooks (Clinical), B.S., University of New Hampshire, 1941; M.D., University of Vermont, 1944. P. 54.


Wilbert Franklin Chambers, A.B., University of West Virginia, 1945; M.S., 1946; Ph.D., University of Wisconsin, 1952. P. 27.

Paul Dennison Clark (Clinical), M.D., University of Vermont, 1926. P. 44.


Julius George Cohen (Clinical), B.S., University of Vermont, 1942; M.D., 1945. P. 54.

Herbert Ashley Durfee, Jr., B.S., Yale, 1948; M.D., University of Vermont, 1948. P. 40, 75.

Oliver Rolfe Eastman, B.S., University of Vermont, 1935; M.D., 1938. P. 40.

Frank James Falck (Speech Pathology), A.B., University of Kentucky, 1950; M.A., 1951; Ph.D., Pennsylvania State University, 1955. P. 32, 41.


Joseph Clayton Foley (Clinical), B.S., Middlebury, 1939; M.A., New York State College, 1940; M.D., University of Vermont, 1949. P. 56, 74.

Ben Ralph Forsyth, M.D., New York University, 1957. P. 34, 36.


Erland Cheney Gjessing, B.S., Copenhagen, 1936; M.S., Michigan State, 1938; Ph.D., Cornell, 1942. P. 30.

Arthur Gladstone (Clinical), B.S., University of Vermont, 1928; M.D., 1931. P. 57.

John Sherwood Hanson (National Institutes of Health Special Fellow), B.A., Yale, 1951; M.D., New York University, 1954. P. 36.


Clinton Dales Janney (Radiologic Physics), B.S., University of Illinois, 1941; Ph.D., University of California, 1945. P. 56.


Bert Karl Kusserow, B.S., Union, 1948; M.D., Yale, 1953. P. 42, 75.

Merton Philip Lamden, B.S., University of Massachusetts, 1941; Ph.D., Massachusetts Institute of Technology, 1947. P. 30.


Herbert Lloyd Martin (Clinical), B.S., Boston University, 1947; M.D., 1950. P. 38, 74, 75.

R. W. Paul Mellish, M.B., B.S., St. Mary's Hospital Medical School, London University, 1945. P. 60, 74, 75.

Donald Barker Miller (Clinical), A.B., Johns Hopkins, 1938; M.D., 1942. P. 61.


Robert Emmett O'Brien (Clinical), B.S., St. Michael's, 1942; M.D., University of Vermont, 1945. P. 36.

Harold Gordon Page (Clinical), B.S., University of Vermont, 1940; M.D., 1945. P. 57.

Oscar Sylvander Peterson, Jr. (Clinical), M.D., University of Vermont, 1936. P. 52, 56.


Platt Rugar Powell (Clinical), B.S., University of Vermont, 1936; M.D., 1939. P. 62, 74.


Arnold Harold Schein, B.S., College of the City of New York, 1936; Ph.D., University of Iowa, 1943. P. 30.


William Joseph Slavin, Jr., B.S., University of Vermont, 1933; M.D., 1935. P. 40.

Ernest Stark, B.S., Columbia, 1933; M.D., Long Island, 1939. P. 42.
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Ralph Daniel Sussman (Clinical), B.S., University of Vermont, 1935; M.D., 1938. P. 44.


John Peter Tampas (James Picker Foundation Scholar in Radiological Research), B.S., University of Vermont, 1951; M.D., 1954. P. 56.

Christopher Marlow Terrien (Clinical), M.D., University of Vermont, 1936. P. 36.

Helene Wallace Toolan (Experimental Pathology), B.S., University of Chicago, 1929; Ph.D., Cornell, 1946. P. 42.

Keith Frank Truax (Clinical), B.S., University of Vermont, 1928; M.D., 1931. P. 57.


Frederick William Van Buskirk (Clinical), A.B., University of Pennsylvania, 1930; M.D., 1933. P. 56.


William Greenhill Young (Clinical), M.D., University of Toronto, 1930. P. 36, 54.

ASSISTANT PROFESSORS

Paul Comstock Agnew (Clinical), M.D., C.M., McGill, 1951. P. 54.


Richard Walker Amidon (Clinical), B.S., University of Vermont, 1941; M.D., 1943. P. 36.

Bernard Benjamin Barney (Plastic) (Clinical), B.S., University of Vermont, 1941; M.D., 1943. P. 57.


Richard Emile Bouchard, M.D., University of Vermont, 1949; M.S., 1951. P. 36.

Stanley Livingston Burns, Jr., A.B., University of Vermont, 1951; M.D., 1955. P. 36, 74, 75.

Roy Vedder Buttes, B.S., University of Vermont, 1937; M.D., 1940. P. 42.

Robert Nolan Cain (Clinical), B.S., University of Vermont, 1943; M.D., 1945. P. 57.


Victor Edward Chase, B.Sc. (Special), London University, 1946; M.B., Ch.B., Manchester University, 1952; Certificate in Psychiatry, Royal College of Physicians and Surgeons (Canada), 1957. P. 54, 75.


Benjamin Franklin Clark (Clinical), B.S., University of Vermont, 1930; M.D., 1933. P. 40.
National Ballet, one of many major attractions to appear on the University's endowed George Bishop Lane Artists Series.
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Ralph Daniel Sussman (Clinical), B.S., University of Vermont, 1935; M.D., 1938. P. 44.


John Peter Thompson (James Picker Foundation Scholar in Radiological Research), B.S., University of Vermont, 1951; M.D., 1954. P. 56.


Jennifer C. McQueen, M.D., University of Toronto, 1930. P. 36.

COLLEGE, RESIDENTS


Richard Walker Travers (Clinical), B.S., University of Vermont, 1941; M.D., 1943. P. 36.

Bernard Benjamin Barnard (Plastic) (Clinical), B.S., University of Vermont, 1916; M.D., 1918. P. 57.


Gino Aldo Dente (Clinical), M.D., University of Vermont, 1941. P. 59.


Winston Milo Eddy (Clinical), B.S., University of Vermont, 1943, M.D., 1945. P. 36.


Martin Edward Flanagan (Clinical), B.S., St. Michael's, 1952; M.D., University of Vermont, 1956. P. 59.

Curtis McCoy Flory, B.S., University of Chicago, 1935; M.D., 1938; Ph.D., 1940. P. 42.

J. Louis Philippe Forest (Clinical), A.B., Laval University, 1920; M.D., University of Montreal, 1925. P. 54.

Steven Leslie Freedman, B.S., University of New Hampshire, 1957; Ph.D., Rutgers, 1962. P. 27.

Harriet Ellen Gillette, B.S., University of Chicago, 1936; M.D., Rush Medical College, 1940. P. 48.

Howard Theodore Guare (Clinical), M.D., University of Vermont, 1934. P. 56.


Carleton Raymond Haines (Oncology) (Clinical), B.S., University of Vermont, 1941; M.D., 1943. P. 57.

John Wilbur Heisse, Jr. (Clinical), A.B., Johns Hopkins, 1949; M.D., University of Maryland, 1953. P. 41.


George Richard Howe, B.S., University of Vermont, 1957; M.S., Pennsylvania State University, 1959; Ph.D., University of Massachusetts, 1961. P. 40, 50.

Robert Jacob Hunziker (Clinical), A.B., University of Vermont, 1948; M.D., 1952. P. 56.

Elbridge Eugene Johnston (Clinical), M.D., University of Vermont, 1936. P. 36.


* On military leave.
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Jay Edgar Keller (Clinical), M.D., University of Vermont, 1940. P. 57.
Raymond Frank Kuhlmann (Clinical), B.A., University of Wisconsin, 1936; M.D., Washington University, 1939. P. 60.
Jonathan Porter Aaron Leopold (Clinical), M.D., University of Buffalo, 1951. P. 54.
Murdo Glenn MacDonald (Clinical), B.S., University of Vermont, 1947; M.D., 1951. P. 36, 46.
John Edmund Mazuzan, Jr. (Clinical), B.S., Boston College, 1951; M.D., University of Vermont, 1954. P. 59.
James Bishop McGill (Clinical), B.S., University of Vermont, 1944; M.D., 1946. P. 57.
Gerald Francis McGinniss (Clinical), A.B., St. Anselm's, 1946; M.D., University of Vermont, 1950. P. 54.
Marion Claire McKee (Clinical), B.A., Hunter, 1949; M.D., Temple, 1953. P. 44.
Harold Edward Medivetsky (Clinical), B.S., University of Vermont, 1929; M.D., 1932. P. 36.
Ernest Lee Mills (Clinical), B.S., University of Vermont, 1938; M.D., 1942. P. 59.
Dorothy Jackson Morrow (Clinical), B.S., Boston University, 1936; M.D., Tufts, 1940. P. 44.
Mitsuo Numoto (Experimental Neurosurgery), M.D., Okayama University, 1948; Ph.D., 1953. P. 59.
Elmer McCready Reed (Clinical), B.S. Allegheny, 1932; M.D., Jefferson, 1936. P. 41, 75.
Charles Brush Rust (Clinical), M.D., University of Vermont, 1939. P. 60, 74.
Wadi Sawabini (Oral Hygiene and Dental Medicine), D.D.S., American University of Beirut, 1940. P. 36, 73.
William Ireland Shea (Clinical), A.B., Holy Cross, 1936; M.D., University of Vermont, 1940. P. 57.
James Edwin Simpson (Clinical), B.S., University of Vermont, 1941; M.D., 1943. P. 60.
Warren Frederick Sims, Jr., B.S., University of Minnesota, 1956; M.D., 1960. P. 40.
John Butler Tompkins (Clinical), B.S., Wesleyan University, 1926; M.D., Tufts, 1935. P. 54.
James Michael Toolan (Clinical), A.B., St. Peter's College, 1943; M.D., Cornell, 1947. P. 54.
Lelan Ashley Weaver, Jr. (Psychology), A.B., University of Vermont, 1943; M.A., Columbia, 1947; Ph.D., Purdue, 1957. P. 54.
Robert Cummings Woodworth, B.S., University of Vermont, 1953; Ph.D., Pennsylvania State University, 1957. P. 30.
Wei Liang Yu, M.D., Cheeloo University, 1947. P. 44.
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INSTRUCTORS


Mary Breen (Medical Technology), B.S., University of Vermont, 1947. P. 42.

Dewees Harold Brown (Clinical), B.S., Donora, 1947; M.D., University of Vermont, 1954. P. 32, 74.

Francis Arnold Caccavo (Clinical), A.B., Syracuse, 1940; M.D., University of Vermont, 1943. P. 57.

Martin John Cannon (Clinical), B.S., University of Vermont, 1943; M.D., 1945. P. 40.

Maurice Raymond Caron (Clinical), A.B., St. Michael's, 1930; M.D., University of Vermont, 1936. P. 54.

Elizabeth Ann Clark (Clinical), B.S., University of Vermont, 1953; M.D., 1956. P. 44.

Wilton Warner Covey (Clinical), A.B., Middlebury, 1941; M.D., University of Vermont, 1944. P. 54.

Albert James Crandall (Clinical), B.S., University of Vermont, 1930; M.D., 1933. P. 57.

Edward Byington Crane (Family Medicine) (Clinical), A.B., Dartmouth, 1945; M.D., University of Vermont, 1947. P. 32.

Philip Hovey Davis (Clinical), B.S., University of Vermont, 1950; M.D., 1953. P. 60.

Donald Merritt Eldred (Psychology) (Clinical), A.B., Oberlin, 1931; A.M., Columbia, 1942. P. 54.


Louis William Esposito (Clinical), B.S., University of Notre Dame, 1931; M.D., Johns Hopkins, 1935. P. 62.

Sarah Louise Fisher (Medical Technology), M.S., Temple, 1966. P. 42.

John Richard Fitzgerald (Clinical), B.S., St. Michael's, 1951; M.D., University of Vermont, 1955. P. 36.

Edward Esau Friedman (Clinical), A.B., Norwich, 1942; M.D., University of Vermont, 1950. P. 32.

Antonio Isaias German (Clinical), B.S., Normal School, Trujillo City, 1946; M.D., University of Santo Domingo, 1952; M.D., University of Vermont, 1960. P. 42.

Charles Morton Gluck (Clinical), B.A., Hamilton, 1953; M.D., Boston University, 1957. P. 36.

Richard Herron Goldsborough (Clinical), B.S., University of Pittsburgh, 1950; M.D., 1951. P. 41.


Robert Cesare Guiduli (Clinical), B.S., University of Vermont, 1954; M.D., 1961. P. 41.

John Farwell Harwood (Radiologic Physics), B.S., University of Vermont, 1951. P. 56.


Edward Suter Irwin (Ophthalmology) (Clinical), B.S., University of Vermont, 1940; M.S., 1942; O.D., Pennsylvania State College of Optometry, 1950; M.D., University of Vermont, 1955. P. 41.

William Herbert Johnston (Clinical), B.S., University of Vermont, 1940; M.D., 1943. P. 56.

Thomas Robert Kleh (Clinical), M.D., George Washington University, 1953. P. 41.

John Clifford Lantman (Family Medicine) (Clinical), B.S., University of Vermont, 1948; M.D., 1951. P. 32.

Hyman Bernard Levine (Family Medicine) (Clinical), B.S., University of Vermont, 1930; M.D., 1939. P. 32.


Carlton Dean Marshall (Clinical), M.D., University of Vermont, 1949. P. 54.

Edward Douglas McSweeney, Jr. (Clinical), A.B., University of Vermont, 1951; M.D., University of Ottawa, 1958. P. 57.


Maurice Edward Mongeon (Clinical), B.S., St. Michael's, 1954; M.D., University of Vermont, 1959. P. 36.


Richard Milton Narkewicz (Clinical), A.B., St. Michael's, 1956; M.D., University of Vermont, 1960. P. 44.

William Arthur Pratt (Clinical), B.S., University of Vermont, 1941; M.D., 1943. P. 36.

Robert Newton Saxby (Clinical), B.S., University of Vermont, 1937; M.D., 1941. P. 56.
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James Douglass Sharpe (Clinical), B.S., New York University, 1933; M.D., Columbia University College of Physicians and Surgeons, 1937. P. 54.
Felix Sommer (Clinical), M.D., University of Graz, Austria, 1954; Diploma Psychiatry, McGill, 1962. P. 54.
David Latham Taber (Clinical), M.D., Long Island, 1946. P. 40.
Louis George Thabault (Clinical), M.D., University of Vermont, 1930. P. 57.
Wilfred Louis Thabault (Clinical), B.S., St. Michael's, 1943; M.D., University of Vermont, 1947. P. 40.
John Cushman Twitchell (Clinical), B.S., University of Vermont, 1949; M.D., 1953. P. 36, 75.
Henry Carmer Van Buren (Clinical), B.A., University of Vermont, 1950; M.D., 1954. P. 36, 75.

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CLINICAL ASSOCIATES

Harry Livingston Colombo, B.S., University of Vermont, 1935; M.D., 1938. P. 36.
John Patrick Corley, A.B., Holy Cross, 1937; M.D., University of Vermont, 1943. P. 36.
Edward Esau Friedman, A.B., Norwich, 1942; M.D., University of Vermont, 1950. P. 36, 44.
William Hentry Heininger, M.D., University of Vermont, 1939. P. 36.
John Louis Saia, B.S., University of Vermont, 1931; M.D., 1934. P. 36.
Namik Kemal Uzsoy, B.Sc., Ataturk Lyceum (Turkey), 1942; M.D., University of Istanbul, 1948. P. 36.

Maurice James Walsh, B.S., University of Vermont, 1936; M.D., 1939. P. 36.

CONSULTANT
Samuel Solomon (Endocrinology), B.S., McGill, 1947; M.S., 1951; Ph.D., 1953. P. 40.

DEMONSTRATOR
Dallas Richard Boushey. P. 27.

MEDICAL LIBRARY

MEDICAL PHOTOGRAPHY
Francis Charles Mallory, R.B.P. Board of Registry, Biological Photographic Association, 1966. Director. P. 64.
Wing Morrison Woon. Medical Photographer. P. 64.

POSTDOCTORAL ASSOCIATES
Tony C. Ty, M.D., University of Santo Tomas, Manila, P.I., 1958. P. 60.

REGIONAL MEDICAL PROGRAM
Mary Breen, B.S., University of Vermont, 1947. Assistant Director for Allied Health Professions. P. 64.
Robert William Coon, B.S., North Dakota State College, 1942; M.D., University of Rochester, 1944. Director of Program. P. 42, 64.
Aline Louise Demers, B.S., University of Vermont, 1955; M.S., Boston University, 1958. Assistant Director for Nursing. P. 64.
Byron A. McDonald, Thompson Ramo Wooldridge (TRW) Systems, Inc., San Bernardino, California. P. 64.
Robert Rolf Struthers, B.A., McGill, 1914; M.D., 1918; F.R.C.P. (Canada), 1933. Assistant to the Dean for Regional Medical Affairs. P. 64, 74.

RESEARCH ASSOCIATES
Herman Conrad Herrlich, B.S., Rensselaer Polytechnic Institute, 1938; M.S., University of California, 1949; Ph.D., Northwestern, 1953. P. 36.
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Tamotsu Shinozaki, M.D., Okayama University, 1958. P. 59.
Zang Zee Zao, M.D., Medical Academy (Duesseldorf), 1942. P. 36.

TUTOR
Graduates, May, 1966 and Internship Appointments

Jeremy Ethan Alperin, B.S., Genesee Hospital, Rochester, N.Y.
Joseph Roger Beauregard, B.A., M.S., Robert Packer Hospital, Sayre, Pa.
Chester Joseph Boulris, A.B., DeGoesbriand Memorial Hospital, Burlington
Dale Roy Childs, A.B., DeGoesbriand Memorial Hospital, Burlington
Gilbert Paul Connelly, B.S., Albany Medical Center Hospital, Albany, N.Y.
Stephen Hart Dyke, B.A., University of Virginia Hospital, Charlottesville, Va.
Frederic Ira Fagelman, B.S., New England Center Hospital, Boston, Mass.
Richard Jay Falk, B.A., Bronx Municipal Hospital Center, Bronx, N.Y.
Sumner Leon Fishbein, B.S., Maimonides Hospital, Brooklyn, N.Y.
Joseph Anthony Guzzetta, B.S., State University of New York Upstate Medical Center, Syracuse, N.Y.
John Ellis Hartford, B.E.E., Robert Packer Hospital, Sayre, Pa.
Robert Kenneth Heistein, B.A., Newark Beth Israel Hospital, Newark, N.J.
Robert David Herstoff, A.B., Buffalo General Hospital, Buffalo, N.Y.
Paul John Jabar, A.B., M.A., Manchester Memorial Hospital, Manchester, Conn.
John Joseph Kelley, Jr., B.S., Rochester General Hospital, Rochester, N.Y.
Richard Howard Landesman, B.S., St. Luke’s Hospital, New York, N.Y.
Frederick George Lea, B.S., Robert Packer Hospital, Sayre, Pa.
William Harris Likosky, B.A., Yale-New Haven Hospital, New Haven, Conn.
Jean Elinor Long, B.A., George Washington University Hospital, Washington, D.C.
Philip Brian Machanic, B.A., State University of New York Upstate Medical Center, Syracuse, N.Y.
Raymond Francis Macious, B.A., DeGoesbriand Memorial Hospital, Burlington
Ellen Mansell, B.S., DeGoesbriand Memorial Hospital, Burlington
Owen Danforth Mathewson, B.A., Albany Medical Center Hospital, Albany, N.Y.
Howard William Meridy, B.A., Hartford Hospital, Hartford, Conn.
Thomas James Muldowney, A.B., U.S. Naval Hospital, Bethesda, Md.
Earl Frederik Nielsen, B.S., Maimonides Hospital, Brooklyn, N.Y.
Douglas Peter Norman, B.A., Mary Hitchcock Memorial Hospital, Hanover, N.H.
Roger Vahram Ohanesian, A.B., State University of New York Upstate Medical Center, Syracuse, N.Y.
Eugene Felix Permanente, A.B., Rhode Island Hospital, Providence, R.I.
Frederick Theodore Perry, A.B., Robert Packer Hospital, Sayre, Pa.
Mark Melvin Platt, B.A., Boston City Hospital, Boston, Mass.
Jeffrey Joseph Pomerance, B.S., Children's Hospital of Buffalo, Buffalo, N.Y.
Maurice Paul Renaud, A.B., King County Hospital, Seattle, Wash.
John Jerome Saia, A.B., Rochester General Hospital, Rochester, N.Y.
Henry Donald Schwartz, A.B., The Montreal General Hospital, Montreal, Canada
Robert George Sellig, A.B., Mary Fletcher Hospital, Burlington
Peter Reuben Shrier, B.S., Jefferson Medical College Hospital, Philadelphia, Pa.
George Millard Simmons, Jr., B.S., DeGoesbriand Memorial Hospital, Burlington
Thomas James Sullivan, B.A., DeGoesbriand Memorial Hospital, Burlington
Leonard James Swinyer, B.A., University Hospital, Salt Lake City, Utah
Robert Wilfred Vigue, B.S., Robert Packer Hospital, Sayre, Pa.
John Joseph Walsh, Jr., A.B., St. Elizabeth's Hospital, Boston, Mass.
Register, 1966-67

FOURTH YEAR:

Stuart Aldrich Alexander, B.A. 
Burlington

Michael Brant Armstrong, A.B. 
Winchester, Mass.

John Harrison Arthur, B.S. 
Lawrence, Mass.

James Francis Austin, B.S. 
Dalton, Mass.

Virginia Barnes, B.A. 
West Newton, Mass.

Michael Peter Barron, A.B. 
Watertown, Mass.

Robert William Bernard, B.A. 
Burlington

Jeanine Luella Berry, B.A. 
Unity, Me.

Jeffrey Lawrence Black, A.B. 
Brookline, Mass.

Norman Myron Bress, B.S. 
Portland, Me.

Michael Robert Britt, A.B. 
Shrewsbury, Mass.

Carroll Dennis Bucko, B.A. 
West Springfield, Mass.

William Mead Burrows, Jr., A.B. 
Winchester, Mass.

Peter Sturgis Colley, B.A. 
Farmington, Me.

James Edward Cooke, B.A. 
Poultney

Ursel Danielson, B.S. 
Burlington

Philip Anthony DeSimone, B.A. 
Franconia, N.H.

John Frederick Dick, B.S. 
Brandon

Paul Henry Dumdey, B.A. 
Lisbon, N.H.

Donald Peter Goldsmith, B.A. 
Providence, R.I.

Nancy Jane Gregory, B.A. 
Brimfield, Mass.

Edward George Hixson, Jr., A.B. 
Oneida, N.Y.

Benjamin Arthur Kropsky, B.A. 
Burlington

Albert Richard Lorbati, B.S. 
Dorchester, Mass.

Lawrence Howard Luppi, A.B. 
Burlington

Bruce Reed MacPherson, B.A. 
Abington, Mass.

Phillip Charles Mahoney, A.B. 
Springfield

David Eugene Martin, A.B. 
Falmouth, Me.

Richard Nels Nelson, A.B. 
Wrentham, Mass.

Irving Gerald Peyser, A.B. 
Brookline, Mass.

Bruce James Poitrast, A.B. 
Natick, Mass.

Gregory Bruno Politi, B.A. 
Barre

Edward Rabinowitz, B.A. 
Kew Gardens, N.Y.

Mildred Ann Reardon, A.B. 
Tewksbury, Mass.

Dick Lamson Robbins, B.A. 
Winchester, Mass.

Charles Rosenbaum, B.A. 
West Newton, Mass.

Carl Frank Rosenbloom, A.B. 
Brookline, Mass.

Meyer Hyman Rosenthal, B.A. 
Newton, Mass.

Francis Roland Sacco, A.B. 

Robert Henry Smart, B.A. 
St. Albans Bay

Merle Geoffrey Smith, A.B. 
Lunenberg, Mass.

John William Sturzenberger, B.A. 
Burlington

Christopher Marlowe Terrien, Jr., B.A. 
Burlington

Otis Pennell Tibbetts, B.S. 
Auburn, Me.

Anthony Frederick Wasilkowski, A.B. 
Winooski

Roger Maitland Wilson, A.B. 
Jefferson, Me.

Stephen Edward Clark, B.A. 
St. Johnsbury

Laurence Michael Cohan, B.A. 
Waban, Mass.
Frederick Wade Crowley, B.S.
West Boylston, Mass.

Charles Michael D'Angelo, B.A.
Marlborough, Mass.

Bruno DePalma, B.A., M.S.
Canton, Mass.

James Elmer Emmons, B.S. Burlington
Steven Allen Feldman, B.A.
Pawtucket, R.I.

Jeffrie Brent Heter, B.A. Brattleboro
Merrick Scott Fisher, B.A.
Marblehead, Mass.

Terence Sean Fitzgerald, B.A.
St. Albans

William James French, B.S.
Dover, N.H.

James Amasa Frizzell, B.S.
Charlestown, N.H.

Todd Mitchell Gladstone, B.A.
Burlington

Joseph Edward Godard, A.B.
Clinton, Mass.

Ronald Lloyd Greene, B.S.
Providence, R.I.

Stephen Harris Greenberg, B.A.

Thomas Albert Halle, B.A.
Pittsfield, Me.

Robert Christopher Hannon, B.S.
Belmont, Mass.

Parker Fred Harris, B.A.
Presque Isle, Me.

David Jay Keller, B.A.
Burlington

Robert Howard Lenox, B.S.
Newton, Mass.

Robert Scott Madrell, B.A.
Ellsworth, Me.

Patrick Joseph Mahoney, B.A.
Burlington

Robert Joseph Malvesta, A.B.
Quincy, Mass.

John Thomas O'Brian, B.S. Clifton, N.J.
Ronald Charles Oliver, B.S. Burlington
Barrie Paster, B.A.
Malden, Mass.
Jon Perley Pitman, B.A.
North Vassalboro, Me.

Sylvia Schechner, B.S., M.S. Burlington
David Ralph Schmottlach, A.B.
Lawrence, Mass.

David Wolfe Scotton, B.S.
Needham, Mass.

Robert F. Shapiro, B.S. Brooklyn, N.Y.
Thomas Keith Slack, B.A.
South Burlington

Donald Thomas Smith, B.A.
Huntington, N.Y.

David Alan Strassburg, B.A.
Essex Junction

Nelson Horace Sturgis, III, B.A.
Arlington, Mass.

Timothy John Terrien, B.A. Burlington
Sydney Melvin Wedmore, A.B.
Taunton, Mass.

Clarence Cluff Whitecomb, B.A.
Springfield

SECOND YEAR:

John Christian Abajian, B.A.
South Burlington

Bruce Douglas Baird, B.S.
Claremont, N.H.

Stephanie Ann Barnes, B.A. Montpelier
George Paul Baron, B.S.
Manchester, N.H.

David Armstrong Byrne, B.A.
Hatfield, Mass.

Richard Redman Byrne, A.B.
Hatfield, Mass.

James David Cahill, A.B.

Elizabeth Jean-Marie Carter, A.B.
Rochester, N.Y.

Bernard Michael Casey, A.B.
Rochester, N.H.

Daniel Buker Clarke, B.S.
Randolph, N.H.

Frederick Seymour Cramer, B.S.E.E.
South Burlington
Register, 1966-67

William Stephen Dempsey, Jr., A.B.
St. Albans
William Joseph Driscoll, B.S.
Florence, Mass.
Ronald James Faille, A.B.
Holyoke, Mass.
Peter Abbey Felder, A.B.
Burlington
Steven Neal Firestone, B.A.
Great Neck, N.Y.
Henry John Fisk, B.A.
Winooski
John Francis Healy, B.S.
Milton, Mass.
David Peter Hebert, B.A.
St. Albans
Charles Bion Howard, A.B.
Beverly, Mass.
David George King, B.A.
North Springfield
Robert Scott Kramer, B.A.
Plymouth, Mass.
Dennis Stanley Kuk, B.A.
Claremont, N.H.
Robert Elliot Leader, B.A.
Rye, N.Y.
Joseph Matthew Lenehan, B.S.
North Scituate, R.I.
Steven James Lowy, B.S.
Forest Hills, N.Y.
Malcolm Waterman MacDonald, B.S.
Rutland
Raymond Alexander Maddocks, A.B.
Burlington
Moussa Yousef Menasha, B.S.
Providence, R.I.

James Arthur McCarthy, B.S.
Peabody, Mass.
James Royal Milne, B.S.
Barre
Stephen Wesley Munson, B.A.
Shrewsbury, Mass.
Wilfrid Louis Pilette, B.A.
Barre
Roger Keith Pitman, A.B.
Port Washington, N.Y.
Darryl Lee Raszl, B.A.
Syracuse, N.Y.
Duane Calvin Record, B.A.
Livermore Falls, Me.
Jonelle Carey Rowe, A.B.
Burlington
Harry Eaton Short, Jr., B.S.
Arthur Bradley Soule, III, B.A.
Shelburne
Bruce Parker Swinyer, B.A.
Poultney
Charles Samuel Tara, B.S.
Brockton, Mass.
William Newman Thibault, B.A.
William Harrison Thurlow, IV, A.B.
Brunswick, Me.
William Joseph Watson, B.S.
Belmont, Mass.
Susan Andrea Wesoly, B.A.
New Britain, Conn.
Ronald Nelson White, B.A.
Springfield, Mass.

FIRST YEAR:
Michael Bruce Andorsky, B.A.
West Hartford, Conn.
Raymond Joseph Anton, A.B.
Palmer, Mass.
Edward Norman Bailey, B.A.
Waterbury
Anthony Raymond Bazzocchi, Jr., B.S.
Portsmouth, N.H.
John Francis Beannis, Jr., B.S.
Somersworth, N.H.
Laurence Walter Betts, B.A.
Manchester, N.H.
Alan Burton Bulotsky, B.A.
Brockton, Mass.
Robert Argo Burton, Jr., A.B.
Essex Junction

Philip Miles Buttaravoli, B.A.
Massapequa Park, N.Y.
Preston Leroy Carter, A.B.
Etna, Me.
Joseph Ira Chartor, A.B.
Milton, Mass.
David Harold Cheney, B.A.
Springfield
Thomas Fox Claffey, B.S.
Wethersfield, Conn.
Joseph Victor Copulsky, B.A.
Brooklyn, N.Y.
Joseph Michael DeCenzo, B.A.
Westwood, Mass.
Vincent Arthur DeCesaris, B.A.
North Reading, Mass.
George Stephen Durisek, B.S.
Richfield Springs, N.Y.
William Alois Fajman, A.B.
Massapequa Park, N.Y.
Richard Michael Faraci, B.S. 
Bradford, Mass.

Robert Vincent Fernandez, B.S. 
Jamaica Plain, Mass.

Christopher Robert Flory, B.S. 
New York, N.Y.

Ronald Joseph Gagne, B.A. 
Manchester, N.H.

Richard Maurice Gendron, A.B. 
Saco, Me.

Thomas Joseph Grady, A.B. 
Waltham, Mass.

James Roby Greene, A.B. 
Newport, R.I.

Clayton Stanley Hitchins, III, B.A. 
Hamden, Conn.

Peter David Hoden, B.A. 
Seekonk, Mass.

John Edward Hunt, Jr., B.S. 
Norwood, Mass.

Kenneth Irving Hunt, B.A. 
Pawtucket, R.I.

Frank Williams Kilpatrick, A.B. 
Washington, D.C.

William Coleman Kurimay, A.B. 
Simsbury, Conn.

Michael Ellis Lupo, A.B. Cheverly, Md.

Keith Norman Megathlin, A.B., M.S. 
Cohasset, Mass.

Walter August Minaert, Jr., A.B. 
Jeffersonville

Jeffrey Clement Morse, A.B. 
Waterford, Conn.

Joel Hutchings Mumford, B.A. 
Killington

Andrew Dennis Parent, A.B. 
Enosburg Falls

Lawrence Perlmutter, B.A. Burlington

Karen Preis, B.A. River Edge, N.J.

Michael Van Rollins, B.A. 
Portland, Me.

Martin Jay Rosenstein, A.B. 
New York, N.Y.

William Nevins Rush, B.A. 
South Burlington

Joel Arthur Sabean, A.B. 
Hudson, Mass.

Arthur Jay Sakowitz, B.A. 
Riverdale, N.Y.

Steven Hugh Sherman, B.A. 
Newton, Mass.

Norman Jay Snow, B.A. Burlington

Thomas Ingalls Soule, B.A. Fairfax

David Clayton Staples, B.S. 
Brewer, Me.

Daniel Carl Sullivan, A.B. 
Cranston, R.I.

Joel Philip Sussman, B.A. Burlington

Normand Francis Tremblay, A.B. 
Springfield, Mass.

Judith Hope Tyson, A.B., M.A. 
South Strafford

Louis Vito, A.B. Providence, R.I.

Clyde Arthur Wright, B.S. 
Bradford, N.H.

William James Young, A.B. 
North Ferrisburg
Calendar, 1967-68

| September 6 | Wednesday | Convocation. |
| September 7 | Thursday   | Classes begin. |

1ST YEAR

1st period: Sept. 7 (Thurs.) through Dec. 20 (Wed.)
- Nov. 23-26: Thurs. through Sun.
- Dec. 18-20: Mon. through Wed.
- Dec. 21-Jan. 2: Thurs. through Tues.

Mid-period examinations.
Thanksgiving Holiday.
End of period examinations.
Christmas Recess.

2nd period: Jan. 3 (Wed.) through March 20 (Wed.)
- Jan. 3: Wednesday
- Feb. 7-9: Wed. through Fri.
- Feb. 23-24: Fri. and Sat.
- Mar. 18-20: Mon. through Wed.
- Mar. 21-27: Thurs. through Wed.

Classes resume.
Mid-period examinations.
Kake Walk—no classes.
End of period examinations.
Spring Recess.

3rd period: March 28 (Thurs.) through June 15 (Fri.)
- Mar. 28: Thursday
- May 1-3: Wed. through Fri.
- May 30: Thursday
- June 12-14: Wed. through Fri.

Classes resume.
Mid-period examinations.
Memorial Day—no classes.
End of period examinations.

2ND YEAR

1st period: Sept. 7 (Thurs.) through Dec. 20 (Wed.)
- Nov. 23-26: Thurs. through Sun.
- Dec. 18-20: Mon. through Wed.
- Dec. 21-Jan. 2: Thurs. through Tues.

Mid-period examinations.
Thanksgiving Holiday.
End of period examinations.
Christmas Recess.

2nd period: Jan. 3 (Wed.) through March 16 (Sat.)
- Jan. 3: Wednesday
- Feb. 23-24: Fri. and Sat.

Classes resume.
Kake Walk—no classes.
End of period examinations.
Spring Recess.

3rd period: March 28 (Thurs.) through May 29 (Wed.)
- Mar. 28: Thursday
- May 27-29: Mon. through Wed.

Classes resume.
End of period examinations.
3RD YEAR

1st Third: Sept. 7 (Thurs.) through Nov. 22 (Wed.)
Nov. 23-26 Thurs. through Sun. Thanksgiving Holiday.

2nd Third: Nov. 27 (Mon.) through Feb. 24 (Sat.)
Nov. 27 Monday Classes resume.
Jan. 3 Wednesday Classes resume.

3rd Third: Feb. 26 (Mon.) through May 18 (Sat.)
Apr. 8 Monday Classes resume.

4TH YEAR

1st Fifth: July 17 (Mon.) through Sept. 10 (Sun.)
July 17 Monday Assignments begin.
Sept. 4 Monday Labor Day—no classes.

2nd Fifth: Sept. 11 (Mon.) through Nov. 5 (Sun.)

3rd Fifth: Nov. 6 (Mon.) through Jan. 14 (Sun.)
Nov. 23-26 Thurs. through Sun. Thanksgiving Holiday.
Nov. 27 Monday Classes resume.
Jan. 3 Wednesday Classes resume.

4th Fifth: Jan. 15 (Mon.) through March 10 (Sun.)

5th Fifth: March 11 (Mon.) through May 11 (Sat.)
Mar. 31-Apr. 7 Sun. through Sun. Spring Recess.
Apr. 8 Monday Classes resume.
May 12-17 Sun. through Fri. Vacation.
May 18 Saturday Class Day.
May 19 Sunday Graduation.
...an intern's life is not an easy one
ACCREDITATION

The University of Vermont College of Medicine is one of 94 accredited schools of medicine in the United States, having been approved by the American Medical Association and by the Association of American Medical Colleges.

Its joint residency programs with the DeGoesbriand Memorial Hospital and the Mary Fletcher Hospital have been approved by the Council on Medical Education and Hospitals of the American Medical Association and by the respective American Boards.