



**DIRECTORY  
OF  
APPROVED INTERNSHIPS  
AND RESIDENCIES**

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**1963**

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**INCLUDES:**

**INFORMATION ON THE NATIONAL INTERN MATCHING PROGRAM FOR 1964**

**ESSENTIALS OF AN APPROVED INTERNSHIP**

**ESSENTIALS OF APPROVED RESIDENCIES**

**REQUIREMENTS FOR CERTIFICATION BY AMERICAN SPECIALTY BOARDS**

**ANNUAL REPORT ON GRADUATE MEDICAL EDUCATION IN THE UNITED STATES**

**(Reprinted from the Education Number of THE JOURNAL of the American  
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# FOREWORD

## TO GRADUATES OF UNITED STATES, CANADIAN AND FOREIGN MEDICAL SCHOOLS SEEKING GRADUATE TRAINING, LICENSURE, OR SPECIALTY CERTIFICATION IN THE UNITED STATES

This Directory contains all of the information or gives references to the sources of information of interest and importance to physicians planning for internship or residency training, for licensure, or for specialty board certification in the United States.

The Directory includes the information necessary to participation in the *National Intern Matching Program* for internships beginning in 1964 (See pp. 75 to 87) in addition to detailed information about all internships and residency programs as well as performance statistics for September 1962. Information is presented which describes the Educational Council for Foreign Medical Graduates (ECFMG) and the part it plays in the qualification of the graduate of a foreign medical school for an internship or residency appointment in the United States, including Puerto Rico and the Canal Zone.

Also contained in this Directory are the Essentials of an Approved Internship and the Essentials of Approved Residencies as well as the Requirements for Certification of the American Specialty Boards. The most recent information regarding licensure in the separate states, including information about the National Board of Medical Examiners, is published in the State Board Number of the J.A.M.A., Vol. 184, No. 10, pp. 785-834, (June 8, 1963).

Thus, this Directory plus the State Board Number of the J.A.M.A. provides all of the information necessary for the correlation of internship selection, residency selection, licensure, and specialty board certification.

The Council on Medical Education and Hospitals of the American Medical Association is pleased to provide this 1963 Directory of Approved Internships and Residencies to all third and fourth year students enrolled in approved medical schools in the continental United States and Puerto Rico.

# Graduate Medical Education in the United States

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The information published in this DIRECTORY OF APPROVED INTERNSHIPS AND RESIDENCIES as pp. 1 - 25 appears in the November 16, 1963, (Education Number) of *The Journal of the American Medical Association*, and will be listed under the appropriate Journal page numbers in the Index Number of JAMA

For the detailed work in preparing the lists of internships, residencies, specialty board requirements, and tables of statistics, the Council staff is especially indebted to Miss Valeda Carbonneau, Miss Dorothy Duncan, Miss Marion Gavrilis, and Miss Lynne Robinson.

dated December 28, 1963.

The other material published in this Directory does not appear in the November 16, 1963, issue of JAMA, but will be indexed in the December 29 issue of JAMA with the reference abbreviation of "Dir." The DIRECTORY OF APPROVED INTERNSHIPS AND RESIDENCIES can thus be bound as a part of the November 16 issue, along with the regular copies of JAMA that make up Volume 186.

### Annual Report on Graduate Medical Education in the United States

This is the 37th Annual Report on Graduate Medical Education in the United States. It consists of a statistical and narrative analysis of the distribution and performance of approved internship and residency programs for the academic year 1962-63. Except for certain data pertaining to foreign medical graduates, the majority of data reported here were secured from hospitals as of September 1, 1962, and are therefore one year old.

This Annual Report on Graduate Medical Education is to be published in the Education Number of *THE JOURNAL* for November 16, 1963. It is also included in the Directory of Approved Internships and Residencies which, because of its size, is no longer published in *THE JOURNAL*. The Directory includes, besides the Annual Report for the previous year, the detailed lists of all approved internship and residency programs, the Essentials of an Approved Internship and the Essentials of Approved Residencies, the requirements of the American Specialty Boards, and the full details of the National Intern Matching Program (NIMP). Certain special announcements regarding procedure or policy changes as well as editorials relating to graduate medical education are also included both in the Directory and in the Education Number of *THE JOURNAL*.

The Directory of Approved Internships and Residencies also serves as the Directory of the National Intern Matching Program, and is accordingly distributed to all fourth year medical students in the United States for use by them in the NIMP. It is distributed as well to all third-year students since it represents the complete manual on programs and policies pertaining to graduate medical education with which the third-year student must become familiar by the time he enters the fourth year of undergraduate medical education. Approximately 50,000 copies of the Directory are published and distributed without cost to all institutions, organizations, and agencies in the United States having need for it. Copies are made available to the United States Department of State for use in its foreign offices, and copies have been distributed to each of the recognized foreign medical schools listed by the World Health Organization. It is intended that at least one copy of this Directory be referred to each medical school library throughout the world for binding with its own copies of the *JAMA*. The Educational Council for Foreign Medical Graduates (ECFMG) performs a valuable service for the Council on Medical Education and Hospitals in distributing "tearsheets" of lists of the approved internships and residencies to interested foreign physicians upon inquiry.

Reprints of the Directory, as well as of the separate Essentials and Board requirements are available on request. Several tables and other data pertaining to licensure for United States as well as foreign physicians have been extracted from the State Board Number of *THE JOURNAL* for June 8, 1963, and comprise the final pages of the Directory.

As was announced last year, the data on foreign medical graduates are now based on data secured as of July 31, 1962, by the Circulation and Records Department of the American Medical Association. These data have been analyzed by IBM methods, and for the first time it is possible to indicate the distribution of foreign physicians by specialty and according to the status of their visas and the status of their licensure or other types of certification.

The Council greatly appreciates the assistance of the Institute of International Education, over the years, but henceforth will rely on the AMA figures, since certain of the definitions and procedures used by IIE are not applicable for the A.M.A. For next year it is hoped a further breakdown can be given, indicating the distribution of foreign physicians by specialty in affiliated and nonaffiliated hospitals.

The responsibilities of the Council for compiling information on graduate training are limited to the United States, Puerto Rico, and the Canal Zone. For that reason, information is not available regarding graduate training opportunities in other countries. As a courtesy and service to our Canadian neighbors, the Council continues to publish a list of the junior rotating internships in Canada at the end of the list of approved internships in the United States. Canadian internships are approved by the Canadian Medical Association, and their acceptability for purposes of United States licensure is a matter for individual determination by each of the state medical boards and not by the Council on Medical Education and Hospitals.

### Internship Programs

The policy of the Council on Medical Education and Hospitals on approval of internship programs was published in detail in *THE JOURNAL* on October 10, 1959, pp. 846-847. Final responsibility for approval of internship programs rests with the Council, but it is assisted in the review of individual programs by the Internship Review Committee. This Committee has representation from the Council, the Association of American Medical Colleges, the American Hospital Association, the Federation of State Medical Boards, and the field of general practice. The Committee meets at least three times annually and makes recommendations to the Council after review of the detailed reports of the Council field representatives who perform the surveys of the individual programs. Those programs



which are approved too late for inclusion in the Directory are published in January of each year by the NIMP as a supplementary list which is distributed to each fourth-year medical student in the United States well in advance of the beginning of the operation of the matching program.

During the year ending June 30, 1963, the Internship Review Committee considered 496 individual programs, of which 329 had been surveyed by the field staff. Of this total, 203 were granted continued approval, action was deferred on 8 for additional data, progress reports were reviewed for 17, 38 new programs were approved, 175 were placed or continued on confidential probation, and approval was withheld or withdrawn from 54.

Table 1.—Number of Internships, 1953-1963

	No. of Hospitals	No. of Internships
1953-1954.....	844	10,624
1954-1955.....	850	11,648
1955-1956.....	867	11,616
1956-1957.....	852	11,895
1957-1958.....	867	12,325
1958-1959.....	853	12,469
1959-1960.....	865	12,580
1960-1961.....	864	12,547
1961-1962.....	816	12,074
1962-1963.....	789	12,024

Table 1 reveals that the total of 789 hospitals with approved internships is 27 less than the previous year and is the lowest total in the past ten years. The 12,024 positions offered is a decrease of 50 positions over the preceding year and the lowest total in the last 6 years.

Fourteen hospitals were added to the list of institutions approved for internship training, with 6 approved for rotating internships, 1 for mixed internships, and 7 for straight internships. Approval was withdrawn from 12 hospitals because of complete inactivity of the programs, and from 28 hospitals for a variety of other uncorrected deficiencies. Approval was withdrawn from only one hospital because of failure to adhere to the policy requiring ECFMG certification for graduates of foreign medical schools serving as interns.

#### Internships by Type of Service

Table 2 indicates that the total of 1,235 approved programs is 13 greater than for the previous year; and that the total of positions offered, as of September 1, 1962, was 50 less than for the previous year. Note that this table contains a new column not previously included, indicating that the total internship positions offered for the year 1964-1965, and published in the Directory is 12,858, or 834 more than were offered for 1962-1963. The percentage of internships filled, as of September 1, 1962, was 73%, for a gain of 5% over the previous year.

The three types of internships approved by the Council are (1) rotating, which includes training

Table 2.—Number of Internships, by Type of Service

Type of Internship	No. of Approved Programs	Number of Internships				
		Total Offered 1964-1965	Total Offered Sept. 1, 1962	Filled Sept. 1, 1962	Vacant Sept. 1, 1962	Percentage Filled
Rotating.....	697	9,448	9,422	6,663	2,759	71
Mixed.....	133	871	541	403	138	74
Straight						
Internal Medicine.....	124	1,162	987	916	71	93
Surgery.....	108	719	574	449	125	78
Pediatrics.....	85	395	316	249	67	79
Pathology.....	66	174	136	94	42	69
Obstetrics and Gynecology.....	8	24	19	13	6	68
Totals.....	1,221	12,793	11,995	8,787	3,208	73
Family Practice and General Practice Programs.....	14	65	29	18	11	62
Grand Totals.....	1,235	12,858	12,024	8,805	3,219	73

for 12 to 24 months on medicine, surgery, pediatrics, and obstetrics-gynecology; (2) mixed, providing training in 2 or 3 of the above 4 major clinical services as well as in pathology or psychiatry (in a mixed internship, the assignment to the major service must be not less than 6 nor more than 8 months, and the hospital must have a fully approved residency program in that specialty); and (3) straight, providing training on a single medical, surgical, pediatric, obstetrics-gynecology, or pathology service in a hospital holding full approval for a residency program in that specialty. The family practice and general practice programs will be discussed in a subsequent section.

The reduction in rotating internships of 40 programs is only half the reduction for the previous year. The 697 approved rotating internship programs thus represented 56% of all the programs and 5% less than rotating internships for the previous year. Straight internships now comprise 32% of the approved programs, which is an increase of 2% over the previous year; and mixed internships comprise 11% or 2% more than the previous year. Family practice and general practice programs now constitute 1% of all the approved programs. While the table indicates that the most popular straight internship continues to be internal medicine, the varieties of mixed internships are not sufficiently large to warrant inclusion in the table. For those mixed internships with a designated major component, 36 specified internal medicine, 32 listed surgery, 13 named pediatrics, 8 offered a major in obstetrics and gynecology, 4 in pathology, and 1 in psychiatry. Thirty-nine of the mixed internships did not designate a specific major, preferring to arrange the major assignment with the interns after the matching had been completed.

For 1962-1963, there was an average of 15.2 intern positions available per hospital, but since some hospitals have more than one type of internship program, the average number of intern positions for each individual program was 9.7. For the four types of programs, the averages were 13.5 positions for rotating programs, 5.2 for straight

programs, 4.0 for mixed programs, and 2.0 for family and general practice programs.

Table 2 indicates that rotating internships comprised 56% of the approved programs, 78% of the positions offered, and 76% of the filled positions. Mixed internships comprised 11% of the approved programs, and 5% of the positions offered, as well as 5% of the positions filled. Straight internships comprised 32% of the programs approved, 17% of the positions offered, and 20% of the positions filled.

On a basis of success in filling, the available rotating internship positions were 71% filled for a gain of 7% over the previous year. Mixed internships were 74% filled for a loss of 5% compared with last year, and straight internships were 85% filled as before. The most attractive of the straight internships continued to be internal medicine with 93% filled, straight surgery and pediatric internships were 78% and 79% filled, while pathology and obstetric-gynecology internships were much less popular with only 69% and 68% filled. The over-all percentage filled rose to 73% for a gain of 5% over the previous year.

For the year 1964-1965, the continued increase in straight and mixed internships is proportionately much greater than the very slight increase in rotating internships offered for 1962-1963.

#### Family Practice and General Practice Programs

These pilot programs were described in the last year's Directory, in which it was pointed out that the general practice programs contain or permit a block assignment on the surgical service, unlike the family practice programs. Both types of programs consist of two unified years in one institution or two closely affiliated institutions, and they are included in the NIMP, as they take the place of a one-year internship and a subsequent one-year residency. There have been certain adjustments in the totals, since one institution withdrew without activating its pilot program. Table 2 indicates that 14 such programs were approved as of Sept. 1, 1962, but currently there are 16 included in the list in the Directory for 1963. As is true of many new programs, it has taken time for these to become competitive. For the previous year, there were 9 programs offering 30 positions, of which only 20% were filled; while for 1962-1963, there were 14 programs offering 29 positions, of which 62% were filled. Those same 14 programs offer 65 positions for 1964-1965.

#### Two-Year Internships

Although the Council staff has continued to emphasize the possibility of establishing two-year internships for those hospitals interested in the preparation of young physicians for general practice, the number approved on this basis has in-

creased to only 12. This is still a decided increase over the 4 such programs approved and listed 2 years ago. These hospitals in the list carry a special footnote indicating that the hospital may offer some appointments of longer than 12 months' duration. Hospitals approved on this basis will continue to offer a 12-month rotating internship through the NIMP, but arrangements for a second 12-month appointment are then made with selected interns after they have gone on duty.

#### Internships by Type of Hospital Control

Table 3 indicates that 22 of the 27 hospitals in which internships were discontinued were church-sponsored. Together, the church and nonprofit corporations comprised 78% of the hospitals, offered

Table 3.—Number of Internships, by Type of Hospital Control

Control	No. of Hospitals	Number of Internships				
		Total Offered 1964-1965	Total Offered Sept. 1, 1962	Filled Sept. 1, 1962	Vacant Sept. 1, 1962	Percentage Filled
<b>Federal</b>						
U. S. Air Force.....	7	104	78	62	16	79
U. S. Army.....	8	164	179	164	15	92
U. S. Navy.....	12	159	159	159	..	100
U. S. Public Health Service	7	107	88	85	3	97
Veterans Administration...	3	46	46	41	5	89
Other Federal.....	4	80	80	63	17	79
<b>Totals.....</b>	<b>41</b>	<b>660</b>	<b>630</b>	<b>574</b>	<b>56</b>	<b>91</b>
<b>Governmental (Non-federal)</b>						
State.....	36	1,154	1,051	841	210	80
County.....	38	1,247	1,127	1,045	82	93
City.....	46	1,325	1,287	877	410	68
City-County.....	12	325	293	228	65	78
Hospital District.....	4	101	98	82	16	84
<b>Totals.....</b>	<b>136</b>	<b>4,152</b>	<b>3,856</b>	<b>3,073</b>	<b>783</b>	<b>80</b>
<b>Nongovernmental</b>						
Church.....	245	3,046	2,932	1,837	1,095	63
Nonprofit Corporations....	358	4,939	4,548	3,276	1,272	72
<b>Totals.....</b>	<b>603</b>	<b>7,985</b>	<b>7,480</b>	<b>5,113</b>	<b>2,367</b>	<b>68</b>
<b>Proprietary</b>						
Partnership.....	1	8	8	8	..	100
Corporations unrestricted as to profit.....	5	28	24	12	12	50
Miscellaneous.....	3	25	26	25	1	96
<b>Totals.....</b>	<b>9</b>	<b>61</b>	<b>58</b>	<b>45</b>	<b>13</b>	<b>78</b>
<b>Grand Totals.....</b>	<b>789</b>	<b>12,858</b>	<b>12,024</b>	<b>8,805</b>	<b>3,219</b>	<b>73</b>

62% of the total positions, and obtained 58% of the available interns. The group of nonfederal governmental hospitals comprised 17% of the total, offered 32% of the positions, and obtained 35% of the interns. The federal group comprised only 5% of the total, offered 5% of the internships, and secured 7% of the interns. The proprietary group comprised less than 1% in each category.

Some of the most striking improvements in individual internship program organization were made in a number of the church-sponsored hospitals. This is reflected in Table 3, which shows that the church group improved its percentage of filled positions from 53% to 63% during 1962-63. The federal group

performance declined from 97% to 91% of positions filled, due largely to the fact that the Air Force and Army were not as successful as the year before. The nonfederal government group improved from 76% to 80%, due mostly to an increase in filled positions from 83% to 93% in county hospitals.

It should be noted that the over-all number of filled positions increased over the previous year by 632 for a percentage increase from 68% to 73%. This was due largely to an increase in filled positions in church hospitals of 285 and in nonprofit corporation hospitals of 249.

#### Internships by Medical School Affiliation and Bed Capacity

Table 4 reveals that, while the total of hospitals approved for intern training was 27 less than the previous year, there was a decrease of 55 non-affiliated hospitals and an increase of 28 affiliated hospitals. This was a continuation of the trend seen last year, and indicates not only that the programs being discontinued are largely in the nonaffiliated group, but also that there is a continuing trend for more and more hospitals to seek affiliation with medical schools for purposes of better support of their programs.

Table 4.—Number of Internships, by Medical School Affiliation and Bed Capacity

Classification	No. of Hos- pitals	Number of Internships				
		Total Offered 1964-1965	Total Offered Sept. 1, 1962	Filled Sept. 1, 1962	Vacant Sept. 1, 1962	Per- centage Filled
Nonaffiliated						
Less than 200 beds.....	61	455	448	266	182	59
200-299.....	192	1,814	1,752	1,076	676	61
300-499.....	212	2,761	2,591	1,641	950	63
500-over.....	67	1,362	1,326	986	340	74
Totals.....	532	6,392	6,117	3,969	2,148	65
Affiliated						
Less than 200 beds.....	19	208	181	122	59	67
200-299.....	46	518	504	330	174	65
300-499.....	96	1,820	1,574	1,192	382	76
500-over.....	96	3,920	3,648	3,192	456	88
Totals.....	257	6,466	5,907	4,836	1,071	82
Grand Totals.....	789	12,858	12,024	8,805	3,219	73

As a result of these shifts, 33% of the hospitals approved for intern training are affiliated with medical schools, while 67% are not. The internships offered by each group of hospitals are almost exactly equal, with 51% offered by nonaffiliated and 49% offered by affiliated hospitals. As for last year, the nonaffiliated hospitals secured 45% and the affiliated secured 55% of the available interns. While the nonaffiliated hospitals offered less internships than before, they secured more interns than before, thus increasing the percentage filled from 56% to 65%. The affiliated group again filled 82% of the positions as before.

While the over-all vacancy for 1962-63 was 27% as compared with 32% for the previous year, there

are still 3,219 vacant internships. Although affiliated hospital internships continue to be the more popular, it must be noted that 18% were vacant as for last year.

For the nonaffiliated group, each size category was more successful than before, and the larger hospitals were more successful than the smaller. For the affiliated group, only the hospitals over 500 beds in size were more successful than the year before. Affiliated hospitals with 200-299 beds were distinctly less successful than before.

For 1964-65, hospitals in each bed-size category are offering more appointments, whether they are affiliated or not affiliated with medical schools. The division of available positions is exactly 50% between the two groups for 1964-65.

#### Internships by Census Region and State

Table 5 indicates that internships were not offered in four states, Idaho, Montana, Nevada, and Wyoming. Each census region improved its recruitment performance over the previous year, and, as before, the Pacific region had the highest percentage filled with 89%, and the West North Central region had the lowest record of 62% filled. The Mountain region showed a striking recovery from the previous year's record, gaining 16 percentage points to achieve 79% of filled positions. Again the Middle Atlantic region of New Jersey, New York, and Pennsylvania, representing 28% of the hospitals and 28% of the approved programs, offered 26% of the total internships and secured 26% of the available interns. Percentage of internships filled in this region was 74% for a gain of 7% over the previous year. The East North Central region which was next largest, secured 19% of the available interns for an improvement of 1% over its record of the previous year.

Last year there were seven states which filled less than 50% of the available internships, while for the current list in Table 5, only Delaware, South Dakota, and West Virginia filled less than 50%. As before, only the Canal Zone and New Hampshire with one hospital each had 100% success in filling internships, while California and New Mexico each filled 92%.

The data on foreign interns in Table 5 will be discussed in a later section on foreign medical graduates. These data were secured as of July 31, 1962, but the percentages have been figured against the September 1, 1962, total figures. This introduces a slight discrepancy, but nevertheless provides a relative measure of the extent to which foreign graduates are recruited in these programs.

#### National Intern Matching Program

The Directory of Approved Internships and Residencies carries a full description of the operation of the matching program, copies of the hospital



## GRADUATE MEDICAL EDUCATION

Table 5.—Number of Internships, by Census Region and State

Census Region and State	No. of Approved Programs	No. of Hospitals	Number of Internships				Percentage Filled	Foreign Interns	
			Total Offered 1964-1965	Total Offered Sept. 1, 1962	Filled Sept. 1, 1962	Vacant Sept. 1, 1962		No. on Duty July 31, 1962	Percentage in Filled Positions
<b>New England</b>									
Connecticut.....	22	19	219	213	163	50	77	29	18
Maine.....	3	3	24	23	15	8	65	3	20
Massachusetts.....	51	36	457	455	327	128	72	66	20
New Hampshire.....	3	1	16	16	16	...	100	...	...
Rhode Island.....	7	7	70	70	40	30	57	19	48
Vermont.....	3	2	28	27	23	4	85	1	4
<b>Totals.....</b>	<b>89</b>	<b>68</b>	<b>814</b>	<b>804</b>	<b>584</b>	<b>220</b>	<b>73</b>	<b>118</b>	<b>20</b>
<b>Middle Atlantic</b>									
New Jersey.....	51	42	523	472	324	148	69	205	63
New York.....	200	101	1,891	1,772	1,356	416	77	502	37
Pennsylvania.....	98	76	958	912	652	260	83	150	23
<b>Totals.....</b>	<b>349</b>	<b>219</b>	<b>3,372</b>	<b>3,156</b>	<b>2,332</b>	<b>824</b>	<b>74</b>	<b>857</b>	<b>37</b>
<b>East North Central</b>									
Illinois.....	67	37	741	698	511	187	73	128	27
Indiana.....	16	10	166	154	108	46	70	...	...
Michigan.....	47	41	622	599	403	196	67	35	9
Ohio.....	78	52	806	744	483	261	65	165	34
Wisconsin.....	20	14	189	183	132	51	72	30	23
<b>Totals.....</b>	<b>228</b>	<b>154</b>	<b>2,524</b>	<b>2,378</b>	<b>1,637</b>	<b>741</b>	<b>69</b>	<b>358</b>	<b>22</b>
<b>West North Central</b>									
Iowa.....	8	6	90	83	64	19	77	10	16
Kansas.....	9	5	87	77	56	21	73	4	7
Minnesota.....	19	14	251	248	172	76	69	11	6
Missouri.....	37	20	381	365	195	170	53	20	10
Nebraska.....	13	9	100	87	47	40	54	4	9
North Dakota.....	2	2	12	10	5	5	50	1	20
South Dakota.....	2	2	13	14	5	9	36	...	...
<b>Totals.....</b>	<b>90</b>	<b>58</b>	<b>934</b>	<b>884</b>	<b>544</b>	<b>340</b>	<b>62</b>	<b>50</b>	<b>9</b>
<b>South Atlantic</b>									
Delaware.....	3	3	30	34	8	26	24	4	50
District of Columbia.....	23	10	245	186	127	59	68	22	17
Florida.....	24	16	304	277	214	63	77	28	13
Georgia.....	31	15	262	229	158	71	69	5	3
Maryland.....	47	21	360	349	252	97	72	29	12
North Carolina.....	27	10	192	189	126	63	67	7	6
South Carolina.....	10	6	100	101	89	12	88	...	...
Virginia.....	24	15	247	239	175	64	73	24	14
West Virginia.....	10	7	83	82	26	56	32	17	65
<b>Totals.....</b>	<b>199</b>	<b>103</b>	<b>1,823</b>	<b>1,686</b>	<b>1,175</b>	<b>511</b>	<b>70</b>	<b>136</b>	<b>12</b>
<b>East South Central</b>									
Alabama.....	15	6	116	108	60	48	56	...	...
Kentucky.....	13	6	121	108	70	38	65	1	1
Mississippi.....	6	3	45	39	27	12	69	...	...
Tennessee.....	21	13	265	277	234	43	84	15	6
<b>Totals.....</b>	<b>55</b>	<b>28</b>	<b>547</b>	<b>532</b>	<b>391</b>	<b>141</b>	<b>73</b>	<b>16</b>	<b>4</b>
<b>West South Central</b>									
Arkansas.....	9	3	60	58	32	26	55	...	...
Louisiana.....	16	9	247	234	188	46	80	3	2
Oklahoma.....	10	8	89	80	70	10	88	...	...
Texas.....	40	25	448	386	303	83	78	18	6
<b>Totals.....</b>	<b>75</b>	<b>45</b>	<b>844</b>	<b>758</b>	<b>593</b>	<b>165</b>	<b>78</b>	<b>21</b>	<b>4</b>
<b>Mountain</b>									
Arizona.....	6	6	88	80	64	16	80	10	16
Colorado.....	18	13	188	154	120	34	78	10	8
New Mexico.....	1	1	16	12	11	1	92	12	100
Utah.....	12	6	99	97	76	21	78	1	1
<b>Totals.....</b>	<b>37</b>	<b>26</b>	<b>391</b>	<b>343</b>	<b>271</b>	<b>72</b>	<b>79</b>	<b>33</b>	<b>12</b>
<b>Pacific</b>									
California.....	68	52	1,102	1,001	920	81	92	34	4
Hawaii.....	5	4	70	49	42	7	86	2	5
Oregon.....	8	6	95	94	73	21	78	4	5
Washington.....	22	16	215	206	161	45	78	3	2
<b>Totals.....</b>	<b>103</b>	<b>78</b>	<b>1,482</b>	<b>1,350</b>	<b>1,196</b>	<b>154</b>	<b>89</b>	<b>43</b>	<b>4</b>
<b>Territories and Possessions</b>									
Canal Zone.....	1	1	16	16	16	...	100	...	...
Puerto Rico.....	9	9	111	117	66	51	56	37	56
<b>Totals.....</b>	<b>10</b>	<b>10</b>	<b>127</b>	<b>133</b>	<b>82</b>	<b>51</b>	<b>62</b>	<b>37</b>	<b>45</b>
<b>Grand Totals.....</b>	<b>1,235</b>	<b>789</b>	<b>12,858</b>	<b>12,024</b>	<b>8,805</b>	<b>3,219</b>	<b>73</b>	<b>1,669</b>	<b>19</b>

and student agreements, and dates for operation of the matching program for 1964. While the annual reports of the 1961 and 1962 (10th and 11th) matching programs were published as one report in THE JOURNAL for Sept. 22, 1962, a formal report of the 1963 (12th) matching program will be deferred until 1964 since the basic data were essentially unchanged from the previous year.

In the 1963 matching, 96% of U.S. graduates participated, 98% of hospitals with approved programs participated, 99% of the approved programs were included in the matching, and 97% of the participants were matched to 6,954 or 56% of the 12,456 positions offered. A total of 91 graduates of Canadian medical schools participated, and only 3% were unmatched. Only 118 graduates of foreign medical schools participated, and 13 or 11% were unmatched.

For 1963, there was an average of 4.9 applications per student, and, as before, 86% of students were matched to either their first or second choice. Straight internships continue to increase in popularity. Of these, 78% were filled for an 18% improvement over the 1952 record. The mixed internships and family and general practice programs were 67% filled, and this was a 7% improvement over 1952. The rotating internships continued to be least successful, since only 49% of those offered were filled. This is 3% less than the performance in 1952. Of the various straight internships, the percentages matched were for medicine—87%, pediatrics—75%, surgery—72%, pathology—47%, and obstetrics-gynecology, 46%.

The hospitals with major medical school affiliations matched 3,839 interns or 78.5% of those sought, for a percentage nearly identical with 1962. The hospitals with minor affiliations matched only 380 or 47.4% of those sought, and this was 19% less than for 1962. The Federal hospitals matched 547 or 94.5% of those sought, representing a 7% improvement over 1962.

The hospitals without medical school affiliation

Table 6.—Annual Internship Salaries

Annual Salary Offered	Programs in Affiliated Hospitals	Programs in Nonaffiliated Hospitals	Total Programs
Data not available.....	10	37	47
500 or less.....	0	4	4
501-1,000.....	17	0	17
1,001-1,500.....	56	2	58
1,501-2,000.....	73	11	84
2,001-2,500.....	161	78	239
2,501-3,000.....	153	131	284
3,001-3,500.....	55	48	103
3,501-4,000.....	77	166	243
4,001-4,500.....	11	49	60
4,501-5,000.....	4	47	51
5,000+.....	9	36	45
Totals.....	626	609	1,235

also improved their record, since they matched 2,188 or 35.4 of the total sought, thus achieving a 5% improvement over 1962.

### Internship Salaries

The average annual salary for interns for 1963-1964 and as published in the Directory for 1964-1965 is \$3,039, or \$253 per month. For affiliated hospitals, this is \$2,625 or \$219 per month. For nonaffiliated hospitals, the average is \$3,485 or \$290 per month. The difference between the averages of these two groups of hospitals is \$71 per month, or \$13 more than for the previous year. Table 6 lists the annual salaries by increments of \$500 for the total of 1,235 programs in 789 hospitals.

### Residency Programs

In the annual report on graduate medical education made in 1962, and published in the November 17, 1962, Education Number of THE JOURNAL, specific reference was made to the interest of the House of Delegates and the instructions in the Report of the Reference Committee on Medical Education and Hospitals at the June 1962 meeting that the Council conduct a "study," as part of its current overall appraisal of medical education, as to numbers, proportion, and other pertinent facts with respect to residencies. Because of that instruction, the 1962 Report contained additional tables on specialty program performance in relation to hospital affiliation, additional tables relating to distribution of foreign medical graduates, and additional tables indicating the relationship of approved programs, hospital affiliation, and bed distribution. In addition, a detailed narrative description was given of the process by which graduate training programs are surveyed, evaluated, and approved. The activities of the Residency Review Committees were described and reduced to tabular form covering the academic year July 1, 1961, to June 30, 1962. In this current report, Table 7 again covers the activities of the Review Committees, from July 1, 1962, to June 30, 1963. There are 19 Review Committees evaluating programs in 24 different specialties at 38 separate meetings. These meetings lasted one or two days each, and occurred from one to three times annually, at which times 2,113 individual programs were reviewed, 193 were placed or continued on probation, 171 had approval either withheld or withdrawn, and 1,054 were granted continued approval. A variety of other actions were taken in the nature of progress reports and increases or decreases in length of approval.

Table 8 indicates the net effect of the activities of the Review Committees on the total number of programs approved.

Table 9 tabulates the survey activities of the Field Staff of the Council on Medical Education and Hospitals for the past four years. While there was a slight reduction in the total number of programs reviewed because of a small decrease in the

Table 7.—Activity of Review Committees—July 1, 1962, to June 30, 1963

Program:	Number of Meetings Held**	Programs Added to Approved List	Programs Granted Continued Approval	Programs Granted Increased or Decreased Approval	Programs on which Further Data were Required	Programs with Progress Reports for Review	Programs Placed or Continued on Probation	Programs on which Approval was Withheld or Withdrawn	Total Programs Reviewed
Anesthesiology.....	2	9	64	0	19	21	9	12	134
Aviation Medicine.....	2**	0	0	0	0	0	0	0	0
Child Psychiatry.....	2**	17	19	0	3	3	0	6	49
Colon and Rectal Surgery.....	1	0	5	0	1	1	1	0	8
Dermatology.....	2	5	28	1	3	1	0	0	38
General Practice.....	2	7	39	2	2	11	23	22	106
General Preventive Medicine.....	2**	3	0	0	1	1	0	0	5
Internal Medicine.....	3	9	112	7	30	63	36	26	283
Neurological Surgery.....	2	2	22	0	15	2	2	1	44
Neurology.....	2**	3	24	3	3	17	1	10	61
Obstetrics-Gynecology.....	3	5	89	23	23	30	24	21	215
Occupational Medicine.....	2**	3	0	0	2	7	0	0	12
Ophthalmology.....	2	5	40	2	8	4	2	2	63
Orthopedic Surgery.....	2	10	82	5	22	27	1	5	152
Otolaryngology.....	2	3	28	0	8	9	10	5	63
Pediatric Allergy.....	2**	3	7	0	0	0	0	1	11
Pediatrics.....	2**	15	79	3	9	22	10	9	147
Physical Medicine and Rehabilitation.....	2	6	21	0	5	6	2	4	44
Plastic Surgery.....	2	4	19	6	7	6	1	5	48
Psychiatry.....	2**	2	55	2	3	59	2	11	134
Public Health.....	2**	0	0	0	0	7	2	0	9
Radiology.....	2	14	81	0	17	40	32	12	196
Surgery.....	3	7	182	13	21	36	32	14	305
Urology.....	2	4	58	0	3	14	3	5	87
Totals*	38	136	1,054	67	205	387	193	171	2,213

\*Residencies in Pathology and in Thoracic Surgery are approved in collaboration with the American Board of Pathology and the Board of Thoracic Surgery, respectively, without review committees.

\*\*Residency Review Committee for Preventive Medicine evaluates residencies in Aviation Medicine, General Preventive Medicine, Occupational Medicine, Public Health at its meetings; Residency Review Committee for Psychiatry and Neurology evaluates residencies in Child Psychiatry, Neurology, Psychiatry; Residency Review Committee for Pediatrics evaluates residencies in Pediatric Allergy and Pediatrics.

number of residencies reviewed, the total number of hospitals visited was greater than ever before.

Because residency programs are conducted primarily in hospitals, only Tables 10, 20, and 21 include complete figures for hospital residencies as well as for those not primarily conducted in hospitals, such as the four programs in the field of preventive medicine and the programs in forensic

pathology. The total of all approved programs is therefore 6,246, representing an overall increase of 357 programs over the previous year 1961-1962. The total of approved positions offered has risen to 36,502, which is again the highest figure yet reached for individual residency positions available. The total of approved positions offered increased by 1,099 the number offered the previous year. It is of interest that, for the year 1964-1965, the total of 37,977 again represents a new grand total of available residencies, and study of the table indicates that every specialty is offering additional positions with the exception of pediatric

Table 8.—Net Effect of Activity of Review Committees on Total Number of Programs Approved.

Program:	Programs Added to Approved List	Programs Withdrawn from Approved List	Net Change	Total Approved Programs 6/30/63**
Anesthesiology.....	9	6	+ 3	232
Aviation Medicine.....	0	0	0	3
Child Psychiatry.....	17	2	+15	86
Colon and Rectal Surgery.....	0	0	0	11
Dermatology.....	5	0	+ 5	73
General Practice.....	7	12	- 5	173
General Preventive Medicine.....	3	0	+ 3	6
Internal Medicine.....	9	20	-11	523
Neurological Surgery.....	2	0	+ 2	82
Neurology.....	3	5	- 2	92
Obstetrics-Gynecology.....	5	12	- 7	374
Occupational Medicine—Academic.....	0	0	0	7
Occupational Medicine—Implant.....	3	0	+ 3	22
Ophthalmology.....	5	0	+ 5	157
Orthopedic Surgery.....	10	1	+ 9	296
Otolaryngology.....	3	3	0	99
Pediatric Allergy.....	3	1	+ 2	26
Pediatrics.....	15	1	+14	242
Physical Medicine and Rehabilitation.....	6	2	+ 4	73
Plastic Surgery.....	4	4	0	53
Psychiatry.....	2	0	- 6	242
Public Health.....	0	0	0	21
Radiology.....	14	7	+ 7	269
Surgery.....	7	11	- 4	660
Urology.....	4	5	- 1	187
Totals	136	100	+36	4,009

\*Residencies in Pathology and in Thoracic Surgery are approved in collaboration with the American Board of Pathology and the Board of Thoracic Surgery, respectively, without review committee action.

\*\*Totals in this Table differ from those in other tables, as, for this analysis, integrated programs in multiple hospitals have been counted as single units.

Table 9.—Survey Activities of the Field Staff

Year Ending June 30	1960	1961	1962	1963
Hospitals Visited.....	720	843	845	922
Internships Reviewed.....	304	329	328	329
Residencies Reviewed.....	1,723	2,099	2,121	1,967
Total Programs Reviewed.....	2,027	2,428	2,449	2,296

allergy, which offers one less, and plastic surgery, which offers three less positions.

### Residencies by Specialty

Training was offered in 23 specialties in hospitals and in six fields in which the programs are located primarily outside of hospitals. Separate programs in obstetrics or in gynecology are no longer listed, as the approval is now in the combined field of obstetrics-gynecology. While formal lists of approved programs in pediatric cardiology are still not available for publication, there were 19 pro-

Table 10.—Number of Residencies, by Specialty

Specialty	No. of Approved Programs	First Year Appointments					Total Appointments (All Years)				
		Number of Residencies									
		Total Offered 1964-1965	Total Offered Sept. 1, 1962	Filled Sept. 1, 1962	Vacant Sept. 1, 1962	Percentage Filled	Total Offered 1964-1965	Total Offered Sept. 1, 1962	Filled Sept. 1, 1962	Vacant Sept. 1, 1962	Percentage Filled
Anesthesiology.....	286	757	762	515	247	68	1,787	1,616	1,144	472	71
Colon and Rectal Surgery.....	12	13	14	8	6	57	25	24	12	12	50
Dermatology.....	111	138	152	135	17	89	407	395	360	35	91
General Practice.....	184	481	493	242	251	49	897	857	398	459	46
Internal Medicine.....	630	2,650	2,691	2,171	520	81	6,615	6,357	5,164	1,193	81
Neurological Surgery.....	188	107	112	103	9	92	473	475	443	32	93
Neurology.....	157	230	212	163	49	77	619	575	441	134	77
Obstetrics-Gynecology.....	483	880	899	793	106	88	2,749	2,705	2,463	242	91
Ophthalmology.....	225	314	339	315	24	93	1,000	986	931	55	94
Orthopedic Surgery.....	360	368	415	356	59	86	1,511	1,506	1,370	136	91
Otolaryngology.....	153	179	199	167	32	84	687	653	558	95	85
Pathology.....	781	1,029	1,131	607	524	54	3,298	3,168	1,965	1,203	62
Pediatrics.....	342	1,019	1,023	849	174	83	2,213	2,100	1,735	365	83
Pediatric Allergy.....	31	15	19	16	3	84	34	35	27	8	77
Pediatric Cardiology.....	19	19	22	20	2	91	45	39	36	3	92
Physical Medicine.....	103	126	121	52	69	43	378	345	165	180	48
Plastic Surgery.....	103	61	73	70	3	96	171	174	162	12	93
Psychiatry.....	338	1,424	1,479	1,121	358	76	4,428	4,231	3,245	986	77
Psychiatry-Child.....	96	63	109	79	30	72	440	330	243	87	74
Radiology.....	372	630	672	498	174	74	2,009	1,972	1,537	435	78
Surgery.....	787	2,453	2,479	2,039	440	82	6,665	6,501	5,696	805	88
Thoracic Surgery.....	123	102	122	101	21	83	264	248	207	41	83
Urology.....	289	247	262	207	55	79	895	870	751	119	86
<b>Totals.....</b>	<b>6,173</b>	<b>13,305</b>	<b>13,800</b>	<b>10,627</b>	<b>3,173</b>	<b>77</b>	<b>37,610</b>	<b>36,162</b>	<b>29,053</b>	<b>7,109</b>	<b>80</b>
Other than hospitals											
Aviation Medicine.....	3	22	29	29	0	100	77	76	71	5	93
Gen. Prev. Medicine.....	6	21	21	5	16	24	46	31	12	19	39
Occup. Medicine (Academic).....	7	30	30	20	10	67	68	60	32	28	53
Occup. Medicine (In-Plant).....	22	25	23	7	16	30	25	23	7	16	30
Public Health.....	23	81	81	34	47	42	135	135	56	79	41
Forensic Pathology.....	12	16	15	8	7	53	16	15	8	7	53
<b>Totals.....</b>	<b>73</b>	<b>195</b>	<b>199</b>	<b>103</b>	<b>96</b>	<b>52</b>	<b>367</b>	<b>340</b>	<b>186</b>	<b>154</b>	<b>55</b>
<b>Grand Totals.....</b>	<b>6,246</b>	<b>13,500</b>	<b>13,999</b>	<b>10,730</b>	<b>3,269</b>	<b>77</b>	<b>37,977</b>	<b>36,502</b>	<b>29,239</b>	<b>7,263</b>	<b>80</b>

grams which offered 39 positions as of September 1, 1962. These positions are accreditable by the American Board of Pediatrics and are included in this table as a reasonably accurate projection of future listings in this new field. The same ten major specialties in clinical and laboratory fields as listed before supported 87% of the positions offered—surgery 6,501, medicine 6,357, psychiatry 4,561, pathology 3,168, obstetrics-gynecology 2,705, pediatrics 2,100, radiology 1,972, anesthesiology 1,616, orthopedic surgery 1,506, and ophthalmology 986. Of these major specialties, the only one that showed a decrease from the previous year was obstetrics-gynecology, which offered 271 less positions. This is a reflection of the discontinuance of the partially approved program in these fields.

There were 7 specialties in which residencies were more than 90% filled, and these were all surgical specialties, except for dermatology and pediatric cardiology. There were again five fields in which less than 70% of the available positions were filled, the least popular field being general practice, with 46%, followed by physical medicine and rehabilitation with 48%, colon and rectal surgery with 50%, preventive medicine fields with 52%, and pathology with 62%. The grand total filled for 1962-

1963 was 28,239, or 398 less than the previous year. Since the total offered for 1962-1963 was 1,099 greater than for the previous year, the overall percentage filled decreased to 80%, or 4% less than the previous year and 8% less than the year before that.

#### Residencies by Type of Hospital Control

Table 11 includes only those programs based in hospitals, of which there were 6,173 programs in 1,474 hospitals, offering 36,162 positions. As usual, the largest group was the nongovernmental non-profit hospitals which comprise 59% of the total, offered 54% of the programs, and 48% of the residencies. Next in order were the nonfederal governmental group of hospitals comprising 25% of the total, offering 28% of the programs with 38% of the positions. Next was the federal group of hospitals comprising 9% of the total, offering 13% of the programs, and 13% of the available positions. The proprietary group comprised 6% of the hospitals, but offered 4% of the programs with 1% of the positions. On the basis of success with filling, the totals were closer than ever before for a grand total of 80% filled and each of the different groups varying from that figure by one percentage point.

Within the federal group of hospitals, the Vet-

## GRADUATE MEDICAL EDUCATION

Table 11.—Number of Residencies, by Type of Hospital Control

Control	No. of Hospitals	No. of Approved Programs	First Year Appointments					Total Appointments (All Years)				
			Total Offered 1964-1965	Total Offered Sept. 1, 1962	Filled Sept. 1, 1962	Vacant Sept. 1, 1962	Percentage Filled	Total Offered 1964-1965	Total Offered Sept. 1, 1962	Filled Sept. 1, 1962	Vacant Sept. 1, 1962	Percentage Filled
<b>Federal</b>												
U. S. Air Force.....	6	16	39	39	24	15	62	103	101	73	28	72
U. S. Army.....	15	71	145	159	149	10	94	355	456	420	36	92
U. S. Navy.....	9	61	103	104	104	..	100	314	297	296	1	99
U. S. Public Health Service..	12	40	57	67	62	5	93	202	200	175	25	88
Veterans Administration....	90	587	1,106	1,201	847	354	71	3,321	3,283	2,464	819	75
Other Federal.....	4	37	76	95	84	11	88	284	293	259	34	88
<b>Totals.....</b>	<b>136</b>	<b>812</b>	<b>1,526</b>	<b>1,665</b>	<b>1,270</b>	<b>395</b>	<b>76</b>	<b>4,579</b>	<b>4,630</b>	<b>3,687</b>	<b>943</b>	<b>80</b>
<b>Governmental (nonfederal)</b>												
State.....	206	839	2,259	2,566	2,079	487	81	7,129	7,186	5,828	1,358	81
County.....	66	336	884	872	685	187	79	2,427	2,283	1,855	428	81
City.....	81	441	1,259	1,298	1,050	248	81	3,487	3,351	2,876	475	86
City-County.....	10	96	191	200	155	45	78	491	514	408	106	79
Hospital District.....	11	34	78	91	75	16	82	220	228	200	28	88
<b>Totals.....</b>	<b>374</b>	<b>1,746</b>	<b>4,671</b>	<b>5,027</b>	<b>4,044</b>	<b>983</b>	<b>80</b>	<b>13,754</b>	<b>13,562</b>	<b>11,167</b>	<b>2,395</b>	<b>81</b>
<b>Nongovernmental nonprofit</b>												
Church operated and church related.....	321	1,113	1,813	1,823	1,192	631	65	4,598	4,299	3,027	1,272	70
Other nonprofit.....	556	2,248	4,857	5,092	3,974	1,118	78	13,342	13,177	10,771	2,406	82
<b>Totals.....</b>	<b>877</b>	<b>3,361</b>	<b>6,670</b>	<b>6,915</b>	<b>5,166</b>	<b>1,749</b>	<b>75</b>	<b>17,940</b>	<b>17,476</b>	<b>13,798</b>	<b>3,678</b>	<b>79</b>
<b>Proprietary</b>												
Individual.....	3	3	2	3	2	1	67	6	7	6	1	86
Partnership.....	2	5	6	7	3	4	43	10	9	4	5	44
Corporation.....	16	40	108	63	42	21	67	320	157	114	43	73
Miscellaneous.....	66	206	323	120	100	20	83	1,001	321	277	44	86
<b>Totals.....</b>	<b>87</b>	<b>254</b>	<b>439</b>	<b>193</b>	<b>147</b>	<b>46</b>	<b>76</b>	<b>1,337</b>	<b>494</b>	<b>401</b>	<b>93</b>	<b>81</b>
<b>Grand Totals.....</b>	<b>1,474</b>	<b>6,173</b>	<b>13,306</b>	<b>13,800</b>	<b>10,627</b>	<b>3,173</b>	<b>77</b>	<b>37,610</b>	<b>36,162</b>	<b>29,053</b>	<b>7,109</b>	<b>80</b>

erans Administration Hospitals comprised exactly two-thirds of the hospitals, had 72% of the approved programs, offered 71% of all federal positions, and secured 67% of all the residents on duty in federal hospitals. The total residencies offered by the Veterans Administration comprised 9% of all those offered in all 1,474 hospitals in the United States. The 2,464 V.A. residents on duty represented a decrease of 138 over the previous year and a decrease of over 350 in the previous two years.

There were 1,035 more residency positions offered in hospitals than the previous year, but 441 less residencies filled, accounting for the additional decrease of 4%, so that the 29,053 filled positions were 80% of those offered.

Except for the proprietary hospitals whose numbers are so few that the comparative figures are not very meaningful, the church operated and church related hospitals showed the poorest record with only 70% of the available positions filled. Next in order were the Air Force with 72% filled, Veterans Administration with 75% filled, proprietary hospitals with 73% filled, and city-county hospitals with 79% filled.

#### Residencies by Medical School Affiliation and Bed Capacity

Table 12 indicates that there was an increase of 108 hospitals over the previous year, of which 45 were nonaffiliated and 63 were affiliated hospitals,

for a new total of 1,474. The 440 affiliated hospitals comprised 30% of the total, a gain of 2% over the previous year. They offered 62% of the residencies and secured 65% of all the available residents.

Table 12.—Number of Residencies, by Medical School Affiliation and Bed Capacity

	No. of Hospitals	Number of Residencies				
		Total Offered 1964-1965	Total Offered Sept. 1, 1962	Filled Sept. 1, 1962	Vacant Sept. 1, 1962	Percentage Filled
<b>Nonaffiliated</b>						
Less than 200 beds...	388	4,825	2,905	2,339	566	81
200-299.....	236	1,995	2,026	1,353	673	67
300-499.....	243	4,104	4,009	2,833	1,176	71
500-Over.....	167	4,766	4,849	3,733	1,116	77
<b>Totals.....</b>	<b>1,034</b>	<b>15,690</b>	<b>13,789</b>	<b>10,258</b>	<b>3,531</b>	<b>74</b>
<b>Affiliated</b>						
Less than 200 beds...	76	1,119	1,040	898	142	86
200-299.....	68	1,749	1,612	1,332	280	83
300-499.....	130	4,966	5,542	4,424	1,118	80
500-Over.....	166	14,086	14,179	12,141	2,038	86
<b>Totals.....</b>	<b>440</b>	<b>21,920</b>	<b>22,373</b>	<b>18,795</b>	<b>3,578</b>	<b>84</b>
<b>Grand Totals.....</b>	<b>1,474</b>	<b>37,610</b>	<b>36,162</b>	<b>29,053</b>	<b>7,109</b>	<b>80</b>

Eighty-four percent of affiliated hospital residencies were filled, for a decline of 4% over the previous year. The 1,034 nonaffiliated hospitals comprised 70% of the total, offered 38% of the positions, and obtained 35% of the residents for a performance figure of 74% filled or a loss of 5% over the previous year. Thus, the affiliated hospital success in recruitment was 10% greater than for the nonaffiliated hos-



Table 13.—Number of Residencies, by Specialty, in Affiliated and Non-Affiliated Hospitals

Number of Residencies											
Specialty	No. of Approved Programs	First Year Appointments					Total Appointments (All Years)				
		Total Offered 1964-1965	Total Offered Sept. 1, 1962	Filled Sept. 1, 1962	Vacant Sept. 1, 1962	Percentage Filled	Total Offered 1964-1965	Total Offered Sept. 1, 1962	Filled Sept. 1, 1962	Vacant Sept. 1, 1962	Percentage Filled
Affiliated											
Anesthesiology.....	175	509	558	378	180	68	1,228	1,184	846	338	68
Colon and Rectal Surgery...	9	9	9	4	5	44	16	17	7	10	41
Dermatology.....	78	97	120	107	13	89	273	299	272	27	91
General Practice.....	26	83	85	53	32	62	136	131	67	64	51
Internal Medicine.....	281	1,535	1,635	1,436	199	88	3,840	3,942	3,373	569	86
Neurological Surgery.....	133	62	90	83	7	92	282	377	352	25	93
Neurology.....	114	175	181	138	43	76	458	483	372	111	77
Ophthalmology.....	143	226	243	224	19	92	705	707	663	44	94
Obstetrics-Gynecology.....	205	477	505	545	51	90	1,515	1,561	1,438	123	92
Orthopedic Surgery.....	201	214	253	216	37	85	914	949	876	73	92
Otolaryngology.....	106	124	155	127	28	82	467	497	420	77	85
Pathology.....	304	530	566	357	209	63	1,744	1,759	1,241	518	71
Pediatrics.....	175	686	712	605	107	85	1,516	1,504	1,267	237	84
Pediatric Allergy.....	24	12	16	15	1	94	27	28	24	4	86
Pediatric Cardiology.....	16	18	21	19	2	90	43	38	35	3	92
Physical Medicine.....	69	79	87	39	48	45	238	238	129	109	54
Plastic Surgery.....	65	41	51	49	2	96	122	124	117	7	94
Psychiatry.....	177	846	903	724	179	80	2,558	2,541	2,037	504	80
Psychiatry-Child.....	41	23	51	41	10	80	195	145	115	30	79
Radiology.....	214	433	492	388	104	79	1,399	1,443	1,161	282	80
Surgery.....	307	1,218	1,296	1,143	153	88	3,482	3,624	3,310	314	91
Thoracic Surgery.....	77	59	76	62	14	82	169	166	136	30	82
Urology.....	178	156	180	141	39	78	593	616	537	79	87
Totals.....	3,118	7,612	8,285	6,803	1,482	82	21,920	22,373	18,795	3,578	84
Non-Affiliated											
Anesthesiology.....	111	248	204	137	67	67	559	432	298	134	69
Colon and Rectal Surgery...	3	4	5	4	1	80	9	7	5	2	71
Dermatology.....	33	41	32	28	4	88	134	96	88	8	92
General Practice.....	158	398	408	189	219	46	761	726	331	395	45
Internal Medicine.....	349	1,115	1,056	735	321	70	2,775	2,415	1,791	624	74
Neurological Surgery.....	55	45	22	20	2	91	191	98	91	7	93
Neurology.....	43	55	31	25	6	81	161	92	69	23	75
Ophthalmology.....	82	88	96	91	5	95	295	279	268	11	96
Obstetrics-Gynecology.....	278	403	394	339	55	86	1,234	1,144	1,025	119	90
Orthopedic Surgery.....	159	154	162	140	22	86	597	557	494	63	89
Otolaryngology.....	47	55	44	40	4	9	220	156	138	18	88
Pathology.....	477	499	565	250	315	44	1,554	1,409	724	685	51
Pediatrics.....	167	333	311	244	67	78	697	596	468	128	79
Pediatric Allergy.....	7	3	3	1	2	33	7	7	3	4	43
Pediatric Cardiology.....	3	1	1	1	...	100	2	1	1	...	100
Physical Medicine.....	34	47	34	13	21	38	140	107	36	71	34
Plastic Surgery.....	38	20	22	21	1	95	49	50	45	5	90
Psychiatry.....	161	578	576	397	179	69	1,870	1,690	1,208	482	71
Psychiatry-Child.....	55	40	58	38	20	66	245	185	128	57	69
Radiology.....	158	197	180	110	70	61	610	529	376	153	71
Surgery.....	480	1,235	1,183	896	287	76	3,183	2,878	2,386	491	83
Thoracic Surgery.....	46	43	46	39	7	85	95	82	71	11	87
Urology.....	111	91	82	66	16	80	302	254	214	40	84
Totals.....	3,055	5,693	5,515	3,824	1,691	69	15,690	13,789	10,258	3,531	74
Grand Totals.....	6,173	13,305	13,800	10,627	3,173	77	37,610	36,162	29,053	7,109	80

pitals, and this represents a progressive increase over the past two previous years.

The 500-bed hospitals and the hospitals smaller than 200 beds had equal success in recruiting for programs affiliated with medical schools. For those hospitals not affiliated with medical schools, the hospitals with less than 200 beds had the best record, for 81% filled, while those between 200 and 300 beds had the poorest record of only 57% filled. For the nonaffiliated group, the hospitals of larger than 500 bed size offered only 35% of all the available residencies, while for the affiliated group that size hospital offered 63% of the residencies.

A study of the column of positions offered for

1964-1965 reveals that the affiliated hospitals are actually offering 453 less positions, while the non-affiliated group offers 1,901 more positions than for September 1962. The nonaffiliated hospitals actually secured 1,607 less residents for the year 1962-1963 than for the year 1961-1962, while the affiliated hospitals secured 1,166 more. Even though the recruitment success in the nonaffiliated hospitals continues to decrease, these hospitals continue to offer more positions each year.

Table 13 was added to the report for last year in response to the instructions of the House of Delegates, and shows the distribution of training programs by specialty, between affiliated and non-

## GRADUATE MEDICAL EDUCATION

Table 14.—Number of Residencies, by Census Region and State

	No. of Approved Programs	No. of Hospitals	Number of Residencies					Foreign Residents	
			Total Offered 1964-1965	Total Offered Sept. 1, 1962	Filled Sept. 1, 1962	Vacant Sept. 1, 1962	Per- centage Filled	No. on Duty July 31, 1962	Percentage in Filled Positions
<b>New England</b>									
Connecticut.....	109	31	726	706	578	128	82	152	26
Maine.....	14	3	51	51	27	24	53	1	4
Massachusetts.....	268	97	1,771	1,737	1,478	259	85	343	23
New Hampshire.....	17	3	93	75	60	15	80	6	10
Rhode Island.....	35	17	151	145	94	51	65	44	47
Vermont.....	42	4	88	75	63	12	84	14	22
<b>Totals.....</b>	<b>485</b>	<b>155</b>	<b>2,880</b>	<b>2,789</b>	<b>2,300</b>	<b>489</b>	<b>82</b>	<b>560</b>	<b>24</b>
<b>Middle Atlantic</b>									
New Jersey.....	140	57	676	675	497	178	74	350	70
New York.....	899	196	6,249	5,905	5,079	826	86	2,076	41
Pennsylvania.....	460	113	2,583	2,507	1,935	572	77	505	26
<b>Totals.....</b>	<b>1,499</b>	<b>366</b>	<b>9,508</b>	<b>9,087</b>	<b>7,511</b>	<b>1,576</b>	<b>83</b>	<b>2,931</b>	<b>39</b>
<b>East North Central</b>									
Illinois.....	306	69	1,951	1,884	1,536	348	82	464	30
Indiana.....	93	23	520	511	356	155	70	14	4
Michigan.....	265	59	1,936	1,872	1,535	337	82	364	24
Ohio.....	387	86	2,317	2,232	1,700	532	76	618	36
Wisconsin.....	102	28	650	592	426	166	72	81	19
<b>Totals.....</b>	<b>1,153</b>	<b>265</b>	<b>7,374</b>	<b>7,091</b>	<b>5,553</b>	<b>1,538</b>	<b>78</b>	<b>1,541</b>	<b>28</b>
<b>West North Central</b>									
Iowa.....	46	12	353	412	293	119	71	26	9
Kansas.....	49	15	384	366	255	111	70	50	20
Minnesota.....	162	28	1,281	1,281	1,118	163	87	170	15
Missouri.....	169	41	1,136	1,086	770	316	71	208	27
Nebraska.....	33	15	186	173	99	74	57	14	14
North Dakota.....	8	4	19	17	16	1	94	16	100
South Dakota.....	4	3	9	9	2	7	22	1	50
<b>Totals.....</b>	<b>471</b>	<b>118</b>	<b>3,368</b>	<b>3,344</b>	<b>2,553</b>	<b>791</b>	<b>76</b>	<b>485</b>	<b>19</b>
<b>South Atlantic</b>									
Delaware.....	16	6	68	67	36	31	54	16	44
District of Columbia.....	122	21	899	855	732	123	86	171	23
Florida.....	108	23	677	613	503	110	82	99	20
Georgia.....	118	25	641	602	445	157	74	50	11
Maryland.....	143	38	1,048	998	870	128	87	294	34
North Carolina.....	105	24	708	666	549	117	82	40	7
South Carolina.....	52	8	163	155	117	38	75	4	3
Virginia.....	107	33	628	590	460	130	78	105	23
West Virginia.....	49	16	214	186	112	74	60	95	85
<b>Totals.....</b>	<b>820</b>	<b>194</b>	<b>5,046</b>	<b>4,732</b>	<b>3,824</b>	<b>908</b>	<b>54</b>	<b>874</b>	<b>23</b>
<b>East South Central</b>									
Alabama.....	72	10	424	443	312	131	70	9	3
Kentucky.....	81	22	371	315	230	85	73	55	24
Mississippi.....	45	9	165	169	117	52	69	2	2
Tennessee.....	124	27	764	712	572	140	80	70	12
<b>Totals.....</b>	<b>322</b>	<b>68</b>	<b>1,724</b>	<b>1,639</b>	<b>1,231</b>	<b>408</b>	<b>75</b>	<b>136</b>	<b>11</b>
<b>West South Central</b>									
Arkansas.....	31	9	199	179	118	61	66	...	...
Louisiana.....	104	20	692	683	548	135	80	19	3
Oklahoma.....	76	13	287	267	206	61	77	9	4
Texas.....	254	49	1,337	1,391	1,081	310	78	149	14
<b>Totals.....</b>	<b>465</b>	<b>91</b>	<b>2,515</b>	<b>2,520</b>	<b>1,953</b>	<b>567</b>	<b>78</b>	<b>177</b>	<b>9</b>
<b>Mountain</b>									
Arizona.....	24	9	106	105	72	33	69	31	43
Colorado.....	112	19	524	546	413	133	76	64	15
New Mexico.....	15	6	68	62	40	22	65	14	35
Utah.....	56	10	191	171	117	54	68	7	6
<b>Totals.....</b>	<b>207</b>	<b>44</b>	<b>889</b>	<b>884</b>	<b>642</b>	<b>242</b>	<b>73</b>	<b>116</b>	<b>18</b>
<b>Pacific</b>									
California.....	523	116	3,148	3,040	2,610	430	86	71	3
Hawaii.....	27	11	132	104	93	11	89	17	18
Oregon.....	44	9	273	259	225	34	87	10	4
Washington.....	103	21	456	401	352	49	88	33	9
<b>Totals.....</b>	<b>697</b>	<b>157</b>	<b>4,009</b>	<b>3,804</b>	<b>3,280</b>	<b>524</b>	<b>86</b>	<b>131</b>	<b>4</b>
<b>Territories and Possessions</b>									
Canal Zone.....	7	1	26	25	22	3	88	2	9
Puerto Rico.....	47	15	271	247	184	63	74	109	59
<b>Totals.....</b>	<b>54</b>	<b>16</b>	<b>297</b>	<b>272</b>	<b>206</b>	<b>66</b>	<b>76</b>	<b>111</b>	<b>54</b>
<b>Grand Totals.....</b>	<b>6,173</b>	<b>1,474</b>	<b>37,610</b>	<b>36,162</b>	<b>29,053</b>	<b>7,109</b>	<b>80</b>	<b>7,062</b>	<b>24</b>

affiliated hospitals. One striking factor is at once apparent from studying the columns of the totals offered for 1964-1965. For the affiliated group of hospitals, 15 out of 23 specialties actually will offer fewer residency positions than were offered for September 1, 1962. For the nonaffiliated group on the other hand, every specialty will offer increased positions with the sole exception of plastic surgery, in which one less position is available. There are six specialties in which the number of approved programs in nonaffiliated hospitals exceeds those in affiliated hospitals. These are residencies in general practice, internal medicine, obstetrics-gynecology, pathology, child psychiatry, and surgery.

Comparison of the on-duty figures for residents in these specialties reveals, however, that the numbers on duty in the nonaffiliated hospitals exceed those on duty in the affiliated hospitals only in the two areas of the general practice residency and child psychiatry. This indicates, therefore, that the programs in the nonaffiliated hospitals are generally smaller because of the smaller size of the hospitals. While the number of residents on duty in general practice residencies in nonaffiliated hospitals is greater than those in the affiliated hospitals, the percentage filled was higher in the affiliated hospitals. This same statistical difference held true for each of the other specialties in which the number of approved programs was greater in nonaffiliated hospitals.

As was pointed out in last year's report, the number of residents in an individual program is relatively unimportant in relation to the amount of time spent in evaluating such programs by the field representatives, the specialist consultants, and the Residency Review Committees. Since the number of programs approved in both groups of hospitals is almost equal, it is apparent that the non-affiliated hospitals require the same time, effort, and expense as do the affiliated hospitals from the standpoint of the Council's over-all responsibility for accreditation of graduate training programs.

#### Residencies by Census Region and State

Table 14 reveals the distribution by census region and state of the 36,162 positions for 6,173 approved residency programs in 1,474 hospitals. The Mid-Atlantic states of New Jersey, New York and Pennsylvania offered 24% of the approved programs in 25% of the hospitals, offered 25% of the individual positions, and secured 26% of all of the available residents. Of the total of 7,511 residents, the 2,931 foreign residents comprised 39% of the total in those three states and comprised 42% of all of the 7,062 foreign residents on duty in the United States. Only one state filled more than 90% of its positions, and this was North Dakota with only 8 programs in 4 hospitals. There were 11 states which filled less than 70% of their residencies, these being

Table 15.—Annual Salaries Offered Residents, 1963-1964

Beginning Salary (Dollars per Year)	Number of Programs		
	In Affiliated Hospitals 384	In Non-Affiliated Hospitals 835	Total 1,219
Data Not Available.....			
0-500.....	...	...	...
501-1000.....	6	1	7
1001-1500.....	84	29	113
1501-2000.....	102	12	114
2001-2500.....	409	70	479
2501-3000.....	461	293	754
3001-3500.....	419	260	679
3501-4000.....	416	616	1,032
4001-4500.....	633	389	1,022
4501-5000.....	85	182	267
5001-5500.....	41	170	211
5501-6000.....	33	92	125
6001-6500.....	17	30	47
6501-7000.....	6	19	25
7001-7500.....	12	31	43
7501-8000.....	3	8	11
8001-8500.....	2	7	9
8501-9000.....	1	2	3
9001-9500.....	...	2	2
9501-10000.....	1	1	2
10001-10500.....	...	3	3
10501-11000.....	1	1	2
11001-11500.....	1	2	3
Over 11500.....	1	...	1
<b>Totals.....</b>	<b>3,118</b>	<b>3,055</b>	<b>6,173</b>

South Dakota 22%, Maine 53%, Delaware 54%, Nebraska 57%, West Virginia 60%, New Mexico and Rhode Island 65% each, Arkansas 66%, Utah 68%, and Arizona and Mississippi each with 69%. Further comments on participation of foreign graduates will be included in a later section.

#### Residency Salaries

Because of the varying length of residency programs, it is not possible to report an "average" salary other than for the beginning salary of first-year residents. The over-all average annual starting salary was \$3,684, with \$3,398 for affiliated and \$4,037 for nonaffiliated hospitals. For comparison with last year's report, these annual averages are equal to monthly averages of \$283 for affiliated and \$336 for nonaffiliated hospitals, with a general average of \$307 per month. The average monthly salary thus increased over the previous year by \$32. The nonaffiliated hospital salaries were \$53 per month higher than the affiliated, and the average residency salary was \$53 per month higher than the average intern salary.

Table 15 indicates the annual beginning salaries to be offered residents for 1963-1964. These will be published in the Directory with the lists of positions for 1964-1965, but these salary figures are also current in the great majority of cases. These salaries are not necessarily those which were in effect on September 1, 1962. It will be noted that 12% of the affiliated hospitals and 28% of the nonaffiliated hospitals did not supply data which could be included in Table 15. In some instances, the salary data were not included simply because the peculiarities and cross relationships between some hos-

pital programs were such that their salaries could not be analyzed. Some hospitals did not report salaries for reasons best known to themselves.

When the salaries are listed on a scale of \$500 increments per year, we find for the affiliated hospitals that 75%, or 2,338 hospitals, report salaries falling between \$2,001 and \$4,500 per year. For the nonaffiliated hospitals, 2,002, or 66% of the hospitals, reported salaries falling between \$2,501 and \$6,000 per year. For both groups of hospitals there was one modal salary level embracing 20% of the hospitals. For 633 affiliated hospitals, this level was from \$4,001 to \$4,500 while for 616 nonaffiliated hospitals this level was from \$3,501 to \$4,000.

Above the \$6,000 range, 45 or 1% of the affiliated hospitals and 106 or 3% of the nonaffiliated hospitals were included. It will be noted that both groups of hospitals listed three programs paying more than \$10,501 per year. The median for affiliated hospitals falls between \$3,000 to \$4,000, while the median for the nonaffiliated hospitals falls between \$3,500 and \$4,500.

At the June 1963 annual meeting of the House of Delegates, a joint report on the subject of Compensation of the House Officers was submitted by the Council on Medical Service and the Council on Medical Education and Hospitals. The report was disapproved although the previous basic principles approved by the House of Delegates were upheld: "(a) graduate physician serving as intern or resident should receive financial support commensurate with his professional responsibilities and with due recognition of his educational opportunities, and (b) the medical profession must assume an increasing responsibility for the development of appropriate methods of financial support of the intern and resident so as to accomplish the above objective." It is probable that the salaries of house officers will continue to rise as in the past, and that the sources and amount of compensation per house officer as well as the apportionment of financial responsibility will continue to be determined locally by agreement between the individual hospital governing bodies and members of their attending staffs. Neither of the above two Councils has ever recommended that the American Medical Association set arbitrary standards or limits for house of-

ficers' salary, and the Essentials contain no policy statement relating the accreditation of any specific program in graduate medical education to any specific salary level.

### Foreign Medical Graduates

As was announced in last year's Annual Report, the data on foreign medical graduates are now obtained from the annual census of the A.M.A. Circulation and Records Department as of July 31, 1962. The data on foreign-trained interns in Table 5, for foreign-trained residents in Table 14, by specialty in Table 17, and the totals in Tables 16 and 20 are from this census. The data in the Consolidated List in the Directory differ, since they were secured from the files of the Circulation and Records Department as of April 1963.

A new Table 16 on Status of Foreign Medical Graduates now reveals the numbers classified according to both visa status and according to qualifications such as licensure, ECFMG certification, etc. Data were not available as to country of origin, but it is believed that the distribution as reported in previous years has not been altered significantly. This distribution will be reported as before by the Institute of International Education in its annual publication "Open Doors."

As of July 31, 1962, there were 1,771 United States citizens who were graduates of foreign medical schools and now serving as interns or residents. (While the IIE considers graduates of Canadian medical schools as foreign, they are not so regarded by the Council. There were 1,078 such graduates serving as interns and residents as of July 31, 1962, but they are included with the over-all figures for U.S. graduates.)

As revealed in Table 16, the total of foreign trained physicians was 9,776, with 1,669 or 17% as interns, 7,062 or 72% as residents, 1,024 or 10% as others (fellows, etc.), and 21 not appropriately classified. Thus, 8,731 were interns and residents, showing a gain of 234 over the IIE figures for the previous year, but a loss of 265 over the comparable A.M.A. figures.

Of the total of 9,776 foreign medical graduates, the visa status was reported for 8,543. This leaves 1,233 not reported as to visa status, and they could

Table 16.—Foreign Medical Graduates, June 1-July 31, 1962

Category	Total	Visa Status				Qualifications					Total Previous Years of	
		Perm.	Exch.	D.P.	Other	Lic.	N.B.	St.	Temp.	Spec.	Internship	Residency
Intern.....	1,669	338	947	112	80	5	3	936	608	1	231	170
Resident.....	7,062	1,570	4,131	66	382	685	20	4,282	1,517	19	6,497	11,124
Other.....	1,024	201	621	11	74	67	1	539	144	8	666	1,751
Unknown.....	21	1	9	...	...	...	..	7	3	...	5	11
Grand Totals.....	9,776	2,110	5,708	189	536	757	24	5,764	2,272	28	7,309	13,056

Perm. —Permanent resident in the United States.  
Exch. —Exchange Visitor (J Visa)  
D.P. —Refugee or Displaced Person.  
Other —Type of visa, other than above.  
Lic. —Full and unrestricted state license to practice.

N.B. —Certified by the National Board of Medical Examiners.  
St. —Standard ECFMG Certificate.  
Temp. —Temporary ECFMG Certificate.  
Spec. —Certified by an American Medical Specialty Board.