



THE AMERICAN ASSOCIATION OF NEUROLOGICAL SURGEONS

(FOUNDED AS THE HARVEY CUSHING SOCIETY IN 1931)

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August 28, 1987

Stewart B. Dunsker, M.D.
Mayfield Neurological Institute
506 Oak Street
Cincinnati, OH 45219

Dear Stewart:

Your suggestions concerning further development of a visible presence in surgery of the spine were discussed at some length by the Joint Officers this summer. There was in general agreement with many of the suggestions you put forward. We would very much appreciate your amplifying on how the Spinal Task Force should be structured. This would presumably be a task force of the Spine Section. There was a consensus that the task force concept was a good one and that the Spine Section should proceed with the implementation of such a group. This group would be expected to come forward with more detailed proposals to implement the activities outlined by you. After some discussion it was felt that it would be much more practical to have a spine workshop either immediately preceding or following the Annual Meeting rather than placing it entirely within the current three and one-half day structure. This would pre-suppose that the Spine Section is making full utilization of the half day already committed to it. It was not felt practical, at least at this stage, to preempt a full day of plenary session time to perform an exclusively spine oriented workshop activity. We would be glad to assist, however, in the above concept of a full day immediately preceding or following the Annual Meeting.

We would appreciate further specific suggestions from you and your section with respect to of encouraging residents both financially and with public recognition vis-a-vis spine activity. It was the perception that the Residency Review Committee is aware of the importance of spine activities in the overall educational program for neurological surgery.

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There was some hesitancy about trying to build in specific numbers or specific course requirements inasmuch as the field has been changing rapidly. The Residency Review Committee does attempt to exercise its discretionary powers to insure that a good balance of training is in effect. We otherwise might have to repeatedly rewrite the special requirements to encompass each new phase of neurological surgery activity.

As indicated from the above, the overall response was quite favorable. We would very much appreciate specific suggestions and recommendations for implementation of points one through four of your submission to the joint officers.

With best regards,



H. D. Garretson, M.D., Ph.D.
President

HDG/beb

cc: David L. Kelly, Jr., M.D.
George T. Tindall, M.D.
Carl H. Hauber, C.A.E.✓