

*Observations and Comments
on the
Seoul National University*

**COLLEGE OF MEDICINE
ATTACHED HOSPITAL
SCHOOL OF NURSING
and
SCHOOL OF PUBLIC HEALTH**



N. L. Gault, Jr, M. D.



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Seoul, Korea June, 1961

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on the

College of Medicine,
Attached Hospital,
School of Nursing
and
School of Public Health,
Seoul National University
Seoul, Korea

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Pertinent Previous Publications

- Report of the WHO/UNKRA Health Planning Mission in Korea, 1952
- Semi-Annual Progress Reports to International Cooperation Administration Seoul National University of Korea, and Office of General Affairs, Republic of Korea, in behalf of the Regents of the University of Minnesota, 1955 through 1961.
- Report of Observations as Adviser in Medicine to College of Medicine, Seoul National University, 1956, Wm. F. Maloney, M. D.
- Report and Recommendations on Teaching and Research in Internal Medicine, College of Medicine, Seoul National University, 1958, Edmund B. Flink, M. D., Ph.D.
- Interim Report on School of Nursing, Seoul National University, 1958, Miss Margery Low, R. N., M. A.
- Final Report of Observations and Recommendations Concerning the College of Medicine, Seoul National University, 1958, James H. Matthews, M. D.
- Report on the Seoul National University Hospital, College of Medicine, Seoul National University, 1958, Glenn R. Mitchell, M. H. A.
- Final Report on Nursing, Seoul National University, 1958, Margery Low, R. N., M. A.
- Report of Observations and Activities as Adviser in Medicine to College of Medicine, Seoul National University, 1959, E. B. Brown, Jr., Ph.D.
- Final Report of Observations, Activities, and Recommendations Concerning the Nursing Service, Seoul National University Hospital and the School of Nursing, Seoul National University, 1959, Miss D. Joan Williams, B. S., M. N. A.
- Final Report of Observations, Activities and Recommendations, Concerning the College of Medicine, Seoul National University, 1959, George Schimert, M. D.
- Report on Survey of National Higher Education in the Republic of Korea, 1960, Ministry of Education, Republic of Korea, and USOM.
- Final Report and Recommendations on Teaching and Research in Pediatrics, 1960, Eldon B. Berglund, M. D.
- Report on Survey of Schools of Nursing in Republic of Korea, 1960, Indiana University Nurse Advisers to Korea.
- Final Report on Nursing Service and Nursing Education at Seoul National University, 1961, Florence Julian, R. N., M. N. A.

Foreword

"If we could first know where we
are, and whither we are tending, we
could then better judge what to do, and
how to do it." - Abraham Lincoln

At the invitation of the Republic of Korea, the U. S. Foreign Operations Administration (later to become the International Cooperation Administration) in 1954 entered into a contractual arrangement with the University of Minnesota to provide assistance to strengthen and develop the educational and research programs in agriculture, engineering, and medicine including nursing at Seoul National University of Korea.

Previous reports have presented progress made in the areas of medicine and nursing during the period of the contract as it applied to these areas, September 28, 1954 to June 30, 1961. As the original planning indicated, the major aspects of the project included faculty exchange, rehabilitation of physical facilities, and re-equipment of teaching, research, and hospital facilities. Since contractual assistance to medicine and nursing will be terminated, this report gives the present status of the College of Medicine. It is hoped that governmental agencies and foundations interested in education in the health sciences in Korea will find this report informative.

In 1954 Dr. Gaylord Anderson of the College of Medical Sciences, University of Minnesota, made initial observations of health science education at Seoul National University. He has continued to serve this

project as the Project's Adviser in Medicine on the Minneapolis Campus. The first participant from the College of Medicine was Dean Chae Koo Lee, who left Korea on February 24, 1955. Various factors delayed the departure of additional faculty members until September 1955. On March 24, 1956 the first Minnesota medical adviser was dispatched to Seoul; Dr. Wm. F. Maloney in 3½ months conducted a thorough survey of the status and needs of the College, serving well to establish "where we are." The second adviser arrived on January 9, 1957 from which date the College has had one or more advisers from Minnesota in residence in Seoul. Thus the College of Medicine has had continuity of technical advisory services in Korea for the past 4½ years.

Initial activities in rehabilitation of the physical facilities of the College and requisitioning of basic teaching and research equipment began in 1955 under the direction of the Chief Adviser of the University of Minnesota Project in Korea, Dr. Arthur E. Schneider. With the arrival in the Spring of 1957 of three advisers - in medicine, nursing, and hospital administration - a team which accomplished a remarkable familiarization with the new set of cultural values they found in Korea, came detailed planning closely developed with their Korean counterparts to define "whither we are tending". Each adviser has worked as effectively as possible by discussing educational, scientific, and administrative principles involved; assisting the Korean faculty to "judge what to do and how to do it" in order to achieve their objectives.

At no time have the advisers in this project assumed administrative or teaching responsibilities of the Korean staff. Despite invitations to undertake such responsibilities, advisers have limited their teaching

activities to demonstrate methods or to provide special lectures which are not usually provided by the Korean faculty. By and large advisers have acted as a symbol for change and through their presence have given some stability to the inevitable insecurity that accompanies change in a traditional culture pattern.

There has been a natural and understandable resistance despite an avowed and indisputable sincere expression by the faculty to adopt methods of teaching medicine known as the "scientific method." The principles and methods of teaching this approach are directly contradictory to the traditional methods of teaching in this culture. Instead of the student accepting, memorizing, and imitating his teacher's word, the student is encouraged to learn fundamental principles, to establish habits of clear and independent thinking, and to apply these principles with critical judgment in solving problems of health and disease. Not only the student but the faculty member as well must make major adjustments. After all, this new method of teaching and learning requires changes in student-teacher relationships, in doctor-patient relationships, in faculty-faculty relationships, and requires various administrative and budgetary adjustments. How long will these changes take? The timetable cannot be predicted but it will undoubtedly take longer than the "changing-conscious" American society thinks it should take. After the few years since gaining independence, marked modifications of the traditional culture of the Korean society have occurred. It is reasonable to predict that with continued assistance, further changes will be made at a reassuring rate.

The Republic of Korea Government.

Medical education as a field of higher education in Korea is controlled by the Ministry of Education which is charged with the enforcement of governmental policies and regulations. The number of students, number of faculty members, the approval of appointment and promotion of individual faculty members, approval of the dean nominated by the faculty, establishment of both governmental and parent-teacher association tuition and fee levels, establishment of minimum building and land space for each college, and most important the support of the budget from national funds through recommendations to the Minister of Finance and the National Assembly are responsibilities of the Minister of Education. From this list the significance of the national government in regulating medical education is apparent. However, disregard for or violations of governmental policies and regulations in respect to the enumerated responsibilities are common and the Ministry has not successfully enforced or caused inappropriate regulations to be legally changed.

Regulation of the practice of medicine in Korea is the responsibility of the Ministry of Health and Social Affairs. Such regulatory functions as licensure of practitioners, hospitals, pharmacies, nurses, recognition of specialists, approval of fee schedules, procurement and distribution of immunization materials, medical supplies, health education materials, etc. are responsibilities of this Ministry.

The need for coordination and teamwork of these two ministries in fulfilling their responsibilities in respect to medical care offered the Koreans appears obvious to most Westerners. But in Korea organizational structure is traditionally rigidly compartmentalized. This pattern is not

easily modified; however, specific instances of cooperation known to this adviser are encouraging. More cooperation is achieved through person-to-person relationships than through organizational channels.

Currently the eight medical schools, four national government financed and four financed by private universities, are capable of graduating 650 to 675 doctors annually. Since one school admits only females and another must admit females to fill at least 30% of its classes, a large number of graduates each year are women. The supply of physicians is certainly not excessive for this nation of 24,000,000 but the distributional pattern of physicians between urban and rural areas deprives half the population of care by doctors of medicine.

The large military force demands a great percentage of graduates each year to maintain its physician needs of 2,111. The regular medical corps is relatively small. In 1961, of 438 male graduates eligible for military service, the forces commissioned 238 and deferred 130 for internship and specialty training (Kim Plan comparable to the Berry Plan). Approximately 8% fail the physical examination for entering the service. If the present strength of the military force is maintained, male graduates can anticipate at least a four year tour of duty upon graduation or, if eligible, a deferment to continue their studies after which they will serve in the armed forces.

For a more detailed study of the role of the government in health sciences education the reader is referred to Doctor Jean A. Curran's section in the Report on Survey of National Higher Education in the Republic of Korea, 1960 which was sponsored by the Ministry of Education and USOM/Korea.

The National Government finances and operates the following hospitals in or near Seoul: Seoul National University Hospital (519 beds), National Medical Center (supervised and partially financed by the Scandinavian governments - 465 beds), Seoul Transportation Hospital (105 beds), National Police Hospital (100 beds), National Oh Ryu Dong Relief Hospital (150 beds), Sung-kae Won Leprosy Sanitorium at Pu Pyung (500 patients), and Noryangin National Veteran's Mental Hospital (170 beds). Several ministries operate these hospitals but the Ministry of Health & Social Affairs is responsible for controlling standards of operation and care.

The bed capacity of the five general hospitals in this group is 1339 beds and from the Report on the Investigation of Medical Facilities in Korea as of the End of 1959 compiled by the Korean Hospital Association with the support of the Ministry of Health & Social Affairs, the total number of patients admitted during 1959 was 7,783. A quick analysis of these figures suggests that the average patient in these hospitals has a hospital stay of 60 days! Such is not the case, for most of the hospitals maintain an occupancy of less than 50%.

Because clinical material, i.e., hospitalized patients to be examined and observed by student doctors with the faculty responsible for the care of the patient, is most essential for teaching modern medicine, the Ministries of Education and Health & Social Affairs and other ministries operating hospitals in Seoul City are urged to consolidate these hospitals as teaching hospitals affiliated with Seoul National University. Government supported hospitals such as these should cooperate with the government supported medical school to provide facilities needed to provide better medical education. This requires that officials of the university

have some control of the professional staff, the standards, and the policies of medical care in the affiliated hospitals.

During the past 18 months, the Dean of the College of Medicine, Seoul National University through agreement with the administrative officials at the National Medical Center has assigned junior medical students to the Center for clinical experience; this is a commendable arrangement of cooperation to correct one of the greatest deficiencies in medical education.

The lack of clinical material is so critical that it deserves the attention of the ministries. Measures must be taken to provide a minimum number of patients in relation to each medical student. The standard recommended in the United States of 10 hospital beds per student per entering class; i.e., 1200 teaching hospital beds for the class of 120 students at Seoul National University, may not be applicable to conditions in Seoul at present. However consolidation of hospitals could more nearly meet the need. Government supported hospitals in Seoul which are unable to maintain 50% full occupancy, thus giving minimal care at an irreducible operating expense in keeping such physical facilities open, require serious study as to the rationale for not discontinuing them. The consolidation of operational funds of these hospitals could be used to adequately finance the teaching hospitals resulting in more economy, upgrading of medical education, and improved medical care. An indisputable fact is that a hospital operates most economically when a maximum of its beds are occupied. The economy of the ROK government cannot afford to continue to support duplicating hospital services which are inadequately utilized.

The Provincial Government

The province surrounding the Special City of Seoul is Kyonggi Do, the equivalent of a state in America. Within the provincial governmental structure a Bureau of Public Health functions. Hospitals as well as health centers are operated by the provincial government. Thus far no arrangements have been proposed to utilize these governmental health facilities to augment the health sciences education in the governmental university.

There are seven provincial hospitals in Kyonggi Do with a total of 459 beds to which 2,561 patients were admitted in 1959. Again as discussed under the National Government, improved medical care with considerable financial saving could be attained by closing those hospitals near enough to Seoul for admission of patients to a nationally supported hospital in Seoul. The desire of patients to be hospitalized in their home town is acknowledged but the importance of economical operation of government-supported hospitals and the education of well trained physicians and assistants such as nurses and technicians overrides, it seems to me, this objection in Korea today.

The Special City of Seoul

The city government finances and operates six hospitals with a total of 742 beds. In 1959, these hospitals admitted 7,069 patients. From these figures it is evident that these hospitals are providing care for more patients than the national hospitals in Seoul. Again I believe cooperation between the national government-supported university medical education program and the health facilities financed by the Special City of Seoul would be mutually beneficial. In America affiliation of city

hospitals with the teaching program of medical schools has invariably raised the standards of medical care given.

The health centers operated in the nine "ku" (precinct) of the city offer excellent opportunities for demonstrating public health practices and the cooperation leading to the utilization of these by the College of Medicine, Seoul National University, is commendable. Efforts to gain maximum value from this arrangement should be emphasized in the future.

Foundations

The American-Korean Foundation since its organization in the post-liberation years has contributed to the support of this college. Initially and even after the ICA project began in 1954, a number of faculty members received financial support for studies abroad, chiefly in the field of public health. Each summer the American-Korean Foundation grants groups of medical students financial support to give medical care in doctorless areas of Korea. During the past year the Medical Social Service of the Seoul National University Attached Hospital received a grant to supplement indigent patient care costs. Although the Foundation has limited resources, the assistance in the past has met real needs and I feel confident that in the future needs will receive deserved consideration within the scope of the policies and resources of the Foundation.

Another important foundation in Korea is The Asia Foundation. Members of the faculty of the College of Medicine have availed themselves of assistance offered by the Asia Foundation primarily as a source of supplemental support for their travel to scientific meetings. It also has been a source of dollars at the official exchange rate which made it possible for faculty members to purchase much needed equipment and supplies

from abroad.

Private Enterprise

Support from industry and private citizenry in Korea has been meager. In the past year the college received from this source a notable increase in scholarship support. No grants for research, however, have been made. Although this type of philanthropy has not been a part of the cultural pattern in this society, it does not mean that cultural changes now occurring in Korea will not encourage such giving. On the contrary, I believe that well planned public relations demonstrating the College's contributions to the health of the people - educationally, researchwise, and in the care of the patient - will unlock this door of potential support.

Seoul National University

Dr. James Matthews in his final report relates the history and objective of Seoul National University and of the College of Medicine, specifically. The university organization and operation were thoroughly studied by Mr. William Middlebrook and his recommendations and implementation planning are part of the Report on Survey of National Higher Education in the Republic of Korea, 1960. The section on Administration, Organization, and Physical Plant contains pertinent, constructive recommendations for reorganization which would improve the overall operation of the university.

The organization of Seoul National University can be characterized as a decentralized educational institution of twelve colleges and three schools. Each unit through its dean operates more or less independently of the central university administration. The University President is responsible for administering the affairs of the university in accordance with regulations of the National Government. The Ministry of Education is his immediate superior for communicating with the government. In developing university policies and communicating with the staff and students, the President uses the Deans' Committee which is composed of deans of all college and schools. The Deans of the College of Medicine and School of Public Health and the Superintendent of the Attached Hospital channel all major matters to the President or to higher government officials with the permission of the President. A surprising amount of cooperation is achieved by direct personal contact by this College's administrators with the officials in the various ministries.

The annual budget request is submitted by the President to the

Minister of Education. Since Korea's independence, national appropriations have been inadequate to finance education, therefore the Finance Support Organization, referred to as PTA (Parent-Teacher Association), was organized in each college with representatives to the central university PTA committee to establish PTA fees to be paid by each student. These funds are used to supplement the regular budget as the PTA committees and deans decide.

An example of the independence of the colleges within this university is illustrated by a critical situation that arose during the first semester, 1961. This is an instance in which some colleges acted contrary to the policy adopted by the Deans' Committee and the President. PTA fees are usually apportioned between a university headquarters fund which is used to supplement faculty salaries and each college for use in the college as the respective PTA officers and dean agree. The colleges with limited admissions but with large faculties such as the College of Medicine obviously require subsidy to meet the salary supplement needed. On this occasion five of the largest colleges refused to surrender any part of PTA fees collected to the university headquarters. So the university headquarters fund was not adequate to do this without PTA contributions. Because of this type of independent action, faculties in the colleges naturally begin thinking that an independent status without any dependence on university headquarters for normal operation would lead to smoother administration. This is unfortunate for it has been amply demonstrated that a centralized administration can offer many advantages to the colleges both educationally and financially.

The salary scales established for academic positions in the College of

Medicine are as follows with the representative portions from the national budget and PTA fees indicated:

1961-62

<u>Academic Rank</u>	<u>National budget</u>	<u>PTA fees</u>
Professor	65,200 hwan	80,000 hwan
Associate Professor	59,480	70,000
Assistant Professor	54,572	59,700
Instructor	49,452	49,600
Assistant	45,562	26,500

The present official exchange rate is 1,300 hwan to \$1.00. These figures are average and a professor who is older and who has served the college longer may have a higher salary than another professor in the college. These figures reflect a marked increase since 1954 when professors, for example, were paid 10,530 hwan per month! The administration regularly deducts the following from salaries: 5% for university retirement fund, 2.3% for government employee retirement program, 4 to 6% for income tax, and 3.5% for education tax. Additional compulsory deductions are made from time to time for such benefits as National Red Cross, National Disaster Fund, etc.

Retirement benefits are meager; at age 65 retirement is compulsory. The government employee retirement program after 20 years of service provides optional payments; the employee may accept a lump sum payment of double the amount contributed or a monthly payment of 30% of his salary for the rest of his life. The university retirement fund pays a lump sum, the size of which depends on the length of service of the faculty member. The maximum amount is approximately 1,000,000 hwan.

All professorial ranks have tenure but in reality instructors and assistants occupying table of organization positions have some degree of

tenure. The procedure for discharging a faculty member is complicated, involving hearings on a university level and finally in the Ministry of Education.

Another benefit accruing to faculty members is the privilege of educating their sons and daughters at Seoul National University without paying PTA fees.

Seoul National University holds an eminent position in Korea as a university of quality. Applicants for admission always greatly outnumber the openings available in freshman classes. The university gains considerable favorable publicity through the press.

COMMENT: Previous recommendations pertaining to the reorganization of the university administration to create a more centralized administration are endorsed. The extent of centralization must be a matter for the Koreans to decide. A change which will permit the central administration to render bookkeeping, purchasing, repair and maintenance, printing, and utility services, to utilize faculty and classroom facilities to the fullest extent, to offer students recreational, living, and dining facilities in addition to counselling and job placement services, would offer educational and economic improvement. In other words, I believe that the central administration should act to serve the colleges, relieving them of some of their present administrative burdens. This would naturally threaten the colleges as they would be losing some autonomy. However, when the university administration convinces the colleges by performing its duties with excellence that it exists not "to issue orders" but, rather, to guide and assist the colleges in achieving their objectives, will the true authority of the university be recognized and respected by the colleges.

Technical Advisory Services

The faculty exchange program of this contract provided eleven technical advisers in medicine and nursing from the University of Minnesota. To attempt to describe their contributions is not within the scope of this report. Besides they have recorded in their own words the status of the areas in which they worked, the changes that occurred during their tours, and their recommendations for the continued development of the educational and service programs of this college.

The total service of University of Minnesota faculty members who served in Korea is provided by the following tabulation:

<u>Name</u>	<u>Date Service Began</u>	<u>Last Day Served</u>	<u>Man Months</u>	<u>Prof. Field</u>	<u>Rank</u>
Eldon Berglund	9-2-59	9-29-60	13	Pediatrics	Asst. Prof.
E. B. Brown, Jr.	7-25-58	2-12-59	6½	Physiology	Prof.
Edmund B. Flink	8-1-57	2-18-58	6½	Int. Med.	Prof.
N. L. Gault, Jr.	8-30-59	6-30-61	22	Overall & Med.	Assoc. Prof. & Asst. Dean
Florence Julian	4-24-60	4-24-61	12	Nursing	Prof. & Dir.
Margery S. Low	1-1-57	2-10-59	25½	Nursing	Asst. Prof.
William F. Maloney	3-24-56	7-11-56	3½	Overall & Med.	Asst. Prof. & Asst. Dean
James H. Matthews	5-2-57	12-6-58	19	Overall & Med.	Asst. Prof.
Glenn R. Mitchell	5-2-57	12-10-58	19	Hosp. Adm.	Asst. Dir. Univ. Hosp.
George Schimert	7-6-58	11-13-59	16½	Overall & Surg.	Asst. Prof.
D. Joan Williams	12-15-58	1-12-60	13	Nursing	Asst. Prof.

COMMENT: The function of a technical adviser in a foreign culture

requires extraordinary adjustments on his part. Aside from the adjustments to the new living pattern in the American community, he is confronted with major differences between the cultural pattern of the new society and his own. No longer is he in his usual position which enabled him to actively achieve his objectives in his work. But instead, he is required to act strictly as an adviser. His new status and prestige as an American adviser among the Koreans demand careful and thoughtful evaluation on his part. He should not displace the Korean staff but should act to complement their activities. His role is necessarily a passive one in one sense in that the technician must limit the extent to which he rolls up his sleeves and actually does the work. But he cannot succeed in his role if he is completely passive. He must be active in his advisory services; the success of the adviser will depend largely on his identifying his proper and acceptable position with his counterparts.

Advisory services in purely technical areas have been rendered effectively by short-term assignments of six months. In fact longer tours would probably have not benefited the faculty appreciably. The longer tour of two years is probably best for those advisers responsible for the overall direction of the project.

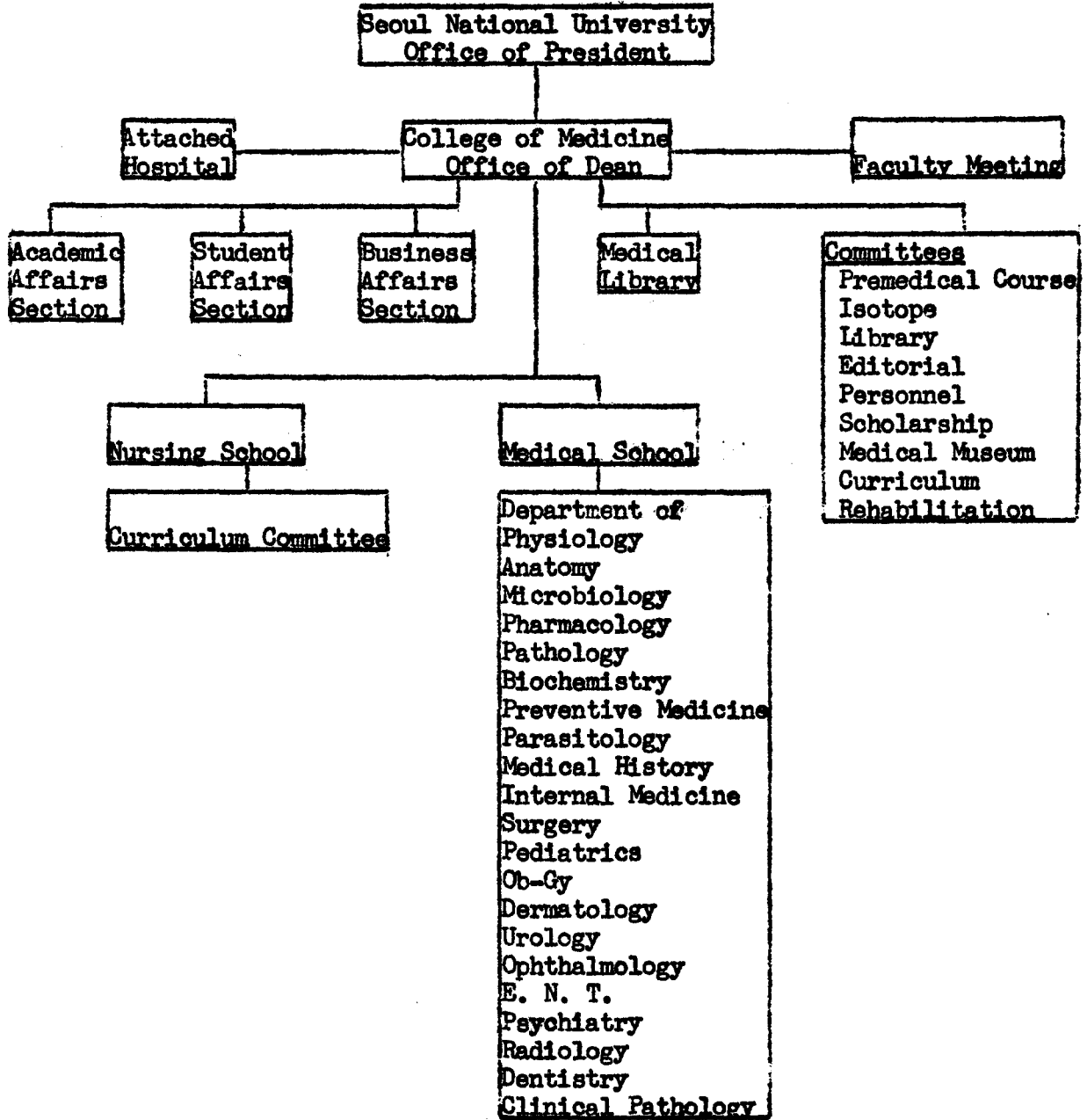
In the future I believe continued advisory services will hasten the complete modernization of this college. Thus far the investment has been great; some of the essentials of the educational program have been strengthened - faculty, equipment and physical facilities. The program is not yet completed but what remains to be done is small compared to what has been accomplished. With the foundation for modernization almost completed, now is the time for technical advisory services. The tools with

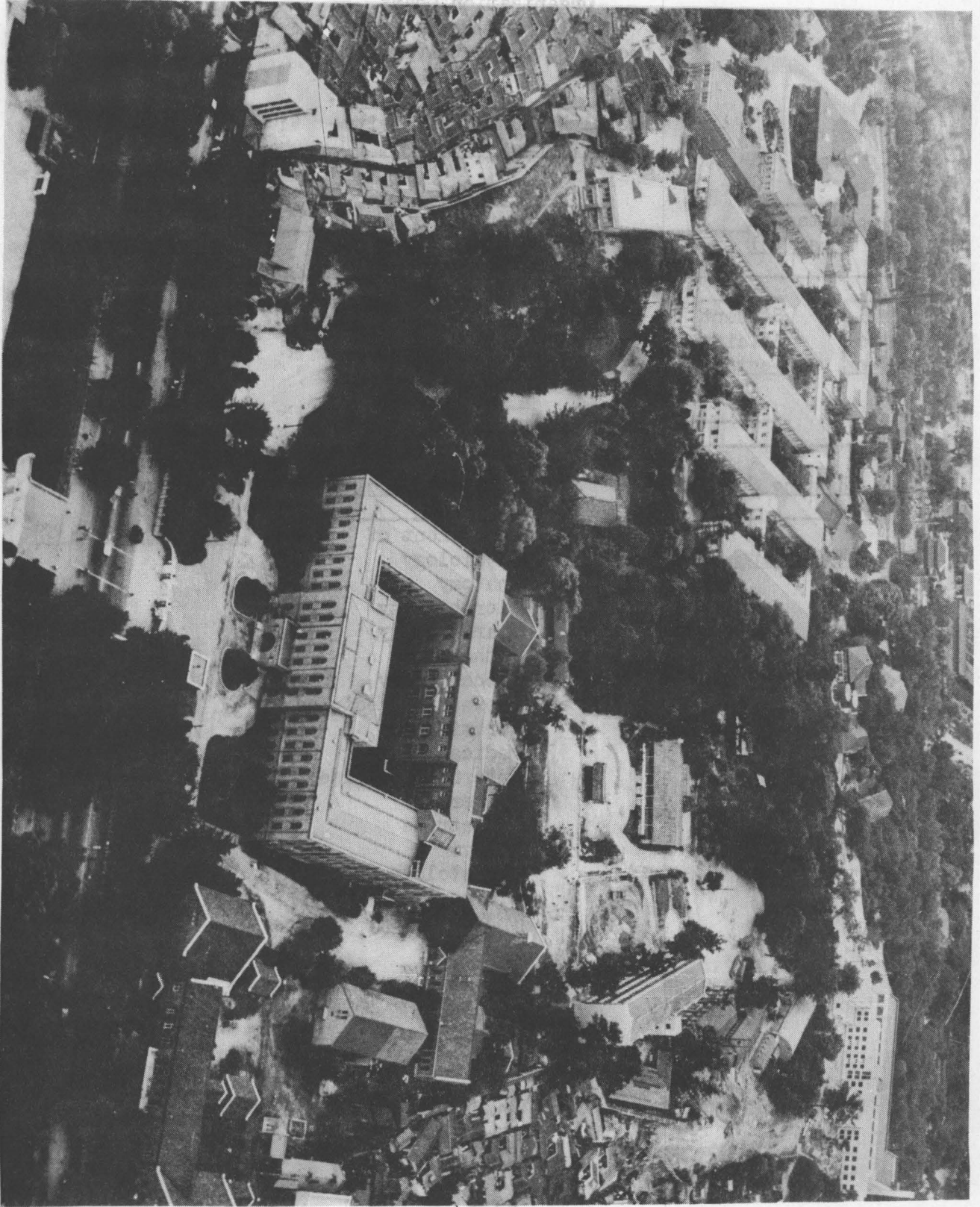
which the adviser can work are now in Korea; in the past this was not always true. The cost of continuing advisory services will not be great but the results in the next five years should witness the multiplier effect of what has gone into the program.

As this contract closes arrangements have been made through the Ministry of Education for the University of Indiana contract in Nursing Education to include the School of Nursing, Seoul National University, as one of the schools they assist for the duration of their contract.

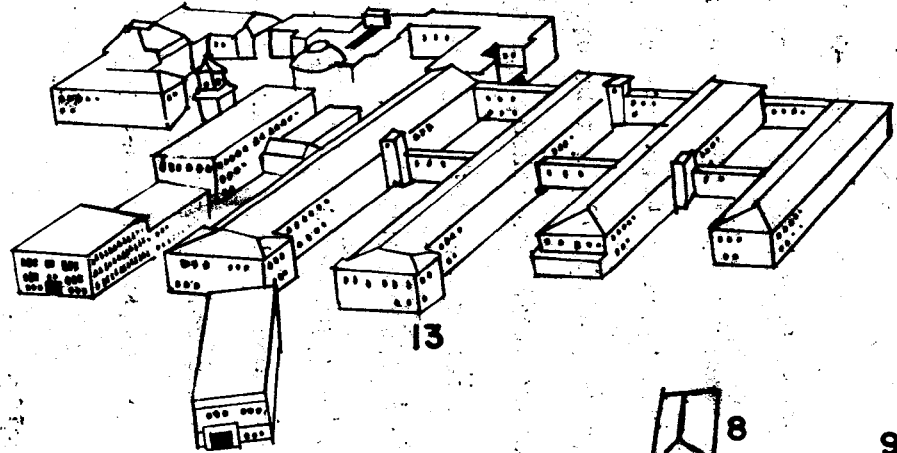
In the medical areas several U. S. Army medical officers are currently contributing time to attend and participate in conferences in various departments. This system now offers obstetrics and gynecology, urology, and chest surgery limited technical assistance; it serves a need and I recommend continuation of this working arrangement. It is however, a system which is indefinite and depends on the interest and dedication of the army physician who volunteers his services.

Organization Chart
 College of Medicine
 Seoul National University

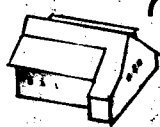




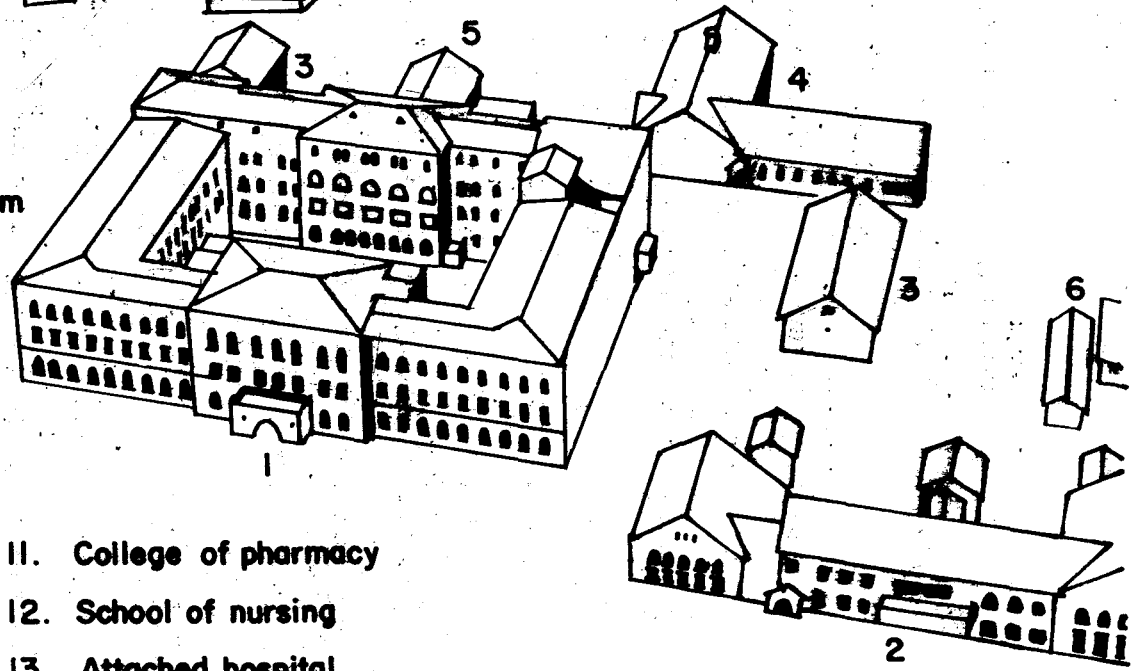
COLLEGE OF MEDICINE, SEOUL NATIONAL UNIVERSITY



1. Main basic science building
2. Biochemistry building
3. Classroom building
4. Gross anatomy laboratory and medical museum
5. School of public health
6. Animal house and heating plant



7. Foreign scholar quarters
8. University Student Health Service
9. Student dining room
10. University faculty club



11. College of pharmacy
12. School of nursing
13. Attached hospital

The College of Medicine

Administration

The College of Medicine and attached hospital are located in the Special City of Seoul which has a population of 2,500,000 people. The college is built on a tract of land (9.2 acres) which is the property of the University; the Dean of the college is responsible for the use of this tract. This location is adjacent to the main university campus which is comprised of University Headquarters, library, auditorium, Graduate School, College of Liberal Arts, College of Law, College of Fine Arts, and School of Public Administration. The units within the "medical center", a larger tract of land, are the College of Medicine including the School of Nursing, the Drug Institute, the College of Pharmacy, the Attached Hospital, and the School of Public Health. Also adjacent to the "medical center" is the College of Veterinary Medicine.

As described earlier there is very little administrative control exercised by the university headquarters' administrative officers. No board of trustees or regents exists for the university or the College of Medicine. The Dean of the College of Medicine, through decisions reached by the College faculty meeting (only professorial ranks), exercises almost full control for determining the policies of the medical school.

The Dean appoints an Assistant Dean of Academic Affairs and another of Student Affairs. Both positions are held by faculty members who continue their usual duties in their respective departments. A general affairs section includes a Business Manager and seven clerks.

The Dean of the College continues to have responsibility for teaching his basic science subject as he is also the head of the Department of

Anatomy. In addition he has a limited teaching schedule at another medical school in Seoul. This practice was prevalent after the Korean War especially in basic science fields as Korea did not have sufficient numbers of qualified basic scientists to fill faculty positions in all the medical schools. In recent years the local training and the return of scientists from abroad has reduced the necessity for sharing faculty members.

The future development of the College has been planned by a faculty committee. They have planned the use of available land for expansion of services: new hospital, dormitories, student health center, residences for faculty, and medical center auditorium. The curriculum committee in particular has been most progressive altering the curriculum to take advantage of the ever changing status of laboratory facilities, equipment, and faculty; its long-term plan is to increase student participation in classes and decrease didactic lectures to an acceptable minimum. The need for greater clinical experience for junior and senior medical students is recognized. In addition to curriculum changes the college has been able to arrange affiliation with several hospitals in Seoul for clerkship experiences for the students.

The Dean of the College of Medicine as well as many members of the faculty are active in various medical societies. The Korean Medical Association is not very effective in its program primarily because the physicians do not join and support it. A monthly journal is published and many contributions come from the faculty of this college. KMA sponsors an annual scientific meeting which is held at the College of Medicine on occasion.

The specialties of medicine have organized their societies to encourage regular scientific meetings and to publish their own journals. This year some 25 different medical publications are being published regularly.

The College of Medicine has no apparent friction with the organized medical societies but often seems to provide leadership and service to them. If any friction in the profession exists, it is between the schools of medicine in Korea. The strong traditional factionalism in this culture supports favoritism of graduates of the alma mater. This practice naturally is a disadvantage to potential growth and productivity of the medical profession in all its endeavors. The best qualified man does not necessarily get the opportunity to exercise his talents. Some progress has been made in changing this pattern of culture but because of its importance in the daily interpersonal relationship of the Korean, a rapid change cannot be expected.

COMMENT: In the future this college should work closely with the Colleges of Pharmacy, Dentistry, and Veterinary Medicine to organize a truly integrated medical center. Advantages in education such as sharing faculty members in specialized fields and cooperative research projects could result. Without question better use of faculty, classroom facilities, and equipment would result in considerable economic saving to the government.

The changes in the techniques of administration in this college during the past five years have been most encouraging. The effective leadership of the Dean in committees and with the faculty at large as witnessed by advisers attests to the democratic processes now in force in

this college. Academic freedom is assured the faculty.

In this developmental period of reorganization and rebuilding following the Korean War, the faculty of the College have at times disregarded administrative policies, but an appreciative sense of responsibilities to themselves, to others, and to the university within such an organization as this college is emerging. The independence of the various departments that has been characteristic of the administrative system in the past is changing gradually to one of interdependence. Such a change cannot occur rapidly as the staff accepts the new pattern of operation, step by step, evaluating the security of their new position after each change. This method of change is slow but, if accepted, should be lasting and firm.

The relationships between faculty members and scientific organizations are excellent. The faculty should continue to contribute to the growth and development of strong, active scientific groups which have as their objectives improvement of the practice of medicine in Korea.

Organization of Faculty

The Dean proposes the appointment or promotion of faculty members to the Personnel Committee for discussion. He may and usually does discuss his proposals with the department head concerned prior to presentation to the committee. With or without the committee's approval he presents the matter to the Faculty Meeting in which a secret ballot indicates either their approval or disapproval. In either case, according to his own determination he makes his recommendation to the University President for approval at higher governmental levels.

Official faculty positions are designated professor, associate

professor, assistant professor, instructor, and assistant. Authorized table of organization positions with existing ranks indicated in parentheses are professors 30 (27), associate professors 19 (21), assistant professors 18 (17), instructors 22 (27), and assistants 13 (9). Appointment and promotion to the professorial ranks must be approved by the Ministry of Education and the President of the Republic. Instructors and assistants require approval of the President of the University and are reported to the Ministry of Education. All appointments are made for indefinite terms.

The faculty of this college is not organized officially except as individual members of the Faculty Association of the University. Professors and instructors are eligible for membership. The association elects its officers and frequently one or more of this college faculty is elected to serve as an officer.

The following committees function in this college:

1. Faculty Meeting. This is in fact a large committee comprised of all faculty members with rank of assistant professor, associate professor, and professor. The Dean chairs this committee and it is the most powerful force in the administration of the college. In fact this committee elects the dean from names proposed by the president; therefore he owes his position to this group. All policies and business of the college may be and most often are discussed at these meetings.

2. Rehabilitation Committee, chaired by the Dean

Myung, Choo Wan, Professor, Psychiatry
Kim, Dong Ik, Professor, Internal Medicine
Chin, Byong Ho, Professor, Surgery
Rhee, Kook Choo, Professor, Pediatrics
Nam, Kee Yong, Professor, Physiology
Lee, Chan Bum, Associate Professor, Surgery
Oh, Jin Sup, Professor, Pharmacology
Kim, Sung Hwan, Professor, Dermatology and Hospital Superintendent
Lee, Chae Koo, Professor, Pathology
Shim, Sang Hwang, Professor, Preventative Medicine
Lee, Seung Hoon, Associate Professor, Pathology
Hahn, Shim Suk, Professor, Internal Medicine

This committee plans for and approves rehabilitation projects and procurement of all equipment under the aid program.

3. Library Committee

Lee, Myung Bok, Professor, Anatomy, Chairman
Lee, Sung Ho, Professor, Internal Medicine
Hong, Chang Hee, Assistant Professor, Pediatrics
Shim, Bo Sung, Instructor, Surgery
Kim, Chul, Professor, Physiology
Ro, Byung Ho, Associate Professor, Internal Medicine
Seo, Byong Seo, Associate Professor, Parasitology

This committee is responsible for policies governing the operation of the library.

4. Isotope Committee

Nam, Kee Yong, Professor, Physiology, Chairman
Lee, Ki Young, Professor, Biochemistry
Chin, Byong Ho, Professor, Surgery
Lee, Sung Ho, Professor, Internal Medicine
Choo, Tong Woon, Associate Professor, Radiology
Kee, Ryong Sook, Professor, Microbiology
Hahn, Shim Suk, Professor, Internal Medicine
Kang, Seung Ho, Professor, Internal Medicine
Lee, Mm Ho, Assistant Professor, Internal Medicine

The use of radioactive materials anywhere in the college is governed by the policies and regulations developed by this committee.

5. Editorial Committee

Kim, Suk Whan, Professor, Obstetrics and Gynecology, Chairman
Chang, Shin Yo, Associate Professor, Anatomy
Kang, Sok Yong, Assistant Professor, Internal Medicine
Kim, Hong Sik, Assistant Professor, Dermatology
Kim, Chul, Professor, Physiology
Lee, Sung Soo, Associate Professor, Pathology
Paik, Man Kee, Assistant Professor, Otolaryngology

This committee is the editorial staff for the official publication of this college, the Seoul Medical Journal.

5. Premedical Course Committee

Kim, Hong Kee, Assistant Professor, ENT
Lee, Seung Hoon, Associate Professor, Pathology
Kwon, E. Hyock, Assistant Professor, Preventive Medicine
Lee, Tong Kee, Professor, Pediatrics
Lee, Zin Soon, Associate Professor, Biochemistry

These five members serve with the five staff members of the College of Liberal Arts and Sciences to recommend administrative and educational policies governing the premedical course.

7. Medical Museum Committee, Chaired by the Dean

Yun, Won Sik, Associate Professor, Ophthalmology
Lee, Sung Soo, Associate Professor, Pathology
Lee, Yong Taik, Assistant Professor, Medical History
Seo, Byong Seo, Assistant Professor, Parasitology
Chang, Shin Yo, Associate Professor, Anatomy
Nam, Myung Suk, Associate Professor, Psychiatry
Hong, Sa Ack, Assistant Professor, Pharmacology

The development of a medical museum has high priority as a needed teaching aid. All museum pieces were destroyed during the Korean War.

8. Curriculum Committee, Chaired by the Dean or Assistant Dean of Academic Affairs.

Chun, Chong Hwee, Professor, Internal Medicine
Kim, In Dal, Professor, Preventive Medicine
Lee, Seung Hoon, Associate Professor, Microbiology
Lee, Zin Soon, Associate Professor, Biochemistry
Rhee, Dong Shik, Instructor, Anesthesiology
Lee, Ho Wang, Instructor, Microbiology

Choo, Kun Won, Associate Professor, Urology
Shin, Han Soo, Associate Professor, Obstetrics & Gynecology
Lee, Yung Kyoon, Associate Professor, Surgery
Kim, Eung Jin, Associate Professor, Internal Medicine
Kim, Jae Nam, Instructor, Anatomy

9. Personnel Committee, Chaired by the Dean.

The Superintendent of the Attached Hospital and the Assistant Dean of Academic Affairs are ex officio members.

The other members of the committee are named anew for each meeting called so that half the membership is new at each meeting.

All matters pertaining to personnel, both academic and general affairs, are discussed by this committee.

10. Scholarship Committee

Members of the Alumni Association serve with the faculty on this committee.

Dean

Assistant Deans

Alumni: Kim, Yee Jung, Cho, Hong Jae, Park, Doo Byung

Lee, Hak Song, Professor, Urology

Hahn, Shim Suk, Professor, Internal Medicine

Kim, Suk Whan, Professor, Obstetrics & Gynecology

Kim, Dong Ik, Professor, Internal Medicine

Kim, In Dal, Professor, Preventative Medicine

The Dean makes all appointments to these committees and the term of appointment is indefinite. (Every four years the newly elected Dean appoints new committee members.)

The Faculty Meeting is not regularly scheduled but meets as often as the urgency of business requires. Other committees also have no regular schedule but meetings are called by the chairman when business dictates.

In this culture the elder members of the faculty jealously guard their prerogative of seniority in all aspects of the educational program. The younger members of the faculty have few changes to contribute except in their teaching and research and then only if they finance their own re-

search. In some departments the senior members welcome and encourage the active participation of younger members but unfortunately in other departments this is not the case. The administration of the college is aware of the excellent contribution that can be made by the entire faculty. To encourage this, the Dean has raised some support for research projects proposed by junior members of the faculty.

The instructors and assistants in this college have organized unofficially to discuss the program of the school. Their officers discuss their thoughts with the Dean. Thus far, this younger group has found their meetings helpful in developing perspective of the educational program. Learning to work together now will pave the way for greater interdepartmental cooperation in the future when these men are senior faculty members.

The nine basic science departments and ten clinical departments do not render annual reports.

All terms of appointment are indefinite but in reality appointment to a table of organization position is tantamount to tenure. Discharge of personnel, either academic or general affairs, is a complicated procedure that requires investigations and hearing up through the University and Ministry. Personnel who are considered for dismissal from the faculty are urged to resign in order to by-pass the procedure of preferring charges and conducting hearings.

Recruitment of faculty is chiefly a matter of promoting a promising graduate student to a faculty position. Recruitment of faculty from scientists who graduated from schools other than Seoul National University and who did not pursue some graduate work in this College is rare. Promotions are usually based on time in grade, teaching and research accomplishments, and recommendations by the department head.

Regulations of the national government require the faculty to lecture at least nine hours a week. This requirement perpetuates the emphasis on didactic teaching and prohibits reasonable curriculum changes. It also works in another way; some faculty members feel no obligation to be at the college more than the nine hours required to meet this stipulation. The administration may approve a faculty member teaching part-time at another university. This practice is followed by but a few members of this college.

A review of the table in appendix I illustrates the magnitude of the main phase of this project, that of providing a large number of faculty with educational experience abroad. Under the auspices of this contract 77 faculty members studied in their fields at the University of Minnesota or at other institutions offering studies not available at Minnesota. This number included 62 physicians, 9 nurses, 1 hospital administrator and 1 dietitian. At the close of this contract on June 30, 1961 sixty-one will have returned to Seoul National University and 16 will be continuing their studies abroad to complete their planned program. Through the institution of new knowledge and techniques in teaching, research, and administration, the staff of this college has made commendable progress in upgrading medical education and medical care. Research has been stressed through the years by this faculty and continues to receive emphasis.

COMMENT: The faculty of this college have been well prepared to conduct an educational program of modern, scientific medicine. The faculty is relatively young and the present leadership of senior members will continue for another ten to fifteen years. The general attitude of the faculty has supported the changes that have come about, for without their support no change could have occurred.

The faculty size seems appropriate for the responsibilities now assumed but if in the future an integrated medical center obligates the medical college to increase its teaching in basic sciences, these departments will need additional staff.

Currently the low salaries and the required minimum lecture load contribute to a situation in which many of the faculty seek income by engaging in additional teaching or the practice of medicine. Because of diversion of their talents to additional employment, the faculty cannot be considered full-time. If every member actually worked a full five-and-one-half-day week at this college, the faculty strength at present would certainly be adequate.

In the future it should not be necessary for all young faculty members to train abroad. The excellence of present faculty members should be the core to train scientists at Seoul National University. Only selected, superior staff in certain departments should receive training abroad to provide strong leadership in the faculty about twenty-five years hence.

Budget and Finances

The College of Medicine has no endowment to speak of; a few million hwan given as scholarship endowment is invested and managed by the college dean.

The current national budget (1961) totaling 99,524,100 hwan provides for the following items (official exchange rate Hw 1300 : \$1.00):

01 Salaries for academic positions (104)	Hw 71,866,700
02 Salaries for general affairs personnel	6,390,000
03 Overtime for 02 personnel and part-time instructors	4,825,500
04 Travel	9,900
07 Utilities and drayage	6,245,900

08 Maintenance of buildings and laboratory equipment	Hw 3,809,400
09 Expendable supplies and printing	5,707,000
10 General equipment procurement	668,800

The administration does no internal budgeting with these funds. The budget is obviously inadequate but each year a small increase has been approved; in 1954 the total was only 31,597,543 hwan. The increase in 1961 was negligible because with the 11,500,000 hwan increment, the college absorbed responsibility for the School of Nursing which had been independently budgeted for previously.

Students must pay the following tuition and fees each semester:

Tuition	Hw 15,000
PTA	29,000
Laboratory fee	21,000
Student Activity fee	1,200
Newspaper fee	1,700
Health Service fee	500
	<u>Hw 68,400</u>

The only funds accruing to the college are laboratory fees and a percentage of the PTA fee. The Dean exercises control of the PTA fund with the approval of the college PTA officers. The laboratory fees are prorated on the basis of 20% straight-across-the-board to each department. The remainder is divided between departments teaching each class during the semester and apportionment is based on the number of hours each department teaches. This is applicable to the clinical departments as well as the basic science departments. No consideration is given to the fact that certain laboratories are more expensive than others.

Other fees are dispersed to the agency indicated and the tuition fee is paid to the Ministry of Finance as required by law.

No exact figures are available indicating the support of research in the college. The Atomic Energy Commission of the Republic of Korea has granted research support to this College and to various individual investigators for the past few years. In 1961 the Commission granted a total of 6,800,000 hwan to twelve faculty members for individual projects and 4,400,000 hwan as an institutional grant. Through counterpart funds the College, Hospital, and School of Nursing received unrestricted research funds in the amount of 3,475,000 hwan last year. One faculty member received a five-year research grant in the amount of \$50,000 from the United States Public Health Service. Two others have received support from the Damon Runyon Fund.

The Dean has regularly submitted a request for a more adequate budget but the economic condition of the government has limited the amount approved. The University headquarters represents the College in negotiating the budget with the Ministry of Education; the college officials have no opportunity to discuss the budget with the Ministry or National Assembly.

The government regularly audits the financial records of the college that pertain to national funds.

COMMENT: The dollar equivalent of the annual national budget to support the College of Medicine and the School of Nursing is \$76,564. The Attached Hospital is budgeted separately. A medical school of similar size in America would have a budget of at least \$1,500,000. In the early 1940's before liberation, the budget was more adequate but the slowness of economic recovery in Korea has precluded more gains. The budget for utilities is so small that the central heating system cannot be used in the winter months. Only minor maintenance can be conducted with an annual budget of \$3,000. In fact all items are inadequately budgeted.

The salaries for the staff are no more than one-tenth the amount a practicing physician earns in Korea. The government cannot expect its professors to accept such differential. Provisions for the private practice of medicine in the Attached Hospital will provide the clinical staff with means to raise their income and at the same time they will be able to spend a full work day at the hospital. Perhaps when this system is working some agreement can be reached to increase the salaries of the basic science staff also.

This adviser believes that the College of Medicine with its well trained staff, its excellent equipment for teaching, patient care, and research, and present physical plant can only continue its high standards if its budget is increased according to the demands made of the College.

Only when the government decides that it should support this college and this university, as a matter of fact, to provide this nation with an outstanding center for learning and research comparable to the leading university of any nation will the necessary funds be provided.

Students

All students entering this College are initially admitted to the Pre-medicine Course in the College of Liberal Arts and Sciences. Students do not take their premedicine courses in other schools. Admission is by competitive examination and interview. The Premedicine Course Committee comprised of 5 faculty members from each of the two colleges concerned conducts the examination and interview; this committee also plans the pre-medicine curriculum. The administration gives preferences for admission to sons and daughters of faculty members. Each year the university admits approximately 120 students to the premedicine course. If successful in the two-year premedicine course, admission is automatic to the four-year medicine course.

The number of students in each class this year is:

<u>Class</u>	<u>Men</u>	<u>Women</u>	<u>Total</u>
Premedicine			
1st year	129	3	132
2nd year	123	2	125
Medicine			
1st year	121	2	123
2nd year	133	3	136
3rd year	126	5	131
4th year	118	7	125

Attrition is minimal. In fact the selection process for continued study beyond primary grades in the Korean educational system provides students of high intellectual ability for university study. Weaker students are eliminated by middle and high school examinations.

Dismissal from medical school for academic reasons is rare. Make-up examinations and repetition of courses are utilized to bring students up to minimal standards. In this college at the end of the 1960-61 school year, 5 freshmen and 6 sophomores were failed. One sophomore who failed for the second time was dismissed from the College; the other ten were permitted to repeat the curriculum year they failed.

The faculty Meeting discusses students in scholastic difficulties and decides on conditions required for the student to continue his studies.

Student loans were not available until 1960; a national loan program was instituted. A good scholarship program provides help for students. This year individual gifts to the college increased considerably.

The College Scholarship Committee is permitted to grant tuition scholarships to 10% of the student body basing their decision on scholastic achievement and need. The following additional scholarships have been granted this year:

<u>Grantor</u>	<u>Number</u>	<u>Amount Per Scholarship</u>
Ministry of Health and Social Affairs	11	Hw 200,000
College of Medicine	32	40,000
Industrial firm (Samil)	4	300,000
Private business (H. Hahn Found.)	1	200,000
Industrial firm (T.J.S.)	4	156,800
World University Service	2	50,000
Research Center of Social Service Workers	1	30,000
Industrial firm (Sam-Song Found.)	5	60,000
National Scholarships	5	100,000
SNU Headquarters' Fund	3	80,000
SNU Headquarters' Fund	1	320,000
Veterans' Scholarship	2	80,000
Provincial Scholarship	1	10,000
Industrial firm (V. Co.)	1	100,000
Rotary Club	1	100,000
Medical Alumni Association	4	80,000
Private citizen contribution	1	156,800

Thus far six students have borrowed Hw200,000 and four Hw150,000 through the national loan scholarship fund.

Each class has elected representatives and the College student body is organized as a whole. The College provides two rooms on the college library floor for the student organization. Various social and cultural activities are sponsored by the students; some funds from the student activity fee are available for use. The Assistant Dean of Student Affairs is the chief counsellor.

No general university departments or services are available to students. The only lounge room available to medical students is in the library and adjacent tea room. A lunch room in a temporary structure is inadequate in size, sanitation, and quality of food. Locker rooms are usually associated with each basic science department and in the hospital students have lockers adjacent to the amphitheaters.

No dormitory facilities are available. The university exercises no control over living conditions of students in this college.

Entrance physical examinations are mandatory. Observation this year of the examinations proved them to be well organized and thoroughly done by the staff of this college. Subsequent examinations such as chest x-rays are required in the student health service but unfortunately the university does not enforce its policies. A large percentage of students failed to report for their annual chest x-ray this year. The student health service program is primarily preventative medicine and not a curative or treatment service except for minor illnesses. Students requiring treatment can obtain this at the University Hospital at a discount rate.

Few recreational facilities exist for students except open areas on the campus where soccer, basketball, and other sports are enjoyed. Koreans like to participate in sports and the college is active in the intercollegiate sports program within this university.

The orientation of new students provides talks explaining the curriculum, various college regulations, the use of the library, and the importance of scholarship. The staff present at the orientation are introduced and the students tour the center. Soon after school begins the new students are invited by the staff to a welcome picnic.

The administration feels an obligation to place all its graduates in the best internships in Korea. Many graduates intern in the armed forces; about half intern in non-military hospitals. Graduates in March 1961 are now engaged in the following activities:

Serving in the armed forces:

Army	40
Navy	14
Air Force	8

Interning in non-military hospitals: 55

Styding abroad: 1

Fifteen graduates are unaccounted for at this date; probably a few entered private practice.

No faculty advisers are designated for the students; however, most of the students usually find a faculty member whom they can confide in and seek advice. Korean culture traditionally obligates the student to his teachers for their services to him. He respects them and gives them recognition. But despite this many students say they do not feel that they can freely contact the faculty for assistance or counselling.

The medical college office maintains student records as does the University Headquarters which issues official transcripts.

Most students want to continue their studies in a specialty area after they graduate receiving the Haksa degree (Bachelor degree in medicine). Although the Ministry of Health and Social Affairs recognizes specialists, the traditional recognition is the Paksa degree (Ph.D.). Only through continued study in a graduate program in a university can the student earn this degree therefore many apply to university programs. A large number of Korean physicians have trained in America; some received certification by American Specialty Boards; others only qualified.

Since the Educational Council for Foreign Medical Graduates conducts a world-wide examination to evaluate the fundamental medical knowledge and comprehension of English of those physicians wanting to study in America, the senior class of 1961 in this college were encouraged to take the examination. The results as reported by the class indicate that over 90% of those taking the examination passed on their first attempt. This is certainly

superior to the international average and to previous results obtained by Koreans. It supports our observations and impressions that medical education has been upgraded significantly in this college since the return of the faculty from their studies abroad.

COMMENT: There is no doubt that Seoul National University attracts students of the highest ability. The changes in methods of teaching and examining in this college are challenging to the students. They are accepting the challenge and are finding deductive inquisitiveness a fascinating and satisfying approach to scientific knowledge.

Enforcement of standards of quality of performance is commendable. The faculty is keenly aware of the need for continued emphasis of quality of work. The recent success of graduates in passing the ECFMG examination is indicative of the improved teaching in this college.

A college such as this one which admits students of such proven high ability has an obligation to develop the human resources of this Nation to insure its continued growth and development. This is accomplished not only by the faculty's sincere dedication to teaching and investigation but much will be gained through the superiorly trained physicians graduated who will render medical care to the people. The faculty is urged to periodically evaluate their performance in teaching and acknowledge their obligation to the students.

The university should provide more services for its students. Increased scholarship and loan support for this college's students is encouraging. The Dean as well as members of the faculty are active in trying to raise more contributions.

Plant and Equipment

The main College building is a three-story rectangular building with a fourth-floor library addition on one of its long sides. This building houses the administrative offices, the departments of physiology, pharmacology, anatomy, pathology, medical history, parasitology, microbiology, and preventative medicine. The head of pharmacology is also Director of the Drug Institute which is an independently budgeted unit but is housed in the pharmacology section. Four student laboratories, two with 3,500 square feet and the others half this size, are in this building. Each major department has approximately 25 rooms for offices, laboratories, storage, and seminar room with a total floor space exclusive of corridors and toilet rooms of approximately 6,500 square feet.

The Department of Biochemistry has its own two-story building with more than adequate space for teaching and research.

The gross anatomy laboratories, necrosy room for teaching in pathology, medical museum rooms, and a few offices are in another building. Two lecture buildings provide three class rooms seating 150 students each for didactic teaching.

An animal house, distillation room, green-house, toilets, garage, boiler house, guard house, incinerator, and two small warehouses comprise the other buildings in the area.

The major buildings are well constructed with tile covered brick and cement. A large auditorium (400 seats), terrazo flooring, water system, new roofs, electrical system rehabilitation, interior painting, redesign of laboratories, library and plumbing are a few of the rehabilitation accomplishments under this contract. Maintenance of the physical plant, a responsibility

of the government, has not been adequately financed as evidenced by the meager budget. Unfortunately no central university maintenance policy or service exists and each college must plan and execute its own maintenance program.

Under the contract, ample movie projectors, slide projectors, opaque projectors and microprojectors have been provided.

Because of the cost of operation, the central heating facilities are not used. In the winter classrooms and laboratories are not heated. In individual offices coal stoves are installed each year as winter approaches.

The supply of electricity by the commercial company in Seoul is inadequate leaving the school without electricity for a few hours daily or even for full days. The wiring of a 60KW generator at the Attached Hospital to serve the college has insured a constant, although inadequate, supply of electricity. Thus research and laboratory exercises can now be carried on without interruption.

Without heat in the winter, the water system is shut off as the pipes freeze and break. This inconvenience cannot be overcome until the central heating functions.

Re-equipment of the basic science departments has been a major aspect of this contract. Approximately \$200,000 worth of teaching and research equipment and supplies have been purchased. Laboratories are reasonably well equipped now to meet requirements for teaching. Unfortunately maintenance and replacement of wornout equipment which is the responsibility of the government has not been possible due to the inadequate national budget. Presumably the government, cognizant of the assistance being rendered under this contract, did not see fit to provide funds for maintenance and replacement. With the

end of the contract, it will be essential that the budget provide for this important aspect of maintaining the basic tools necessary for teaching.

The rehabilitation of the physical facilities has not been completed. Although much has been done, a number of important projects still remain to be programmed. The following projects need to be financed by some means:

Remodeling of Audiovisual Rooms	6,000,000
Repairing Outside Wall	62,532,000
Repairing of Medical Museum	11,035,000
Install Steel Sash Windows	64,719,000
Painting of Entire Building	32,487,000
Remodeling Seminar Rooms (8)	19,256,000
Repairing of Sewerage System	6,560,000
Screen Window Installation	5,350,400
Fire Fighting System	9,880,000
General repairs to annex buildings:	
Boiler Room	1,980,000
Incinerator	2,598,000
Guard Room	525,500
Amphibian Farm	1,062,000
Distillation Room	595,000
Student Dining Room	2,786,000

COMMENT: The lack of adequate financing by the national budget is the chief cause of deficiencies in maintaining the physical facilities and equipment. Now that this contract will no longer be assisting the college it is imperative that the budget provide adequately for this phase of the college program.

Present physical facilities provide adequate space for the college. No new buildings are needed in the near future but continued rehabilitation is necessary.

The lack of dependable electricity in the amount required and the lack of money to pay for this utility impede the teaching and research programs. Without sufficient coal to heat the college both teaching and research are interrupted in the winter months.

The faculty is to be commended for their ingenuity in partially overcoming the obstacles that are created by inadequate physical facilities, utilities, and maintenance.

Library

Located on the fourth floor of the main college building is a new addition, the college library. In this area is a large reading room with a seating capacity of 150 at study tables, a fire-proof bound-journal room, a current journal reading room, student activities room, staff conference room, and a tea room. The library committee regulates the operation of the library. One untrained library clerk is employed. Students work in the evenings to keep the library open. Students have access to all parts of the library.

Currently 160 subscriptions to scientific journals from contract funds (these will be continued through 1964), 30 from the China Medical Board (granted on a year to year basis) and 36 through exchange services are received. The administration establishes no budget for the library but provides funds for binding as needed.

All journals are bound. Currently the library acquisition records indicate the possession of 4,116 monographs and 36,948 volumes of bound journals. Many back issues of important journals have been procured through the China Medical Board and the ICA/Minnesota contract.

Because the library is removed from the hospital by a distance of one block, the library cooperates with the library in the hospital by keeping acquisition records and furnishing the hospital library duplicate books and clinical journals. The School of Nursing library is a part of the College library but is housed in the School building. Most departments maintain limited libraries with their personal journals and books.

The library currently is tracing any journal which is not received within a reasonable period of time by writing directly to the publisher. The library committee requested a survey of the use of the various journals and on the basis of the findings eliminated about ten journals from the subscription renewal request.

COMMENT: The college now has excellent library facilities and the most complete collection of modern medical literature in Korea. It is indeed one of the greatest assets of the college. Unfortunately the administration has not as yet employed a trained librarian to organize and supervise the operation of the library. A private university in Korea graduates majors in library science and the college should be able to employ a graduate of this course. Special training in America is not essential.

The annual dollar value of subscriptions is about \$4,000. The college should be planning to assume full responsibility for this expenditure beginning in 1965.

A continuing survey of the use of journals will determine which ones are never or rarely used. Although difficult but in view of the expense involved in continuing subscription to infrequently used journals and recognizing the value of extensive coverage, I recommend that the five medical schools in Seoul enter a cooperative affiliation to maintain at least one subscription of each journal. If each school subscribed to its share of infrequently used journals the expense would not be too burdensome and the journals would be available on a loan basis to any of the other libraries.

This college's current journal room is frequently used by the staff and graduate students of the other medical schools. Such cooperation, if abuses of privileges do not occur, is the role of a government supported institution.

Curriculum

The curriculum of this college is adjusted frequently to take advantage of improvements that come about. Didactic teaching is stressed less today than five years ago. Two main factors have encouraged this: the faculty have observed the curricula of many American medical schools and are convinced of the importance of laboratory and clinical experiences for students, and students today have better command of English so can utilize textbooks for study and not depend on lecture notes.

Few textbooks in the Korean language are available. Students today do not know Japanese so they can not use texts from Japan. Textbooks from America, many Asian editions of these texts, and pirate editions printed in the Far East provide students with ample material in English. A few departments continue to provide mimeographed Korean translations of English texts but this practice is becoming unnecessary.

A major addition to the curriculum is the weekly interdepartmental lecture. The subjects for these lectures were planned for a two-year period to prevent needless duplication of material presented. Each week an appropriate senior faculty member is in charge of the lecture; he plans the lecture to include in the 90-minute period several short presentations by faculty members from the various departments concerned primarily with the subject being discussed. This conference provides the students and faculty an opportunity to integrate the various disciplines, both basic science and clinical science, in the consideration of the disease entities. Needless to say, it encourages cooperation and exchange of ideas between departments.

The curriculum committee requires each department to report the subject matter or the laboratory exercise or clerkship and teacher for every hour

assigned to the department. A review by the committee eliminates excessive repetition of subject matter.

An example of the type of analysis of the curriculum conducted by departments is illustrated in Appendix II. An example of a clerkship schedule is also included in Appendix III.

Most departments are energetic in preparing audiovisual aides for teaching. A deficiency of gross pathological specimens has not been met but with the increasing necropsy rate, the staff should be able to restore its collection. Microscopic slide collections for teaching are constantly being improved.

Both objective and essay examinations are used; many are given in English.

The subjects and hours of work for each year of the medical course are:

<u>FIRST YEAR</u>			
<u>Subject</u>	<u>Number of Lecture Hours</u>	<u>Number of Laboratory Hours</u>	<u>Total Hours</u>
Gross Anatomy	160	256	416
Histology	112	128	240
Embryology	32		32
Physiology	128	128	256
Biochemistry	112	128	240
Medical History	32		32
<u>SECOND YEAR</u>			
Microbiology	112	128	240
Pharmacology	96	128	224
Preventative Medicine	96	128	224
Pathology	144	256	400
Surgical Anatomy	16		16
Parasitology	32	64	96
Physical Diagnosis	40		40
Principles of Surgery	32		32
Laboratory Medicine	16		16

THIRD YEAR

<u>Subject</u>	<u>Number of Lecture Hours</u>	<u>Number of Other Hours</u>
Radiology	32	
Surgery	72	864 clerkship hours
Pediatrics	32	
Ophthalmology	16	
Psychiatry	32	
Internal Medicine and Neurology	96	48 Interdepartmental Lecture Hours
Urology	16	32
Otorhinolaryngology	16	CPC hours
Obstetrics & Gynecology	40	
Dermatology	16	
Clinical Pharmacology	8	

FOURTH YEAR

Urology	16	
Internal Medicine	88	
Oral Surgery	8	864 Clerkship hours
Otorhinolaryngology	16	
Psychiatry	8	32 Interdepartmental Lecture hours
Dermatology	16	
Epidemiology	16	32
Obstetrics and Gynecology	32	CPC hours
Ophthalmology	16	
Surgery	64	
Pediatrics	32	
Psychiatry	8	
Medical Regulations	8	
Forensic Medicine	8	
Anesthesiology	8	
Elective lectures	32	

COMMENT: The faculty and administration have acted to take advantage of opportunities to improve the curriculum. Despite the government regulation requiring each member to lecture 9 hours a week and the common practice of budgeting funds on the basis of teaching hours assigned a department, progressive curriculum changes have been made.

The prospect of having Korean medical texts within the next ten years is poor. Emphasis on English is to be encouraged as texts and modern scientific journals in the library are predominately English.

Audiovisual aids including slides, movies, flip charts, and microscopic projectors have helped immeasurably in improving presentation.

Clinical Facilities

The Attached Hospital of Seoul National University is the university owned and operated clinical facility. A subsequent section of this report describes the hospital in detail.

Other hospitals in Seoul utilized for training of students and residents are:

- a) National Medical Center (capacity 465 beds). In 1959, 4056 patients were admitted and 11,777 outpatients were treated. In 1960 student physicians from this college began clerkships in this center. Assignments are for too short a time for maximum educational benefits but I anticipate a revision of the schedule by the curriculum committee as they seem to recognize the advantage of having affiliations like this one.

Scandinavian doctors at this hospital hold clinical academic appointments and teach both in the center and at Seoul National University. This hospital's objective besides caring for indigent Koreans is to train Korean physicians in specialty areas. Without affiliation with a university it has been difficult to attract the most competent physicians for residencies as more prestige and status accrues to those with advanced degrees. The officials of National Medical Center and of this college have discussed the desirability of affiliation for graduate education. It is my opinion such an arrangement would be mutually beneficial.

- b) Seoul Electric Hospital (capacity 180 beds). Admissions numbered 910 in 1959 and 12,229 outpatients were seen. The college assigns both residents and students to this hospital. The staff hold clinical appointments in this college.
- c) Sodo Army Hospital (capacity 300 beds). This hospital is officially the property of Seoul National University but is leased to the Republic of Korea Army. Some of the medical officers at this hospital hold clinical teaching appointments at this college and medical students are assigned to the army hospital for clerkship.
- d) Noryangin National Veterans Mental Hospital (capacity 150 beds). Students clerkships are scheduled at this hospital also.
- e) Central Health Center, Seoul City. This unit is utilized by the Department of Preventative Medicine for field trips for sophomore students.

Postgraduate Program

The postgraduate program in medical sciences is administered by the Graduate School. The professorial faculty members of the College of Medicine are members of the Graduate School faculty. Two degree programs are offered: Soksa (Master's) and Paksa (Ph.D.). Candidates usually earn the Soksa degree before they may work towards the Paksa degree. Graduate students must pay tuition and fees as other students do.

The curriculum is very flexible and the candidate's research is emphasized. This is true even in the clinical fields of medicine to the extent that a candidate usually has little clinical experience at the time he receives his doctorate.

Since a member of the graduate school faculty receives additional remuneration based on the number of graduate students working under his direction, some faculty members accept too many graduate students. Certainly the clinical material available in the Attached Hospital does not warrant such a large graduate student body as is currently registered in the clinical fields. A good number of the graduate students maintain private practices of medicine at their homes during the early morning and evening hours.

The following number of students are pursuing graduate studies in the departments indicated but some are not registered in the graduate school:

Dermatology	7	Anatomy	6
Surgery	43	Pathology	6
Internal Medicine	52	Microbiology	3
Pediatrics	14	Preventive Medicine	11
Urology	8	Parasitology	1
Otorhinolaryngology	7	Pharmacology	4
Ophthalmology	7	Biochemistry	15
Radiology	8	Physiology	7
Psychiatry and Neurology	5		
Obstetrics & Gynecology	36		

COMMENT: The postgraduate program should be studied carefully to improve its quality. The Paksa degree is the highest degree that can be earned in Korea and if it is to maintain its significance, the qualifications demanded of each and every candidate must distinguish him as a scholar and scientist.

The practice of remunerating the faculty on the basis of the number of graduate students under his tutorage should be discontinued. A maximum number of students per faculty member should be enforced. Certainly in the clinical areas of medicine the number of graduate students needs to be limited by the opportunities for clinical experience in the teaching hospital. The Paksa degree in a clinical field should attest to the physician's competence in his clinical field as well as in his research area.

Other Educational Programs

Each summer the college offers a course for medical technicians. It lasts for three months and permits high school graduates to study in one of five areas: x-ray, biochemistry, microbiology, pathology, or parasitology. The fee is Hw 15,000.

The Ministry of Education recently indicated that a medical technology course would be approved at Seoul National University and asked for detailed plans of such a course. I urged the college not to seek this authorization unless additional staff and financial support were assured.

Each summer the college also offers a week's refresher course to practicing physicians. A fee of Hw 20,000 is charged. Each clinical department, if the staff agree to hold such a course, plans its own program using its staff as teachers. The enrollment is limited. Advanced planning and advertising is done poorly.

COMMENT: This center of medical education should certainly offer courses in the paramedical fields of x-ray technology and medical technology. The need for well trained technicians in the practice of medicine and in hospitals will be greater as the quality of care improves. But this college cannot afford to institute such a course without at least one full-time staff position and an annual budget sufficient to procure equipment and supplies.

Continuation courses for practicing physicians could be a valuable service rendered by this college. But to be successful the planning must be executed well in advance of the date offered, the proposed course of study should be well advertised through medical presses, and the best qualified teachers in Korea should present the subject matter. This type of course offers an opportunity to bring other universities' faculty to this campus.

Attached Hospital, Seoul National University

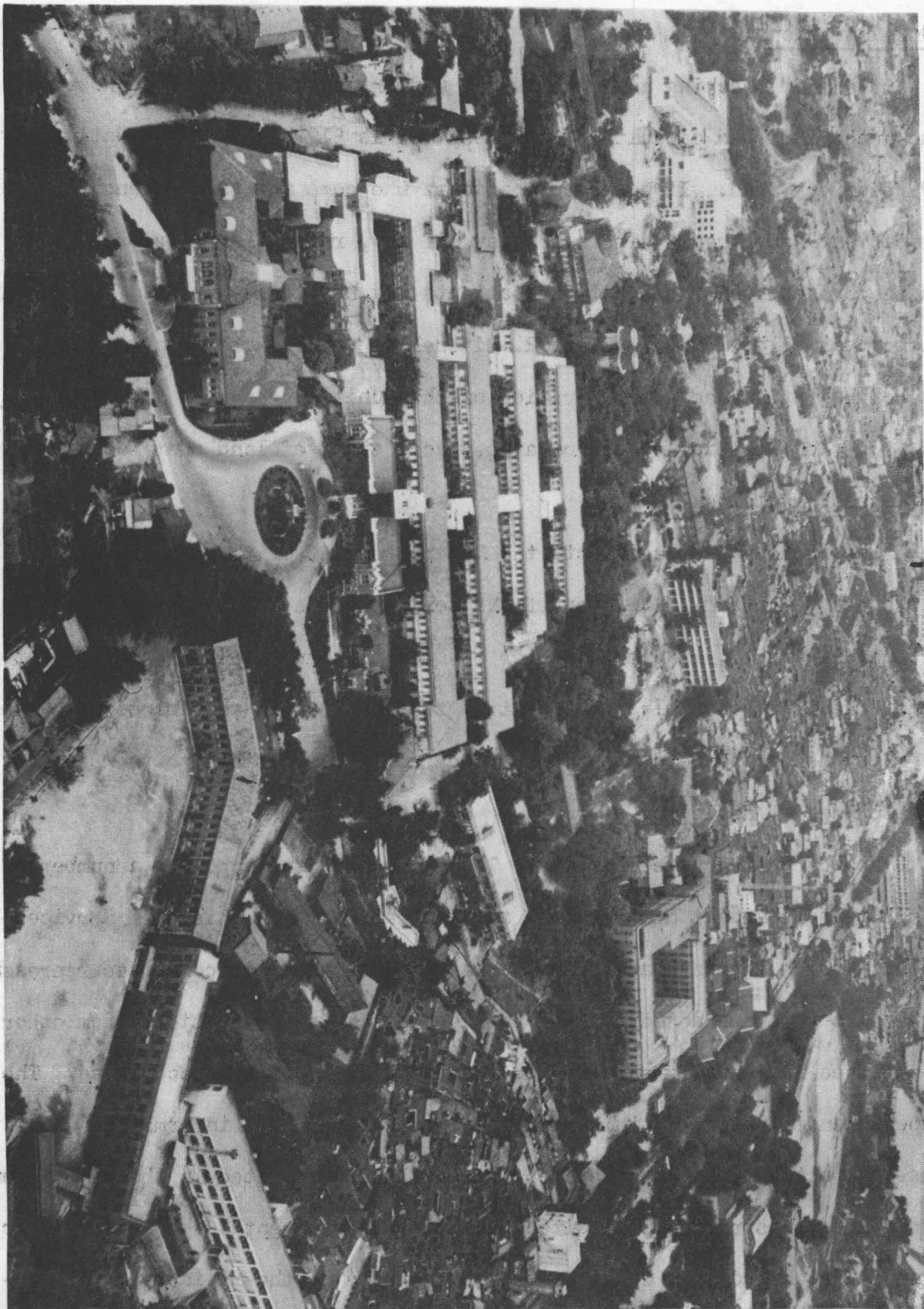
Administration

The main teaching hospital is the university owned Attached Hospital. The authorized bed capacity of the hospital is 519 beds but currently only 399 beds are used. It cares for patients who come to its Emergency Room or Outpatient Department. There are few, if any, referrals. Doctors do not charge professional fees but the patients pay hospital charges. The hospital's history is related in Mr. Glenn R. Mitchell's report which deals mainly with the organization and administration of this unit.

The hospital is located on a 36.5-acre tract of land contiguous with the College of Medicine land.

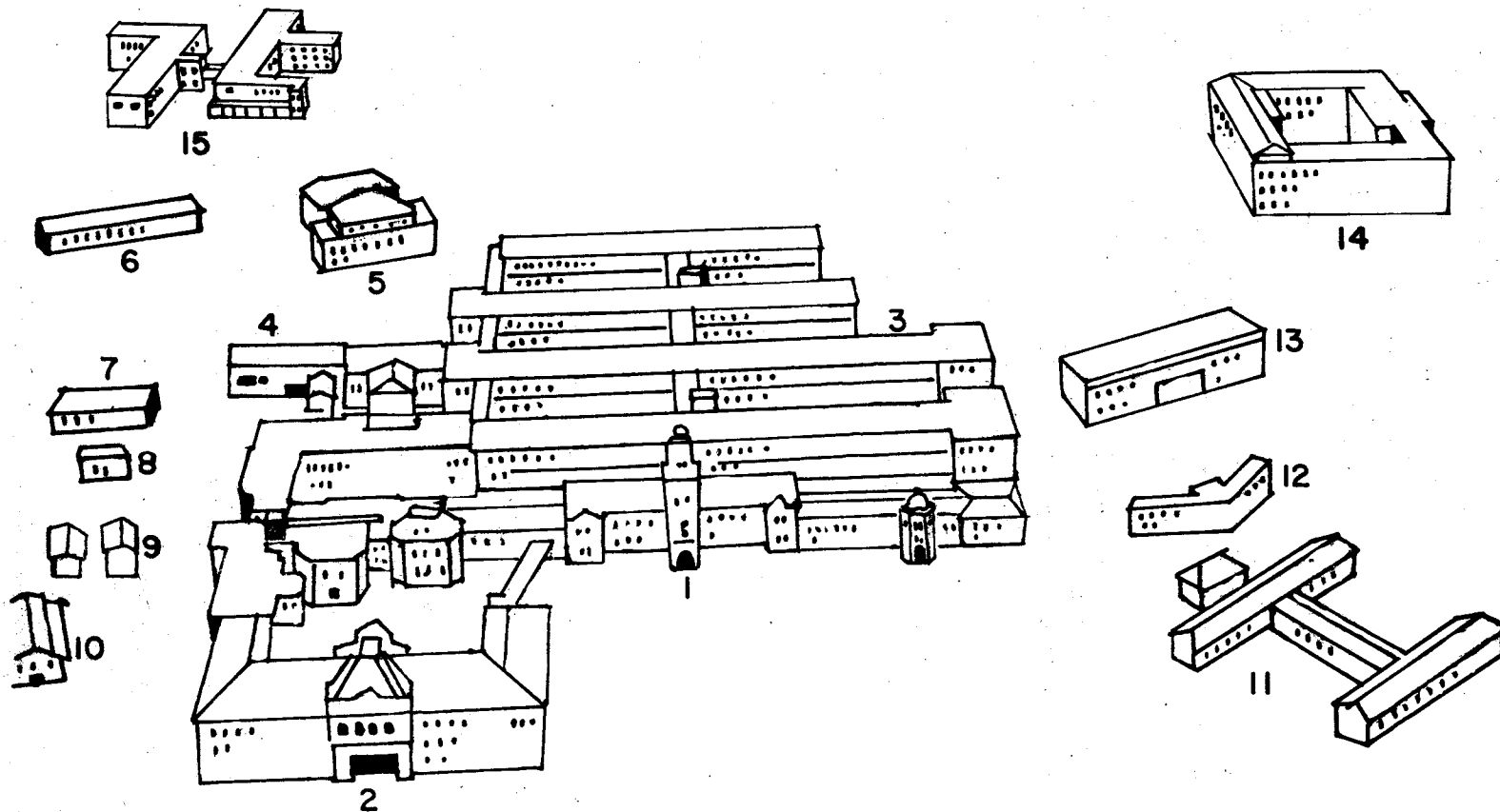
The Faculty Meeting elects the Superintendent of the Attached Hospital for a two year term. The Dean of the College of Medicine, the President of the University, and the Minister of Education must approve his appointment. He is responsible for operating the hospital in accordance with the regulations of the government. He is directly responsible to the Dean of the College of Medicine.

No board of trustees exists. The superintendent appoints a number of committees to assist him with the administration. The Chiefs of Services Meeting which convenes at least once a month is the only committee representing all services and sections of the hospital. Recommendations from other committees are usually referred to this meeting for final acceptance. The superintendent utilizes this opportunity to disseminate information about hospital activities to the staff. The authority invested in the superintendent and his administration is limited by various governmental regulations; for example, standard fees charged must be approved by the Ministry. Any subsequent fee changes require approval. Primarily the Ministries of Education



Recent the changes require approval. Primarily the Minister of Education

ATTACHED HOSPITAL, SEOUL NATIONAL UNIVERSITY



- | | | |
|-----------------------|-------------------|----------------------------|
| 1. Main adm. bldg. | 6. Warehouse | 11. Former Nurses' dorm. |
| 2. Outpatient Depart. | 7. Generator room | 12. Animal house |
| 3. Hospital wards | 8. Laundry | 13. Clinical Research lab. |
| 4. Kitchen | 9. Shops | 14. College of medicine |
| 5. Psychiatry | 10. Heating Plant | 15. School of nursing |

and of Health and Social Affairs are responsible for exercising control but a number of other ministries control services and products needed by the hospital.

A general affairs section is the chief non-professional administrative section in the hospital. The chief of this section is the superintendent's interpreter of government regulations and how they apply to the hospital. He is the payment officer, the responsible disburser of funds provided in the national budget. Employees of this section and the superintendent usually make direct contact with the personnel of the various ministries.

The superintendent during his term usually continues limited responsibility for teaching and patient care. He may even conduct his private practice outside of duty hours and on Sundays.

The following committees with membership noted are the standing committees appointed by the superintendent for terms of one year. These appointments are approved by the dean of the College:

1. Hospital Operating Committee, chaired by the Superintendent.

Hahn, Shim Suk, Professor, Internal Medicine
Chin, Byong Ho, Professor, Surgery
Chun, Chong Hee, Professor, Internal Medicine
Shin, Han Soo, Associate Professor, Obstetrics & Gynecology
Kim, Hong Kee, Associate Professor, Otorhinolaryngology
Choo, Keum Won, Associate Professor, Urology

This committee meets weekly and is the main group which discusses and recommends operational policies. The chief of general affairs and chief of the personnel section are ex-officio members.

2. Medical Care Committee

Myung, Choo Wan, Professor, Psychiatry
Kim, Dong Ik, Professor, Internal Medicine
Kim, Suk Whan, Professor, Obstetrics & Gynecology
Chun, Sung Kwan, Professor, Surgery
Rie, Kook Choo, Professor, Pediatrics
Kong, In Ho, Professor, Ophthalmology
Kim, Eung Jin, Associate Professor, Internal Medicine
Lee, Chan Bum, Associate Professor, Surgery

Choo, Tong Woon, Assistant Professor, Radiology
Baik, Yong Soo, Chief of General Affairs
Lee, Song Hee, Chief Nurse
Cho, Won Chai, Treasurer

This committee studies all matters that pertain to the medical care of patients. It is chiefly concerned with professional regulations and policies.

3. Intern-resident Committee

Hahn, Shim Suk, Professor, Internal Medicine
Lee, Tong Kee, Professor, Pediatrics
Park, Kil Soo, Associate Professor, Surgery
Shin, Han Soo, Associate Professor, Obstetrics & Gynecology
Choo, Kun Won, Associate Professor, Urology
Huh, In Mok, Assistant Professor, Internal Medicine
Hong, Chang Yee, Assistant Professor, Pediatrics
Rhee, Dong Sik, Instructor, Anesthesiology (Surgery)

Selection, orientation, assignment, evaluation and control of interns residents lies with this committee. Because this committee considers matters pertaining to education, the dean of the college in addition to the superintendent is kept informed of its actions.

4. Tissue Committee

Chin, Byong Ho, Professor, Surgery
Lee, Hak Song, Professor, Urology
Kang, Seung Ho, Professor, Internal Medicine
Lee, Chae Koo, Professor, Pathology
Kim, Ja Hoon, Associate Professor, Surgery
Lee, Yung Kyoon, Associate Professor, Surgery

Weekly conferences held by this committee review the surgical pathological specimens.

5. Hospital Infection Committee

Chun, Sung Kwan, Professor, Surgery
Chun, Chong Hae, Professor, Internal Medicine
Song, Ho Seung, Associate Professor, Internal Medicine
Sim, Bo Sung, Assistant Professor, Surgery
Lee, Song Hee, Chief Nurse

Reports of infections occurring in patients hospitalized are investigated by this committee. Policies governing control of infected cases emanate from this committee.

6. Nutrition Committee

Kim, Kyung Sik, Professor, Internal Medicine
Lee, Sung Ho, Professor, Internal Medicine
Nam, Myung Suk, Associate Professor, Psychiatry
Ro, Byung Ho, Associate Professor, Internal Medicine
Lee, Zin Soon, Associate Professor, Biochemistry
Lee, Song Hee, Chief Nurse
Myung, Bok Soon, Dietitian

This committee was named to study the development of standard and special diets and to improve the quality of food served by the hospital kitchen.

Under the auspices of the contract, one young man who was graduated from the College of Commerce, Seoul National University, has completed the one-year course in Hospital Administration at the University of Minnesota. He is now completing a one-year internship in the University of Minnesota Hospitals. This summer he will receive a Master's degree in Hospital Administration and will return to Seoul to work on the superintendent's staff. I anticipate this person will bring many new ideas and approaches to hospital administration in Korea. His return is eagerly awaited by the administrative offices.

COMMENT: The superintendent of the hospital is limited in his authority to alter the administration of the hospital because of many restrictive government regulations. Modifications of government policies should be proposed to allow the administration to responsibly transact the business of the hospital. Because the staff have tenure through their academic appointments in the college, some feel allegiance to the college but not to the hospital. Although the superintendent reports to the dean, the latter's position is not always sound enough to assist the superintendent to solve staff problems.

The transition is slow from strict departmentalization with no interdependence on other departments which characterized the hospital during the 30 years prior to the Korean War to an organization in which all departments are expected to work together harmoniously to achieve the hospital's objectives. Signs of progress in this respect are definite but more time and continued, inspired leadership by faculty members is needed to achieve the best functioning staff.

Twice in the past two years the Chief of the General Affairs Section has been summarily transferred to other assignments. Newly assigned chiefs have had no experience in hospital administration. After each became oriented and appreciative of the problems peculiar to hospital administration, he was transferred. This seems a waste of trained manpower and the university is urged to impress the Minister of Education with the need for the permanent assignment of a hospital administrator to the Attached Hospital.

The staff who serve on committees in my opinion are functioning well in their role. Committees no longer just sit and discuss policies but if need be, make site inspections, examine medical records, discuss flow of traffic in hospital through good diagrams, and in my opinion thoroughly study questions put to them. Planning by the faculty as witnessed today is more thorough and analytical than was practiced a few years ago.

Improved leadership by the chiefs of services will help the staff adhere to policies adopted by the committees and announced by the superintendent.

Improved administration has resulted in greater control of visitors, of cooking in ward kitchens by relatives of patients, of administration of drugs purchased elsewhere than from the hospital pharmacy, etc. The unit record system for medical records is utilized although some outpatient de-

partmental clinics still insist on separate outpatient charts. Only approved hospital chart forms are used. The WHO nomenclature will be adopted and used. The Hospital Operating Committee checks medical records periodically for completeness; the administration plans to appoint residents to a chart review committee which will be chaired by a professor. Statistical records of services rendered are being revised to provide data which can be used to support the claim of changing practices of medicine in this hospital and which can assist the administration in demonstrating its services to the people.

Organization and Personnel

During the past five years the administrator has directed various changes in the organizational pattern within the hospital. By and large these changes have come about as the operation of the hospital required the changes to function well. This is as it should be. Many changes have been recommended by advisers in the past but they are adopted gradually as the administration believes the staff, patients, facilities, and budget will accept or tolerate the changes.

Table III represents the current organization of this hospital.

The professional services are nineteen in number:

Internal Medicine

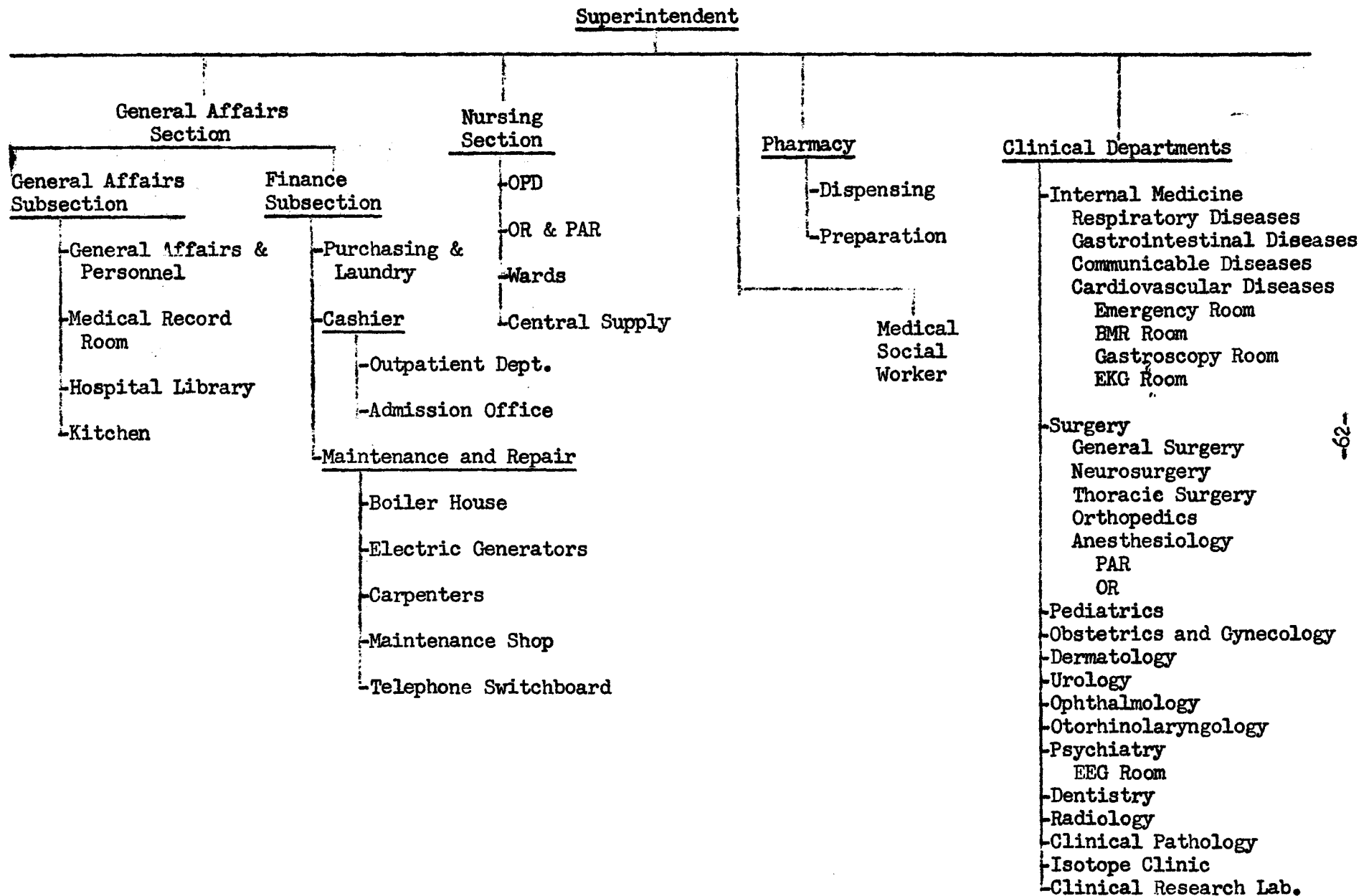
- Respiratory Diseases (1)
- Communicable Diseases (2)
- Gastrointestinal Diseases (3)
- Cardiovascular Diseases (4)

Surgery

- General Surgery (5)
- Neurosurgery (6)
- Thoracic Surgery (7)
- Orthopedics (8)
- Anesthesiology (9)

Pediatrics (10)
Obstetrics and Gynecology (11)
Dermatology (12)
Urology (13)
Ophthalmology (14)
Otorhinolaryngology (15)
Psychiatry (16)
Dentistry (17)
Radiology (18)
Clinical Pathology (19)

Table III: Organizational Chart, Attached Hospital, Seoul National University



The four divisions of internal medicine were formerly independent departments. Several years ago they were combined into one department but in reality still function independently. This creates a serious handicap to teaching, research, and patient care. No administrative directive can break the barriers that maintain this separation. Only with time, and possibly not until the retirement or resignation of some faculty members, will the unification of internal medicine take place.

For reasons unknown to me the divisions of surgery have not followed the same pattern as in internal medicine.

The current operating bed capacity is 399 beds. The assignment of the clinical services and hospital services to the wards with total operating beds is as follows:

<u>Ward</u>	<u>Services</u>	<u>Beds</u>
East 1	Neurosurgery, Orthopedics, and Emergency Room	43
West 1	Obstetrics & Gynecology	35
East and West 2	Pediatrics, ENT, Dermatology, Dentistry, offices for Department of Pediatrics and OB and Gynecology	53
East 3	Hospital services: BMR, EKG, Social Service, Tea room, Department of Surgery offices	
West 3	Central Supply, autoclave room, serving room	
East and West 5	Only 5 of 50 beds in use for special prisoner patients, Department of Internal Medicine offices	5
East and West 6	General Surgery, Urology, Department of Urology offices	54
East and West 7	Internal Medicine, Dept. of Derm. offices	50

<u>Ward</u>	<u>Services</u>	<u>Beds</u>
East 8	Communicable Diseases	22
West 8	Surgical Tuberculosis	22
East and West 9	Respiratory Diseases (Tuberculosis)	59
Psych. Bldg.	Psychiatry and offices	56
Admin. Bldg.	Offices of Superintendent, General Affairs, and Chief Nurse; Clinical Pathology and Blood Bank; Radiology; Amphitheaters; Operating Rooms; Library; Post Anesthesia Room; and Minnesota Contract Offices.	

The professional staff consist of the faculty members of the College of Medicine (Appendix I). They are responsible to the superintendent for service to the patients and to the dean for teaching of students.

An impressive and real improvement of medical care resulted from the training of an anesthesiologist. Upon his return better anesthesia administration was evident and in addition, he established with the help of others who had studied abroad the operation of the Post Anesthesia Room (PAR).

Another service area which developed as the result of this program is Central Supply. Prior to the organization of this service, each ward was responsible for preparing sterile tray setups, syringes, bandages, etc. Centralization has reduced wastes, breakage, duplication, and has improved service to the medical staff. The sewing room now mends torn linens, gowns, and uniforms; previously no maintenance of linens was practiced.

Rehabilitation of the Clinical Research Laboratory has provided laboratory facilities for each clinical service. This building is located adjacent to the main hospital therefore is readily accessible to the staff. Equipment for these laboratories was ordered this year and should be de-

livered by late summer. Already a number of departments are conducting their research with equipment that is available in the basic science departments.

The Isotope Clinic is located in the Clinical Research Laboratory. Through local funds an excellent laboratory has been established. Facilities were remodelled to meet standards of safety required in handling radioactive isotopes. The staff arranged for the procurement of isotopes from both American and British sources; payment is made from local funds. The staff arranged through the Korean Customs office a procedure to clear expeditiously shipments of isotopes of a short half-life. A number of the essential technical instruments are on loan from various Korean agencies or laboratories. A limited order for equipment was placed through this contract as the International Atomic Energy Commission has approved financing the purchase of a medical laboratory unit for this hospital provided the Republic of Korea government will pay insurance and transportation charges. It is anticipated this will be consummated this year.

Probably the area in the hospital that needs the greatest attention in the immediate future is Clinical Pathology. Until recently the various sections of the laboratory--microbiology, pathology, parasitology, biochemistry, and hematology--were independently supervised by faculty members from the appropriate basic science departments. With the return of a participant who studied clinical pathology abroad for one year, the administration saw fit to name him Director of Clinical Pathology and gave him responsibility for the reorganization and operation of it. He is enthusiastic and has accomplished some improvements. Maximal change must await the return of a second participant in this field in June 1962 and remodelling

of the laboratory area. Problems to be solved include staff acceptance of regulations regarding routine and emergency requests, quality control of all tests, in-service training of technicians (none have had formal medical technology training), increased operating budget, and research to develop new methods for use in the laboratory. Service by the laboratory is too slow and results vary so much as to cause the staff to distrust the results. Without the highest quality of laboratory procedures, the best trained clinician cannot practice scientific medicine but may in fact through error in results be caused to misjudge what he should do.

The full-time staff of the various clinical services numbers 63. Of these, 46 have had training abroad, 35 under the auspices of this contract. The other 11 privately financed their foreign studies or were supported by various agencies and foundations (Appendix 1).

Because the faculty salaries are so meager, most members of the clinical departments, including a number of residents, maintain a private practice in Seoul. As a consequence, the staff arrive late in the morning for their duties at this hospital and some leave early to attend to their private patients. This deprives this teaching center of full-time coverage by experienced staff members. Residents have had to accept responsibilities and to exercise judgment beyond their capabilities in the late afternoons, nights, and Sundays when no senior staff were available. Presumably the new private practice system will correct this outstanding deficiency in the medical program of this hospital.

The authorized residents number 130. An additional 15 residents are authorized to be assigned to affiliated hospitals. The residency programs are 4 years long after which the physician either is appointed to the faculty

or leaves to work elsewhere. A number of residents currently studying were deferred as interns (Kim Plan) and will enter military service when their residencies are completed.

The hospital is authorized 26 interns. The Minister of Defense deferred 16 of the new graduates (196I) for internship at this hospital. The other ten were selected from applicants who had no obligation for military service.

During the past year the Unitarian Service Committee has financed the first medical social worker for this hospital. This service is new and the worker is provided only a pittance with which to work. Funds from private donors and from the American Korean Foundation have encouraged the worker allowing her to meet some of the urgent needs she finds. The worker was trained in social service at Seoul National University. She is a mature, well oriented person who accomplishes very much with so little.

The Nursing Section is directly responsible to the superintendent. The Chief Nurse, Assistant Chief Nurse, and supervisors plan, acquire the superintendent's approval, and supervise the nursing services. Many non-nursing activities have been returned to the general affairs section. The medical social worker has relieved the nursing office of the many patient problems that they formerly were involved with. An effective in-service training program for the 143 nurses and 70 nurses' aides in this section is functioning. Unfortunately the full-time faculty of the School of Nursing numbering only 3 cannot supervise all ward teaching so the head nurses are now assisting in the teaching. Realistic job descriptions and an evaluation system have been developed by this section. The many changes in nursing are well documented in the previous nursing advisers' reports.

The General Affairs Section is responsible for matters pertaining to the non-professional services required to operate this hospital. A personnel section maintains records on the 196 permanent employees, 121 temporary employees, and 73 special fund employees. Other areas of responsibility include medical record room, hospital library, kitchen, laundry, purchasing, admission offices, and maintenance and repairing. The chief of this section often sits on appropriate committees as an ex officio member.

The administration has initiated an incentive program for employees. Twice a year the best two or three employees will be chosen for their efficiency in their work and will be recognized by commendation letters, monetary prizes, and display of their photographs on the bulletin boards in the hospital. No incentive program has ever been tried by this hospital therefore I believe this is a progressive decision. The usual employee is so poorly paid and unnoticed by his superiors that the chance for success is great.

COMMENT: Within limitations set by the government, the administration and staff have been alert to alter the organization of the hospital to improve its services in achieving its objectives. New services and improved methods of operation are continually being adopted.

The personnel problems are many. The salaries are low. There is little or no allegiance demonstrated by the employees to the hospital. The excellent work completed in writing job descriptions for the Nursing Section is recommended for all of the non-professional sections; only through this method can the employees know of their responsibilities and fulfill them. The incentive program and regular inspections of all areas in the hospital to evaluate efficiency will encourage the employees.

The return this summer of the participant who has majored in hospital administration will provide the hospital with much needed help in administrative organization and operation.

Budget and Finances

The budgets since the Korean War have been most inadequate even more so than that in the College of Medicine. During this year 1961 a major increase in the budget was approved due to the energetic planning and support given by the Superintendent and his staff. The hospital is budgeted for independently from that of the College of Medicine. Since the hospital collects for its services, it is a source of income for the government. All income must be deposited to the Minister of Finance.

The budget establishes the maximum expenditure permitted during the year. If the administration determines its services are utilizing the budget too rapidly, it must reduce the number of operating beds so as to save funds for operation throughout the entire year.

The budget is released in equal quarterly amounts regardless of the variations in needs due to heavy patient loads in summer months and higher expenses due to costs of heating in the winter months.

The government permits the hospital to admit 20% of its inpatients as "free patients". This term means that the patient gets his room free and that the government allows the hospital Hw89 a day plus rations of rice and wheat to feed the patient. Expensive medications and additional food must be paid for by the patients. No charge is made for routine laboratory examinations and surgery.

An idea of the improvement in the hospital budget since 1954 is evident from this tabulation:

<u>1954</u>	<u>1956</u>	<u>1960</u>	<u>1961</u>
Hw 148,986,000	Hw 170,000,000	Hw300,000,000	Hw660,000,000
Official exchange rate:			
Hw180 : \$1.00	Hw 500 : \$1.00	Hw 500 : \$1.00	Hw1,300 : \$1.00

With the increases came requirements for comparable increases in earned income to be paid to the Minister of Finance. Although these increases are considerable, the total has failed to reach the 1.5 billion hwan budget expended annually by this hospital under the Japanese.

The 1961 budget is as follows:

01 Basic T/O salaries (nurses, general affairs, custodial employees)		85,611,200
02 Temporary employees (Technicians, nurses, residents, maintenance employees)		56,630,000
03 Allowances (housemother and on-call employees)		3,156,000
04 Travel		82,500
05 Clothing (Uniforms, gowns, employee uniforms)		2,844,300
06 Subsistence (for interns, nurses, and free patients)		21,313,400
07 Transportation and utilities		59,274,100
Drayage	7,840,000	
Postage	18,300	
Telephone	3,263,300	
Electricity	42,100,000	
Water	6,052,500	
08 Maintenance and Repairing		15,562,500
09 Expendable Supplies & Printing		301,578,300
General supplies, including vehicle and generator fuel costs	7,827,600	
Medical supplies	195,415,500	
Coal	85,349,000	
Printing	12,986,200	
10 Equipment		10,047,500
13 Private Practice Fund to subsidize staff salaries		104,488,700

Item 13 above is a new provision as the principle of demanding the full-time staff to discontinue their private practices outside the university and permitting them instead the privilege of private practice in the Attached Hospital was accepted. Initially, it was recognized, the staff would suffer loss of income so this item was allowed to subsidize their salaries. The regulations governing the private practice system have not been agreed upon; it is questionable whether or not the system will go into effect this year.

Because legal charges collected for must be deposited with the Minister of Finance, the Welfare Association of the Attached Hospital leases, operates, or collects various funds from services conducted on the hospital compound. The hospital variety shop, tea room, kitchen, blood bank, etc. are examples. Money raised in this manner is not "legal" income (nor is it illegal) and can be used to meet many needs not provided for in the budget. Of course the total amount that can be raised in this way is limited.

Salaries of personnel are very low as is the case with all government employees. Some of the general affairs staff receive supplementary salaries from PTA funds. Salaries of temporary employees are lower than regular employees.

In the last year the finance section has been reorganized bringing about many improvements. Formerly various sections controlled purchases of their own needs. Today the kitchen food and drugs for pharmacy, for example, are procured through standardized procedures in the finance section.

The charges rendered for hospital rooms and meals are:

Special class	Hw 2,500
1st class	1,500
2nd class	900
3rd class	500
Daily food charge	1,050

The hospital charges for various surgical procedures in addition to laboratory examinations, x-rays, injections, intravenous fluids, and drugs.

During 1961 the average inpatient day cost Hw 2,633.

The charges for care in the Outpatient Clinic are as follows:

Registration	Hw 100
Physical Examination	200
Subsequent visits to same clinic - no charge	
Visits to new clinics	200

These charges are made once in each fiscal year; the patient has the privilege of unlimited revisits to specific clinics for which he is registered during the year. The patient has to pay for drugs, laboratory tests, x-rays, and special treatments and examinations.

The average outpatient visit in 1961 costs the patient Hw 1,345.

The income thus far in 1961 has been about 154,000,000 hwan which is less than was anticipated. The budget requires the hospital to earn at least Hw 420,000,000 this year. The demand for care during the spring and summer months usually is greatest but this year due to the poor economic and disturbed political situations, the patient load has been less.

COMMENT: The recommendation in the Report on Survey of National Higher Education which pertains to hospital financing is endorsed. A system which permits the hospital to use its earned income to meet its needs would undoubtedly increase the incentive of those responsible for the administration of the hospital. This system would make it possible for the hospital to enter all its income in one set of books and accounting would be improved.

A teaching hospital rendering care to indigent patients requires some subsidy from the government. The government needs to authorize a more reasonable maximum budget and provide for any deficit that the hospital income did not meet by the end of the fiscal year.

Funds for the care of more indigent patients should be provided. In a teaching hospital the need for at least 50% free beds is stressed.

No comment on the inadequacy of the budget for maintenance, repairing, equipment, etc. is necessary. The figures tell the story.

Clinical Material

The use of the Attached Hospital by Koreans has been increasing every year. The majority of patients who come are from outside Seoul City. Patients come with the expectation that they will be examined, diagnosed, and treated within the day.

Comparative yearly data for inpatients and outpatients are as follows:

	<u>In patients</u>			
	<u>1957</u>	<u>1958</u>	<u>1959</u>	<u>1960</u>
Total Admissions	2,660	1,944	2,638	6,613
Average Daily Census	205.7	183.5	226.9	300.9
Deaths				229
Autopsies			21	46
	<u>Outpatients</u>			
Total Visits	91,387	88,006	98,755	106,787
New patients	36,873	37,098	37,910	35,268
Average Daily Visits	300	290	330	359

A detailed tabulation of the inpatient and outpatient workload for the first five months of 1961 is presented in Table I and II. In reviewing these data the reader should recall that half of the hospital is closed during winter months due to the lack of coal to heat the hospital completely.

Table IInpatient Data, January thru May 1961

<u>Service</u>	<u>Admissions</u>					<u>Average Daily Patient Load</u>
	<u>Jan.</u>	<u>Feb.</u>	<u>Mar.</u>	<u>Apr.</u>	<u>May</u>	
Respiratory Disease	4	4	8	18	31	36.3
Gastroenterology	60	62	60	54	53	36.5
Cardiovascular	10	10	14	16	12	7.7
Communicable Disease	11	8	17	12	15	5.3
General Surgery	51	40	76	61	58	33.2
Neurosurgery	27	25	28	36	21	22.9
Thoracic Surgery	10	5	16	5	11	10.0
Orthopedics	17	17	23	16	17	26.5
Pediatrics	9	18	17	29	26	11.2
OB & Gynecology	37	35	60	48	48	18.3
Dermatology	4		4	2	1	0.4
Urology	9	7	10	16	12	9.3
Ophthalmology	4	3	4	6	12	1.6
ENT	12	13	12	14	15	7.8
Psychiatry	14	15	28	18	20	37.0
Dentistry						
Total	279	262	373	381	352	264.0
Deaths	13	13	9	23	29	
Autopsy	3	3	1	3	7	
Births	40	38	32	26	38	

Table II

Outpatient Data, January thru May 1961

<u>Service</u>	<u>Total Visits</u>					<u>Average Daily No. of Visits</u>
	<u>Jan.</u>	<u>Feb.</u>	<u>Mar.</u>	<u>Apr.</u>	<u>May</u>	
Respiratory Service	744	771	1097	934	1302	37.6
Gastroenterology	911	927	1444	1200	1638	46.3
Cardiovascular	710	737	1045	803	1107	34.2
Communicable Disease	140	165	160	142	56	5.2
General Surgery	253	740	939	633	769	26.1
Neurosurgery	252	209	280	308	332	10.7
Thoracic Surgery	246	267	*	*	*	8.1
Orthopedics	214	205	302	238	367	10.6
Pediatrics	381	396	676	524	569	19.8
OB & Gynecology	719	800	1141	1015	1475	39.9
Dermatology	638	636	892	901	1015	33.8
Urology	465	434	679	672	752	25.8
Ophthalmology	426	432	562	488	592	19.4
ENT	754	614	964	741	877	32.7
Psychiatry	484	489	628	535	629	21.5
Dentistry	260	312	385	298	364	12.5
Total	7597	8034	11194	9467	11844	
Av. Daily Visits	292.1	334.4	430.5	394.4	423	370.9

*Not reported.

COMMENT: A review of these data must impress the reader with the magnitude of the outpatient services as compared to the inpatient services. Less than 10% of the new patients seen are admitted to the hospital. Many reasons are given for this low figure; culture, lack of finances, many minor illnesses seen among OPD patients don't require hospitalization. Although I have never been able to establish that this staff refers OPD patients to private clinics and hospitals for definitive care, the practice is prevalent in some medical centers. Of the 48,136 outpatient visits in the first five months of 1961, 33.8% were new patient visits, an average of 130 for each day the clinic operates. This number would permit each senior medical student to workup one new patient each day provided of course the distribution was even throughout the year. In addition to the new patients, twice as many return visits are made. The clinical material available in the Attached Hospital is primarily in the outpatient department and it is a most acceptable place for teaching. But to take full advantage of the opportunity, reorganization of the OPD is necessary. Past recommendations for reorganization have been made and some changes have been adopted.

The admissions clerk, a non-professional person, refers patients to specific clinic depending on the patient's complaint. In this way patients are seen in specialty clinics which direct their attention to limited areas of the patient failing to consider the whole patient. The opportunity to practice preventative medicine; i.e., to point out other potential or existing disease states, is missed.

This practice has been criticized in previous reports and recommendations for intake or newpatient clinics in medicine and pediatrics stress

the advantages. But due to limitation of time, staff, and space, the administration has made no major change in the usual procedure. Besides, the staff of specialty fields are not convinced that the intake clinic system would provide their clinics with the customary number of patients. The practice of consultation with other specialists is not common; the patient is said to expect one doctor to know all there is to know in order to treat him. If the doctor asks for consultation, he "looses face" with the patient as he in essence is saying, "I don't know enough to treat you!" Also if the OPD is a source of referral to private clinics and hospitals in Seoul, it is understandable that the first doctor who sees the patient has the best opportunity to dissuade the patient from continuing his care in the University Hospital. The patient expects examination, diagnosis, and treatment in one visit, but the establishment of an intake clinic requires all specialty clinics to be scheduled every day. An intake clinic requires more rooms and staff than the present system to handle the large number of new patients who come each day; the appointment system as practiced in America has not been adopted in Korea. Neither adequate room nor staff is available.

Thus many difficult problems confront the implementation of this recommendation. An attempt on a small scale is functioning in Internal Medicine. A limited number of new patients each day are assigned to the medical students on duty in the OPD. The others are handled by the senior staff. Because of the workload the examination is seldom as complete as it should be and referrals to other clinics are few.

What is the answer to this problem? First, the objectives of the hospital in its role as a teaching and medical care center must be clearly defined, accepted, and supported by the staff. Secondly, the administration

needs to reorganize the OPD in such a way that its objectives may be attained.

The customs of the people can be changed in due time particularly when they learn that the services they receive are truly excellent rendered by the best trained and experienced physicians available.

It seems to me that a university medical center is obligated to continually raise the standards of medical services it renders. It is also apparent that the specialties must encourage the people to recognize the advantages of their services.

Such a reorientation of outpatient service is not impossible but will be admittedly difficult. The gains in education, medical care, and compilation of clinical data for research are evident therefore I again recommend that this question be studied intensively to create plans for the needed reorganization. Complete workups would define the appropriate specialty that should care for the patient. A surprising increase of pathological conditions would be detected and specialty clinics would see more patients. This system would encourage the practice of consultation between specialties which is badly needed if the specialties are to ever earn recognition as offering more technical care than the general physician.

The inpatient census is another problem. Certainly the number of patients is too small to adequately train the large number of student doctors, interns, residents, and nurses. Most of the time the number of student doctors and staff exceed the number of hospitalized patients!

To meet the educational needs, affiliation with other hospitals has proven helpful but both the staff and students prefer training in the University hospital if the patient load were adequate.

But another important need is for a sounder financial operation of the hospital. This is attainable through maintaining a higher percentage of occupancy. The basic costs of upkeep and operating a large physical plant such as this hospital are irreducible therefore to gain the most from the annual investment it is necessary to maintain an occupancy of 80 to 90 per cent.

This occupancy rate can be attained in one of several ways. When the private practice privilege for the full-time staff is put into effect, undoubtedly the census will increase greatly. It is entirely reasonable to propose that the government close the inpatient services in other government supported general hospitals in Seoul which usually have occupancy rates of less than 50 per cent. The outpatient services in these hospitals could be continued with referrals of all cases needing hospitalization to Seoul National University Attached Hospital. A third way would be for the government to increase the number of free patients authorized this hospital.

An example of the force of custom in medicine in Korea is illustrated by the analysis of the lack of autopsy examinations on patients who die in the hospitals. All advisers have been disturbed by the lack of autopsies as examination after death is a basic requirement for the practice of scientific medicine. Regardless of the newest and complicated nature of scientific equipment at the disposal of the staff, no one has proposed a way to bypass the pathologist in the practice of scientific medicine and education of students. Why were so few autopsies performed in Korea? The first answer usually given was "it is against the customs of the culture." Another reason was "The families take the dying patient home and he is not available

for autopsy."

But it is the legal admission requirement to have "free" patient's relatives sign an authorization for autopsy if death occurred. This authorization however was not always enforced but autopsies, if done, were on these patients, not paying patients.

The National Medical Center, operated jointly by the Koreans and Scandinavians, is authorized to admit 75 percent of its patients to free beds; the autopsy rate is better than 90 percent.

Convinced of the need for autopsies and believing that the pathologist is in the unique position to prove that the staff are indeed good diagnosticians rather than to prove the staff in error, Dr. Berglund and I established a \$5,000 prize for the intern or resident who obtained autopsy permission on deceased paying patients. Accompanying each prize was a letter of commendation for the doctor's dedication to the practice of modern, scientific medicine. Within a few months the autopsy rate increased notably. In 1960 38 autopsies were performed. And for the first time in 1961 autopsies were performed on paying patients.

In this year by June 15, 1961, 23 autopsies were performed; six of the 12 patients who died in the past month have been autopsied. The new autopsy room in the hospital was completed in May. The clinical staff and students find it more convenient to attend autopsies held in the hospital; their interest in seeing what was wrong with the patient has been stimulated as was expected.

One additional point should be made. That is, the attitude and the policy of the chief of each department is very important. If the chief is not impressed with the importance of autopsies, then his staff do not feel obliged to obtain the permission. But if the chief himself would inquire

in each case of death why the intern and resident did not obtain autopsy permission, the staff would without a doubt be more conscientious in regard to this matter.

Further evidence of the staff's sincerity in raising the standards of medical care is the increase in the number of surgical specimens being submitted for pathological examination. In the first four and one half months of 1961, January to May 15, 604 specimens were examined compared to only 358 specimens during the same period in 1960.

Plant and Equipment

The Attached Hospital buildings number 38; the main hospital building (five two-storied cantonment-type structures), plus the outpatient clinic, psychiatry and the clinical research laboratory are used for patient services.

The other 35 buildings are staff residences, animal house, boiler house, laundry, kitchen, generator house, oxygen tank storage house, several maintenance shops, and warehouses. The major buildings are old but rehabilitated concrete and brick structures. A number of the others are wooden structures, many not having had any maintenance or rehabilitation since the Korean War.

The rehabilitation of the hospital has included only minor new construction: new connecting corridor, and housing for generators, pharmacy boiler, and an addition to the main boiler building.

Major rehabilitation projects supported by defense and counterpart funds have been completed. These include repair and replacement of roofing, laying of terrazo flooring except for linoleum on the second floors of the Outpatient Clinic and the Administration Building, installation of a fire fighting system, window screening, installation of a nurses call system, installation of two elevators, complete rewiring of all electrical circuits, building of a security fence, installation of new telephone equipment, preparation of a Recovery Room and an Autopsy Room, and complete interior painting.

Partial rehabilitation has been undertaken to provide hot and cold water systems, a high pressure steam system, ward toilets and kitchens, to remodel the operating room suite, and to pave access and service roads and improve the compound drainage.

Appendix V designates the dollar value and hwan value of hospital rehabilitation projects.

Maintenance has improved during the past year with replacement of broken windows, trimming of compound shrubs and trees, painting metal roofs and down spouts, and in general a definite improvement of housekeeping.

The needs in the future have been studied. The new kitchen and laundry buildings are urgently needed and architectural plans have been approved. Commodities including equipment are on hand and all that is needed is the release of Hwŭll,000,000 by the government. If the hwan is released as anticipated, work on these structures will begin this summer.

The second most urgent need is for a complete rehabilitation of clinical pathology laboratories. The laboratories moved to their present location about one year ago. The problems of lack of hot and cold water, waste disposal, controlled humidity, adequate electricity, refrigeration, incubators, etc. must be solved. Commodities on order will meet some of the needs but the physical facilities will require complete renovation.

Additional rehabilitation required in the future includes the following projects with the estimated hwan cost indicated:

1. Complete the rehabilitation of the heating and hot water systems	70,000,000
2. Additional ward rehabilitation primarily bath and toilet facilities	42,000,000
3. Central operating room rehabilitation	24,000,000
4. Remodel amphitheatres A & B	13,580,000
5. Furniture for patient's rooms	15,590,000
6. Road paving and drainage	43,000,000
7. Window screens, main building	7,320,000
8. Repair OPD elevator	4,000,000
9. Rehabilitation of animal house	4,900,000
10. Remodelling pharmacy storage	6,400,000
11. Repairing of outside walls, all buildings	20,000,000

Items 1,2,3, and 5 are particularly important if the entire hospital is to function through the winter months. Also these improvements are needed if the private practice system is to be introduced this year. Some of the other items include what rightfully is ordinary maintenance and most probably will have to be financed by the national budget.

At this date approximately \$28,000 worth of commodities requested are expected to provide materials for walk-in incubators for Clinical Pathology and for the Department of Microbiology, walk-in cooler for the Clinical Pathology, x-ray developing room equipment, physical medicine equipment, material for remodelling the central operating room, and other miscellaneous items.

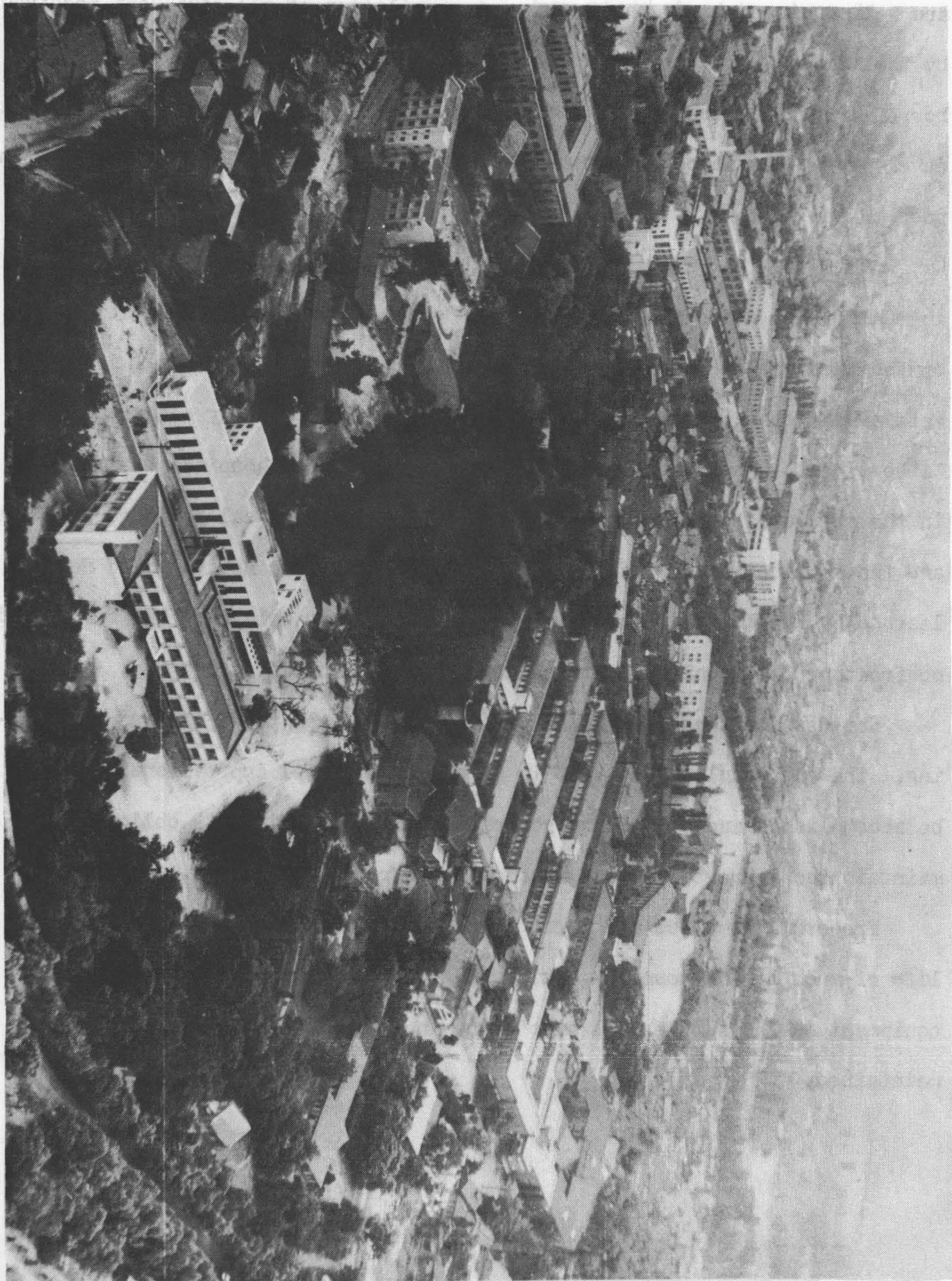
The re-equipment of the hospital to provide the tools to teach and render scientific medical care cost more than \$400,000.00. After the Korean War practically no equipment was salvaged. This phase of the contract met an urgent need. Today the various clinical services and hospital services

are well equipped to do their work. A compilation of all equipment received by the various departments serves to advise the faculty where they might borrow a needed piece of equipment. The hospital administration is currently developing a new inventory system which will be an improvement of the system used in the past.

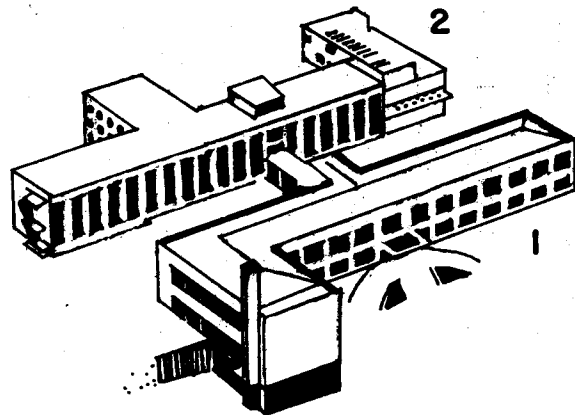
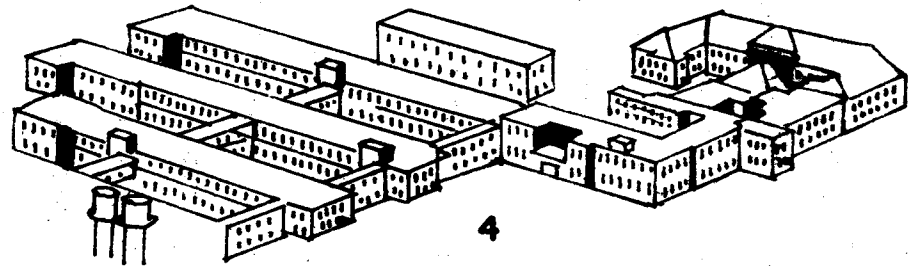
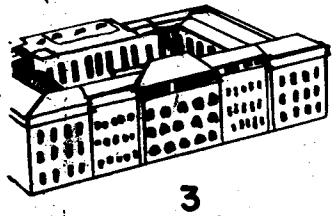
COMMENT: The rehabilitation of the physical facilities has been the most difficult phase of this program. Delays caused by procurement of commodities and lack of counterpart funds have slowed the overall achievement of the objectives and forced revision of plans on many occasions. Without heat, water, hot water, electricity, etc. the hospital is limited in the services it can render, the usefulness of technical advisers is limited, and the application of techniques of conducting modern medical care newly learned by the Korean faculty who studied abroad is delayed. The difficulties confronting the faculty at times must have been most discouraging.

But despite these problems, the outcome as seen today is most encouraging. The end result is not yet in sight. Additional improvements will be accomplished and I hope the government will recognize its obligation to maintain the improvements and finance further rehabilitation.

Proper maintenance and periodic inventories will insure the useful life of much of the hospital equipment. The budget for procurement of equipment in the future will have to be increased if present standards are maintained.



**SCHOOL OF NURSING, College of Medicine,
Seoul National University**



1. Main school building
2. Nurses' dormitory
3. College of Medicine
Main building
4. Attached Hospital

School of Nursing

Administration

On January 14, 1959 a Presidential proclamation established the collegiate program of nursing within the College of Medicine at Seoul National University. The nursing education program had been a 3-year Technical High School program admitting girls who had graduated from middle school; the classes of this program were continued until February 28, 1961 when the last class graduated. The high school program was administratively independent from the College although it was essential to coordinate its activities both with the College and the Attached Hospital.

The new collegiate program is a 4-year course open to high school graduates who pass the competitive entrance examination and physical examination.

The program is under the direction of the Dean of the College of Medicine who is responsible for the budget, educational standards, and physical facilities. To assist him he appoints with the approval of the Faculty Meeting a head or director of the school. This person has an academic appointment with all the privileges and obligations of the faculty. The extent to which the director is able to guide and influence the school depends a great deal on her working relationships with the dean. The school in truth has a status comparable to that of any one of the departments in the college.

Because the full-time faculty only numbers three and the curriculum demands instructors in both liberal arts and medical subjects, the director extends her contacts in search of teachers throughout the college and beyond to other colleges in the university. The present director is given full responsibility for obtaining the part-time faculty she needs. Curriculum changes must be approved by the school committee and the dean.

With only two full-time nursing educators to assist her, the director must rely on the nursing service staff of the hospital for help so regular staff meetings are held with Nursing Service personnel to discuss and plan the program.

The present director has served as president of the Korean Nurses Association for 6 years and currently is a vice-president and chairman of the education committee. She is an active member in the Seoul City Nurses Association. Relationships with other nursing schools and nursing services of other hospitals are good.

The school cooperates with nursing organizations by permitting meetings and workshops to be held in the school building.

COMMENT: Nursing as a profession in Korea is establishing itself slowly and successfully. The school has contributed greatly to the accomplishments made thus far and now with its collegiate program it can multiply its effect. The need for scientifically trained nurses will be greater as the physicians adopt the modern, scientific practice of medicine.

The school is urged to continue its good public relations program to encourage high school graduates to enter nursing.

Now that the school is an integral part of the college and its budget is buried in the college budget, the administrators are urged to support the school in its program and not lose sight of its needs which are relatively more than the long-established departments in the medical school. The role of nursing in medical care in Korea has not been recognized by the majority of physicians. But in a university which is challenged to bring new and better services to the people through its graduates and research, the support of new programs is its obligation.

Faculty

The full-time faculty of three is listed in Appendix I. The preparation of these educators abroad is indicated. Three additional nurses are now studying at the University of Minnesota and should return to assume their responsibilities in the school sometime this year. Although only three T/O positions are now authorized, the Ministry of Education and the University indicated in the participant agreement the intention of appointing these nurses to the faculty upon their return.

The salaries for this faculty are meager and are supplemented from PTA funds.

COMMENT: It is difficult to realize that this small core of full-time instructors have had the responsibility to organize and teach this course. The work load has been heavy and as much as possible has been accomplished. The need for an adequate faculty of at least 12 for this school of 200 students must be satisfied within the next few years if the collegiate program is to be other than in name only. It is impractical to expect the present staff without additional help to raise the teaching standards and curriculum to a collegiate level.

The first priority to be fulfilled by the College of Medicine is to provide the school with the essential full-time staff. Because the Ministry of Education is the responsible government office for establishing faculty quotas, this becomes its responsibility but to achieve results the college and the university officials must continue to press for favorable action.

Budget and Finances

The School of Nursing is financed through the national budget authorized the College of Medicine. Although the Technical High School of Nursing had a Hw20,000,000 budget in 1959 and Hw12,000,000 in 1960, the increase given the College of Medicine this year when it assumed budgetary responsibility for the school was only Hw11,000,000. The College of Medicine actually received no increase in budget and the School of Nursing budget was even reduced. But since no line items insure a portion of the budget for the School of Nursing as is exactly the case for all departments of the College of Medicine, one can't help but feel that its financial support will be considerably less this year than ever before.

A collegiate program in nursing cannot be less expensive than a high school program!

Students pay the following fees each semester:

Tuition fee	Hw15,000
PTA fee	29,000
Laboratory fee	12,000
Student activities fee	1,200
Newspaper fee	1,700
Student Health Service fee	500
	<u>Hw 59,400</u>

The school is allocated a portion of the laboratory fee by the Dean to provide funds to pay for nursing arts laboratory supplies, office help, and to pay a token to nurses in the hospital who assist in the clinical teaching.

Non-regular instructors are paid Hw 600 from the national budget per hour of teaching and an additional Hw 300 from PTA funds. Instructors from the college full-time staff are not paid extra for teaching in this program however

each department of the college is paid a small sum from the laboratory fees each semester for their staff's contribution in teaching nurses. The basic science departments which teach laboratory exercises are paid larger sums than clinical departments.

Each semester the school pays a sum to the hospital for laundry of uniforms.

COMMENT: The director of the school actually has less than \$250,000 per semester which she can use at her discretion. The remainder of funds are managed by the Dean. Any additional needs must be met through negotiations with the Dean.

The practice of rewarding nursing service employees and departments for their contribution to teaching nurses is defended on the ground that these personnel will give more attention to their assignment if some remuneration is given. I believe this is true but would urge that this practice be discontinued if and when the salaries of the staff and employees are raised to more acceptable levels.

The new buildings of this school must be properly maintained. During the past two years there has been no repair of needs normally required. Now that the college has responsibility and the budget for maintenance of the buildings, I urge the administration to give proper attention to these new structures to keep them in good condition.

Students

The collegiate program is authorized a class size of 50. For the first time this year the applicants numbered 2:1 and thus a higher ability student was admitted than in the two previous classes when fewer than 50 students applied for admission.

This year the director with the support of the dean invited superintendents

of girl high schools in Seoul to the campus for lunch, an explanation of the program, and a tour of the facilities. Apparently this meeting impressed the visitors as a greater number of students was encouraged to apply for admission this year.

The entrance examination is the same as given to all students who want to be admitted to Seoul National University. Interviews are also held by the faculty. Acceptable examination results are based on the highest 50 students. Of course the students must pass the physical examination.

At present the student body is comprised of three classes:

Freshmen	51
Sophomore	33
Junior	38

The first class to be granted bachelor degrees will be in February 1963.

Placement of graduates has not been easy but the director is usually able to find enough positions. Many are employed by the Attached Hospital. Since the number of graduates will be 50 a year, the increase over the 30 graduates per year in the technical high school program may pose a serious problem. However the turnover of nurses in hospital positions is fairly rapid and I assume that graduates with good scientific training will be sought after. Only experience in 1963 will prove whether or not the need for graduate nurses will absorb the supply. Two other degree programs in nursing are offered in Korea.

A new student dormitory will provide the only dormitory facilities on the main university campus. The building is beautiful and should meet the school's needs for many years.

COMMENT: The acceptance of nursing as a profession by young Korean women and their families seems to be established if the trend in applications this year holds. The physicians who trained abroad find the lack of western nursing service an impediment to the medical care they are trained to give therefore I feel confident that the medical profession will welcome the better trained and more intelligent nurse.

As the number of high school graduates who want to enter nursing increases, the aptitude of the students should improve. As this occurs, the faculty is urged to adjust their teaching and examinations to the potentials of the class.

It is reasonable to expect the students will use English with greater competence in the future as high school graduates today have better preparedness than the middle school graduates of the past program. However at present the use of English texts is very limited.

Plant and Equipment

This contract has provided a new school and a new dormitory building for the School of Nursing. Both buildings are adequate to meet the needs of the school and no expansion is necessary in the immediate future. The dormitory is not yet occupied as no furniture is available but funds for furnishings should be released within the next month. Equipment for teaching has been provided and no additional equipment other than usual replacement should be required for some years.

COMMENT: The physical facilities and equipment for the School of Nursing are excellent. Again I wish to point out that building and equipment maintenance should have priority over the addition of new space and equipment.

The release of funds for the furnishings of the dormitory will permit

the use of this new building this year. Funds for the purchase of a boiler for heating the dormitory have not been approved and it may be necessary for the university to purchase it locally with funds from the national budget or from counterpart funds.

Library

The school library is a branch of the college library and because of the distance from the main college building, a collection of 500 books is kept in the school building. Students have access to the library but the practice of locking all shelves for security reasons seems a deterrent to use of the books. Most books are in English and have limited appeal to the students. A few texts have been translated into Korean but since western theories and practices are rarely adaptable to the local situation much in these translated texts are more confusing than helpful. Only a few nursing journals are subscribed to by the college.

COMMENT: The nursing profession is urged to prepare texts in nursing that will teach the practices of nursing in Korea. These would require frequent revisions as I anticipate this field to be changing markedly each year as the health science fields accept scientific methods. It may be impractical to publish texts at present but certainly leaders in the field should be preparing and revising manuscripts.

A library if it is to be used as it should be must be readily accessible to the students. Shelves should be open for students to browse through the material as they desire; supervision by a trained librarian will give the necessary security and can add greatly to attracting students to use the facility.

Clinical Facilities

The nursing students utilize the clinical facilities in the Attached Hospital. The outpatients and inpatients are adequate to meet the needs of the curriculum with exceptions in deliveries and public health experiences. Although the clinical material is available, there is not staff available for supervising their training other than the nursing service personnel.

COMMENT: The clinical facilities offered in the Attached Hospital should meet most of the needs of the school. The need for utilization of these facilities is for more faculty. Instruction in techniques by the faculty in the classroom is useless if the student sees or learns that a different technique is practiced by the nursing service in the Attached Hospital. Combined conferences between the school and the nursing service are improving this situation.

Curriculum

Since the curriculum was discussed in Professor Julian's recent report, it will not be presented here.

The only comments I wish to restate are that I believe the liberal arts and science courses should be offered nursing students in regular classes held in the College of Liberal Arts and Sciences rather than as special classes in the School of Nursing. I also stress the need for close supervision of the part-time faculty by the full-time faculty, particularly the physician instructors, to ensure that the content of lectures is pertinent to nursing and are not too detailed for their scientific preparation. The presentations should not continue at the same level as previously given to the high school classes in nursing.

Postgraduate Programs

It is unreasonable to expect the present staff to offer additional courses either on a graduate or postgraduate level. They do not at present and I don't recommend they do so until the faculty strength is adequate. Since no faculty members have advanced degrees, I do not believe it is possible to offer a graduate course unless the additional faculty to be recruited have the qualifications required.

The faculty is very cooperative in planning and participating in workshops sponsored by KNA and other nursing programs. The School facilities have been used for these workshops on several occasions in the past year.

School of Public Health

Administration

The School of Public Health was officially established in the College of Medicine, Seoul National University, in January 1959 by Presidential proclamation. During the previous six years two abortive attempts were made to establish a school of public health. The first was supported by the American Korean Foundation and was under the Ministry of Health and Social Affairs. After a couple of years when the Foundation's support ended, the school closed.

Seoul National University recognized the urgent need of public health for the nation's people so began an unauthorized school in 1956 hoping that the Minister of Education would be able to gain governmental approval. Ten students enrolled and the staff of the college, mainly from the department of Preventative Medicine, taught the course. Within the year it was evident that support was not to be gained, therefore seven students transferred to other graduate courses and three continued in Graduate School completing their master's requirements in Preventative Medicine. So it was through 1957 and 1958; students interested in public health majored in Preventative Medicine in the Graduate School.

In April 1959 the first class of 17 students enrolled in the newly proclaimed school. The budget was a temporary one which provided no full-time staff. The College of Medicine faculty with the assistance of the Health and Sanitation Division of USOM developed a curriculum. In 1960 five full-time faculty members were authorized.

But in 1960 another administrative change occurred. As the result of the arguments set forth by those interested in separating the School of

Public Administration from the College of Law, the government on July 13, 1960 decreed both the School of Public Health and the School of Public Administration independent administrative and educational schools with direct responsibility to the president of the university.

Today Dean Kim, In Dal, Professor, Department of Preventative Medicine, is head of the School of Public Health. He retains his status and tenure in the College of Medicine and of course his teaching responsibilities. As Dean, he reports directly to the president of the university, is the person responsible for using the budget, and meeting educational standards.

His relationship to the College of Medicine is a close one. All the physical facilities used belong to the College of Medicine as does the teaching equipment. Many college faculty members teach in the courses offered by the school. The dean is first a member of the college faculty and secondly dean of the school.

COMMENT: The close association of the School of Public Health and College of Medicine should lead to mutual benefits. Since the college faculty is responsible for the majority of the teaching, it is imperative that a cooperative spirit continue between these two units.

But at the same time, it is just as important if the School of Public Health is to develop properly and fulfill its objectives for it to be recognized by the College of Medicine as an authorized unit in the university with objectives just as important to Korea as are the objectives of the College of Medicine. There is the danger that the college being larger and with control of physical facilities and equipment might inadvertently smother the development of the school. This must be consciously guarded against.

The Ministry of Health and Social Affairs administers the National Institute for Public Health Training (NIPHT) for in-service training of the Ministry personnel. The staff of NIPHT were given professorial titles without having any affiliation with a university. Rather than serve as an in-service training program to upgrade the efficiency of employees, the ministry has used it to train new employees who had had no public health education. In essence, NIPHT and the School of Public Health were duplicating services and graduates of the latter were not accepted for employment by the Ministry of Health and Social Affairs.

There needs to be no conflict in these two programs if each will strictly adhere to its objectives. One is an in-service training program badly needed in Korea and the other is a graduate course teaching the fundamentals of public health.

In general the relationships between the school and the Ministry of Health and Social Affairs is good. Faculty members are asked to give service on committees and help in writing health education material or participating in radio programs on health.

Faculty

Although the Table of Organization authorizes five faculty positions, only two have been filled. The other three are used temporarily for members of the faculty of the College of Medicine.

The faculty of the school is listed in Appendix I. The two full-time members are augmented by a large number of non-regular staff members who are paid per class hour they teach. During the past year due to the poor attendance of the non-regular staff who are from outside the College of Medicine, it was necessary to reassign the teaching staff. Full-time

College of Medicine faculty now give 3/4 of the classes. Since they are present on the premises during most of the day and are teachers, they fulfill their obligations to meet class.

Four Non-Table of Organization staff members but full-time assistants have been trained in the School of Public Health at Minnesota. Only one has returned and because he is a military officer on active duty in the School of Public Health, he can not be appointed to the T/O staff. The others now completing their studies abroad will return this fall. Certainly with three T/O positions due the School, these men will be appointed to permanent positions.

Faculty salaries are equivalent to those described for the College of Medicine.

Because the faculty is so small, it is not formally organized.

COMMENT: Certainly the faculty should be brought up to T/O strength within this school year. With positions officially provided and with participants whom the university selected as future faculty members returning from abroad to fill these positions, no apparent justification for not appointing a full faculty is known to this adviser. It is true that the participants may not have had military service and will be required to enter the armed forces.

The government is urged to view health education and particularly public health education as a critical area requiring exceptional judgment in conscripting teachers lest the quality of the educational program be reduced and graduates be inadequately prepared to carry the responsibilities demanded of them in this emerging modern society. Besides considerable expense has been incurred with the agreement of both the Korean and American governments to

prepare these faculty members and the investment will be lost if they are not allowed to contribute to the educational program.

The faculty strength should be raised to a total of eight so as to have an experienced teacher in each of the eight areas of the public health curriculum.

The School should schedule monthly staff meetings. All faculty members who teach regardless of their parent organization should attend. The administrators could then discuss the school's objectives, how the faculty is meeting these, and other organizational and educational policies. This would give the faculty greater identification with the school.

The need for more adequate salaries is evident.

Budget and Finances

The national budget for the school during the current school year is ~~Hw~~9,273,000:

01 Salaries for faculty (5)	Hw3,519,700
02 Temporary employees (3)	1,080,000
03 Part-time instructors' pay	1,857,300
04 Travel	3,300
07 Transportation, postage, telephone, electricity, water	1,184,700
08 Repair and maintenance	177,300
09 Consumable supplies, coal, and printing	413,400
10 Equipment	1,037,300

Student fees per semester are

Tuition fee	Hw 15,000
PTA fee	39,000
Laboratory fee	25,000
Student Health fee	500
Newspaper fee	1,700
Plus these extra fees for the 1st semester	
PTA entrance fee	10,000
University entrance fee	2,000

Total charges per student are

1st semester	93,200
2nd semester	81,200

The school reimburses the College of Medicine for utilities consumed. The only fees accruing to the school are the laboratory fees, one-half the university entrance fee, and a portion of the PTA fees. As related in the section on the college the apportionment of PTA fees is disputed at present so the school is not receiving any of these funds.

The school pays \$600 from the national budget to its part-time instructors for each teaching hour. In addition it is customary to add \$300 from PTA fee funds.

COMMENT: The current arrangement of sharing staff, facilities, and equipment by the school and the College of Medicine is exemplary. It certainly allows the school to operate more adequately with this budget. Although the expenditure of \$200 per student per year is small compared to American standards, it is equivalent to that provided for each medical student in this university. A graduate program in public health can not attain the excellence it should on this budget. As the economic situation improves, this school's budget should be increased.

Students

The authorized student body of this school is forty. Student's accepted must take a competitive examination and be interviewed by the staff. The staff is responsible for structuring the exam and grading it. Requirements for admission demand all candidates to be graduates of a recognized university or college and that they have had minimal science courses in their undergraduate work.

In 1959 the first class had 17 admissions but only 11 graduated; 41 registered in 1960 and 29 graduated. This year's class numbers 41 as two of last year's students are repeating the course because they were unable to

continue their studies at that time. There are nine females in the present class.

Of the eleven graduates in 1960, all were employed in positions requiring public health knowledge:

Armed forces (administrative positions)	5
Health Centers	2
National Institute for Public Health Training	2
Medical College	1
National Vaccine Laboratory	1

In 1961 twenty-eight of the graduates were employed in the following categories:

Health agencies	3
Armed forces	16
University faculty	1
High School Teaching	4
Industry	1
Advanced studies continued	3

COMMENT: The number of students applying for admission to this school has been just above the number authorized for enrollment therefore selection has been limited. When the faculty is increased and its own facilities are occupied, I believe more students will apply for admission.

The armed forces have regularly enrolled some of its officer personnel in the course and this practice should be continued provided well qualified officers are selected. There were nine officers in last year's class.

Strict adherence to the requirement that all students must have had a minimal undergraduate science curriculum is endorsed. The principles of public health if they are to be taught in one year require certain prerequisites in the student's education. As soon as possible the school should define these as their staff is not adequate nor is there time for providing elementary basic scientific knowledge.

The class size, I believe, is adequate to meet the needs of Korea. Most graduates will find government jobs and in the past and for the immediate future there is no evidence that the health of the nation has a high priority among the various services of the government.

Physical Plant and Equipment

Through this contract only a limited budget was provided this school for purchasing, teaching and research equipment. Since the Department of Preventative Medicine acquired much more equipment and is most cooperative with the administration of this school, basic needs are met.

Counterpart funds and commodities in the past six months were authorized to remodel an annex building of the College of Medicine specifically to provide a home for the School of Public Health. The college has decided to assign only three offices and one classroom in this building to the School of Public Health. The remainder of the building will be used as medical student activities rooms. The building before remodelling was used only as a carpenter shop. Of course, the college laboratories will continue to be shared as will laboratories used by the school faculty in conducting research.

COMMENTS: The cooperative use of equipment for teaching and research as illustrated by this school and the Department of Preventative Medicine is commendable. Maintenance and replacement of equipment must be more adequately provided for in the future.

The plans for the School of Public Health to utilize the remodelled annex building in its entirety will not materialize. The decision to allocate the first floor to medical students is firm for the time being. Since the students do not seem to efficiently use the space assigned to them

on the library floor, I cannot understand why they need additional rooms. The gathering of students on the first floor of the building will undoubtedly lead to noise and increase the already difficult security problem for the school. Then, too, the agreement for release of counterpart funds as signed by the Minister of Education indicated the funds would be used for the School of Public Health.

It is recommended that this space question be reviewed after the school has operated for a time in its new quarters. Experience should indicate whether or not more room is needed.

Library

The School of Public Health faculty and students have access to the College of Medicine library. The monographs pertaining to public health are few. Recent issues of the following public health journals are available:

A.M.A. Archives of Industrial Health
American Journal of Hygiene
American Journal of Public Health and the Nation's Health
American Journal of Tropical Medicine and Hygiene
Bulletin of Hygiene
Bulletin of World Health Organization
Public Health Reports

The students who have been admitted to the first three classes have been older in age and have not been as competent in English as are the university graduates of today. For this reason current literature in English has been of limited value to the students.

The faculty have provided Korean translations of the following texts:

Styles - Individual and Community Health
Anderson - Communicable Disease Control
Hill - Medical Statistics
Nolden and Taylor - Principles of Epidemiology

COMMENT: The school should make every effort to collect current and back issues of public health publications. Future students will use English with greater ease and library references must be available for them. Japanese publications may also be helpful as they undoubtedly report studies on problems common to these two countries.

Since the school is located adjacent to the College of Medicine, I believe the majority of journals and texts should be in the College library. It is really very accessible to the school. Only the personal books and possibly a few reference books should be kept in the school offices.

Curriculum

The original curriculum has been modified to fit the needs and the faculty of the school. As is often the case, the original curriculum was modelled after one of an American school. The Division of Health and Sanitation of USOM/Korea provided assistance to the school in its planning.

The school plans eventually to offer majors in eight areas:

1. Public Health Administration
2. Environmental Hygiene
3. Epidemiology
4. Biostatistics
5. Maternal and Child Health
6. Physiological Hygiene
7. Public Health Education
8. Public Health Nursing

Currently majors in 1, 2, 3, 4, and 7 are offered. And with only five authorized faculty members I suspect the other majors will not be offered until additional faculty is approved.

The following courses are offered by the school:

1. Public Health Administration
2. Epidemiology
3. Environmental Hygiene
4. Sanitary Inspection
5. Biostatistics
6. Maternal and Child Health
7. Physiological Hygiene
8. School Hygiene
9. Industrial Hygiene
10. Oral Hygiene
11. Mental Hygiene
12. Nutrition
13. Public Health Nursing and Midwifery
14. Tuberculosis Control
15. Leprosy Control
16. Venereal Disease Control
17. Public Health Education
18. Medical Regulations
19. Parasitology and Entomology
20. Radio-isotope Protection

Requirements for the master of public health degree include not more than 24 credits, an acceptable thesis and oral examination. Two lecture hours per week per quarter is allocated $\frac{1}{2}$ credit and $\frac{1}{2}$ credit of laboratory study requires 4 hours per week per quarter.

A faculty member is assigned to each student to advise him on his thesis preparation. The oral examination is given by two regular staff members of the school and College of Medicine plus one of the non-regular instructors.

The first quarter curriculum this year is listed below:

School of Public Health

DESCRIPTION OF COURSES

Abbreviations:

Ar To be arranged
Cr Credits

100A Elements of Public Health 1
100A 1 Topics in Public Health

E.H. Kwon, Cr 1
M 1050-1230 T 900-1040

April 3 Introduction
4 Population
10 Principle of Selection
11 Eugenics
17 Stimulants
18 "
24 Alcoholism
25 Narcotics

May 1 Weight and its Control
2 " " " "
8 Exercise-Fatigue-Rest
9 Sunlight
15 Geriatrics
16 "
22 Conservation of Vision
23 Community Health
Health in the Future

100A 2 General Aspects of Public Health

I.D. Kim, Cr 1
T 1050-1230
F 1050-1230

April 6 Introduction - Definition of Health
7 Major Causes of Illness and Deaths
13 Accidents
14 Air-Borne Disease - Viral Infection
20 " " " "
21 " " " "
27 Air-borne Infection - Bacterial Infection
28 " " " " "

May 4 Air-borne Infection - Bacterial Infection
5 Fecal borne Diseases
11 Helminthic Infection
12 General Means of Disease Control
18 Arthropod-Borne Diseases
19 Public Health Nutrition
25 Protection of Food, Water and Milk.

100B Elements of Public Health II

- 100B1 Public Health Nursing Cr Ar
100B2 Health Education. Chun, Cr Ar, T 1330-1510
100B3 Medical Care Um, Cr $\frac{1}{2}$ F 1330-1510
- April 7 Local Government: Types of Local Authority
14 Local Government: Two-tier Structure of Local Government
Comparison: British and Korean
Local Government Finance
Conduct of Local Government
21 Local Government: Offices of Local Authorities
Law Making and Public Health
Legislation
28 The Ministry of Health
Control of Local Authorities by the Central
Government
- May 5 Health Department of Local Authorities
Organization and Officers
12 National Health Service
Hospital and Specialist Services
Health Services Provided by
Local Health Authority
General Medical Service
19 Medical Services of Local Authorities
Welfare Services of Local Authorities
- 100B4 General Administration. Huh, Cr $\frac{1}{2}$, 1Q, Th 900-1040
100B5 Health Department Administration, Huh, $\frac{1}{2}$ Cr 1 Q T 1950-1230
- April 4 General Administration. Conception of Administration
6 Conception of Administration
11 Dimension of Administration
14 Approaches of Administration
18 Administrative Organization and Management
21 Principles of Administrative Organization
25 Line, Staff and Auxiliary Agency
27 Mid-Quarter Examination
- May 2 Organizational Consideration of Public Health Administration
Present Status in Korea
4 Present Organization in Korea
9 Present Organization in Korea
12 Present Organizational Patterns in U.S.
16 Present Organizational Patterns in U.S.
18 Present Organizational Patterns in Japan
23 Present Organizational Patterns in Japan
25 Summary; and Discussion on Reasonable Public
Health Organization in the Future.

- 100C Elements of Public Health III
 100C1. Maternal and Child Health Cr. Ar. W 900-1040
 100C2. Mental Health $\frac{1}{2}$ Cr
101. Public Health Administration and Field Work.
- 102 Environmental Sanitation. 1 Cr, M W. F.
- 102A Control of Food, Arthropods, and Rodents Cha, Cr 1/3
 F 900-1040
- April 7 Food Sanitation-General Discussion
 14 Food Infection and Food Poisoning
 21 Adulteration of Food; Sanitation of Food Establishment
 28 Arthropod-borne Disease
- May 5 Control of Arthropods of Medical Importance
 12 Control of Rats and Other Rodents
 19 Fumigation and Disinfection
- 102B Environmental Medicine Shim, Cr 1/3 W 1050-1230
- April 12 Introduction to Preventive Medicine
 26 Temperature
- May 3 Temperature, Humidity and Air Movement
 10 Effects of High and Low Barometric Pressure
 17 Noise
 24 Climate and Atmospheric Pollution
 Housing and Illumination
- 102C Aspects of Sanitary Engineering Hahn, Cr 1/3, M 1330-1510
- April 3 Introduction: Organization of Sanitary Activities
 10 Water Sanitation-General Discussion
 17 Water Purification
 24 Water Distribution, Storage, and Plumbing System;
 Swimming Pool Problem.
- May 1 Ground Water Supply and Rural Water Supply Problems
 8 Excreta Disposal, Rural and Urban
 15 Sewage and Industrial Waste Treatment
 22 Garbage and Refuse Disposal
- 103 Fundamentals of Bacteriology K.M. Lee Cr 1 M 900-1040
 W 1330-1510

April	5	Size, Shape, & Structure of Bacterial Cells
	10	Staining Reactions
	12	Taxonomy of Microorganisms
	17	Growth of Bacteria
		Nutrition of Bacteria
	24	Bacterial Metabolism, Cycles of Elements
	26	Variation of Bacteria
May	1	Bacterial Ecology
	3	Microbiology of Special Environments
	8	Sterilization and Disinfection
	10	Antibiotics and Chemotherapy
	15	Antigen and Antibodies
	17	Antigen-Antibody Reactions
	22	Antigen-Antibody Reactions
	24	Allergy

Appendix I: Medical Sciences Faculty as of April 19, 1961.

College of Medicine

Other

	Anatomy	Physiology	Biochemistry	Pharmacology	Parasitology	Medical History	Physical Training	Pathology	Microbiology	Preventive Medicine	Internal Medicine	Surgery	Pediatrics	Dermatology	Urology	Obstetrics & Gynecology	Oto-Rhino-Laryngology	Radiology	Ophthalmology	Psychiatry & Neurology	Dentistry	Clinical Pathology	Radioisotope Clinics	School of Nursing	College Totals	Attached Hospital	School of Public Health	GRAND TOTALS	
T.O. Staff: Total	5	5	4	4	1	1 ^a	1	5	4 ^a	4	17	12 ^b	6 ^a	3	3	5	3	2	4	3	4	1	1	3	101	3	5	106	
Foreign Study: Total	5	5	4	3	1	1		5	4	4	12	9	5	2	2	2	2	2	2	3	4	1	1	3	78	3	2	83	
Minn. Contract	5	3	4	3	1			2	2	1	7	8	3	2	1	1	2	1	2	3	3	1	1	3	56	3		59	
Other		2				1		3	2	3	5	1	2		1	1		1							22		2	24	
By Academic Rank average:																													
Prof. 50.3	2	2	1	1				1	2	2	6	2	2	1	1	1			1	1	1				27			27	
Assoc. Prof. 43.5	1	1	1		1			1	1	1	4	5	1	1	1	1	1	1	1	1					21			21	
Asst. Prof. 40.2		1	1	1		1 ^a		1	1	1	4	1	1	1		1	1	1	1	1	2			1	17	1	1	18	
Instructor 34.8	2	1	1	1			1		1 ^a	1	3	3 ^b	2 ^a	1		3	1	1	1	1	1	1	1	1	27	1	1	28	
Assistant 33.1			1	1				2				1	1	1	1									1	9			9	
Advanced Degrees																													
American Institutions																													
Master's		1		1				1	1		1													BS	6			6	
Ph.D.	1							1																	2	1		3	
Korean Institutions																													
Master's	2		1	1		1		2	2	7	1	1	1	1	2	2	2	1	1		2	1	1		29			29	
Ph.D.	2	2	1	1	1	1		3	2	2	10	3	1	1	3	2	2	1	2						38			38	
Third Country Institution																													
Master's																											1	1	
M.D.	1										2	2						1							6			6	
Ph.D.			1						1	1	3	1	2	1	1					2					13			13	
Non T/O Staff: Total					1			2	1		1	2			1					1				3	12	2	4	18	
Foreign Study: Total					1			2	1		1	2			1					1				3	12	2	4	18	
Minn. Contract					1			2	1		1	2			1					1				3	12	2	4	18	
By Academic Rank																													
Assistant					1			2	1		1	2			1					1				3	12		4	16	
Advanced Degrees																													
Master's, Korean Inst.					1			1	1		1	2													6		3	9	

^aT/O borrowed from the School of Public Health

^bPresently paid as "Special Faculty"

Appendix II: Sample Analysis of Curriculum in Anatomy

NUMBER OF HOURS IN ANATOMY COURSES

	SNU			U.S. Mean			U of M*		
	Lec.	Lab.	Total	Lec.	Lab.	Total	Lec.	Lab.	Total
Gross Anatomy	160	256	416	61	262	323	84	210	294
Neuro-anatomy				30	62	92	32	64	96
Histology	112	126	238	43	110	153	65	92	157
Embryology	32		32	21	41	62	31	42	73
GRAND TOTAL			654			630			620

*University of Minnesota

U.S. Mean is the average of up to 82 medical schools as shown in:

The Journal of Medical Education; the teaching of Anatomy and Anthropology in Medical Education. 31:110, 1956

Ratio of Lecture to Laboratory

	SNU		U.S. Mean		U of M	
	Lect :	Lab	Lect:	Lab	Lect :	Lab
Gross Anatomy	1	1.6	1	4.3	1	2.5
Neuro-anatomy			1	2	1	2
Histology	1	1.1	1	2.5	1	1.4
Embryology	1	0	1	2	1	1.3

Proposed changes to be considered:

1. Separate Neuro-anatomy from Gross Anatomy and teach it in 4th Quarter, as suggested in page 2.
2. Reduce the ratio of lecture to lab. in Gross Anatomy, keeping the same total number of hours.
3. Reduce the number of Histology lectures to 50%, and Histology lab to 80%.

Appendix II - continued

TOTAL HOURS OF LECTURES AND LAB.
Dept. of Anatomy, SNU

		1st Q (Fall)		2nd Q		3rd Q		4th Q	Total hrs.	
		SNU	U. of M.	Winter		Spring		term		
Gross Anatomy	Lect.	56	(42)	40	(42)	32		32	160	(84)
	Lab.	64	(105)	64	(105)				256	(210)
Neuro-anatomy	Lect.						(32)			(32)
	Lab.						(64)			(64)
Histology	Lect.	40	(34)	24		24	(31)		112	(65)
	Lab.	32	(42)	32		32	(50)	32	126	(92)
Embryology	Lect.		(31)							(31)
	Lab.		(42)							(42)

Gross Anatomy Laboratory and Lecture Hours*

	Hour per week	Days per week	Duration in weeks	Total Hours
SNU	8 (7-5-4-4)	2 (4-3-2-2)	24	187(128)
U. of M.	10 (4)	4 (4)	20	200(80)

*Figures in parenthesis represent the number of lecture hours.

ACADEMIC CALENDARS

University of Minnesota College of Medical Sciences

Fall Quarter 74 days or 10 weeks plus 1 week Final Exam. Period.

Winter " 73 " " " " " " " " " "

Spring Term 110 " " 15 " " " " " " "

Number of days of classes except exam. period and registration period, etc.

257 days per School Year

Seoul National University College of Medicine

1st Quarter 56 days or 8 weeks plus 1 week Final Exam. Period.

2nd " 56 days or 8

3rd " 56 days or 8

4th " 56 days or 8

Number of days of classes except exam. period and registration period, etc.

224 days or 32 weeks per School year.

PROPOSED ANATOMY TEACHING SCHEDULE

(April 1, 1961 - February 22, 1962)

Gross Anatomy Total number of lectures and laboratories - 416 hours
at least 2 to 3 hours laboratory work should be given per
1-hour lecture.

Staff	Section	No. of hours	Period
Dr. J. N. Kim	Upper and lower extremities	105	Most part of 1st Quarter (April 1 thru May 19)
Dr. M. B. Lee	Thorax and Abdomen	104	Mainly 2nd Quarter (May 22 thru July 19)
Dr. S. J. Rha	Head and neck	106	3rd Quarter (Sept. 1 thru Oct. 25)

Neuro-anatomy including sense organs

Dr. M. B. Lee	Lect. 32 Lab. 64	96	4th Quarter
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Comment: Osteology may be profitably taught in the first week of the period for each section.

	1st Quarter	2nd Quarter	3rd Quarter	4th Quarter
Prof. Rha			Head and Neck	
Prof. Lee		Thorax and Abdomen		Neuro-anatomy
Dr. Chang	Histology	Histology	Histology	Histology
Dr. Kim	Upper and Lower Extrem.		Embryology	Embryology

Appendix III: Sample Clerkship Schedule (Internal Medicine)

Eight groups of four junior students are assigned to Internal Medicine for a two-month period. Each student is assigned for four weeks to general medicine, for two weeks to the tuberculosis service, and for two to the communicable disease service.

Senior students are assigned to the Internal Medicine Outpatient Clinics.

	8:30-9:30	9:30-12:00	12:00-1:00	1:00-2:00	2:00-3:00	3:00-5:00
Mon.	Lecture	Senior;O.P.D. Practice Junior;ward Practice		Medical X-ray Conf.	G-I Seminar	Lecture
Tue.	"	"		Hematology Seminar	Infectious Disease Seminar	3:30 Interdepart- mental Lecture
Wed.	"	"		Resp. Disease Seminar	E.C.G. Seminar	Lecture
Thur.	"	"		Medical Grand Rounds		3:30 C.P.C.
Fri.	"	"		Medico- surgical Joint Conf.	Chest X-Ray Conf.	Lecture
Sat.	"	"				

Appendix IV: Scheduled Clinical Conferences and Seminars

<u>Monday</u>	X-ray Medical Conference	1300-1400 B Auditorium
	Neuropsychiatric Conference	1300-1400 Dept. of Psychiatry
	Tumor Conference	1300-1400 A Auditorium
	Hematology Conference	1300-1400 Dept. of Int. Med.
	OB & Gyn Grand Round	1300-1500 Dept. of OB & Gyn.
	C-I Seminar	1400-1500 Dept. of Int. Med.
	Pediatric Seminar	1400-1500 Dept. of Pediatrics
	Dermatology Seminar	1500-1600 Dept. of Dermatology
<u>Tuesday</u>	Urological Conference	0830-0930 Dept. of Urology
	Pediatric Grand Round	1330-1430 Dept. of Pediatrics
	OB & Gyn Seminar	1300-1500 Dept. of OB & Gyn
	Surgical Seminar	1300-1400 B Auditorium
	Infectious Disease Seminar	1400-1500 Dept. of Int. Med.
	Heart Conference	1400-1600 Dept. of Surgery
	Seminar (Anatomy of the eye)	1500-1600 Dept. of Ophthalmology
	Interdepartmental Lecture	1530-1700 Main Auditorium
<u>Wednesday</u>	E.N.T. Conference	0900-1000 Dept. of Otolaryngology
	Seminar on Metabolism	1300-1400 Dept. of Int. Med.
	Pediatric Surgical Conference	1300-1400 A Auditorium
	Chest Conference	1300-1400 X-Ray Reading Room
	Liver Biopsy Conference	1400-1500 Only in the 4th week
	E.C.G. Seminar	1400-1500 Dept. of Int. Med.
	E.N.T. Seminar	1500-1700 Dept. of E.N.T.
<u>Thursday</u>	Ophthalmological Conference	0900-1000 Dept. of Pediatrics
	X-Ray Urological Conference	0830-0930 Dept. of Urology
	Literature Review case Conference	0900-1000 Dept. of Ophthalmology
	Medical Grand Round	1000-1500 A-Auditorium
	X-Ray Pediatric Conference	1300-1500 X-Ray Reading Room
	OB & Gyn Pathological Conference	1400-1500 Dept. of OB & Gyn.
	Dermatology Seminar	1500-1600 Dept. of Dermatology
	C.P.C.	1530-1700 A Auditorium
<u>Friday</u>	Seminar (Ocular muscles)	1500-1600 Dept. of Ophthalmology
	Surgical Pathological Conference	0900-1000 Dept. of Pediatrics
	Prenatal Care	1300-1500 OB & Gyn C.P.D.
	Medical Surgical Joint Conference	1300-1400 A Auditorium
	Pediatric Journal Review	1600-1700 Dept. of Pediatrics
	Neurosurgical X-Ray Conference	1600-1700 A Auditorium (3rd Friday)
<u>Saturday</u>	Urological Seminar	0830-0930 Dept. of Urology
	Ophthalmological Seminar (Ocular Muscle)	0900-1000 Dept. of Ophthalmology
	X-Ray Surgical Conference	0900-1000 A-Auditorium
	Neuropsychiatric Conference	1200-1300 Dept. of Psychiatry
	Dental Clinical Conference	1300-1400 Dept. of Odontology
	Ophthalmic Pathomology	1300-1400 Dept. of Ophthalmology
	Resp. Dis. Seminar	1400-1500 Dept. of Int. Med.

Appendix V

Rehabilitation Projects and Financing

	<u>FY 55</u>	<u>FY 56</u>	<u>FY 57</u>	<u>FY 58</u>	<u>FY 59</u>
College of Medicine	\$ 10,560.83 Hw 20,633,300 Roofing Repair	\$ Hw 83,681,000 Heating System Water Supply System	\$4,179.31 Hw 50,620,000 Library Animal House	\$ Hw 37,037,000 Constant Temper- Room Gas-Producing Apparatus	\$ Hw 63,473,000 Auditorium Laboratories Public Health Sch. Transformer Room
University Hospital	\$72,755.43 Hw48,196,700 Department of OB - Gyn. Ophthalmology	\$ 123,800.00 Hw74,724,000 Heating System Water Tank Roofing Repair	\$278,111.58 Hw107,770,000 Electricity Screening Corridor Repair	\$51,118.92 Hw173,418,000 Fence Corridor of Ward Roofing Repair Pavement Operating Room	Hw 71,667,000 Hot Water Supply Fire Extinguisher Water Tank Laying Linoleum Mattress
Nursing School		\$99,985.89 Hw101,506,000 Nursing School Building	\$ 4,940.91 Hw13,487,000 School Furniture	\$49,903.74 Hw 241,232,000 Nursing School Dormitory	Hw23,180,000 Pavement Outside Light Toilet Exchange
Total	\$83,316.26 Hw68,830,000	\$223,785.89 Hw259,911,000	\$287,231.80 Hw171,877,000	\$101,022.66 Hw451,687,000	Hw158,320,000

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Appendix VI.

Name	Age	Degree	Rank	Other Employment	Program Participant period
COLLEGE OF MEDICINE					
1. Table of Organization (Regular) Staff Members					
<u>Dean</u>					
1. RHA, Saejin	52	'32 MD(KIU) '42 PhD(KIU)	Prof.	School of Medicine, Ewha University	13 Aug 58 - 11 Aug 59
<u>Department of Anatomy</u>					
1. RHA, Saejin*					
2. LEE, Myung Bok	48	'39 MD(KIU)	Prof.		22 Aug 58 - 19 Aug 59
3. CHANG, Shin Yo	42	'44 MD(Japan Med Col, Tokyo) '49 MS(SNU) '57 PhD(SNU)	Assoc Prof.	School of Medicine, Ewha University	6 Aug 56 - 26 Jun 57
4. SEONG, Key June	35	'53 MD(SNU) '56 MS(SNU)	Instr.		19 Aug 59 - (19 Aug 61)
5. KIM, Jae Nam	32	'53 MD(SNU) '59 PhD(Minn)	Instr.	Soo Do Medical College	13 Sep 55 - 6 Sep 59
<u>Department of Physiology</u>					
1. NAM, Kee Yong*	43	'41 MD(KIU) '53 PhD(SNU)	Prof.	Soo Do Medical College	15 Sep 55 - 24 Aug 56
2. KIM, Chul	45	'41 MD(KIU) '58 PhD(SNU)	Prof.	Korea University (1954-56, Yale Univ., AKF)**	

* Head of Department

** Studies abroad sponsored by other than ICA-Minn Contract.

Name	Age	Degree	Rank	Other Employment	Program Participant Period
3. LEE, Chong Hwan	54	'30 MD(KMC)	Assoc Prof.	(1955-57, Munich and Hamburg, Germany, ROK Gov't)**	
4. SHIN, Dong Hoon	39	'47 MD(SNU)	Asst Prof.	(1941-45 Kanazawa and Kyoto, Japan, Private)**	21 Aug 59 - (21 Aug 61)
5. RHEE, Sang Don	31	'53 MD(SNU) '57 MS(Minn)	Instr.	Soo Do Medical College	16 Sep 55 - 10 Sep 57

Department of Biochemistry

1. LEE, Ki Young*	46	'36 MD(KMC) '56 PhD(Paris U)	Prof.	(1941-43 Nagasaki Med Col, Japan; 1952-55, Pasteur Institute Paris, French Gov't)**	1 Jul 55 - 31 Dec 55
2. LEE, Zin Soon	42	'43 MD(KIU) '59 PhD(SNU)	Assoc Prof.	School of Medicine Ewha University	16 Dec 55 - 4 Jan 57
3. SUNG, Nak Eung	36	'50 MD(SNU)	Instr.		19 Aug 59 - 25 Aug 60
4. CHANG, Kim Yong	34	'53 MD(SNU)	Asst.	(1959- , Minnesota, Private)**	15 Sep 55 - 13 Sep 58

Department of Pharmacology

1. OH, Jin Sup*	52	'32 MD(KIU) '41 PhD(KIU)	Prof.	Director of Drug Institute	6 Aug 56 - 5 Jun 57
2. HONG, Sa Ack	40	'50 MD(SNU) '45 BS, Pharm(Kyung Seong)	Asst Prof.		23 Aug 57 - 22 Jun 58
3. LIM, Jung Kyoo	32	'53 MD(SNU) '58 MS(Minn)	Instr.		13 Sep 55 - 31 Dec 57
4. LEE, Min Chae	30	'59 MD(SNU)	Asst.		

Name	Age	Degree	Rank	Other Employment	Program Participant Period
<u>Department of Parasitology</u>					
1. SEO, Byong Seol*	39	'47 MD(SNU) '60 PhD(SNU)	Assoc Prof.		13 Sep 55 - 25 Aug 56
<u>Department of Medical History</u>					
1. LEE, Yong Tak*	39	'44 MD(Severance) '53 MS(SNU) '59 PhD(SNU)	Asst Prof.	(1959-61, Univ of Paris, French Gov't)**	
<u>Department of Physical Training</u>					
1. KIM, Sung Soo	41		Instr.	(1940-44, Nippon Gymnastic School, Japan, Private)**	
<u>Department of Pathology</u>					
1. LEE, Chae Koo*	50	'37 MD(KIU) '42 PhD(KIU)	Prof.		24 Feb 55 - 28 Jul 55
2. LEE, Sung Soo	38	'47 MD(SNU) '49 MS(SNU) '60 PhD(SNU)	Assoc Prof.	(1949-50, Cornell Univ., GARIOA)**	
3. LEE, Kyu-Sun	39	'44 MD(Severance) '50 MS(SNU) '60 PhD(SNU)	Asst Prof.	(1956-58, Univ Col Hosp Med Sch, London, British Council)**	
4. LEE, Sang Kook	32	'53 MD(SNU)	Asst.		22 Jun 55 - 22 Aug 58
5. PAIK, Seung Ryong	33	'53 MD(SNU)	Asst.	(1958-60, Meadowbrook Hosp, New York, Private)**	

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Name	Age	Degree	Rank	Other Employment	Program Participant Period
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Department of Microbiology

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|---------------------|----|--|-------------|--|----------------------|
| 1. KEE, Ryong Sook* | 55 | '29 MD(KMC)
'41 PhD(Manchuria
Med Col) | Prof. | Catholic Medical School

(1949-50, N.Y. State Lab., WHO,
1956-57, Univ of Calif, Pittsburgh Univ, US State Dept.)** | |
| 2. PARK, Chin Yung | 47 | '41 MD(KIU)
'56 PhD(SNU) | Prof. | | 6 Aug 56 - 1 Aug 57 |
| 3. LEE, Seung Hoon | 40 | '43 MD(KIU)
'59 PhD(SNU) | Assoc Prof. | (1954-56, Cornell Univ, AKF & Cornell Univ.)** | |
| 4. LEE, Ho Wang | 32 | '54 MD(SNU)
'58 MS(Minn)
'60 PhD(Minn) | Instr. | | 15 Sep 55 - 9 Dec 59 |

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Department of Preventative Medicine

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|----------------------|----|---|------------|--|-----------------------|
| 1. SHIM, Sang Hwang* | 52 | '35 MD(KMC)
'45 PhD(Kyoto) | Prof. | (1954, Univ of Philippines, Rockefeller)** | |
| 2. KIM, In Dal | 46 | '41 MD(KIU)
'56 PhD(SNU) | Prof. | (1954-55, Univ of Calif, AKF)** | |
| 3. KWON, E. Hyock | 37 | '47 MD(SNU)
'49 MS(SNU)
'60 PhD(SNU)
'56 MPH(Minn) | Asst Prof. | (1955-56, Univ of Minn, AKF)** | |
| 4. CHA, Chul Whan | 33 | '53 MD(SNU)
'58 MS(SNU) | Instr. | | 13 Aug 58 - 27 Aug 59 |

Name	Age	Degree	Rank	Other Employment	Program Participant Period
<u>Department of Internal Medicine</u>					
1. HAHN, Shim Suk*	47	'38 MD(KIU) '43 PhD(KIU)	Prof.		6 Jul 55 - 17 Jun 56
2. KIM, Kyung Sik	50	'37 MD(KIU) '45 PhD(KIU)	Prof.		21 Sep 59 - 20 Mar 60
3. KIM, Dong Ik	60	'24 MD(KMC) '32 PhD(Keio Univ, Japan)	Prof.	(1953-54, Letterman Army Hosp. US Army)**	21 Aug 59 - 18 Nov 59
4. KANG, Seung Ho	48	'36 MD(KMC) '43 PhD(Nagasaki)	Prof.	(1955-56, Harvard, AKF)**	
5. CHUN, Chong Hwee	47	'35 MD(KMC) '45 PhD(KIU)	Prof.		13 Sep 55 - 17 Sep 56
6. LEE, Sung Ho	46	'41 MD(KIU) '45 PhD(KIU)	Prof.		21 Jun 55 - 29 Jun 56
7. SONG, Ho Seung	47	'40 MD(KMC) '58 PhD(SNU)	Assoc Prof.	Director, Red Cross Tbc Hospital, Inchon	21 Jun 55 - 20 Aug 57
8. KIM, Eung Jin	45	'39 MD(KMC) '49 MS(SNU) '55 PhD(SNU)	Assoc Prof.		21 Sep 59 - 20 Mar 60
9. RO, Byung Ho	45	'39 MD(KMC) '61 PhD(SNU)	Assoc Prof.		
10. IM, Chung Soon	44	'41 MD(KMC) '61 PhD(SNU)	Assoc Prof.		
11. CHANG, Chai Heun	44	'41 MD(Severance)	Asst Prof.		

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Name	Age	Degree	Rank	Other Employment	Program Participant Period
12. KANG, Sok Yong	42	'43 MD(Kumamoto) '49 MS(SNU) '56 PhD(Kyoto)	Asst Prof.	Soo Do Medical College (1953-56, Univ of Kyoto, Private)**	
13. HUH, In Mok	40	'46 MD(SNU) '49 MS(SNU) '54 Doctor Med(Munich) '61 PhD(SNU)	Asst Prof.	Soo Do Medical College (1953-55, Univ of Munich, German Gov't)**	
14. LEE, Mun Ho	38	'46 MD(SNU) '47 MS(SNU) '60 PhD(SNU)	Asst Prof.	Soo Do Medical College (1954-57, Freiburg Univ, German Gov't)**	
15. MIN, Duk Sung	47	'43 MD(SWMC) '49 MS(SNU)	Instr.		
16. OH, In Hyuk	32	'52 MD(SNU) '55 MS(SNU)	Instr.		
17. MIN, Hyong Kee	32	'51 MD(SNU) '58 MS(SNU)	Instr.	(1959-60, Univ of Minn, Private)**	
<u>Department of Surgery</u>					
1. CHIN, Byong Ho*	51	'32 MD(KIU) '37 PhD(KIU)	Prof.		15 Sep 55 - 2 Jun 56
2. CHUN, Sung Kwan	50	'38 MD(KIU) '45 PhD(Kyung Seong)	Prof.		21 Sep 59 - 20 Mar 60
3. KIM, Ja Hoon	47	'38 MD(KMC) '61 PhD(Osaka)	Assoc Prof.		23 Aug 57 - 12 Aug 58

Name	Age	Degree	Rank	Other Employment	Program Participant Period
4. LEE, Chan Bum	46	'41 MD(SNU) '57 PhD(SNU)	Assoc Prof.	(1952-53, Fitzsimmons AH, US Army)**	21 Aug 59 - 14 Aug 60
5. HAHN, Moon Sik	42	'43 MD(KIU)	Assoc Prof.		19 Oct 59 - 10 Oct 60
6. PARK, Kil Soo	47	'42 MD(Nippon) '61 PhD(SNU)	Assoc Prof.		
7. LEE, Yung Kyoan	39	'44 MD(KIU)	Assoc Prof.		23 Aug 57 - 19 Aug 59
8. SIM, Bo Sung	36	'49 MD(SNU) '58 MS(Minn)	Asst Prof.		19 May 55 - 26 Aug 57
9. KIM, Yeh Heun	40	'51 MD(SNU)	Instr.		
10. RHEE, Dong Sik	35	'54 MD(SNU) '55 MS(SNU)	Instr.		16 Sep 55 - 16 Sep 57
11. WHANG, Junshick	34	'52 MD(SNU) '58 Dr. Med. (Göttingen Univ. Ger)	Instr.	(5 years study in London, Edinburgh, Göttingen, and USA)**	
12. KIM, Chang Song	39	'54 MD(SNU)	Asst.	<u>Department of Pediatrics</u>	
1. RIE, Kook Choo*	49	'35 MD(KIU) '45 PhD(KIU)	Prof.		
2. LEE, Tong Kee	49	'36 MD(KMC) '45 PhD(Tohoku Imp Univ, Japan)	Prof.		23 Aug 57 - 15 Aug 58
3. HONG, Chang Yee	37	'47 MD(SNU) '50 MS(SNU)	Asst Prof.		15 Sep 55 - 19 Sep 57

Name	Age	Degree	Rank	Other Employment	Program Participant Period
4. MOON, Hyung Ro	32	'52 MD(SNU)	Instr.	(1954-59, Englewood Hosp N.Y., St. Vincent's Hosp N.Y., AKF; Jefferson Med Col Hosp, Phila, Private)**	
5. CHO, Woon Hae	35	'50 MD(Kyung Puk) '60 PhD(Tokyo Univ)	Instr.	(1956-60, Univ of Tokyo)**	
6. KIM, Sang Hyup	33	'52 MD(SNU)	Asst.		8 Oct 60 - (8 Oct 61)
<u>Department of Dermatology</u>					
1. KIM, Sung Hwan*	56	'33 MD(KMC) '41 PhD(Keio, Japan)	Prof.		6 Aug 56 - 1 Aug 57
2. KIM, Hong Sik	40	'44 MD(KMC)	Asst Prof.		
3. LIM, Soo Duk	31	'55 MD(SNU) '58 MS(SNU)	Asst.		19 Aug 59 - (19 Aug 61)
<u>Department of Urology</u>					
1. LEE, Hak Song*	54	'32 MD(Severance) '39 PhD(Tokyo, Imperial)	Prof.	(1950-51, Johns Hopkins, GARIOA 1956 Johns Hopkins; Minchen, Ger., Private)**	
2. CHOO, Kun Won	43	'43 MD(KIU) '50 MS(SNU) '60 PhD(SNU)	Assoc Prof.		10 Aug 56 - 1 Aug 57
3. KIM, Haeng Sok	33	'53 MD(SNU) '56 MS(SNU)	Asst.		

Name	Age	Degree	Rank	Other Employment	Program Participant Period
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Department of Obstetrics and Gynecology

1. KIM, Suk Whan*	52	'32 MD(KIU) '39 PhD(KIU)	Prof.		14 May 55 - 2 Jun 56
			(1960, Sloan Kettering, Private)**		

2. SHIN, Han Soo	42	'42 MD(KIU) '49 MS(SNU) '61 PhD(SNU)	Assoc Prof.		
			(1949-54, Chicago Lying-In Hosp, Private New Haven Hosp, and Margaret Haegue Maternity Hospital)**		

3. BAI, Byong Choo	38	'50 MD(SNU) '51 MS(SNU) '59 PhD(SNU)	Instr.	Chief of OB & Gyn Dept. Red Cross Hospital	
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4. PARK, Chae Il	36	'50 MD(SNU)	Instr.		
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5. SHIN, Myun Woo	37	'50 MD(SNU)	Instr.		
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Department of Oto-Rhino-Laryngology

1. KIM, Hong Kee*	41	'44 MD(KIU) '50 MS(SNU) '61 PhD(SNU)	Assoc Prof.		23 Aug 57 - 22 Jun 58
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2. PAIK, Man Kee	39	'47 MD(SNU) '50 MS(SNU) '61 PhD(SNU)	Asst Prof.		16 Sep 55 - 25 Aug 56
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3. LEE, Yung Kil	33	'51 MD(SNU)	Instr.		
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Name	Age	Degree	Rank	Other Employment	Program Participant Period
<u>Department of Radiology</u>					
1. CHOO, Tong Woon*	45	'45 MD(Kumamoto Med Col, Japan) '50 MS(SNU) '60 PhD(SNU)	Assoc Prof.	(1958-59, St. Luke's Hospital, Chicago, Private)**	
2. KIM, Choo Wan	31	'53 MD(SNU)	Instr.	Seoul Electric Co. Hospital Capital Army Hospital	14 May 55 - 14 Oct 57
<u>Department of Ophthalmology</u>					
1. KONG, In Ho*	46	'41 MD(KIU) '45 PhD(KIU)	Prof.		6 Aug 56 - 1 Aug 57
2. YUN, Won Sik	41	'43 MD(KIU) '59 PhD(SNU)	Assoc Prof.	Consultant, Seoul Electric Co. Hospital	
3. HAHN, Chun Suk	43	'41 MD(KMC) '49 MS(SNU)	Asst Prof.		
4. KO, Choong Jae	38	'52 MD(SNU)	Instr.		19 Aug 59 - 3 Aug 60
<u>Department of Psychiatry and Neurology</u>					
1. MYUNG, Choo Wan*	56	'30 MD(KIU) '38 PhD(Kyoto, Japan)	Prof.	School of Medicine Ewha University (1952-53, Walter Reed Army Hospital, US Army)**	20 Aug 59 - 18 Nov 59
2. NAM, Myung Suk	44	'38 MD(Severance) '47 PhD(Kyushu)	Assoc Prof.	School of Medicine Yonsei University (1941-45, Kyushu Univ, Japan, Private)**	6 Aug 56 - 5 Jun 57
3. LEE, Chong Kyoon	38	'52 MD(SNU)	Instr.		21 Aug 59 - 23 Jun 60

<u>Name</u>	<u>Age</u>	<u>Degree</u>	<u>Rank</u>	<u>Other Employment</u>	<u>Program Participant Period</u>
<u>Department of Dentistry</u>					
1. CHEUNG, Yong Kook	60	'32 DDS(Kyung Seong Dental Col)	Prof.		
2. KIM, Yun Sook	49	'40 DDS(Kyung Seong Dental Col)	Asst. Prof.		
3. KIM, You Hwan	41	'44 DDS(Nippon Univ Dent Sch) '56 MS(SNU)	Asst. Prof.		
4. KIM, Chang Wook	34	'49 DDS(SNU) '57 MS(SNU)	Instr.		
<u>Department of Clinical Pathology</u>					
1. KIM, Sang In*	33	'55 MD(SNU) '57 MS(SNU)	Instr.		19 Aug 59 - 12 Aug 60
<u>Radioisotope Clinic</u>					
1. KANG, Soo Sang	29	'53 MD(SNU) '58 MS(SNU)	Instr.		21 Aug 59 - 12 Aug 60

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<u>Name</u>	<u>Age</u>	<u>Degree</u>	<u>Rank</u>	<u>Other Employment</u>	<u>Program Participant Period</u>
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COLLEGE OF MEDICINE

2. Non Table of Organization (Regular) Staff Members

Department of Parasitology

1. RIM, Hahn Jong	29	'57 MD(SNU) '59 MS(SNU)	Asst.		28 Sep 59 - 22 Sep 60
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Department of Pathology

1. PARK, Yong Keun	34	'57 MD(SNU)	Chief Resident, Clin. Lab.		25 Jun 60 - (25 Jun 62)
2. RHO, Yung Myun	31	'55 MD(SNU) '58 MS(SNU)	Asst.		26 Aug 59 - (26 Aug 61)

Department of Microbiology

1. PAI, Chik Hyun	30	'55 MD(SNU) '57 MS(SNU)	Asst.		3 Sep 59 - (3 Sep 61)
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Department of Internal Medicine

1. HAN, Yong Chol	31	'56 MD(SNU) '59 MS(SNU)	Asst.		17 Aug 59 - (17 Aug 61)
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Department of Surgery

1. CHU, Joong Wha	31	'56 MD(SNU) '58 MS(SNU)	Asst.		21 Aug 59 - (21 Aug 61)
2. LEE, Hwa Young	31	'56 MD(SNU) '59 MS(SNU)	Asst.		21 Aug 59 - (21 Aug 61)

Name	Age	Degree	Rank	Other Employment	Program Participant Period
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Department of Urology

1. LEE, Hee Yung	39	'51 MD(SNU)	Asst.		19 Aug 59 - 8 Sep 60
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Department of Psychiatry and Neurology

1. MYUNG, Ho Jin	30	'58 MD(SNU)	Asst.		28 Dec 59 - (28 Dec 61)
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Name	Age	Rank	Degree	Dates	Place	Studied Abroad	Sponsor
COLLEGE OF MEDICINE							
3. Clinical Staff Members							
<u>Administration</u>							
1. PARK, Choo Byong	59	Clin.Prof.	'22 MD(SNU) '26 PhD(Germany)				
<u>Anatomy</u>							
1. KIM, Dong Chang	31	Clin.Instr.	'54 MD(SNU) '56 MS(SNU)	1956-57	St. Clare's Hosp, N.Y.,		Private
<u>Biochemistry</u>							
1. CHOI, Hahn Ung	44	Clin.Assoc.Prof.	'41 MD(SNU)				
<u>Pharmacology</u>							
1. KANG, Soo Sang	30	Clin.Instr.	'53 MD(SNU) '58 MS(SNU)	1960-61	Minnesota		
2. LEE, Chang Kyoo	35	Clin.Instr.	'50 MD(SNU) '54 MS(SNU)				
<u>Medical History</u>							
1. KIM, Doo Jong	65	Clin.Prof.	'24 MD(Kyodo Med Col, Japan) '45 PhD(Manchuria Med Col)	1957-58	Johns Hopkins Univ.		Rockefeller & Private

Name	Age	Rank	Degree	Dates	Place	Studied Abroad	Sponsor
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Pathology

1. CHUNG, Whan Kook	39	Clin.Asst.Prof.	'49 MD(Taekoo Med Col)				
2. KIM, Ki Hong	40	Clin.Asst.Prof.	'47 MD(SNU)				
3. RINGSTED, Jorgen	38	Clin.Assoc.Prof.	'49 MD(Copenhagen Univ.) '60 PhD(Copenhagen)				

Microbiology

1. LEE, Kyu Myung	40	Clin.Asst.Prof.	'42 MD(KIU) '52 MS(Cornell Univ.)	1949-52	Cornell Univ.		
2. KALBAK, Kaj.	52	Clin.Prof.	'38 MD(Copenhagen) '43 Jasdosendi Degree(Copenhagen)				
3. PARK, Seung Hahn	35	Clin.Instr.	'51 MD(SNU)	1955-56	Letterman Army Hosp.		US Gov't

Preventive Medicine

1. CHOI, Jin	35	Clin.Instr.	'48 MD(SNU)				
2. LEE, Chong Chin	44	Clin.Prof.	'39 MD(Pyong Yang) '45 PhD(SNU)	1952-53	Sch of Pub Health, Johns Hopkins		WHO
3. UM, Chang-hyun	36	Clin.Instr.	'53 MD(SNU) '56 MS(London Univ.) '56 PhD(London Univ.)	1955-57	London Univ. & I.A.E.		
4. WON, Myung Soo	45	Clin.Assoc.Prof.	'40 MD(KIU)				

Internal Medicine

1. BERLIN, Ragnar O.M.		Clin.Prof.	'51 MD(Sweden)	1950-60	British, France, West German		
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Name	Age	Rank	Degree	Dates	Place	Studied Abroad	Sponsor
2. CHUNG, Hee-Young	36	Clin.Instr.	'50 MD(SNU) '58 MS(SNU)	1957-58	Nat'l Institutes of Health		UNKRA
3. JON, Dong Soo	35	Clin.Instr.	'50 MD(SNU) '56 MS(SNU) '61 PhD(SNU)				
4. JONG, Hae Wohn	35	Clin.Asst.Prof.	'48 MD(SNU)	1958-59	Tripler Army Hosp.		US Army
5. KANG, Hyung Ryong	40	Clin.Instr.	'48 MD(SNU) '53 MS(SNU)				
6. KANG, Son Jeh	46	Clin.Instr.	'48 MD(SNU) '59 MS(SNU)				
7. KIM, Chong Suhl	37	Clin.Asst.Prof.	'47 MD(SNU)	1953-54 1957-58	US Naval Hosp. Oakland Karlstad Central Hosp, Sweden		US Navy
8. KIM, Do Jin	37	Clin.Asst.Prof.	'49 MD(SNU)	1955	13th Air Force Hospital		US Army
9. KIM, In Yong	33	Clin.Instr.	'53 MD(Kwanchoo) '58 PhD(Freiburg)	1956-59	Freiburg Univ.		West Germany Gov't
10. KIM, Kyo Myung	38	Clin.Asst.Prof.	'47 MD(SNU) '50 MS(SNU)	1958-59	Univ. of Philippines		ICA
11. KIM, Suk Keun	35	Clin.Instr.	'51 MD(SNU)	1958-59	Institute of Hygiene, Univ. of Philippines		ICA
12. KIM, Woo Yung	38	Clin.Asst.Prof.	'49 MD(SNU) '50 MS(SNU)	1956-57	Walter Reed Army Hosp.		
13. KO, Chan Sung	37	Clin.Instr.	'47 MD(Severance)				
14. LAURSEN, Laurits	60	Clin.Prof.	'23 MD(Copenhagen)				

Name	Age	Rank	Degree	Dates	Place	Studied Abroad	Sponsor
15. LEE, Bong Kee	35	Clin.Instr.	'52 MD(SNU)	1955-59	Saint Louis Hospital		Missouri
16. LEE, Chang Hee	38	Clin.Asst.Prof.	'44 MD(SNU)				
17. LEE, Joo Hee	54	Clin.Prof.	'36 MD(KIU) '38 MS(KIU) '41 PhD(KIU)	1956-57	Sch of Pub Health Johns Hopkins Univ.		ICA
18. LEE, Jung Joo	39	Clin.Asst.Prof.	'45 MD(SNU) '49 MS(SNU)				
19. PARK, Choong Suh	35	Clin.Instr.	'54 MD(Kyung Book)	1955-56	Baltimore		
20. PARK, Hi Chan	44	Clin.Assoc.Prof.	'43 MD(KIU)				
21. SON, E Sok	41	Clin.Asst.Prof.	'47 MD(SNU) '60 PhD(Kobe, Japan)	1951 1952-57	Army Medical Field Serv. Sch. Henry Ford Hospital		US Army Private
22. SONG, Son Bo	36	Clin.Instr.	'47 MD(SNU) '50 MS(SNU)				
23. SONG, Tae Sup	37	Clin.Instr.	'51 MD(SNU)	1954-57	Columbia Univ, NY		Private
24. WON, Chong Duk	39	Clin.Instr.	'45 MD(Pyung Yang)	1956-57	Observation U.S.A.		

Surgery

1. CHAI, Han Sang	32	Clin.Instr.	'52 MD(SNU)				
2. CHANG, Ik Yull	38	Clin.Instr.	'49 MD(SNU)	1954-55 1959-60	US Naval Hosp, Bethesda US Naval Hosp, Bethesda		US Navy US Navy

Name	Age	Rank	Degree	Dates	Place	Studied Abroad	Sponsor
3. KIM, Bong Seo	45	Clin.Assoc.Prof.	'42 MD(KMC) '49 MS(SNU) '59 PhD(Chonnam)				
4. KIM, Bong Suh	45	Clin.Assoc.Prof.	'42 MD(SNU) '49 MS(SNU)				
5. LEE, Yung Lim	46	Clin.Asst.Prof.	'41 MD(KIU)				
6. OH, Hyun Mook	43	Clin.Assoc.Prof.	'44 MD(SNU) '50 MS(SNU)				
7. RO, Yak Woo	36	Clin.Instr.	'48 MD(SNU)	1955	Albans Hospital N.Y.		
8. SUH, Yong Won	41	Clin.Assoc.Prof.	'43 MD(Taegu) '51 MS(SNU)	1955-58	Univ. of Maryland		Private
9. YUN, Kyung Hyun	40	Clin.Asst.Prof.	'47 MD(SNU) '50 MS(SNU)				
10. RHIM, Kwang Se	37	Clin.Asst.Prof.	'47 MD(SNU)	1955-56	Walter Reed Army Hosp.		US Army
<u>Pediatrics</u>							
1. CHANG, Chai Sum	41	Clin.Assoc.Prof.	'40 MD(Tokyo Med. Col, Japan)	1956-57	Johns Hopkins		Private
2. IMERSLUND, Olga	54	Clin.Prof.	'33 MD(Oslo)				
3. KANG, Won Ja	30	Clin.Instr.	'53 MD(Seoul Women's Med.Col) '56 MS(SNU)	1959-60	State Serum Institute, Denmark		ICA
4. LEE, Kum Soo	38	Clin.Instr.	'48 MD(SNU) '50 MS(SNU) '57 PhD(Sidney, Australia)	1957-58	Sidney University, Australia)		

Name	Age	Rank	Degree	Dates	Place	Studied Abroad	Sponsor
5. LEE, Sun Keun	51	Clin.Prof.	'24 MD(Kyung Sung) '41 (Kuy Shuy Med Col, Japan)				
6. SKOGLUND, Erling	35	Clin.Prof.	'55 MD(Sweden)				
<u>Dermatology</u>							
1. LEE, Yu Shin	34	Clin.Instr.	'49 MD(SNU)				
2. NORLAND, Robert	54	Clin.Prof.	'38 MD(Stockholm) '46 PhD(Stockholm)				
<u>Urology</u>							
1. KIM, Sae Kyung	41	Clin.Asst.Prof.	'45 MD(SNU) '49 MS(SNU)	1955-59	Baltimore		
2. KIM, Young Kyoon	35	Clin.Asst.Prof.	'49 MD(SNU)	1953-56	Philadelphia Gen.Hosp; Johns Hopkins		Private
3. PARK, Key Ha	31	Clin.Instr.	'54 MD(SNU) '56 MS(SNU)				
<u>Obstetrics and Gynecology</u>							
1. LEE, Chong Yoon	34	Clin.Instr.	'54 MD(SNU) '56 MS(SNU)				
2. OH, Jin Jin	34	Clin.Instr.	'53 MD(SNU)				
3. PARK, Chan Moo	39	Clin.Asst.Prof.	'47 MD(SNU) '50 MS(SNU)				
<u>Otorhinolaryngology</u>							
1. BLOMQUIST, Erik	51	Clin.Asst.Prof.	'40 MD(Sweden)				

Name	Age	Rank	Degree	Dates	Place	Studied Abroad	Sponsor
2. CYNN, Kyu Sic	34	Clin.Instr.	'50 MD(SNU)				
3. HAHN, Ki Taik	58	Clin.Prof.	MD(KIU) MS(KIU)				
4. LEE, Son Chul	37	Clin.Instr.	'47 MD(SNU)				
5. NOH, Kwan Taek	30	Clin.Instr.	'55 MD(SNU) '57 MS(SNU)	1959-60	US Naval Hosp, Philadelphia		US Navy
6. RO, Chong Moon	42	Clin.Asst.Prof.	'45 MD(KIU)				
7. SHIM, Seung Sub	31	Clin.Instr.	'53 MD(SNU)				

Radiology

1. CHO, Choong Sam	48	Clin.Prof.	'37 MD(SNU)				
2. HANSON, Lougen	62	Clin.Prof.	'25 MD(Copenhagen) '42 PhD(Copenhagen)				
3. KIM, Jae Seup	37	Clin.Instr.	'51 MD(SNU)				
4. SONG, Ik Hoon	35	Clin.Instr.	'54 MD(SNU)				

Ophthalmology

1. KOO, Bon Sool	35	Clin.Instr.	'50 MD(SNU)	1955-56	Letterman Army Hosp		US Army
2. LARSEN, Victor	61	Clin.Prof.	'25 MD(Copenhagen) '33 PhD(Copenhagen)				
3. YOON Bong-Hun	54	Clin.Prof.	'30 MD(KIU) '45 PhD(KIU)	1952-53	Letterman Army Hosp		US Army

Name	Age	Rank	Degree	Dates	Place	Studied Abroad	Sponsor
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Psychiatry and Neurology

1. KIM, Oh Hyuk	33	Clin.Instr.	'50 MD(SNU)	1955-56	Univ. of Colorado		US Gov't
2. MIN, Byong Keun	34	Clin.Instr.	'52 MD(SNU)	1957-60	N.Y. Univ.; Kings Park State Hosp.		N.Y. Univ.
3. LEE, Bongky	34	Clin.Instr.	'52 MD(SNU)	1956-59	St. Louis State Hospital, St. Louis, Mo.		Private
4. LEE, Chi Yung	27	Clin.Instr.	'58 MD(Ewha)				

Physical Medicine and Rehabilitation

1. AN, Yong Pal	35	Clin.Asst.Prof.	'57 PhD(Munich, Germ.)	1955-59	Munich Univ. Germany		Private
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Name	Age	Degree	Rank	Other Employment	Program Participant Period
SCHOOL OF NURSING (College of Medicine)					
1. Table of Organization (Regular) Staff Members					
1. LEE, Kwi Hyang	50	'29 Nursing (Severance)	Director and Asst Prof.	(1955-56, Australia, Colombo Plan)	20 Aug 56 - 18 Feb 57
2. CHOI, Ai Ok	34	'50 Nursing(SNU) '59 BS(Kuk Min College)	Instr.	(1955-57, Australia, AKF and Colombo Plan)	17 Aug 59 - 12 Aug 60
3. HONG, Yeo Shin	27	'54 Nursing(SNU) '61 BS(Minn)	Asst.		13 Aug 58 - 27 Mar 61
2. Non-Table of Organization (Regular) Staff Members					
1. LEE, Sung Hak	24	'59 BS(Nursing) (Ewha)	Asst.		21 Mar 60 - (21 Sep 61)
2. CHO, Yun Sup	27	'54 Nursing(SNU) '58 BA(Social Work) (Ewha)	Asst.		27 Jan 60 - (27 Jun 61)
3. YOO, Hea Soo	24	'59 BS(Nursing) (Yonsei)	Asst.		25 Jun 60 - (25 Jun 61)

Name and Subject Taught	Age	Degree	Rank	Dates	Place	Studied Abroad	Sponsor
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3. Non-Table of Organization (Non-regular) Staff Members for Freshman and Sophomore Classes**

1. YOO, Kae Won Home Economics	44	'39 Bachelor (Japan)	Instructor				
2. KIM, Soon Hae Anatomy	30	'56 MD(SNU) '59 MS(SNU)	Assistant				
3. LEE, Pyong Woo German Language	28	'56 Bachelor(SNU)	Instructor				
4. KIM, Sung Soo Physical Training	41		Instructor	1940-44	Nippon Gymnastic School Japan		Private
5. RIM, Hahn Jong Parasitology	29	'57 MD(SNU) '59 MS(SNU)	Assistant	1959-60	Univ. of Minn.		ICA
6. BANG, Chang Mo Mathematics	31	'53 Bachelor(SNU) '57 MA(SNU)	Instructor				
7. LIM, Jung Kyoo Pharmacology	32	'53 MD(SNU) '58 MS(Minn)	Instructor	1955-57	Univ. of Minn.		ICA
8. HONG, Sa Aek Pharmacology	40	'50 MD(SNU) '45 BS, Pharm(Kyong Seong)	Asst. Prof.	1957-58	Univ. of Minn.		ICA
9. LEE, Ho Wang Microbiology	32	'54 MD(SNU) '58 MS(Minn.) '60 PhD(Minn.)	Instructor	1955-59	Univ. of Minn.		ICA
10. MYUNG, Bok Hyon	25	'60 Bachelor(SNU)	Dietitian, Attached Hospital				
11. KIM, Ung Chan	39	'48 BS(SNU)	Pharmacist, Attached Hospital				

** Faculty for the Junior and Senior Classes are listed in 1 and 2 above and in the College of Medicine roster.

Name and Subject Taught	Age	Degree	Rank	Dates	Place	Studied Abroad	Sponsor
12. KANG, Kwang Kyoo Psychology	33	'51 BS(SNU)	Instructor				
13. JONG, Byung Wook Korean Language	38	'48 BS(SNU)	Instructor				
14. PARK, Sung Kwan English Language	43	'41 BS(Japan)	Instructor				
15. CHOO, Hong Mo Philosophy	39	'53 BS(SNU)	Instructor				
16. KWON, E Hyock Medical English	37	'47 MD(SNU) '49 MS(SNU) '60 PhD(SNU) '56 MPH(Minn.)	Asst. Prof.	1955-56	Univ. of Minn.		AKF
17. LEE, Jong Hwan Physiology	54	'30 MD(KMC)	Assoc. Prof.	1955-57	Munich, Germany		ROK Gov't
18. CHA, Chul Whan Preventative Medicine	33	'53 MD(SNU) '58 MS(SNU)	Instructor	1958-59	Univ. of Minn.		ICA
19. UM, Chang Hyun Public Health	35	'54 MD(SNU) '55 CPH(Univ London) '56 DPH(Univ London)	Instructor	1955-57	London Sch of Hygiene & Tropical Medicine		Brit Council
20. SON, Hong Chong Biology	28	'57 BS(SNU)	Instructor				
21. SUNG, Nak Eung Chemistry, Biochemistry, Nutrition	36	'50 MD(SNU)	Instructor	1959-60	Univ. of Minn.		ICA
22. HA, Sang Nak Sociology	45	'42 BS(Japan)	Instructor	1955-56	Univ. of Minn.		

Name and Subject Taught	Age	Degree	Rank	Dates	Place	Studied Abroad	Sponsor
23. LEE, Sang Kook Pathology	32	'53 MD(SNU)	Assistant	1955-58	Univ. of Minn.		ICA
24. MIN, Doo Kee World History and Culture	28	'55 BA(SNU) '58 MA(SNU)					
25. (Instructor not selected as of this date) Natural Sciences							

Name	Age	Degree	Rank	Other Employment	Program Participant Period
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ATTACHED HOSPITAL

1. Table of Organization (Regular) Staff Members*

1. LEE, Song Hi	33	'50 Nursing(SNU)	Chief Nurse (1952-53, Med Fld Serv School Fort Sam Houston, Texas)		20 Aug 56 - 12 Aug 57
2. KANG, Yoon Hi	31	'50 Nursing(SNU)	Supervisor		17 Aug 59 - 27 Mar 61
3. KIM, Un Sook	31	'50 Nursing(Pusan) '58 BA(Sook Myung Women's Univ)	Head Nurse		17 Aug 59 - 26 Feb 60

2. Non-Table of Organizational (Regular) Staff Members*

1. KIM, Sang Chan	28	'56 BA(SNU)	Civil Serv. Employee		19 Aug 59 - (19 Aug 61)
2. PARK, Chong Sik	25	'58 BA(SNU)	Civil Serv. Employee		25 Jun 60 - (25 Jun 61)

* Only participants in this project are listed.

Name	Age	Degree	Rank	Other Employment	Program Participant Period
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SCHOOL OF PUBLIC HEALTH

1. Table of Organization (Regular) Staff Members

1. LEE, Kyu Myung	39	'46 MD(Kyung Seong) '54 PhD(Cornell)	Asst Prof.	(1949-54, Cornell University, ROK Gov't)	
2. UM, Chang Hyun	35	'54 MD(SNU) '55 CPH(Univ London) '56 DPH(Univ London)	Instr.	(1955-57, London Sch of Hygiene & Tropical Medicine, British Council)	

2. Non-Table of Organization (Regular) Staff Members

1. CHOI, Nung Won	29	'58 MD(SNU)	Asst.		19 Aug 59 - (19 Aug 61)
2. HUH, Chung	28	'57 MD(SNU) '57 MS '60 MPH(Minn)	Asst.		28 Sep 59 - 29 Aug 60
3. KO, Ung Rin	30	'57 MD(SNU) '59 MS(SNU)	Asst.		28 Sep 59 - (28 Sep 61)
4. PARK, Hyung Jong	30	'56 MD(SNU) '58 MS(SNU)	Asst.		3 Aug 60 - (3 Aug 61)

Name	Age	Degree	Rank	Dates	Place	Studied Abroad	Sponsor
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SCHOOL OF PUBLIC HEALTH

3. Non-Table of Organization (Non-regular) Staff Members

CHAE, Rai Suk	52	'35 BS(Keijo Pharm.Col)					
Associate Director, National Chemical Laboratories, Ministry of Health and Social Affairs.							
CHANG, Duk Seung	56	'41 MD(KIU) '59 PhD(SNU)					
Surgeon General, ROK, Air Force							
CHOI, Jae Wee	53	'35 MD(KIU) '38 PhD(KIU)					
Head, Sorokto Leprosarium, Ministry of Health and Social Affairs.							
CHOI, Yung Tai	51	'30 MD(Severance) '36 PhD(Osaka Imp. Univ)		1947-48	Univ. of Minn. Sch. of Pub. H.		
Head, Medical Service, Dai Hahn Coal Company							
CHU, In Ho	41	'42 MD(KIU) '46 MPH(Michigan) '54 PhD(SNU)		1945-46	Univ. of Mich. Sch. of Pub. H.		Rockefeller
Associate Professor at Soo Do Medical College.							
CHUN, Byung Hwoon	33	'52 MD(SNU) '59 Cert. Pub.Health (Univ of Philippines)		1958-59	Univ. of Philippines Institute of Pub. H.		ICA
Head, Medical Service Section, Ministry of Health and Social Affairs.							
CHUNG, Hi Sup	41	'43 MD(Pyung Yang) '54 PhD(Nagasaki, Japan)					
Surgeon General, ROK, Army							
HAHN, Sang Tae	32	'55 MD(SNU) '57 MPH(Minn)		1956-57	Univ. of Minn. Sch. of Pub. H.		WHO
Chief, Facility Section, Ministry of Health and Social Affairs							

Name	Age	Degree	Rank	Dates	Place	Studied Abroad	Sponsor
HUH, Kum Director, National Chemical Laboratories, Ministry of Health and Social Affairs	43	'38 BS(Kinazawa, Pharm. Col. Japan)		1953-54	Johns Hopkins Univ. Sch. of Pub. H.		WHO
KIM, Chu Sung Associate Professor, Sook Myung University	42	'40 MD(Severance) '55 MPH(Minn.)		1954-55	Univ. of Minn. Sch. of Pub. H.		AKF
KIM, Ki Chun Surgeon General, ROK Navy	45	'40 MD(Nippon, Japan) '45 PhD(Nagoya, Japan)		1953-54	Bethesda Naval Hosp.		US Navy
KIM, Kyung Ho Chief, Virus Section, National Vaccine Laboratory, Ministry of Health and Social Affairs.	38	Veterinarian by Nat'l Exam		1951-52 1958	Calif. State Lab. Virus Institute Malai Univ, Singapore		WHO
KIM, Myung Ho Director, Ko-yang Public Health Center	37	'45 MD(Taegu Med.Col.) '55 MPH(Minn.)		1954-55	Univ. of Minn. Sch. of Pub. H.		AKF
KIM, San Tai Chief of Production, Vaccine Laboratory, Ministry of Health and Social Affairs	36	'48 MD(SNU)		1954-55	N.Y. State Public Health Laboratories		
KIM, Yong Sung Chief, Preventative Medicine Section, Ministry of Health and Social Affairs.	33	'51 MD(SNU) '56 MPH(Univ. of Calif)		1955-56	Univ. of Calif. Sch. of Pub. H.		AKF
KOO, Yun Chul Assistant Professor, Ewha University	38	'48 MD(SNU) '53 Cert. Pub. H. (Univ. of Philippines)		1952-53	Institute of Pub. H. Univ. of Philippines		
LEE, Chong Chin Private practice	44	'39 MD(Pyungyang) '45 PhD(Kyung Seong) '53 MPH(Johns Hopkins)		1952-53	Sch. of Pub. H. Johns Hopkins Univ.		WHO

Name	Age	Degree	Rank	Dates	Place	Studied Abroad	Sponsor
LEE, Chong Hak	46	'40 MD(Pyongyang) '56 MPH(Yale Univ.)		1955-56	Sch. of Pub. H. Yale Univ.		
Professor, National Institute for Public Health Training.							
LEE, Chong Seung	39	'46 (Severance)		1954	United States		
Head, National Vaccine Laboratories, Ministry of Health and Social affairs							
LEE, Choo Hi	54	'36 MD(KIU) '41 PhD(KIU)		1956-57	United States Observation		ICA
Former Director, Seoul Electric Company Hospital							
LEE, Pyung Hak	41	'41 MD		1947-48	Univ. of Michigan		
Vice-Minister of Health and Social Affairs							
LEE, Yong Sung	44	'39 MD(KMC) '58 Cert. Pub. H.(Philippines)		1957-58	Institute of Pub. H. Univ. of Philippines		ICA
Chief, Medical Service Bureau, Ministry of Health and Social Affairs.							
LEE, Yung Chun	57	'29 MD(Severance) '34 PhD(Tokyo Imp. U)					
Head, Kaejung Rural Health Center, Cholla Pukto							
PARK, Jai Bin	35	'49 MD(SNU) '59 PhD(Univ. of Calif.)		1955-59	Univ. of Calif.		AKF
Consultant to Statistics Bureau, Ministry of Home Affairs							
PAIK, Nam Chin	43	'45 MD(Taegu Med.Col) '47 MPH(Pittsburgh)		1956-57	Univ. of Pittsburgh		WHO
Professor, National Institute for Public Health Training							
SO, Chin Taik	40	'41 MD(Severance) '60 PhD(Yonsei)		1955-56	Tulane Univ.		WHO
Associate Professor, Yonsei University School of Medicine							
SOHN, Kyung Chun	41	'40 (Ewha)		1947-48	Univ. of Minn.		
Associate Professor, Ewha University							

Name	Age	Degree	Rank	Dates	Place	Studied Abroad	Sponsor
SONG, Hyung Rai	46	'38 MD(KMC)		1945-46	Harvard Sch. of Pub. H.		Rockefeller
		'46 MPH(Harvard)		1954-55	Harvard Sch. of Pub. H.		AKF
Former Director, Medical Service Bureau, Ministry of Health and Social Affairs.							
YANG, Jae Mo	41	'48 MS(Severance)		1954-55	Univ. of Michigan Sch. of Pub. H.		AKF
		'55 MPH(Michigan)					
		'61 PhD(Yonsei)					
Assistant Professor, Yonsei University Medical School							
YU, Choon	45	'41 MD(KMC)		1951-55	Univ. of Calif.		Private
		'55 PhD(Univ. of Calif.)					
Professor, Yonsei University Medical School							
YUN, Suk Woo	34	'48 MD(Severance)		1954-55	Univ. of Michigan Sch. of Pub. H.		WHO
		'55 MPH(Univ. of Michigan)					
Chief, Public Health Section, Ministry of Health and Social Affairs.							
YUN, Yu Sun	50	'35 MD(Severance)		1946-47	Johns Hopkins Univ. Sch. of Pub. H.		WHO
		'45 PhD(Tokyo Imp. Univ.)					
Director, National Institute for Public Health Training							