

Manual M-2, Clinical Affairs/Programs. Part I, General

Chapter 11, Distinguished Physician (DP) Program (Paragraphs 11.01 through 11.12)
Revises Chapter 11 dated January 6, 1981

This document includes:

Memorandum, dated **July 23, 1985**
Contents page for M-2, dated **June 1989**
Title page and title page verso for M-2, Part I, dated **February 9, 1990**
Contents page and Rescissions pages for M-2, Part I, dated **April 7, 1995**
Contents page for Chapter 11, dated **October 12, 1993**
Rescissions page for Chapter 11, dated **October 12, 1993**
Text for Chapter 11, dated **October 12, 1993**

Transmittal sheet located at the end of the document:
Sheet dated **October 12, 1993**

Changes prior to 1993 located at the end of the document:

Change 64, dated **January 6, 1981**
Change 55, dated **April 9, 1974**
Change 52, dated **March 30, 1973**
Change 32, dated **June 13, 1967**
Change 8, dated **August 30, 1960**
Change 7, dated **June 4, 1958**
Change 4, dated **May 13, 1957**



Veterans
Administration

Memorandum

Date:

From: Actg. ACMD for Clinical Affairs (11)

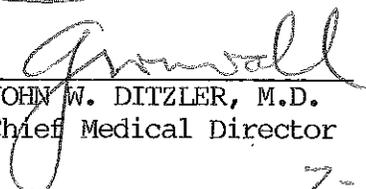
Subj: Redesignation of Manual M-2

To: Director, Regulations and Publications (10A1B)

VA Department of Medicine and Surgery Manual M-2, "Professional Services," has been redesignated as VA Department of Medicine and Surgery Manual M-2, "Clinical Affairs."


HOWARD D. COHN, M.D.

APPROVED/DISAPPROVED:


JOHN W. DITZLER, M.D.
Chief Medical Director

7-23-85

RECEIVED

07/29/85
JUL 25 1985

Regulations and Publications
Management Staff (10A1B)

June 1989

M-2 MANUALS

M-2

Part I General

Part II Chaplain Service

Part III Dietetic Service

Part IV Medical Service

Part IV Nuclear Medicine Service

Part V Nursing Service

Part VI Pathology & Allied Sciences Service

Part VI Drug Dependency Treatment Program

Part VII Pharmacy Service

Part VIII Physical Medicine & Rehabilitation Service

Part IX Prosthetic & Sensory Aids Service

Part X Psychiatry, Neurology & Psychology Service

Part XI Radiology Service

Part XII Social Work Service

Part XIII Medical & General Reference Library Staff - *Rees (see M-8, Pt III 8/14/87)*

Part XIV Surgical Service

Part XV Resc. by M-2, Part IV, Chg. 6(11-62) Pulmonary Disease (TB) Service

Part XVI Resc. by M-2, Part X (4-65) Vocational Counseling Service

Part XVII Voluntary Service - *M-1, Pt I, Ch 3*

Part XVIII Audiology & Speech Pathology (II 10-66-20, 6-8-66)

Part XIX ~~Extended Care Service (Domiciliary) *Replaced by M-5*~~ ~~*Spinal Cord Injury*~~

XX Nuclear Medicine

XXI Vocational Counseling Service

XXII Prosthetic & Sensory Aids Service

XXIII *Blind Rehabilitation Service*

XXIV *Spinal Cord Injury*

**DEPARTMENT OF
VETERANS AFFAIRS**

PROGRAMS

**CLINICAL AFFAIRS
GENERAL**

**M-2, Part I
February 9, 1990**

**Veterans Health Services and
Research Administration
Washington, DC**

Department of Veterans Affairs
Veterans Health Services and
Research Administration
Washington, DC

February 9, 1990

Department of Veterans Affairs, Veteran Health Services and Research Administration Manual M-2, "Clinical Affairs," Part I, "General," is published for the compliance of all concerned.


JOHN A. GRONWALL, M.D.
Chief Medical Director

Distribution: RPC: 1024
FD

Printing Date: 2/90

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1. CHIEF OF STAFF RESPONSIBILITIES
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5. AMERICAN COLLEGE OF PHYSICIANS--PROPOSALS FOR MEMBERSHIP
6. SPECIALLY ADAPTED HOUSING
7. OUTPATIENT DIAGNOSIS AND TREATMENT
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11. DISTINGUISHED PHYSICIAN PROGRAM
12. BLOOD TRANSFUSION SERVICES--GENERAL ADMINISTRATION
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37. *Patient Representation Program*

RESCISSIONS

The following material is rescinded:

1. COMPLETE RESCISSIONS

a. Manuals

Par. 112f, M10-3.

Pars. 129f and 169, M10-6.

M-2, Part I, changes 2 through 5 through 9, 11, 12, 13, 14, 16, 18 through 21, 25, 30, 32 through 40, 41, 44, 45, 49, 50, 51, 52, 55, 57, 60.

VHA Supplement MP-1, Part I, Chapter 2, Section A and Appendices D and E, change 43, dated October 27, 1987 (Effective October 1, 1992).

VHA Supplement MP-1, Part I, Chapter 2, Section A, change 44, dated July 26, 1991 (Effective October 1, 1992).

M-2, Part I, Chapter 35, dated August 7, 1992 and Supplements 1 and 2.

b. Interim Issues

II 10-156

II 10-161

II 10-184

II 10-188

II 10-270

II 10-292, pars. I, II, III, App. A

II 10-300

II 10-381

II 10-68-31

II 10-71-33

II 10-71-26 by M-2, part I, chg. 67

II 10-82-53 de facto by chg. 74

II 10-83-7 by chg. 74

c. Circulars/Directives

261, 1946, Sec.1

10-62-70

10-65-33

10-82-137 by chg. 68

10-82-215 by chg. 75

10-84-8 by chg. 78

10-84-108

10-85-16 by chg. 78

10-85-181 by chg. 77

10-86-37 by chg. 78

00-87-23

10-91-059

10-91-101

10-92-038

10-92-056

c. Circulars/Directives Continued

- 10-92-105 and Supplement 1
- 10-93-004
- 10-93-009
- 10-93-130
- 10-93-136
- 10-93-151

d. Regulations and Procedure

- R&P 6202
- R&P 6203
- R&P 6205
- R&P 6206

e. Technical Bulletins

- Par. 2, TB 10A-191
- Pars. 1b, 2 through 5, 6a and 9c, TB 10A-246
- TB 10A-256
- TB 10A-295 (except sec. XXI)
- TB 10A-359
- TB 10A-324 (This completes the rescission of TB 10A-324.)

f. AB Station Letters and Other Communications

<u>Date</u>	<u>Subject</u>
December 5, 1949	Officer of the Day Reports
March 3, 1952	Furnishing of Meals to Officers of the Day
April 8 1952	Domiciliary Care for Paraplegics
April 16 1952	Transfer of Quadriplegic Patients
April 17, 1952	Accomplishment of Recheck Examinations and Treatment of current Conditions Involving Paraplegics at VA Hospitals Other Than Paraplegia Centers.
June 23, 1952	Monthly Report of Service-Connected Blinded Veterans and Blinded Military Personnel
August 18, 1952	Proposals for Membership, American College of Physicians
September 19, 1952	Establishment of Paraplegia Organizational Segment
January 4, 1954	Certificate of Medical Feasibility, VA Form 4555b

g. Instructions (pertaining to Public Law 702, 80th Congress, as amended)

- Pars. 2d and 2e, Inst. 1-B
- Inst. 1C
- Inst. 1-D

2. LIMITED RESCISSIONS

The following material is rescinded insofar as it pertains to this manual.

a. Manuals

- M10-3, par. 115h

a. Manuals - Continued

M10-6, pars. 9b, 42e, 70c, 86, and 132h
M10-11, pars. 22b, 92e, 96d, 133b, and 172

b. Circulars

10-65-57, pars.2 and 3

c. Regulations and Procedure

R&P 6130

d. Technical Bulletins

TB 10A-324

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CHAPTER 11. DISTINGUISHED PHYSICIAN (DP) PROGRAM

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RESCISSIONS

The following material is rescinded:

Manuals

M-2, Part I, Chapter 11, change 64, dated January 6, 1981, and Contents Page 11-i, dated February 9, 1990.

CHAPTER 11. DISTINGUISHED PHYSICIAN (DP) PROGRAM**11.01 SCOPE**

This chapter contains policies, instructions, and procedures governing the DP Program.

11.02 POLICY

The DP program brings distinguished clinicians, educators, scientists and administrators on VA staff as advisors to the Department of Veterans Affairs (VA) and health care facilities in the areas of health care delivery, academic education, research, and medical management. DP nominees are to be nationally and internationally recognized for their clinical, academic, scientific or administrative merit. The veterans Health Administration (VHA), through DPs, fosters scientific dialogue, promotes the advancement of medical knowledge and enhances the reputation of both the Department and its employees. DP involvement in these activities benefits veteran patients, as well as the general population. It also facilitates communication of research results and technological advances to the Nation's health care practitioners. (See 38 United States Code (U.S.C.) 7301-7303.)

11.03 PROGRAM MANAGEMENT

The DP program is managed by the Office of the Under Secretary for Health. Operational responsibility for implementation, administration, and periodic evaluation of the program is assigned to the Deputy Under Secretary for Health or designee. DPs will relate organizationally and administratively to the Deputy Under Secretary for Health, through the Director at the DPs host VA facility, in fulfilling their respective continuing roles as DPs. (See 38 U.S.C. 7304.)

11.04 NOMINATIONS FOR INITIAL APPOINTMENT

a. Nominations for DP appointments are made by VA facility Directors when vacancies are announced by the Office of the Deputy Under Secretary for Health. Vacancy announcements may restrict nominations to candidates in specific fields or specialties. In making their nomination, VA facility Directors may consider recommendations from any appropriate source, e.g., current DPs, affiliated medical schools, or medical specialty organizations.

b. Nominations must meet the following criteria:

(1) The candidate's career will demonstrate exceptional experience and expertise in at least two of the following areas:

- (a) Clinical practice.
- (b) Education and/or academic medicine.
- (c) Research.
- (d) Administrative or executive medicine.

(2) The candidate will be known nationally and/or internationally as an active and leading expert in at least one particular field of medicine, as evidenced by the nomination package and supporting evidence.

c. Nomination packages shall include:

- (1) Director's letter of nomination;
- (2) Letter of endorsement from the affiliate (if affiliated);
- (3) Statement from the candidate expressing interest in being considered for the position;
- (4) At least three, and no more than six, letters of support from medical center clinical staff and other appropriate individuals;
- (5) A plan (no longer than three pages) describing the professional activity to be pursued as a Distinguished Physician. The plan should represent collaboration between the facility Director and DP candidate. The planned activity will:
 - (a) Demonstrate a direct relevance for veterans and for the Department;
 - (b) Demonstrate creative, innovative approaches to issues or problems;
 - (c) Detail specific activities which will further the objectives and goals of the candidate's project; and
 - (d) Demonstrate potential to make seminal contribution(s) in a specific area or field of study.
- (6) Complete credentialing information for the nominee, as defined in the VHA supplement to MP-5, Part II, Chapter 2, Section C and other applicable VHA guidance regarding credentialing of physicians.
- (7) Official Personnel Folder of the nominee (if a current, former or retired Federal employee).

11.05 SCREENING COMMITTEE

- a. A DP Screening Committee composed of members appointed by the Under Secretary for Health, or designee, including at least one current or former DP, will review the qualifications of DP nominees using the outlined criteria.
- b. The DP Screening Committee chairperson will forward a list of nominees, through the VA Central Office Professional Standards Board, to the Under Secretary for Health, or designee, for review. Criteria listed under subparagraph 11.04b(5) will provide a framework for those final candidates to be ranked by the screening committee in order to identify the most suitable nominees for appointment.
- c. The Under Secretary for Health, or designee, will forward, through the Assistant Secretary for Human Resources and Administration to the Secretary of Veterans Affairs, recommendation(s) for appointment. (See 38 U.S.C. 7304.)

NOTE: *The Under Secretary for Health, or designee, is responsible for ensuring that the Screening Committee convenes as necessary to maintain the cadre of DPs at a level consistent with Department needs.*

11.06 REQUESTS TO EXTEND APPOINTMENT

a. Extensions of DP appointments will only be approved if they result in a significant contribution to the care and treatment of veterans or the other goals specified in paragraph 11.04b(5). Requests for extensions shall be submitted by facility Directors through the appropriate Regional Director's Office (13_/10A2) and include:

(1) Director's recommendation;

(2) Statement from the candidate indicating why the extension is desired, and the DPs planned activities and accomplishments during the period of the extension. (The statement should represent a collaboration between the facility Director and DP candidate and should speak to both national and local activity. The statement should be also limited to three pages.); and

(3) The Official Personnel Folder of the DP.

(4) The current Credentialing and Privileging file of the DP.

b. Requests for extensions will be reviewed by the DP Screening Committee established under paragraph 11.05. The DP Screening Committee will forward its recommendation to the Under Secretary for Health, or designee, for review. The Under Secretary for Health, or designee, may forward, through the Assistant Secretary for Human Resources and Administration to the Secretary, the recommendation for extension of the DPs appointment. (See 38 U.S.C. 7304.)

11.07 APPOINTMENT AND PAY

Title 38 U.S.C. 7405 and VA Manual MP-5, Part II, Chapter 2 and its VHA Supplement provide the authority to appoint DPs. In accordance with this authority, DPs may be appointed by the Secretary for an initial period of 3 years. Such appointments may be extended by the Secretary for an additional period not to exceed 2 years under the procedures outlined in paragraph 11.06. DPs are placed in Medical Director grade Step 7, but are excluded from special pay eligibility (see VHA Supplement MP-5, Pt. II, Ch. 3, sec. A). (See 38 U.S.C. 7304 and 7405.)

11.08 FUNCTIONS OF DPs

a. DPs will further understanding and knowledge in their respective areas of expertise. The major focus of their work will contribute to addressing needs of veterans as well as initiatives and programs of VA. In a minor role, they may be utilized by the host facility to conduct local activities such as program reviews or advisory services when approved by the Deputy Under Secretary for Health, or designee.

b. Major activities of the DPs, consistent with goals and plans submitted in the DP nomination package, are selected with the concurrence of the facility Director as outlined in paragraph 11.04.

c. Distinguished physicians may:

(1) Serve as members of VA Central Office committees dealing with development of health care policy, program development, or resolution of program management problems;

- (2) Serve as advisors to local, regional or national medical and health care education programs;
 - (3) Serve as lecturer-teachers on Regional Medical Education Center faculties;
 - (4) Conduct special purpose site visits for medical program reviews and recommend approaches for resolution of management problems related to clinical program activities;
 - (5) Advise VA Central Office and field facilities on the utilization of professional staff and the resolution of problems related to management of professional staff;
 - (6) Advise on affiliation matters;
 - (7) Serve on medical study groups and task forces, e.g., evaluate data related to issues of national interest such as that arising from health care policy, quality management activities, research projects, etc.; and/or
 - (8) Serve in such other capacities for which they have demonstrated expertise as may be germane to the needs of VA.
- d. Any publications resulting from, or during, a DP's tenure will identify the individual as a VA DP. (See 38 U.S.C. 7304.)

11.09 DP ACTIVITY SCHEDULES AND REPORTS

- a. While DPs are employees of VA Central Office, they are administratively and physically assigned to a host facility most geographically convenient for the DP to maintain and carry out planned activities.
- b. DPs will submit annual progress reports, including copies of published works, through the appropriate Regional Director to the Office of the Deputy Under Secretary for Health, Professional Affairs Staff (13_10A2).
- c. A Program Assessment Committee chaired by the Deputy Under Secretary for Health, or designee, and consisting of at least one DP, will function as an oversight body, review program progress and issues, and make recommendations to the Under Secretary for Health, or designee.
 - (1) When feasible, an annual planning and report workshop will be conducted by the Committee to evaluate the program in terms of accomplishments, concerns and future directions.
 - (2) Any recommendations made by the Committee are prepared for consideration of the Under Secretary for Health, or designee.
- d. When feasible, an annual meeting of DPs will be held. Such a meeting may be held in conjunction with a meeting of the Program Assessment Committee. DPs will participate in the planning of the annual meeting which will include among its goals interchange among the DPs. (See 38 U.S.C. 7403.)

11.10 FUNDING AND SUPPORT

The DP Program will be administered through centrally directed funding that supports the DPs salary, clerical support and specifically budgeted travel resources. Host facilities provide office space, furniture, equipment and may supplement travel funds.

VA facilities and non-VA institutions utilizing services of DPs will provide funding for travel and per diem costs. **NOTE:** *Title 26 U.S.C. Section 501(c)(3), lists those tax exempt organizations which may pay travel and per diem costs.* All other organizations not listed are restricted to payment-in-kind. All such activities of the DP's will conform to VA policy regarding outside professional activities (VHA Supplement MP-5, Pt. II, Ch. 13 and the "Standards of Ethical Conduct for Employees of the Executive Branch," 5 Code of Federal Regulations (CFR) Part 2635). (See 38 U.S.C. 7304 and 7423.)

11.11 RESEARCH

a. DPs have the same privileges and obligations with regard to their personal research activities as do all other VA professional staff members. All research activities must be reviewed and approved, prior to initiation, by the host facility's Research and Development Committee and by the Human Studies Committee when patients or other human subjects are involved.

b. DPs are eligible to submit proposals for research support in a number of programs including Research Advisory Group (RAG) start up funding, cooperative studies, health services research, merit review and rehabilitation research. Application limitations apply to some programs, e.g., RAG funding must be requested in the first 6 months of appointment. (See 38 U.S.C. 7304.)

11.12 REFERENCES

- a. MP-5, Part II, Chapter 2 and the VHA Supplement.
- b. MP-5, Part II, Chapter 3, section B and the VHA Supplement.
- c. MP-5, Part II, Chapter 13 and the VHA Supplement.
- d. 5 CFR part 2635, "Standards of Ethical Conduct for Employees of the Executive Branch."

October 12, 1993

1. Transmitted is a revised Department of Veterans Affairs, Veterans Health Administration Manual M-2, "Clinical Affairs," Part I, "General," Chapter 11, "Distinguished Physician (DP) Program." Because the revision is extensive, brackets were not used to identify changes in text.

2. Principal changes are:

a. **Paragraph 11.01:** Establishes the scope of the chapter.

b. **Paragraph 11.02:** Sets forth Veterans Health Administration policy on utilization of Distinguished Physicians.

c. **Paragraph 11.03:** Indicates operational responsibility for the Distinguished Physician Program resides with the Office of the Deputy Under Secretary for Health, and that Distinguished Physicians report through the facility Director at their location to the Deputy Under Secretary for Health.

d. **Paragraphs 11.04, 11.05, and 11.06:** Discuss the submission to VA Central Office of Distinguished Physician nominees, the selection criteria, and requests to extend Distinguished Physician appointments.

e. **Paragraph 11.07:** Covers the appointment and pay of Distinguished Physicians.

f. **Paragraph 11.08:** Clarifies the functions of Distinguished Physicians.

g. **Paragraph 11.09:** Outlines Distinguished Physician activity schedules and reports.

h. **Paragraph 11.10:** Provides information about funding and support for Distinguished Physicians and adds new information on the receipt of remuneration from other than Department of Veterans Affairs sources.

i. **Paragraph 11.11:** Provides information related to the research privileges and obligations of Distinguished Physicians.

j. **Paragraph 11.12:** Contains applicable legal and regulatory references.

3. Filing instructions

Remove pages

11-i ✓
11-1 through 11-2 ✓

Insert pages

11-i through 11-ii ✓
11-1 through 11-5 ✓

4. **RESCISSION:** M-2, Part I, Chapter 11, change 64, dated January 6, 1981, and Contents Page 11-i, dated February 9, 1990.



John T. Farrar, M.D.
Acting Under Secretary for Health

Distribution: RPC 1333 is assigned
FD

Printing Date: 10/93

January 6, 1981

Part I, "General," VA Department of Medicine and Surgery Manual M-2, "Professional Services," is changed as indicated below:

NOTE: The purpose for the change is to update policies and procedures governing the distinguished physician program.

Page iii, paragraph 1f, line 4: Add change "55". ✓

Page 11-1: Remove this page and substitute pages 11-1 and 11-2 attached.

RESCISSION: Change 55, M-2, part I.



DONALD L. CUSTIS, M.D.
Chief Medical Director

Distribution: RPC: 1024
FD

Department of Medicine and Surgery
Veterans Administration
Washington, D.C. 20420

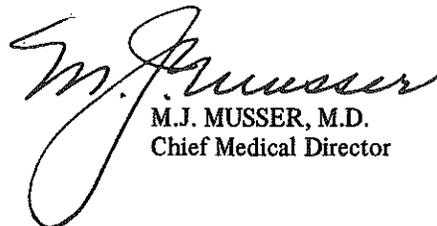
M-2, Part I
Change 55

April 9, 1974

Part I, "General," VA Department of Medicine and Surgery Manual M-2, "Professional Services," is changed as indicated below:

NOTE: The purpose for establishing chapter 11 is to disseminate information to the field concerning the "Distinguished Physician Program" and to indicate that administrative responsibility has been assigned to the Assistant Chief Medical Director for Professional Services.

✓ Page 11-1: Insert this page attached.



M.J. MUSSER, M.D.
Chief Medical Director

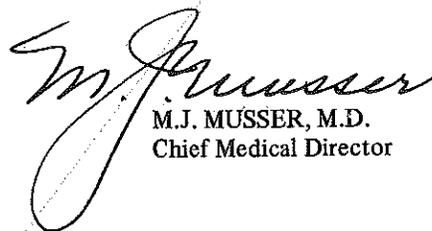
Distribution: RPC: 1024
FD

March 30, 1973

Part I, "General," VA Department of Medicine and Surgery Manual M-2, "Professional Services," is changed as indicated below:

NOTE: The purpose of this change is to delete Chapter 11, "Quality Control and Utilization Reviews." Information on management review of field station functions is in M-1, part I, chapter 1, section VII.

- ✓ Page iii, paragraph 1f, line 3: Add change "32".
- ✓ Page vi: Delete chapter 11 and paragraphs 11.01 through 11.04.
- ✓ Pages 11-1 through 11-3: Remove these pages. (Ch. 11 rescinded.)
- ✓ RESCISSION: Change 32, dated June 13, 1967, M-2, part I.


M.J. MUSSER, M.D.
Chief Medical Director

Distribution: RPC: 1024
FD

Handwritten initials and date: M.J. 3-31-73

Department of Medicine and Surgery
Veterans Administration
Washington, D.C. 20420

M-2, Part I
Change 32

June 13, 1967

Part I, "General," VA Department of Medicine and Surgery Manual M-2, "Professional Services," is changed as indicated below:

NOTE: The purpose of this change is to establish in all DM&S field stations a primary medical committee titled "The Medical Executive Committee" with assigned responsibility for quality control reviews of patient care programs to assure compliance with standards of the Joint Commission on Accreditation of Hospitals and the requirements of the VA.

✓ Page 11-1: Remove this page and substitute pages 11-1 through 11-3 attached. (Ch. 11, "Length of Hospital Stay," deleted and new ch. 11, "Quality Control and Utilization Reviews," added.)

H. M. Engle

H. M. ENGLE, M. D.
Chief Medical Director

Distribution: RPC: 1024
FD

✓ NOTE: Change 8 has been completely absorbed and existing stock may be destroyed in accordance with DM&S Records Control Schedule 10-1.

*By change 52
(3-30-73)*

absorbed by change 32

June 4, 1958

Part I, "General," VA Department of Medicine and Surgery Manual M-2, "Professional Services," is changed as indicated below:

NOTE: The purpose of this change is to:

1. Reemphasize length of stay as an important management tool.
2. Place responsibility for control of length of stay with the Manager.
3. Decentralize to the station and Area Medical Office the methods by which length of stay will be studied.
4. Eliminate the recurring semiannual report from field stations and Area Medical Offices.

ch. 32

Pages 11-1 and 11-2: Remove these pages and substitute page 11-1 attached. (Ch. 11, "Hospital Stay Committee," redesignated "Length of Hospital Stay," and changed.)

ch. 31

Page 12-4, paragraph 12-04e (1)

✓ Line 8: After "and/or" insert "may".

✓ Line 12: After "started, the" insert "responsible".

Wm. S. Middleton

WILLIAM S. MIDDLETON, M. D.
Chief Medical Director

Distribution:

Same as M-2, Part I

March 31, 1958

Part I, "General," VA Department of Medicine and Surgery Manual M-2, "Professional Services," is changed as indicated below:

NOTE: The purpose of this change is to establish the overall conduct of the blood transfusion program as a responsibility of the Director, Professional Services, and to revise existing procedures in blood transfusion administration. M-2, part V, section IV, paragraph 1.15, and M-2, part VI, chapter 5, will be changed in the near future, as appropriate, to reflect the changes contained herein.

ch. 15
Pages v and vi: Remove these pages and insert pages v and vi attached. (Contents pages brought up to date.)

ch. 15, 21
Pages 10-5, 11-1, 11-2, and A-1: Remove these pages and substitute pages 10-5, 11-1, 11-2, 12-1 through 12-5, and A-1 attached. (Par. 11.01b changed as directed by change 4 and to correct organizational title; ch. 12, "Blood Transfusions--Plasma Expanders," added; app. A 1a, b, and d changed as directed by changes 1, 3, and 5.)



WILLIAM S. MIDDLETON, M. D.
Chief Medical Director

Distribution:

Same as M-2, Part I.

ch. 37

May 13, 1957

Part I, "General," VA Department of Medicine and Surgery Manual M-2, "Professional Services," is changed as follows:

Page 2-1

✓ Paragraph 2.03b, line 3: Delete "Blank" and "blanks" and insert "Form" and "forms".

✓ Paragraph 2.04b, line 1: Delete "Chief" and insert "Director".

Page 3-1

Paragraph 3.01a

Line 3

✓ Delete "Chief, Professional" and insert "Director, Professional".

✓ After "Clinic, or" delete "his" and insert "other".

✓ Line 4: Delete "designee." and insert "acting for him."

Paragraph 3.02a (4)

✓ Line 1: Delete "VA Formulary" and insert "station formulary".

✓ Line 2: After end of sentence add "(See par. 8.02e (2), pt. VII, M-2.)"

Page 11-1, paragraph 11.01b

✓ Line 1: Delete "Chief of the" and insert "Director,".

✓ Line 2: Delete "Chief of" and insert "Director,".

✓ Line 4: Delete "records" and insert "record".

Wm. S. Middleton

WILLIAM S. MIDDLETON, M. D.
Chief Medical Director

Distribution:

Same as M-2, Part I.

MAY 21 1957