

Minutes of the Meeting of the Board of Trustees of the University
of Kentucky, Tuesday, April 4, 1978.

The University of Kentucky Board of Trustees met in regular statutory session on Tuesday, April 4, 1978, at 2:00 o'clock (Eastern Standard Time) in the Board Room on the 18th floor of the Patterson Office Tower on the Lexington campus with the following members answering the call of the roll: Mr. William B. Sturgill, Chairman, Professor Michael Adelstein, Mr. William R. Black, Mr. L. D. Gorman, Mrs. Betty Carol Clark, Mr. Albert G. Clay, Governor Albert Benjamin Chandler, Mr. John R. Gaines, Mr. George W. Griffin, Mr. James W. Newberry, Mrs. Sally Hermansdorfer, Mr. Thomas B. Kessinger, Mr. Zirl A. Palmer, Mr. Frank Ramsey, Mr. Homer Ramsey, Professor Paul G. Sears, Dr. David A. Hull, and Dr. John R. Woodyard. Absent from the meeting was Mr. Richard E. Cooper who remains a member of the Board since his replacement has been named but has not qualified. The University administration was represented by President Otis A. Singletary; Vice Presidents Lewis W. Cochran, Robert Zumwinkle, Stanley Wall, Peter P. Bosomworth, Raymond R. Hornback, John T. Smith, Jack C. Blanton, and Donald B. Clapp; Dr. Wimberly C. Royster, Dean of the Graduate School and Coordinator of Research; and Mr. John Darsie, Legal Counsel.

A. Meeting Opened

The meeting was called to order by the Chairman at 2:00 p.m. Following the invocation, pronounced by Mr. Black, Mr. Sturgill took a few minutes to assess the Board's stewardship during the past year. A copy of his remarks is included at the end of the minutes.

B. Oath of Office and Roll Call

After explaining that Mr. W. B. Terry (named by Governor Carroll on December 21, 1977, for a four year term ending December 31, 1981, to replace Mr. Richard E. Cooper whose term expired December 31, 1977) was ill and unable to be at the meeting, Mr. Sturgill asked Mr. Darsie to administer the oath of office to Mr. Homer W. Ramsey, reappointed by Governor Carroll for a second four-year term ending December 31, 1981, and Mr. Frank Ramsey, reappointed as alumni member by Governor Carroll for a term ending December 31, 1981.

Following the administration of the oath of office, Professor Sears called the roll and reported 18 members present. Mr. Sturgill then declared the meeting officially open for the conduct of business at 2:15 p.m.

C. Minutes Approved

On motion duly made, seconded and carried, the reading of the Minutes of the December 13, 1977, meeting of the Board of Trustees was dispensed with, and the Minutes were approved as published.

Professor Sears read the Minutes of the telephone conference call meeting held by the Executive Committee of the Board on Friday, March 10, 1978. On motion made, seconded and carried, the Minutes were approved as read.

D. President's Report to the Trustees (PR 1)

President Singletary recommended that his monthly report, copies of which were available to the trustees, be accepted and filed. Without objection it was so ordered.

E. Recommendations of the President (PR 2)

Noting that the recommendations in PR 2 concerned routine personnel changes, President Singletary recommended approval. On motion by Mr. Palmer, seconded by Governor Chandler and passed, PR 2, Recommendations of the President, was approved as a whole and ordered made an official part of the Minutes of the meeting. (See PR 2 at the end of the Minutes.)

F. Supplemental Recommendations of the President (PR 3-I)

President Singletary explained that PR 3, Supplemental Recommendations of the President, contained two separate action items which had been received too late for early submission to the Board members and suggested that these be considered individually.

The first item recommended the naming of three University buildings - The Ezra Gillis Building for the present Administration Annex; The Joe B. Hall Wildcat Lodge for the new basketball dormitory; and The Frank D. Peterson Service Building for the Service Building located on South Limestone. Dr. Singletary explained that the recommendations came to the Board from the Committee on Naming University Buildings and that no buildings on the campus could be named without the names first being considered and recommended by this committee and approved by the Board of Trustees.

Dr. Singletary continued that this University policy had been ignored in the case of the installation of a name plaque on the basketball dormitory, leaving no alternative to the University administration but to order its removal until such time as the proper procedures had been followed. This action having resulted in considerable media coverage, President Singletary felt an explanation was in order. He said that following the removal of the name from the basketball dormitory, he had received a petition from the members of the varsity basketball team that the dormitory be named for Coach Joe B. Hall. This petition was transmitted to the Committee on Naming University Buildings which in turn approved the petition and so recommended to the Board. He reiterated that at no time was there any intention of offending Coach Hall and that the University's actions were taken in order to comply with University policies.

President Singletary then recommended that the Board approve the names of the buildings as set forth in PR 3-I. Mr. Sturgill thanked Dr. Singletary for his explanation and hoped that the media would give it the same coverage that had been given to the original incident. He then called for a motion on PR 3-I. Mr. Clay moved that the Board of Trustees approve the name Ezra Gillis Building for the building now known as Administration Annex; the name Joe B. Hall Wildcat Lodge for the new basketball dormitory; and the name Frank D. Peterson Service Building for the building now known as the Service Building on South Limestone. Motion was seconded by Mr. Homer Ramsey and passed without dissent. (See PR 3-I at the end of the Minutes.)

G. Supplemental Recommendations of the President (PR 3-II)

The second item in PR 3 concerned appointments and other personnel changes not included as a part of PR 2. President Singletary recommended approval and, on motion by Mr. Frank Ramsey, seconded by Mr. Black and passed, it was so ordered. (See PR 3-II at the end of the Minutes.)

H. Budget Revisions for 1977-78 (PR 4)

Indicating that Mr. Ed Carter, Budget Director, was present to answer any questions relative to the budget revisions recommended in PR 4, President Singletary recommended approval.

There being no questions, on motion by Dr. Hull, seconded and passed, the revisions of the 1977-78 Budget as recommended in PR 4 were authorized and approved. (See PR 4 at the end of the Minutes.)

I. Exception to the Retirement Resolution (PR 5)

Stating that the recommendation relative to exceptions to the Retirement Resolution would authorize the University to honor certain contractual arrangements made with individuals prior to the adoption of the Resolution, President Singletary recommended approval.

On motion by Mrs. Clark, seconded by Dr. Hull and passed, the recommendation in PR 5 was adopted. This resolution authorizes the President to grant exceptions to the deductions mandated for civil service benefits received by retirees by the Retirement Plan as adopted on April 5, 1977, upon the presentation of documented evidence that contractual commitments were made between the institution and an employee prior to the effective date of the Retirement Plan revision referred to above. (See PR 5 at the end of the Minutes.)

J. Honorary Degree Recipients (PR 6)

On the recommendation of President Singletary and on motion by Mr. Homer Ramsey, seconded by Mrs. Clark and passed, approval was granted to awarding the honorary degrees of Doctor of Laws to Mr. Robert T. McCowan and Doctor of Letters to Mr. Thomson R. Bryant and Mr. James A. King. (See PR 6 at the end of the Minutes.)

K. University Research Professorships (PR 7)

President Singletary reminded the Board that the first four one-year University Research Professorships funded by the University of Kentucky Research Foundation were awarded in 1977 and recommended that the following individuals be approved as University Research Professors for 1978-79: Professor Richard C. Birkebak, Department of Mechanical Engineering; Professor Thomas Chapman, Department of Mathematics; Professor Malcolm E. Jewell, Department of Political Science; and Professor Marcus T. McEllistrem, Department of Physics and Astronomy. Following the introduction of the recipients by President Singletary, Mr. Newberry moved approval. His motion was seconded by Mr. Palmer and passed without objection. (See PR 7 at the end of the Minutes.)

L. Amendments to Governing Regulations (PR 8)

At the December 13, 1977 meeting, the Board received and tabled certain proposed amendments to the Governing Regulations. Noting that the required month had passed, President Singletary recommended that the proposed amendments to the Governing Regulations as presented in PR 8 be removed

from the table and approved. On motion duly made, seconded and carried, PR 8 was approved. (See PR 8 at the end of the Minutes.)

M. Capital Construction Projects (PR 9)

President Singletary said that the four capital construction projects recommended in PR 9 were all needed and funding was available. He added that the fourth floor alteration of the Chandler Medical Center would temporarily provide space for eight additional neo natal beds, increasing the total to 39. Hospital expansion currently being programmed will be necessary before the full 50 beds can be made available.

Since all construction projects in excess of \$100,000 must be approved by the Council on Higher Education, President Singletary recommended approval of the four projects in PR 9 for transmission to the Council. Governor Chandler so moved. His motion was seconded by Mrs. Hermansdorfer and passed without dissent. (See PR 9 at the end of the Minutes.)

N. Interim Financial Report (FCR 1)

Mr. Clay, Chairman of the Finance Committee, reported that the Committee had met on Tuesday morning, April 4, 1978, and had approved the items to be presented to the Board for action.

Mr. Clay then indicated that the Interim Financial Report for the eight months ending February 28, 1978, showed the University was "on target" and the Finance Committee recommended its acceptance. He so moved. His motion was seconded by Mr. Palmer and passed without dissent. (See FCR 1 at the end of the Minutes.)

O. Resolution Naming Officers Authorized to Sign Checks, Drafts, and Orders (FCR 2)

Mr. Clay moved that the officers named in FCR 2 be authorized to sign and endorse checks, drafts and orders for the payment of money upon the active accounts of the University of Kentucky and its affiliated corporations. His motion was seconded by Mr. Kessinger and passed without dissent. (See FCR 2 at the end of the Minutes.)

P. Acceptance of Audit of Spindletop Hall Inc. (FCR 3)

The Finance Committee recommending, Mr. Clay moved that the Board of Trustees accept the financial statement of Spindletop Hall, Inc., for the years ended December 31, 1977, and 1976. His motion was seconded by Mr. Griffin and passed without dissent. (See FCR 3 at the end of the Minutes.)

Q. External Auditor for Fiscal Year 1977-78 (FCR 4)

Mr. Clay reported that a sub-committee of the Finance Committee had interviewed various auditing firms and had recommended that the University continue to employ the firm Coopers and Lybrand, Certified Public Accountants, for the 1977-78 audit. Mr. Clay moved that the recommendation in FCR 4 be approved. His motion was seconded by Mr. Gorman and passed without dissent. (See FCR 4 at the end of the Minutes.)

R. Authorization to Request Renovation Costs from Maintenance Fund (FCR 5)

Mr. Clay moved that the Vice President for Business Affairs be authorized and directed to request the Trustee of University of Kentucky Housing Bonds of 1960 to make available the sum of \$2,500 from the "Maintenance Fund" of said Bonds for the purpose of paying the cost of installing new floor tile in the Alpha Gamma Rho Fraternity House located at 700 Woodland Avenue. His motion was seconded by Mrs. Clark and passed without dissent. (See FCR 5 at the end of the Minutes.)

S. Room and Board Rates for 1978-79 (FCR 6)

At Mr. Clay's request, Mr. Blanton explained this item. He said that the rate increases in room and board for 1978-79 resulted from the higher costs of labor, food, and utilities, and represented the lowest amounts that could be implemented to keep the housing and dining operations on a break-even basis. In answer to some questions raised by Board members, Mr. Blanton indicated that the occupancy rate at the University of Kentucky is 98%, that there are a thousand more applications for housing this year than a year ago, and that the University ranks fourth on rates with its benchmark institutions.

Mr. Clay moved that the five parts of FCR 6, which related to different plans, be approved as recommended. His motion was seconded by Mrs. Clark and passed without dissent. (See FCR 6 at the end of the Minutes.)

T. Sale of Surface Rights - Oklahoma Property (FCR 7)

Mr. Clay said that the Finance Committee had carefully considered the proposed sale of surface rights of the Oklahoma property, which came to the University of Kentucky in 1973 as a part of the estate of Violette Renaker, and believed it to be in the best interest of the University to accept the present offer. He then moved that the Board of Trustees authorize the Vice President for Business Affairs and Treasurer to execute the documents necessary to

convey the University's interest (being an undivided one-half interest) in the surface rights to three hundred thirty (330) acres of land located in Garvin County Oklahoma to A. E. Shamley and Pauline Shamley for a total consideration of \$107,500. His motion was seconded by Mr. Gorman and passed without dissent. (See FCR 7 at the end of the Minutes.)

U. Report of Investments (ICR 1)

Mr. Griffin, Chairman of the Investment Committee, said that the report of changes made in investments for the University of Kentucky and its affiliated corporations for the quarter ending December 31, 1977, had been reviewed by the Investment Committee and moved its acceptance. His motion was seconded by Mr. Homer Ramsey and passed without dissent. (See ICR 1 at the end of the Minutes.)

V. Medical Center Committee Report (MCCR 1)

Mr. Black, Chairman of the Medical Center Committee, reported that the Committee had met on the morning of April 4, 1978, and reviewed the proposed By-Laws of the Medical Staff of the University Hospital and the By-Laws of the Council of Supervisors of the University of Kentucky Hospital (copies of both documents were sent to all members of the Board prior to the meeting). The Medical Center Committee approved the By-Laws of the Medical Staff without change but recommended that the By-Laws of the Council of Supervisors, Section I be amended to read as follows "... , four (4) public members recommended by the President, one of whom shall be a student of the University of Kentucky. ..."

Mr. Black moved that the Board approve, in principle, the By-Laws of the Medical Staff and the By-Laws of the Council of Supervisors, University of Kentucky Hospital, as amended, with the following provisos: (A) that subsequent Board action will be requested to empower the Council of Supervisors to commence exercising the functions to be delegated to it by the Board. (B) that subsequent Board action will be requested to amend the By-Laws of the Medical Staff to provide, consistent with the action relating to (A) above, for the substitution of the Council of Supervisors for the Board of Trustees regarding certain functions now provided to be performed by the Trustees. Mr. Black's motion was seconded by Dr. Woodyard and passed without dissent. (See MCCR 1 at the end of the Minutes.)

W. Status Report on the Development of Professional Practice Plan in the Medical Center

Mr. Black reported that the Medical Center Committee had received a status report on progress relative to the development of a new plan for

professional practice in the College of Medicine. The report included identification of basic principles and specific issues which President Singletary has prepared to guide and direct the development of a plan. The Committee endorses these principles and agrees with his position on the specific issues.

The remaining steps include: 1) establishment of outside corporate entity, 2) development of formal policy document and its adoption by the Board of Trustees and 3) development of a mutually satisfactory agreement between the University and the outside corporate entity.

Mr. Black concluded his report by stating that the Committee encourages the University to move expeditiously to complete the process.

There being no action required, the report was accepted by the Chairman.

X. Meeting Adjourned

After it having been determined there was no further business to be considered, on motion duly made, seconded, and passed, the meeting adjourned at 3:10 p.m.

Respectfully submitted,

Paul G. Sears, Secretary
Board of Trustees

(Mr. Strugill's Stewardship Report, PR's 2, 3, 4, 5, 6, 7, 8, and 9; FCR's 1, 2, 3, 4, 5, and 6; ICR 1, and MQCR 1 which follow are official parts of the Minutes of the meeting.)

Mr. Sturgill's Stewardship Report
Board Meeting - April 4, 1978

We are rapidly coming to the close of another school year and what an exciting year it has been! Another year of progress here at the University of Kentucky. But a time, I think, when we should take a brief moment to assess our stewardship as a board--so, Mr. President and members of the board, I would like to make some general observations concerning our University from my vantage point as your chairman.

1. Let me say that, in my assessment, during the last few years the University has made significant progress in all areas of endeavor and this progress is unparalleled in the life and history of this University.

2. What the people of Kentucky don't know, but should know, is that this University is on the threshold of becoming a great University and almost all of the colleges within the University not only have excellent ratings but high national rankings.

3. We have just come out of a legislative session which granted to the University the necessary funds to make our projected budget a workable one. We will receive during the first year of this biennium some 17 million dollars in new money and in the second year of the biennium, some 11 million dollars. While this is not as much as requested and actually needed, it is, nevertheless, significant enough to allow us to do the necessary and fundamental things in the areas that need immediate financial attention and to assure the continuation of necessary funds for existing programs. It should be noted that only 49.9% of our annual budget comes from public funds. While there is no new money for construction in this immediate appropriation, we do have underway building projects, both under construction and on our drawing board, that will allow us to meet the demands of an ever-growing student population. Our bonding capacity is adequate and the credit rating of the University is excellent.

4. The student population growth has been such that today we have in the University system nearly 42,000 students and the demands on the University far exceed those demands made on any other institutions of higher learning in the State of Kentucky. We should point with pride to our Community College System which has afforded the opportunity for an education at the college level for students in all the four quarters of Kentucky which heretofore had been denied to them. It is my view that the demand for higher education from the young people of Kentucky will continue in an increasing manner.

5. It is a matter of record that under the careful direction of Dr. Singletary and his administration we have assembled one of the finest

faculties, staff and research efforts of any University in the country. In support of this statement I need to point out that in the last two years the faculty and research people here at the University have received 1,462 teaching and research grants that amount to over 50 million dollars and, again, exceeds by far the amount received in this area by nearly all of our so-called benchmark institutions. This is indeed a compliment to our faculty and professional staff.

6. While the University has had limited funds during the last two years some very interesting things noteworthy of mention have occurred on campus that would indicate a continuation of our excellent progress.

Did you know-----

That during this biennium the University has granted over 8,000 degrees and noteworthy is that 1/3 of these degrees were on the graduate or professional level.

That three out of every ten students in Kentucky colleges are taught by University of Kentucky professors.

That during the past biennium the University for the first time broke into the top 50 of all Universities receiving federal funding.

That the Agriculture, Education, Engineering, Medical and Pharmacy Colleges each received more than one million dollars in extramural support annually.

That private giving at this institution ranked No. 2 last year in the nation for the greatest percentage of increase in annual giving among public universities.

That one-fifth of all the tobacco and health research done in the world is done here on the campus of the University.

That the Alumni Association has grown to over 21,000 paid members who support this University and we now have 48 Alumni Clubs throughout the nation.

And while I do not have many rose petals for the news media, I thought Dick Wilson's story in the Courier-Journal on Sunday brought into focus that phase of University life and activity that needs to be told to the general public. Dick you are to be commended.

Athletic teamsmajor men's sports record 46-3 and women's basketball team finished 23-12.

What I am really saying, ladies and gentlemen of the board, is that these things just don't happen. It takes long hours of planning, diligent

research and painstaking effort to put into motion the progress which has been made at this great University.

I know the board would want to join me in commending Dr. Singletary, the faculty and staff for their efforts during this period of great progress.

I would like to say to Dr. Singletary, his administration and his faculty, and also to the Governor, the legislature and the people of the Commonwealth of Kentucky, that the affairs of the University are in strong, capable, talented and dedicated hands as long as they rest with Otis Singletary. I know that he is working diligently to make real the dreams we all have for a greater University.

PR 2

Members, Board of Trustees:

RECOMMENDATIONS OF THE PRESIDENT

I. Appointments and/or Other Staff Changes

Recommendations: (1) that approval be given to the appointments and/or other changes which require Board action; and (2) that the report relative to appointments and/or changes already approved by the administration be accepted.

Background: The following recommended appointments and/or other staff changes require approval by the Board of Trustees in accordance with Part VIII-B of the Governing Regulations of the University. These recommendations are transmitted to the Board by the appropriate vice president through the President and have his concurrence.

Under the Governing Regulations the authority to make certain appointments and/or other staff changes is delegated to the President or other administrators who are required to report their actions to the Board. This report follows the recommendations requiring Board approval.

BOARD ACTION

New Appointments

- Abbott, David J., Instructor (temporary), Department of Ophthalmology, College of Medicine, 1/16/78 through 6/30/78.
- Baker, Nancy L., Librarian III, M.I. King Library, Reference, 3/15/78 through 6/30/78.
- Baugh, Benjamin V., Instructor in the Community College System, Madisonville Community College, 1/1/78 through 6/30/78.
- Connelly, Thomas F. Jr., Assistant Professor*, Department of Community Health, College of Allied Health Professions, 3/1/78 through 6/30/79.
- Cibull, Michael L., Assistant Professor, Department of Pathology, College of Medicine, 6/1/78 through 6/30/79.
- Danner, Frederick W., Assistant Professor, Department of Educational Psychology and Counseling, College of Education, 8/16/78 through 6/30/80.
- Bergsma, Donald R., Professor, (with tenure), Department of Ophthalmology, College of Medicine, effective 3/20/78.

*Special Title Series

Douglas, Robert H., Assistant Professor, Department of Veterinary Science, College of Agriculture, 3/1/78 through 6/30/78.

Earlywine, Garnett R., Assistant Professor, Department of Pathology, College of Medicine, 6/1/78 through 6/30/79.

Fackler, James S., Assistant Professor, Department of Economics, College of Business and Economics, 8/16/78 through 6/30/79.

Fink, Karl J., Assistant Professor, Department of Germanic Languages and Literatures, College of Arts and Sciences, 8/16/78 through 6/30/80.

Fortune, William H., Associate Professor (part-time), College of Law, 1/16/78 through 5/15/78.

Fulks, Daniel L., Instructor, Department of Accounting, College of Business and Economics, 8/16/78 through 6/30/79.

Gairola, Gerry A., Senior Research Associate, Clinical Associate Program, College of Allied Health Professions, 2/1/78 through 6/30/78.

Gibson, Kenneth R., Assistant Professor in the Community College System, and Assistant Director, Academic Affairs, Henderson Community College, 3/1/78 through 6/30/78.

Gilbert, James T., Associate Professor (part-time), College of Law, 1/16/78 through 5/15/78.

Grant, J. Kirkland, Visiting Professor, College of Law, 1/15/78 through 5/15/78.

Hagle, Paul, Visiting Associate Professor, Department of Geography, College of Arts and Sciences, 1/1/78 through 5/31/78.

Hendee, Edward F., Assistant Professor in the Community College System, Jefferson Community College, 1/30/78 through 6/30/78.

Hilliker, Jo Ann, Assistant Extension Professor of Home Economics*, Home Economics Extension, College of Agriculture, 2/1/78 through 6/30/79.

Hunter, Floyd G., Visiting Professor, Department of Sociology, College of Arts and Sciences, 1/1/78 through 5/31/78.

Josifek, Lorraine F., Assistant Professor, Department of Neurology, College of Medicine, 11/1/77 through 6/30/78.

Kroliekiewicz, Helena, Clinical Instructor (part-time) and Post-Doctoral Fellow (part-time), Department of Radiation Medicine, College of Medicine, 1/1/78 through 6/30/78.

Lewis, John R. Jr., Clinical Professor (voluntary), Department of Surgery, College of Medicine, 12/1/77 through 6/30/79.

Lu-Yuan, Lee, Assistant Professor, Department of Physiology and Biophysics, College of Medicine, 7/1/78 through 6/30/79.

McCafferty, Lawrence, Assistant Professor, Department of Anesthesiology, College of Medicine, 7/1/78 through 6/30/79.

Marino, Kenneth E., Instructor, Department of Business Administration, College of Business and Economics, 8/16/78 through 6/30/79.

Maxwell, Edward N., Assistant Professor, Department of Psychiatry, College of Medicine, 7/1/78 through 6/30/79.

Mossman, Robert G., Assistant Clinical Professor (part-time), Department of Anesthesiology, College of Medicine, 3/1/78 through 6/30/78.

*Special Title Series

Nunley, Terry J., Instructor, Department of Accounting, College of Business and Economics, 8/16/78 through 6/30/79.

Rodgers, James W., Professor, (with tenure), Department of Theatre Arts, College of Fine Arts, effective 8/16/78.

Shraberg, David, Assistant Professor, Department of Psychiatry and Department of Neurology, College of Medicine, 6/1/78 through 6/30/79.

Skaff, Karen O., Assistant Professor*, Department of Allied Health Education and Research, College of Allied Health Professions, named Coordinator, Resource Unit to Develop Dental Auxiliary Programs, Department of Dental Hygiene, College of Allied Health Professions, 2/1/78 through 6/30/78.

Smith, M. Scott, Assistant Professor, Department of Agronomy, College of Agriculture, 5/1/78 through 6/30/79.

Stahmann, Fred D., Assistant Professor, Department of Surgery, College of Medicine, 12/1/77 through 6/30/78.

Tulloch, Joan Frances, Assistant Professor, Department of Orthodontics, College of Dentistry, 12/15/77 through 6/30/78.

Wann, Daniel Ray, Assistant Professor, College of Architecture, 1/31/78 through 5/15/78.

Whayne, Thomas F. Jr., Clinical Professor (part-time), Department of Medicine, College of Medicine, 2/1/78 through 6/30/78.

Non-Academic Appointment

Andersson, George, Director of Finance, Office of the Dean, College of Medicine, effective 12/23/77.

Atwood, Donald R., Telecommunication Technician, Appalachian Education Satellite Project, effective 2/8/78.

Campbell, Phyllis D., County Extension Agent for Home Economics, Area Extension Programs, College of Agriculture, effective 1/1/78.

Compton, Virginia L., County Extension Agent for 4-H, Extension KSU 1890, College of Agriculture, effective 1/1/78.

Fish, Birney R., Project Director, Environmental Cancer Program, Ephraim McDowell Community Cancer Network, Inc., College of Medicine, 12/1/77 through 6/30/78.

Gwinn, Emogene, County Extension Agent for 4-H, Area Extension Programs (4-H), College of Agriculture, effective 1/1/78.

Hunt, John W., Management Specialist, Center for Real Estate and Land Use Analysis, College of Business and Economics, effective 12/1/77.

Hunter, Elizabeth, Assistant Director of Nursing for Pediatrics, University Hospital, 1/30/78 through 6/30/78.

Keating, Jean, Assistant for Area Health Systems Coordination, Office of the Vice President, Medical Center, effective 2/1/78.

Lutz, Bernard, Curriculum Director, College of Dentistry, effective 1/1/78.

Phillips, Alan D., Research Specialist, Department of Agronomy, College of Agriculture, effective 2/1/78.

Staples, Stuart J., Senior Research Associate, Department of Medicine, College of Medicine, 11/14/77 through 6/30/78.

*Special Title Series

Thalheimer, Richard, Senior Management Specialist, Center for Real Estate and Land Use Analysis, College of Business and Economics, effective 1/1/78.

Quarles, Terry, County Extension Agent for 4-H, Area Extension Programs (4-H), College of Agriculture, effective 1/1/78.

Troutman, David L., Area Regulatory Specialist, Department of Regulatory Services, College of Agriculture, effective 1/23/78.

Wilberding, Louis V., County Extension Agent for 4-H, Extension KSU 1890, College of Agriculture, effective 1/1/78.

Williams, Randall G., Research Specialist, Department of Agricultural Engineering, College of Agriculture, effective 12/8/77.

Administrative Appointments

Binkley, Harold R., Professor-Student Teaching*, (with tenure), Department of Vocational Education, College of Education, named Chairman, Department of Vocational Education, College of Education, 1978-79.

Cowen, David L., Associate Professor, (with tenure), Department of Community Medicine, and Department of Medicine, named Acting Chairman, Department of Ophthalmology, College of Medicine, 1/1/78 through 12/31/78.

Morsink, Catherine, Associate Professor, (with tenure), named Chairman, Department of Special Education, College of Education, 7/1/78 through 6/30/82.

Peters, William H., Associate Professor, (with tenure), named Chairman, Department of Curriculum and Instruction, College of Education, 7/1/78 through 6/30/81.

Pirone, Thomas P., Professor, (with tenure), named Chairman, Department of Plant Pathology, College of Agriculture, 7/1/78 through 6/30/84.

Rodgers, James W., Professor, (with tenure), named Chairman, Department of Theatre Arts, College of Fine Arts, 8/15/78 through 6/30/82.

VanWilligen, John, Associate Professor, (with tenure), named Chairman, Department of Anthropology, College of Arts and Sciences, 1/1/78 through 12/31/81.

Bergsma, Donald R., Professor, (with tenure), named Chairman, Department of Ophthalmology, College of Medicine, effective 3/20/78.

Promotions

Anderson, James W., from Associate Professor, (with tenure), to Professor, (with tenure), Department of Medicine, College of Medicine, effective 7/1/78.

*Special Title Series

- Banning, Lance G., from Assistant Professor, (without tenure), to Associate Professor, (with tenure), Department of History, College of Arts and Sciences, effective 7/1/78.
- Brock, Carolyn P., from Assistant Professor, (without tenure), to Associate Professor, (with tenure), Department of Chemistry, College of Arts and Sciences, effective 7/1/78.
- Burki, N. K., from Assistant Professor, (without tenure), to Associate Professor, (with tenure), Department of Medicine, College of Medicine, effective 7/1/78.
- Butterfield, David Allan, from Assistant Professor, (without tenure), to Associate Professor, (with tenure), Department of Chemistry, College of Arts and Sciences, effective 7/1/78.
- Evans, Lawrence Craig, from Assistant Professor, (without tenure), to Associate Professor, (with tenure), Department of Mathematics, College of Arts and Sciences, effective 7/1/78.
- Freeman, Michael B., from Associate Professor, (with tenure), to Professor, (with tenure), Department of Mathematics, College of Arts and Sciences, effective 7/1/78.
- Ireland, Robert M., from Associate Professor, (with tenure), to Professor, (with tenure), Department of History, College of Arts and Sciences, effective 7/1/78.
- Kotchen, Theodore, from Associate Professor, (with tenure), to Professor, (with tenure), Department of Medicine, College of Medicine, effective 7/1/78.
- Mersack, Ira P., from Assistant Clinical Professor (part-time), to Associate Clinical Professor (part-time), Department of Medicine, College of Medicine, 7/1/78 through 6/30/79.
- Norton, James C., from Assistant Professor, (without tenure), to Associate Professor, (with tenure), Department of Psychiatry, College of Medicine, effective 7/1/78.
- Phillips, Jane Ellen, from Assistant Professor, (without tenure), to Associate Professor, (with tenure), Department of Classical Languages and Literatures, College of Arts and Sciences, effective 7/1/78.
- Prior, David J., from Assistant Professor, (without tenure), to Associate Professor, (with tenure), Department of Biological Sciences, College of Arts and Sciences, effective 7/1/78.
- Randall, David C., from Assistant Professor, (without tenure), to Associate Professor, (with tenure), Department of Physiology and Biophysics, College of Medicine, effective 7/1/78.
- Reeb, Arvil, from Assistant Professor*, (without tenure), to Associate Professor*, (with tenure), Department of Psychiatry, College of Medicine, effective 1/1/78.
- Schankula, Henry A. S., from Assistant Professor, (without tenure), to Associate Professor, (with tenure), Department of Philosophy, College of Arts and Sciences, effective 7/1/78.
- Scott, Samuel R., from Assistant Professor*, (without tenure), Department of Medicine and Department of Community Medicine, College of Medicine, to Associate Professor*, (with tenure), Department of Medicine, remains Assistant Professor, Department of Community Medicine, College of Medicine, 7/1/78 through 6/30/79.
-

- Sorokin, Boris A., from Assistant Professor, (without tenure), to Associate Professor, (with tenure), Department of Slavic and Oriental Languages and Literature, College of Arts and Sciences, effective 7/1/78.
- Surawicz, Frida, from Associate Professor (with tenure), to Professor (with tenure), Department of Psychiatry, College of Medicine, effective 7/1/78.
- Ulack, Richard, from Assistant Professor, (without tenure), to Associate Professor, (with tenure), Department of Geography, College of Arts and Sciences, effective 7/1/78.
- Vance, Jane G., from Assistant Professor, (without tenure), to Associate Professor, (with tenure), Honors Program, Undergraduate Studies, effective 7/1/78.

Tenure

- Cole, James S., from Associate Professor, (without tenure), to Associate Professor, (with tenure), Department of Medicine, College of Medicine, effective 7/1/78.
- Hanley, Henry, from Associate Professor, (without tenure), to Associate Professor, (with tenure), Department of Medicine, College of Medicine, effective 7/1/78.

Reappointments

- Bender, Paul A., Associate Professor*, Department of Pediatric Dentistry, College of Dentistry, 7/1/78 through 6/30/79.
- Cunningham, Charles, Associate Professor, Department of Endodontics, College of Dentistry, 7/1/78 through 6/30/79.
- Jacobsen, Marilyn-Lu, Associate Professor*, College of Nursing, 7/1/78 through 6/30/79.
- Hoffman, Donald H., Associate Professor, Department of Art, College of Fine Arts, and Department of Curriculum and Instruction, College of Education, 7/1/78 through 6/30/79.
- Elliott, David G., Associate Professor-Applied*, School of Music, College of Fine Arts, 7/1/78 through 6/30/79.
- Foree, Sherrell B., Associate Extension Professor of Home Economics*, Department of Home Economics Extension, College of Agriculture, 7/1/78 through 6/30/79.
- Nieman, Thomas J., Associate Professor, Department of Horticulture and Landscape Architecture, College of Agriculture, 7/1/78 through 6/30/79.
- Milner, Samuel, Professor (part-time), College of Law, 1/16/78 through 5/15/78.
- Moore, Escum L. Jr., Professor (part-time), College of Law, 1/16/78 through 5/15/78.

Nietzel, Deedra Benthall, Professor (part-time), College of Law, 1/16/78 through 5/15/78.

Savage, Joe C., Professor (part-time), College of Law, 1/16/78 through 5/15/78.

College of Medicine Reappointments

Department of Family Practice

Allnutt, Richard A., Associate Clinical Professor (voluntary), 7/1/78 through 6/30/79.

Bowling, R. Eugene, Associate Clinical Professor (voluntary), 7/1/78 through 6/30/79.

Burkhart, Robert C., Associate Clinical Professor (voluntary), 7/1/78 through 6/30/79.

Ferrell, James L., Associate Clinical Professor (voluntary), 7/1/78 through 6/30/79.

Lewis, David T., Associate Clinical Professor (voluntary), 7/1/78 through 6/30/79.

Maddox, Paul F., Associate Clinical Professor (voluntary), 7/1/78 through 6/30/79.

Roach, Benjamin F., Clinical Professor (part-time), 7/1/78 through 6/30/79.

Sklar, Allen L., Associate Professor*, 7/1/78 through 1/31/79.

Department of Community Medicine

Eddison, Grace G., Associate Clinical Professor (part-time), 7/1/78 through 6/30/79.

Cooper, James Kyle, Associate Professor, 7/1/78 through 6/30/79.

Department of Medicine

Leavell, Ullin W., Clinical Professor (part-time), 7/1/78 through 6/30/79.

Mayer, Lloyd D., Clinical Professor (part-time), 7/1/78 through 6/30/79.

Mazzoleni, Alberto, Associate Professor (adjunct series), 7/1/78 through 6/30/79.

Whayne, Thomas F. Jr., Clinical Professor (part-time), 7/1/78 through 6/30/79.

Department of Pathology

Roeckel, Irene E., Clinical Professor (part-time), 7/1/78 through 6/30/79.

Department of Pharmacology

Gorodetzky, Charles W., Associate Professor (adjunct series), 7/1/78 through 6/30/79.

Huang, Kee Chang, Professor (adjunct series), 7/1/78 through 6/30/79.

Jasinski, Donald R., Associate Professor (adjunct series), 7/1/78 through 6/30/79.

Scharff, Thomas G., Professor (adjunct series), 7/1/78 through 6/30/79.

Waddell, William J., Professor (adjunct series), 7/1/78 through 6/30/79.

Department of Physiology and Biophysics

Timmons, Edward H., Associate Professor (adjunct series), joint with
Department of Veterinary Science, 7/1/78 through 6/30/79.

Department of Obstetrics & Gynecology

Austin, James A., Associate Professor*, 7/1/78 through 6/30/79.

*Special Title Series

Department of Biochemistry

James, Eric, Associate Professor, 7/1/78 through 6/30/79.

Joint Appointments

- Ambrose, Charles T., Professor, (with tenure), Department of Medical Microbiology and Immunology, College of Medicine, also named Professor (part-time), Graduate Center for Toxicology, retroactive 7/1/77.
- Csaky, T. Z., Professor, (with tenure), Department of Pharmacology, College of Medicine, also named Professor (part-time), Graduate Center for Toxicology, retroactive 7/1/77.
- Diamond, Louis, Associate Professor, College of Pharmacy, also named Associate Professor, Graduate Center for Toxicology, retroactive 7/1/77.
- Dorough, H. Wyman, Professor, (with tenure), Department of Entomology, College of Agriculture, also named Professor (part-time), Graduate Center for Toxicology, retroactive 7/1/77.
- Fletcher, James W., Associate Professor, Department of Pharmacology, College of Medicine, also named Associate Professor (part-time), Graduate Center for Toxicology, retroactive 7/1/77.
- Tobin, Thomas, Associate Professor, (with tenure), Department of Veterinary Science, College of Agriculture, also named Associate Professor (part-time), Graduate Center for Toxicology, retroactive 7/1/77.
- Waddell, William J., Professor-Adjunct, (with tenure), Department of Pharmacology, College of Medicine, also named Professor-Adjunct (part-time), Graduate Center for Toxicology, retroactive 7/1/77 through 6/30/78.
- Wiseman, Ralph F., Professor, (with tenure), Department of Biological Sciences, College of Arts and Sciences, also named Professor (part-time), Graduate Center for Toxicology, retroactive 7/1/77.
- Yeh, Shu Yuan, Associate Professor-Adjunct*, Department of Pharmacology, College of Medicine, also named Adjunct Associate Professor* (part-time), Graduate Center for Toxicology, retroactive 7/1/77 through 6/30/78.

Changes

- Beckner, Archie W., from Associate Clinical Professor (voluntary), to Associate Professor (part-time), Department of Periodontics, College of Dentistry, 2/20/78 through 6/30/78.
- Hall, Tom M., from Clinical Instructor (part-time), to Assistant Professor (temporary), Department of Psychiatry, College of Medicine, 1/1/78 through 6/30/78.
- Lange, Karl W., from Associate Clinical Professor (voluntary), to Associate Professor (part-time), Department of Prosthodontics and Department of Community Dentistry, College of Dentistry, 12/1/77 through 6/30/78.
- Lambson, Roger O., from Associate Professor, (with tenure), to Associate Professor*, (with tenure), Department of Anatomy, College of Medicine, retroactive 1/1/78.

*Special Title Series

TeKrony, Dennis M., from Associate Extension Professor*, (with tenure), to Associate Professor, (with tenure), Department of Agronomy, College of Agriculture, effective 2/1/78.

Retirements

Bell, William D., Crew Leader, Physical Plant Division, after 17 consecutive years of service, effective 3/1/78.

Coleman, A. Lee, Professor, Department of Sociology, College of Arts and Sciences, after 29 consecutive years of service, effective 6/30/78.

Denbo, Bruce F., Director and Professor, University Press, after 28 consecutive years of service, effective 6/30/78.

Diachun, Stephen, Chairman and Professor, Department of Plant Pathology, College of Agriculture, after 41 consecutive years of service, effective 6/30/78.

Erwin, Carlos C., Associate Professor, Department of Economics, College of Business and Economics, after 26 consecutive years of service, effective 6/30/78.

Gladden, James W., Professor, Department of Sociology, College of Arts and Sciences, after 29 consecutive years of services, effective 7/1/78.

Hagan, Wallace W., Director and Geologist, Kentucky Geological Survey, after 20 consecutive years of service, effective 7/1/78.

Johnson, Lucille W., Administrative Assistant, Business Services, after 20 consecutive years of service, effective 5/1/78.

McNary, Mark, Lab Technician, Western Kentucky Experimental Station, after 14.5 consecutive years of service, effective 5/2/78.

Nash, Gordon B., Associate Professor, School of Music, College of Fine Arts, after 20 consecutive years of service, effective 7/19/78.

Richardson, Mary E., Administrative Assistant, Vice President for the Medical Center's Office, after 18 consecutive years of service, effective 5/31/78.

Verrill, Mary G., Library Technician IV, King Library, after 19 consecutive years of service, effective 6/30/78.

Whiteside, Frederick W., Professor, College of Law, after 29 consecutive years of service, effective 6/30/78.

Wright, Kenneth R., Professor, School of Music, College of Fine Arts, after 29 consecutive years of service, effective 7/1/78.

Early Retirements

Gulley, John W., Laboratory Technician, College of Agriculture, after 21 consecutive years of service, effective 8/1/78.

Hawkins, J. A., Manager, Duplicating Services, after 19 consecutive years of service, effective 4/30/78.

Holbrook, Norma, Laboratory Technician, Regulatory Services, after 23 consecutive years of service, effective 7/1/78.

Smith, Frances L., Staff Assistant, College of Agriculture, after 15.5 consecutive years of service, effective 3/1/79.

*Special Title Series

Post Retirement Appointments

Duncan, Joseph G., Associate Extension Professor* (part-time), Administration, College of Agriculture, 12/1/77 through 6/30/78.
Hammaker, Ellwood M., Professor, Department of Chemistry, College of Arts and Sciences, 1/1/78 through 5/31/78.
Herbert, Marvin J., Associate Professor, U.K. Center at Fort Knox, 7/1/78 through 6/30/79.

Transfer of Personnel from Kentucky Department of Agriculture CKADDL to Central Kentucky Animal Diagnostic Laboratory

Colley, Eddie L., Diagnostic Specialist, effective 1/1/78.
Donahue, James M., Diagnostic Specialist, effective 1/1/78.
Hempel, Elizabeth M., Diagnostic Specialist, effective 1/1/78.
Leach, Roy B., Diagnostic Specialist, effective 1/1/78.
Newman, Dewey H., Diagnostic Specialist, effective 1/1/78.
Poonacha, Kochanda B., Diagnostic Specialist, effective 1/1/78.
Prickett, Patricia A., Diagnostic Specialist, effective 1/1/78.
Singer, Robert H., Diagnostic Specialist, effective 1/1/78.
Sisk, Dudley B., Diagnostic Specialist, effective 1/1/78.
Smith, Barbara J., Diagnostic Specialist, effective 1/1/78.
Weaver, Pamela R., Diagnostic Specialist, effective 1/1/78.
Wilson, Mignon S., Diagnostic Specialist, effective 1/1/78.

ADMINISTRATIVE ACTION

New Appointments

College of Allied Health Professions

Axiotes, Steve, Clinical Instructor (voluntary), Department of Physical Therapy, 1/1/78 through 6/30/78.
Beatty, Eunice Archie, Instructor (temporary), Department of Dental Hygiene, 1/1/78 through 6/30/78.
Clara, Ann Sister M., Clinical Instructor (voluntary), Department of Allied Health Education and Research, 12/15/77 through 6/30/78.
Craft, Paula, Clinical Instructor (voluntary), Department of Allied Health Education and Research, 2/1/78 through 6/30/78.
Davis, Jean Marie, Clinical Instructor (voluntary), Department of Physical Therapy, 12/13/77 through 6/30/78.
Esrig, Kenneth, Clinical Instructor (voluntary), Department of Allied Health Education and Research, 12/15/77 through 6/30/78.

*Special Title Series

Glaysbrook, Julia L., Clinical Instructor (voluntary), Department of Allied Health Education and Research, 12/15/77 through 6/30/78.

Gosney, Brenda, Clinical Instructor (voluntary), Department of Physical Therapy, 2/1/78 through 6/30/78.

Hill, Kathleen B., Clinical Instructor (voluntary), Department of Allied Health Education and Research, 3/1/78 through 6/30/78.

Johnson, Joe, Clinical Instructor (voluntary), Department of Allied Health Education and Research, 3/1/78 through 6/30/78.

Jordan, Patricia C., Clinical Instructor (voluntary), Department of Allied Health Education and Research, 1/1/78 through 6/30/78.

Lippert, Marilyn, Instructor (part-time), Department of Medical Technology, 1/1/78 through 5/31/78.

Reed, Linda, Clinical Instructor, Department of Physical Therapy, 12/15/77 through 6/30/78.

Richardson, Peggy Ann, Clinical Instructor (voluntary), Department of Physical Therapy, 12/14/77 through 6/30/78.

Robillard, Helan M., Clinical Instructor (voluntary), Department of Allied Health Education and Research, 12/1/77 through 6/30/78.

Roy, E. Kendall, Clinical Instructor (voluntary), Department of Allied Health Education and Research, 3/1/78 through 6/30/78.

Swartzwelder, Lauralee, Clinical Instructor (voluntary), Department of Allied Health Education and Research, 12/15/77 through 6/30/78.

Tanner, Roger Neal, Clinical Instructor (voluntary), Department of Physical Therapy, 12/7/77 through 6/30/78.

Thomas, R. Michael, Clinical Instructor (voluntary), Department of Allied Health Education and Research, 12/15/77 through 6/30/78.

Tonkin, Alice L., Clinical Instructor (voluntary), Department of Physical Therapy, 12/6/77 through 6/30/78.

Traylor, Linda, Clinical Instructor (voluntary), Department of Allied Health Education and Research, 2/1/78 through 6/30/78.

Vahlsing, Linda, Clinical Instructor (voluntary), Department of Physical Therapy, 3/1/78 through 6/30/79.

Wurtz, James R., Clinical Instructor (voluntary), Department of Allied Health Education and Research, 12/15/77 through 6/30/78.

Wright, Cynthia L., Clinical Instructor (voluntary), Department of Allied Health Education and Research, 12/15/77 through 6/30/78.

Zingman, Barbara, Clinical Instructor (voluntary), Department of Allied Health Education and Research, 12/15/77 through 6/30/78.

College of Arts and Sciences

Baskin, Carol C., Instructor (part-time), Department of Biological Sciences, 1/1/78 through 5/31/78.

Blumenthal, Linda, Visiting Instructor (part-time), Department of Chemistry, 1/1/78 through 5/31/78.

Duncan, Charles E., Visiting Instructor (part-time), Department of Physics and Astronomy, 1/1/78 through 5/31/78.

Eng, Erling, Visiting Instructor (part-time), Department of Psychology, 1/1/78 through 5/31/78.

Evensen, Paul, Visiting Instructor (part-time), Department of Psychology, 1/1/78 through 5/31/78.

Feraca, Jane, Visiting Instructor (part-time), Department of English,
1/1/78 through 5/31/78.

Fouts, Arnold, Visiting Instructor, Department of Physics and Astronomy,
1/1/78 through 5/31/78.

Fowler, Corbin, Visiting Assistant Professor, Department of Philosophy,
1/1/78 through 5/31/78.

Greene, Jeffrey A., Visiting Instructor (part-time), Department of Physics
and Astronomy, 1/1/78 through 5/31/78.

Gregory, Richard, Visiting Instructor, Department of Chemistry, 1/1/78
through 5/31/78.

Grun, Ruth E., Instructor (part-time), Department of History, 1/1/78 through
5/31/78.

King, Ronald, Visiting Instructor (part-time), Department of Chemistry,
1/1/78 through 5/31/78.

Kook, Alan, Visiting Instructor, Department of Chemistry, 1/1/78
through 5/31/78.

Krolikoski, Stanley J., Visiting Assistant Professor, Department of Philosophy,
1/1/78 through 5/31/78.

Landon, Pamela, Instructor (part-time), Department of Chemistry, 1/1/78
through 5/31/78.

Lowe, Marion O., Visiting Instructor (part-time), Department of Chemistry,
1/1/78 through 5/31/78.

Messer, John Davis, Visiting Assistant Professor, Department of Philosophy,
1/1/78 through 5/31/78.

Norton, James, Visiting Instructor (part-time), Department of Psychology,
1/1/78 through 6/30/78.

Saylors, Marshall Lee, Visiting Assistant Professor (temporary), Department of
Physics and Astronomy, 1/1/78 through 5/31/78.

Shelton, William A., Visiting Instructor (part-time), Department of History,
1/1/78 through 5/31/78.

Stonecipher, Mabel A., Instructor (part-time), Department of English, 1/1/78
through 5/15/78.

Stott, Nancy M., Instructor (part-time), Department of Chemistry, 1/1/78
through 5/31/78.

Warren, Barbara J., Visiting Instructor (part-time), Department of Chemistry,
1/1/78 through 5/31/78.

College of Business and Economics

Crouse, Gilbert L., Instructor (part-time), Department of Economics, 1/1/78
through 5/31/78.

DuMont, Paul F., Instructor, Department of Business Administration, 8/16/78
through 6/30/79.

Reinstein, Alan, Instructor (part-time), Department of Accounting, 1/1/78
through 5/31/78.

College of Dentistry

Kluemper, Joan, Clinical Instructor (voluntary), Department of Restorative Dentistry, 1/1/78 through 6/30/80.

College of Education

Andersen, Peter A., Instructor (temporary), Department of Health, Physical Education, and Recreation, 1/1/78 through 5/31/78.

Appling, Jeff, Instructor (part-time), Department of Health, Physical Education, and Recreation, 1/1/78 through 5/15/78.

Ardila, Alfredo, Adjunct Assistant Professor*, Department of Educational Psychology and Counseling, 2/15/78 through 6/30/79.

Fitzpatrick, Ruth, Instructor (temporary), Department of Curriculum and Instruction, 1/16/78 through 5/16/78.

Higgins, Jerry M., Instructor (part-time), Department of Special Education, 1/1/78 through 5/15/78.

Mertens, Donna, Instructor (temporary) (part-time), Department of Psychology and Counseling, 1/1/78 through 5/15/78.

Perritt, Lea, Instructor (temporary) (part-time), Department of Psychology and Counseling, 1/1/78 through 5/15/78.

Prus, Joseph S., Instructor (temporary) (part-time), Department of Psychology and Counseling, 1/1/78 through 5/15/78.

Thomas, Susan, Instructor (temporary) (part-time), Department of Curriculum and Instruction, 1/1/78 through 5/15/78.

McCombs, Walter M., Instructor (part-time), Department of Health, Physical Education, and Recreation, 3/1/78 through 5/31/78.

College of Engineering

Mayes, Jesse, Visiting Instructor (part-time), Department of Engineering Mechanics, 1/1/78 through 5/31/78.

Ohlinger, Wayne L., Adjunct Assistant Professor* (part-time), Department of Metallurgical Engineering and Materials Science, 1/15/78 through 5/15/78.

College of Fine Arts

Glover, Henry, Visiting Assistant Professor, Department of Art, joint with Department of Curriculum and Instruction, College of Education, 1/1/78 through 5/31/78.

College of Home Economics

Hoskin, Sharla Jean, Assistant Professor, Department of Human Environment; Design and Textiles, 1/1/78 through 5/15/78.

College of Law

Brazil, Wayne, Visiting Assistant Professor (temporary), 1/15/78 through 5/15/78.

College of Medicine

Bell, James A., Assistant Adjunct Professor (voluntary), Department of Pharmacology 1/1/78 through 6/30/79.

Cooper, William, Clinical Instructor (voluntary), Department of Diagnostic Radiology, 3/1/78 through 6/30/79.

*Special Title Series

Cowles, Mary, Assistant Clinical Professor (voluntary), Department of Psychiatry, 1/1/78 through 6/30/79.
Gilbert, Paul Elliot, Assistant Adjunct Professor (voluntary), Department of Pharmacology, 2/1/78 through 6/30/79.
Halpin, John A., Clinical Instructor (part-time), Department of Ophthalmology, 2/1/78 through 6/30/78.
Lucas, Barbara Ann, Librarian IV (temporary), Medical Center Library, 1/1/78 through 6/30/78.
Ramsey, Barry, Assistant Clinical Professor (voluntary), Department of Pediatrics, 2/1/78 through 6/30/79.
Shannon, Harlan, Assistant Adjunct Professor (voluntary), Department of Pharmacology, 1/1/78 through 6/30/79.
Vaupel, Donald B., Assistant Adjunct Professor (voluntary), Department of Pharmacology, 2/1/78 through 6/30/79.
Wheeler, William B., Clinical Instructor (voluntary), Department of Obstetrics and Gynecology, 1/1/78 through 6/30/79.

College of Nursing

Blues, Kay, Clinical Instructor (voluntary), 1/1/78 through 6/30/78.
Gascoigne, George B., Assistant Clinical Professor (voluntary), 1/1/78 through 6/30/78.
Lauf, Anna, Assistant Clinical Professor (voluntary), 1/1/78 through 6/30/78.
Morrell, Maureen, Clinical Instructor (voluntary), 1/1/78 through 6/30/78.

College of Pharmacy

Ross, John D., Clinical Instructor (voluntary), 10/1/77 through 6/30/78.

Community College System

Hazard Community College

Gilmer, Marshall E., Assistant Professor in the Community College System, 1/1/78 through 6/30/78.

Hopkinsville Community College

Shehan, Thomas G. Jr., Instructor in the Community College System, 1/10/78 through 6/30/78.

Jefferson Community College

Dolan, Dennis J., Instructor in the Community College System, 1/24/78 through 6/30/78.

Lexington Technical Institute

Chancellor, Madonna, Instructor in the Community College System, 1/24/78 through 5/30/78.
Delaney, Beverly, Instructor in the Community College System, 1/16/78 through 5/15/78.
Kendall, Olivia, Instructor in the Community College System, 1/1/78 through 5/31/78.
Leach, Naomi, Instructor in the Community College System (voluntary), 8/31/77 through 5/13/78.
Saha, Siby, Instructor in the Community College System (voluntary), 1/1/78 through 5/13/78.
Wells, Donald W., Instructor in the Community College System, 1/1/78 through 6/30/78.

Maysville Community College

Mincey, Ruth Ann, Instructor in the Community College System, and Coordinator, Cooperative Education, 12/1/77 through 6/30/78.

Paducah Community College

Braboy, James M., Instructor in the Community College System, 2/1/78 through 6/30/78.

Kennerknecht, Norbert, Instructor in the Community College System, 1/1/78 through 6/30/78.

Russell, Helene, Instructor in the Community College System, 1/31/78 through 6/30/78.

Prestonsburg Community College

Hobbs, Thomas C., Librarian III in the Community College System, 7/1/78 through 6/30/79.

Southeast Community College

Jones, Lynn Y., Instructor in the Community College System, 1/1/78 through 6/30/78.

Non-Academic Appointments

Breter, Hans-Joachim, Research Associate, Department of Biochemistry, College of Medicine, 11/22/77 through 6/30/78.

Finley, Sharon S., Research Assistant, Center for Public Affairs, College of Business and Economics, 2/20/78 through 6/30/78.

Floore, Douglas, Research Associate, Department of Pediatrics, College of Medicine, 1/1/78 through 6/30/78.

Flynn, Lynne J., Research Associate, Department of Community Medicine, College of Medicine, 2/1/78 through 6/30/78.

Goldsmith, Robert, Administrative Staff Officer, Office of the Dean, College of Medicine, retroactive 12/19/77.

Hsu, Fwu-Jih, Research Associate, Department of Electrical Engineering, College of Engineering, 11/1/77 through 4/30/78.

Murray, Bruce, Research Associate, Department of Community Dentistry, College of Dentistry, 1/1/78 through 6/30/78.

Rao, Paturi B., Post Doctoral Fellow (temporary), Department of Metallurgical Engineering and Materials Science, College of Engineering, 12/1/77 through 6/30/78.

Swetnam, Larry, Agriculture Engineer, Department of Agricultural Engineering, College of Agriculture, retroactive 11/29/77.

Joint Appointments

Chapman, James P., Assistant Adjunct Professor*, Department of Classical Languages and Literatures, College of Arts and Sciences, also named Assistant Adjunct Professor* (part-time), Department of Social and Philosophical Studies, College of Education, 1/1/78 through 5/15/78.

Hafferty, Frederic W., Assistant Professor, Department of Behavioral Sciences, College of Medicine, also named Assistant Professor, Department of Sociology, College of Arts and Sciences, 1/1/78 through 6/30/78.

Administrative Appointments

Blandau, James Richard, Associate Professor in the Community College System, (with tenure), named Assistant Director; Acting Division Chairman, Hazard Community College, 8/1/77 through 6/30/78.

Bruce, Herbert Jr., Professor, Student Teaching*, (with tenure), named Acting Chairman, Department of Vocational Education, College of Education, 1/1/78 through 6/30/78.

Crabb, Alfred L. Jr., Associate Professor of English Education*, (with tenure), named Acting Chairman, Department of English, College of Arts and Sciences, 1/1/78 through 6/30/78.

Maley, Donald, Assistant Professor in the Community College System, named Acting Division Chairman, Paducah Community College, 1/1/78 through 6/30/78.

Tanner, Robert F., named Associate Director, Department of Continuing Education and Extension, College of Engineering, retroactive 1/1/78.

Promotions (without Tenure)

Baldini, Bernadette, from Librarian IV to Librarian III, Medical Center Library, 7/1/78 through 6/30/79.

Blair, Joyce A., from Instructor to Assistant Professor, Department of Computer Science, College of Arts and Sciences, 1/1/78 through 6/30/79.

Ellis, William C., from Clinical Instructor (voluntary), to Assistant Clinical Professor (voluntary), Department of Obstetrics and Gynecology, also Associate Clinical Professor (voluntary), Department of Family Practice, College of Medicine, 2/1/78 through 6/30/79.

Farrell, David T., from Librarian IV, to Librarian III, Special Collections, M.I. King Library, 7/1/78 through 6/30/79.

Gill, John W., from Instructor, Department of Anesthesiology, to Assistant Professor*, Department of Medicine, College of Medicine, 12/1/77 through 6/30/78.

Kelly, William N., from Clinical Instructor (voluntary), to Assistant Clinical Professor (voluntary), College of Pharmacy, 1/1/78 through 6/30/79.

Miller, Douglas E., from Clinical Instructor (voluntary), to Assistant Clinical Professor (voluntary), College of Pharmacy, 1/1/78 through 6/30/79.

Nordquist, Niles T., from Instructor, to Assistant Professor, Department of Horticulture and Landscape Architecture, College of Agriculture, 1/1/78 through 6/30/78.

O'Connor, P. J., from Instructor, to Assistant Professor, Department of Business Administration, College of Business and Economics, 2/1/78 through 6/30/78.

Preston, Charles L., from Clinical Instructor (voluntary), to Assistant Clinical Professor (voluntary), Department of Obstetrics and Gynecology, College of Medicine, also Associate Clinical Professor, Department of Family Practice, College of Medicine, 2/1/78 through 6/30/79.

Rodgers, William C., from Instructor, to Assistant Professor, Department of Business Administration, College of Business and Economics, 12/1/77 through 6/30/78.

Saillard, Kay, from Librarian IV to Librarian III, Medical Center Library 7/1/78 through 6/30/79.

Scherl, Eileen, from Clinical Instructor* (part-time), to Assistant Professor*, Department of Medicine, College of Medicine, 7/1/78 through 6/30/79.

Schwemm, Susan Waller, from Librarian IV to Librarian III, Law Library, 7/1/78 through 6/30/79.

Reappointments

College of Agriculture

Anderson, Robert G., Assistant Extension Professor*, Department of Horticulture and Landscape Architecture, 7/1/78 through 6/30/79.

Busch, Lawrence M., Assistant Professor, Department of Sociology, 7/1/78 through 6/30/79.

Fehr, Robert L., Assistant Extension Professor*, Department of Agricultural Engineering, 7/1/78 through 6/30/79.

Garkovich, Lorraine E., Assistant Professor, Department of Sociology, 7/1/78 through 6/30/79.

Graves, Donald H., Assistant Professor, Department of Forestry, 7/1/78 through 6/30/79.

Herman, Glenda M., Assistant Extension Professor*, Department of Home Economics Extension, 7/1/78 through 6/30/79.

Hicks, Clair Lloyd, Assistant Professor, Department of Animal Sciences, 7/1/78 through 6/30/79.

Hotze, Mary Louise, Assistant Extension Professor*, Department of Horticulture and Landscape Architecture, 7/1/78 through 6/30/79.

Johns, John Thomas, Assistant Extension Professor*, Department of Animal Sciences, 7/1/78 through 6/30/79.

Liu, Calvin J., Assistant Professor, Department of Forestry, 7/1/78 through 6/30/79.

McNiel, Robert E., Assistant Extension Professor*, Department of Horticulture and Landscape Architecture, 7/1/78 through 6/30/79.

Maronek, Dale M., Assistant Professor, Department of Horticulture and Landscape Architecture, 7/1/78 through 6/30/79.

Miksch, Duane, Assistant Extension Professor*, Department of Veterinary Science, 7/1/78 through 6/30/79.

Muir, William Martin, Assistant Professor, Department of Animal Sciences, College of Agriculture and Department of Statistics, College of Arts and Sciences, 7/1/78 through 6/30/79.

*Special Title Series

O'Leary, Joseph, Assistant Professor, Department of Animal Science,
7/1/78 through 6/30/79.

Olson, Kenneth E., Assistant Extension Professor*, Department of Animal
Science, 7/1/78 through 6/30/79.

Pagoulatos, Angelos, Assistant Professor, Department of Agricultural
Economics, 7/1/78 through 6/30/79.

Parker, Walter Ronald, Assistant Extension Professor*, Department of Animal
Sciences, 7/1/78 through 6/30/79.

Pigg, Kenneth E., Assistant Extension Professor*, Department of Sociology,
7/1/78 through 6/30/79.

Quick, J. Samuel III, Assistant Extension Professor*, Department of
Home Economics Extension, 7/1/78 through 6/30/79.

Reicosky, David A., Assistant Professor, Department of Agronomy,
7/1/78 through 6/30/79.

Robbins, Lynn Wayne, Assistant Professor, Department of Agricultural
Economics, 7/1/78 through 6/30/79.

Rumsey, Robert L., Assistant Professor, Department of Forestry, 7/1/78
through 6/30/79.

Stahly, Tim S., Assistant Professor, Department of Animal Sciences, 7/1/78
through 6/30/79.

Stuckey, Richard E., Assistant Extension Professor*, Department of Plant
Pathology, 7/1/78 through 6/30/79.

Taraba, Joseph L., Assistant Extension Professor*, Department of Agricultural
Engineering, 7/1/78 through 6/30/79.

Vian, Wayne Edwin, Assistant Professor, Department of Agronomy, 7/1/78
through 6/30/79.

Wells, Larry G., Assistant Professor, Department of Agricultural Engineering,
7/1/78 through 6/30/79.

Wittwer, Robert F., Assistant Professor, Department of Forestry, 7/1/78
through 6/30/79.

College of Allied Health Professions

Alberhasky, Timothy E., Instructor, Department of Physical Therapy, 7/1/78
through 6/30/79.

Angermeyer, Kathryn, Assistant Professor*, Department of Physical Therapy,
7/1/78 through 6/30/79.

Bryant, Jane G., Assistant Professor (part-time)*, Department of Medical
Technology, 7/1/78 through 6/30/79.

Christensen, Ralph, Assistant Professor, Department of Health Radiation Sciences,
also Department of Radiation Medicine, College of Medicine, 7/1/78
through 6/30/79.

Clark, Daniel A., Assistant Professor*, Department of Allied Health Education
and Research, 7/1/78 through 6/30/79.

Clark, Sherry, Instructor, Department of Physical Therapy, 7/1/78 through
6/30/79.

Combs, Glen E., Instructor, Department of Allied Health Education and
Research, 7/1/78 through 6/30/79.

*Special Title Series

Ellenor, Gary L., Assistant Professor*, Department of Allied Health Education and Research, also College of Pharmacy, 7/1/78 through 6/30/79.

Fury, Debra Jean, Instructor, Department of Allied Health Education and Research, 7/1/78 through 6/30/79.

Gardner, Davis L., Assistant Professor*, Department of Allied Health Education and Research, 7/1/78 through 6/30/79.

Lloyd, Brenda M., Instructor*, (part-time), Department of Medical Technology, 7/1/78 through 6/30/79.

Lyons, Lynne H., Instructor*, Department of Medical Technology, 7/1/78 through 6/30/79.

McEwen, Claudia A., Assistant Professor*, Department of Allied Health Education and Research, also Department of Pediatrics, College of Medicine, 7/1/78 through 6/30/79.

Marion, Rodger, Instructor, Department of Allied Health Education and Research, 7/1/78 through 6/30/79.

Robertson, Denver, Assistant Professor* (part-time), Department of Medical Technology, 7/1/78 through 6/30/79.

Schneider, Diane, Instructor, Department of Allied Health Education and Research, 7/1/78 through 6/30/79.

Seymour, Ronald J., Assistant Professor*, Department of Physical Therapy, 7/1/78 through 6/30/79.

Walsh, Terry, Instructor*, Department of Allied Health Education and Research, 7/1/78 through 6/30/79.

College of Arts and Sciences

Aguirre, Ramon, Visiting Instructor, Department of Spanish and Italian Languages and Literatures, 7/1/78 through 6/30/79.

Bland, Richard A., Instructor (part-time), Department of History, 1/1/78 through 5/31/78.

Bodine, Jay F., Assistant Professor, Department of Germanic Languages and Literatures, 7/1/78 through 6/30/80.

Brooks, J. Michael, Assistant Professor and Director of Undergraduate Studies*, Department of Sociology, 7/1/78 through 6/30/79.

Dare, Philip N., Instructor (part-time), Department of History, 1/1/78 through 5/31/78.

Kaplan, Steven J., Assistant Professor, Department of Mathematics, 7/1/78 through 6/30/81.

Knerr, Barry, Assistant Professor, Department of Mathematics, 7/1/78 through 6/30/81.

Likens, Thomas W., Assistant Professor, Department of Political Science, 7/1/78 through 6/30/80.

Magretta, William R., Assistant Professor, Department of English, 1/1/78 through 12/31/79.

Mingst, Karen, Assistant Professor, Department of Political Science, 7/1/78 through 6/30/79.

Tolbert, Laren M., Assistant Professor, Department of Chemistry, 7/1/78 through 6/30/80.

*Special Title Series

College of Dentistry

Bader, James D., Assistant Professor, Department of Community Dentistry,
7/1/78 through 6/30/79.

Bosman, C. Warner, Assistant Professor, Department of Periodontics,
7/1/78 through 6/30/79.

Falace, Donald A., Assistant Professor, Department of Oral Diagnosis and
Oral Medicine, 7/1/78 through 6/30/79.

Fisch, A. L., Assistant Professor*, Department of Community Dentistry,
also Department of Community Health, College of Allied Health Professions,
7/1/78 through 6/30/79.

Hovijitra, Suteera, Assistant Professor, Department of Restorative Dentistry,
7/1/78 through 6/30/79.

Keiser, LaMar, Clinical Instructor (voluntary), Department of Community
Dentistry, 7/1/77 through 6/30/80.

Kemper, John T. Jr., Assistant Professor, Department of Restorative Dentistry,
7/1/78 through 6/30/79.

Lucente, Jose M., Assistant Professor, Department of Restorative Dentistry,
7/1/78 through 6/30/79.

Meyer, Edward Allen, Assistant Professor, Department of Restorative Dentistry,
7/1/78 through 6/30/79.

Okeson, Jeffrey, Assistant Professor, Department of Restorative Dentistry,
7/1/78 through 6/30/79.

Reid, Stephen L., Assistant Professor*, Department of Restorative Dentistry,
7/1/78 through 6/30/79.

Robinson, Francis, Assistant Professor, Department of Restorative Dentistry,
7/1/78 through 6/30/79.

Robinson, Ronald, Assistant Professor, Department of Restorative Dentistry,
7/1/78 through 6/30/79.

College of Education

Charlesworth, Jean, Assistant Professor (part-time), Department of Social and
Philosophical Studies, 1/1/78 through 5/15/78.

Cronin, Janice, Instructor (temporary), Department of Health, Physical Education,
and Recreation, 1/1/78 through 5/15/78.

School of Fine Arts

Brunner, Lance, Assistant Professor, School of Music, 7/1/78 through 6/30/79.

Cole, Gordon B., Assistant Professor-Applied*, School of Music, 7/1/78 through
6/30/79.

DiMartino, Vincent A., Assistant Professor of Applied Music*, School of Music,
7/1/78 through 6/30/79.

Domek, Richard C. Jr., Assistant Professor, School of Music, 7/1/78 through
6/30/79.

Hamann, Marilyn D., Assistant Professor, Department of Art, 7/1/78 through
6/30/79.

Henderson, Gordon, Instructor of Applied Music* and Assistant Director of
Bands, School of Music, 7/1/78 through 6/30/79.

Lindsey, John, Assistant Professor-Applied Music*, School of Music, 7/1/78
through 6/30/79.

*Special Title Series

Miller, Mina F., Assistant Professor, School of Music, 7/1/78 through 6/30/79.
Montgomery, Patricia, Assistant Professor-Applied Music*, School of Music, 7/1/78 through 6/30/79.
Peters, Jane S., Assistant Professor, Department of Art, 7/1/78 through 6/30/79.
Prizer, William F., Assistant Professor, School of Music, 7/1/78 through 6/30/79.
Salzberg, Rita, Assistant Professor of Music Education*, School of Music, 7/1/78 through 6/30/79.
Senff, Thomas E., Assistant Professor-Applied*, School of Music, 7/1/78 through 6/30/79.
Tunks, Thomas W., Assistant Professor, School of Music, 7/1/78 through 6/30/79.
Wang, Cecilia Hoi-Mee Chu, Assistant Professor in Music Education*, School of Music, 7/1/78 through 6/30/79.

College of Medicine

Braen, G. Richard, Assistant Professor*, from Department of Anesthesiology, to Department of Medicine, 7/1/78 through 6/30/79.
Clifford, Happa B., Assistant Professor, Department of Community Medicine, 7/1/78 through 7/31/78.
Dougherty, John A., Assistant Professor, Department of Psychiatry, and Department of Pharmacology, 7/1/78 through 11/30/78.
Frye, Tagalie, Librarian IV, Medical Center Library, 7/1/78 through 6/30/79.
Heckenlively, John, Visiting Assistant Professor, Department of Ophthalmology, 12/31/77 through 1/7/78.
Lee, Tai-Shion, Visiting Assistant Professor, Department of Anesthesiology, 2/1/78 through 6/30/78.
Mazloomdoost, Manoochehr, Visiting Assistant Professor, Department of Anesthesiology, 12/1/77 through 12/9/77.
Smith, Coy D., Assistant Professor (Adjunct Series), Department of Community Medicine, 7/1/78 through 6/30/79.
Suruda, Anthony J., Assistant Professor*, from Department of Anesthesiology to Department of Medicine, 7/1/78 through 6/30/79.
Sparrow, John C., Clinical Instructor (part-time), Department of Ophthalmology, 1/1/78 through 6/30/78.
Wilson, H. David, Assistant Professor, Department of Pediatrics, 7/1/78 through 5/31/79.

College of Medicine Reappointments-Full-time Faculty, 7/1/78 through 6/30/79.

Department of Anatomy

Martin, William D., Assistant Professor.

Department of Biochemistry

Barkley, Mary D., Assistant Professor.
Coleman, Mary Sue, Assistant Professor.
Dickson, Robert C., Assistant Professor.
Laine, Roger A., Assistant Professor.
Rhoads, Robert E., Assistant Professor.

*Special Title Series

Department of Community Medicine

Kotchen, Jane M., Assistant Professor.

Somes, Grant W., Assistant Professor; Joint with Department of Statistics,
College of Arts and Sciences.

Department of Diagnostic Radiology

Ellis, Guy T., Assistant Professor*.

Fried, Andrew M., Assistant Professor.

Krumpelman, Jerome L., Assistant Professor.

Larson, Thomas O., Assistant Professor.

Pulmano, Calixto M., Assistant Professor.

Department of Family Practice

Dale, Thomas A. II, Assistant Professor*.

David, Alan K., Assistant Professor*.

Foley, William S. Jr., Assistant Professor*.

Department of Medicine

Baehler, Richard W., Assistant Professor.

Boldt, David H., Assistant Professor.

Curtis, John J., Assistant Professor.

DeSimone, Philip A., Assistant Professor.

Flueck, James A., Assistant Professor.

Galla, John H., Assistant Professor.

Gill, John W., Assistant Professor*.

Guthrie, Gordon P., Assistant Professor.

Hughes, Shirley L., Assistant Professor of Social Work*.

Kuo, Chien-Suu, Assistant Professor.

Leichter, Steven B., Assistant Professor.

Reddy, Chandupatla P., Assistant Professor.

Riegler, Sandra L., Assistant Professor*.

Spremulli, Ellen, Assistant Professor.

Vine, Donald L., Assistant Professor.

Walzer, Peter D., Assistant Professor.

Weber, Frederick L., Assistant Professor.

Williams, Robert H., Assistant Professor.

Department of Obstetrics & Gynecology

Donaldson, Elvis S., Assistant Professor.

O'Neill, James Eugene, Assistant Professor.

Wilson, Emery A., Assistant Professor.

Department of Pathology

Brusman, Harold P., Assistant Professor.

O'Connor, William, Assistant Professor.

Oeltgen, Peter R., Assistant Professor.

Overman, Timothy L., Assistant Professor*,

Pett, Donald M., Assistant Professor.

Primus, F. James, Assistant Professor.

Rutherford, Isobel, Assistant Professor*.

Sniecinski, Irene, Assistant Professor.

Yoneda, Kokichi, Assistant Professor.

Zimmer, Stephen G., Assistant Professor.

*Special Title Series

Department of Pediatrics

Campbell, Jacqueline, Assistant Professor*.

Cottrill, Carol M., Assistant Professor.

Johnson, Gregory L., Assistant Professor.

Melnik, Evelyn H., Assistant Professor*.

Department of Pharmacology

Dominic, Jerome A., Assistant Professor, joint with Department of Medicine.

Department of Physiology and Biophysics

Ott, Cobern E., Assistant Professor.

Department of Psychiatry

Brightwell, Dennis R., Assistant Professor.

Combs, Gene N. Jr., Assistant Professor.

Husband, Lowell S., Assistant Professor*.

Jones, Janet H., Assistant Professor*.

Maffeo, Patricia, Assistant Professor*.

Mansky, Peter A., Assistant Professor.

Neill, John R., Assistant Professor.

Weitzel, William D., Assistant Professor.

Williams, Melborne A., Assistant Professor.

Department of Radiation Medicine

Kim, Euishin E., Assistant Professor, joint in Diagnostic Radiology.

College of Medicine Reappointments--Adjunct Faculty, 7/1/78 through 6/30/79

Department of Pharmacology

Yeh, Shu-Yuan, Assistant Professor.

Department of Psychiatry

Dempsey, G. Michael, Assistant Professor.

Granacher, Robert P. Jr., Assistant Professor.

Ruth, Douglas D., Assistant Professor.

Miller, Loren L., Assistant Professor.

Department of Radiation Medicine

Coffey, Charles W., Assistant Professor.

Wilson, Leonard, Assistant Professor.

College of Medicine Reappointments-Part-time Faculty, 7/1/78 through 6/30/79.

Department of Anesthesiology

Cramer, John R., Assistant Clinical Professor.

Department of Community Medicine

Harmon, Gordon S., Clinical Instructor.

Department of Medicine

Barron, Michael P., Clinical Instructor.

Department of Ophthalmology

Garden, John W., Assistant Clinical Professor.

Minix, Michael, Clinical Instructor.

Wood, William J., Clinical Instructor.

Department of Pediatrics

Falace, Peggy B., Clinical Instructor.

Gerson, Kenneth L., Assistant Clinical Professor.

Wolf, Betty I., Assistant Clinical Professor*.

*Special Title Series

Department of Physiology and Biophysics

Birge, Barbara A., Clinical Instructor.

Toleikis, J. Richard, Assistant Clinical Professor.

Department of Radiation Medicine

Feola, Jose M., Assistant Clinical Professor.

College of Medicine Reappointments-Voluntary Faculty, 7/1/78 through 6/30/79.

Department of Family Practice

Baker, James W., Clinical Instructor.

Ballard, Ted D., Assistant Clinical Professor.

Brown, Robert Kendall, Assistant Clinical Professor.

Burkhart, William K., Assistant Clinical Professor.

Bynum, Gus A., Clinical Instructor.

Caldwell, Joseph G., Clinical Instructor.

Crase, James D., Assistant Clinical Professor.

Eubank, Rachel R., Assistant Clinical Professor.

Fisher, Norman, Assistant Clinical Professor.

Jasper, Stephen, Clinical Instructor.

Kelley, Stephen B., Assistant Clinical Professor.

Miller, John D., Clinical Instructor.

Sebastian, Wilson, Clinical Instructor.

Stein, Orville J., Assistant Clinical Professor.

Thomas, Michael D., Assistant Clinical Professor.

Williamson, Paul, Clinical Instructor.

Wright, Elizabeth A., Clinical Instructor.

College of Nursing Reappointments--Full-time Faculty, 7/1/78 through 6/30/79.

Browne, Susan, Assistant Professor*.

Cooper, Kathleen, Instructor.

Gaunder, Beatrice N., Assistant Professor.

Goodykoontz, Lynn, Instructor.

Jessop, Alyce, Assistant Professor.

Lewis, Shirley, Instructor.

Maurer, Jo Ann, Instructor.

Musacchio, Marilyn, Assistant Professor.

Riker, Carol, Assistant Professor*.

Robinson, Mary Kay, Assistant Professor*.

Sebastian, Julie, Instructor.

Smith, Jean G., Assistant Professor*.

Withrow, Cora N., Assistant Professor*.

Community College System

Cleveland, Alice A., Instructor in the Community College System, Jefferson
Community College, 1/1/78 through 6/30/78.

Simpson, Lillian Faye, Instructor in the Community College System, Southeast
Community College, 1/1/78 through 6/30/78.

*Special Title Series

Changes

- Armstrong, Paul J. Jr., from Assistant Professor (part-time), to Assistant Clinical Professor (voluntary), Department of Periodontics, College of Dentistry, 1/1/78 through 6/30/80.
- Armstrong, Smith R. III, from Assistant Clinical Professor (voluntary), to Assistant Professor (part-time), Department of Community Dentistry, College of Dentistry, and Department of Dental Hygiene, College of Allied Health Professions, 12/1/77 through 6/30/78.
- Durant, Susan, from Visiting Assistant Professor (part-time), to Visiting Assistant Professor (full-time), Department of History, College of Arts and Sciences, 1/1/78 through 5/31/78.
- Elliott, Larry M., from Clinical Instructor (voluntary), Department of Oral Diagnosis and Oral Medicine, and Department of Community Dentistry, to Department of Restorative Dentistry and Community Dentistry, 1/1/78-6/30/80.
- Haney, Charlotte, from Clinical Instructor (voluntary), to Clinical Instructor (part-time), Department of Community Dentistry, College of Dentistry, 12/1/77 through 6/30/78.
- Josifek, Lorraine F., from Assistant Professor (temporary), to Assistant Professor (regular-full-time), Department of Neurology, College of Medicine, 1/1/78 through 6/30/78.
- Kincaid, Harvey L., from Assistant Professor, to Assistant Professor*, Department of Pathology, College of Medicine, 2/1/78 through 6/30/79.
- Miller, Loren L., from Assistant Professor (part-time), to Assistant Professor (adjunct series), Department of Psychiatry, College of Medicine, 10/1/77 through 6/30/78.
- Saunders, Joseph, from Assistant Clinical Professor (part-time), to Assistant Clinical Professor (voluntary), Department of Ophthalmology, College of Medicine, 7/1/78 through 6/30/79.
- Saykaly, Ronald J., from Assistant Professor, to Assistant Clinical Professor (part-time), Department of Medicine, College of Medicine, 4/1/78 through 6/30/78.
- Scherl, Eileen, from Instructor*, to Clinical Instructor (part-time), Department of Medicine, College of Medicine, 1/1/78 through 6/30/78.

Terminal Reappointments

- Baldwin, William C., Assistant Professor, Department of History, College of Arts and Sciences, 7/1/78 through 6/30/79.
- Clifford, Happa B., Assistant Professor, Department of Community Medicine, College of Medicine, 8/1/78 through 7/31/79.
- Coppay, Frank L., Visiting Instructor, Department of French Language and Literature, College of Arts and Sciences, 7/1/78 through 6/30/79.
- Everett, Paul M., Assistant Professor, Department of Physics and Astronomy, College of Arts and Sciences, 7/1/78 through 6/30/79.
- Fizdale, Tay N., Assistant Professor, Department of English, College of Arts and Sciences, 7/1/78 through 6/30/79.
- Patterson, John W., Assistant Professor, Department of Political Science, College of Arts and Sciences, 7/1/78 through 6/30/79.

Phillips, Phillip D., Assistant Professor, Department of Geography, College of Arts and Sciences, 7/1/78 through 6/30/79.

Potratz, George A., Assistant Professor, Department of English, College of Arts and Sciences, 7/1/78 through 6/30/79.

Leaves of Absence

Adelstein, Michael, Professor of English Composition*, Department of English, College of Arts and Sciences, Sabbatical leave with half-salary, 7/1/78 through 12/31/78.

Ambrose, Charles T., Professor and Chairman, Department of Medical Microbiology and Immunology, College of Medicine, Special Assignment 1/1/78 through 6/30/78.

Bernardi, Ray, Associate Professor, Department of Vocational Education, College of Education, Sabbatical leave with full-salary, Spring semester 1979.

Berzins, Juris, Professor, Department of Psychology, College of Arts and Sciences, Sabbatical leave with full-salary, 7/1/78 through 12/31/78.

Boyd, Thomas F., Assistant Professor in the Community College System, and Assistant Director, Madisonville Community College, Leave without pay, 2/1/78 through 2/28/78.

Brautigam, Richard, Associate Professor*, College of Social Professions, Sabbatical leave with half-salary, academic year 1978-79.

Breazeale, Daniel, Associate Professor, Department of Philosophy, College of Arts and Sciences, Sabbatical leave with full salary, 7/1/78 through 12/31/78.

Burkett, Hugh N., Associate Professor*, Department of Restorative Dentistry, College of Dentistry, Leave without pay, 8/1/78 through 12/31/78.

Crowell, Elizabeth, Associate Professor*, College of Social Professions, Leave without pay, academic year 1978-79.

Dallerba, Maria G., Associate Professor, College of Architecture, Leave without pay, 1/1/78 through 6/30/78.

Donnelly, James H., Professor, Department of Business Administration, College of Business and Economics, to change Sabbatical leave with half-salary for academic year 1977-78 to fall semester 1977 with full-salary, and Leave without pay for spring semester 1978, and extend leave without pay for academic year 1978-79.

Douglass, John D., Associate Professor in the Community College System, Somerset Community College, Sabbatical leave with half-salary, 7/1/78 through 6/30/79.

Duncan, Phillip A., Professor, Department of French Language and Literature, College of Arts and Sciences, Sabbatical leave with full-salary, 7/1/78 through 12/31/78.

Durant, David S., Associate Professor, Department of English, College of Arts and Sciences, Sabbatical leave with full-salary, 7/1/78 through 12/31/78.

Evans, Robert O., Professor, Department of English, College of Arts and Sciences, Sabbatical leave with half-salary, academic year 1978-79.

*Special Title Series

- East, Maurice A., Associate Professor, Department of Political Science, College of Arts and Sciences, Sabbatical leave with half-salary, 7/1/78 through 6/30/79.
- Ellinger, Charles, Professor, Department of Prosthodontics, College of Dentistry, Sabbatical leave with full-salary, 3/15/78 through 6/14/78 and 1/10/79 through 4/9/79.
- Fischer, Doane, Professor, Department of Pediatrics, College of Medicine, Sabbatical leave with half-salary, 7/1/78 through 6/30/79.
- Graves, Charles P., Professor, College of Architecture, Sabbatical leave with full-salary, Spring semester 1978.
- Groves, John R., Assistant Professor, College of Architecture, Leave without pay, 1/78 through 8/79.
- Halford, Andrew, Associate Professor in the Community College System, Paducah Community College, Sabbatical leave with full-salary, 1/1/78 through 6/30/78.
- Hilliker, Jo Ann Schickel, Extension Specialist, Department of Home Economics Extension, College of Agriculture, Leave without pay, extended through 1/31/78.
- Jackson, John S. Jr., Associate Professor, Department of Electrical Engineering, College of Engineering, Sabbatical leave with full-salary, fall semester 1978.
- Johnson, David, Associate Professor, Department of Mathematics, College of Arts and Sciences, Sabbatical leave with full-salary, 7/1/78 through 12/31/78.
- Jones, Lowell, Associate Professor, Department of Art, College of Fine Arts, Leave without pay, academic year 1978-79.
- Jones, Russell A., Associate Professor, Department of Behavioral Science, College of Medicine, Sabbatical leave with full-salary, 7/1/78 through 12/31/78.
- Kifer, Edward, Assistant Professor, Department of Educational Psychology and Counseling, College of Education, Leave without pay, 1/1/78 through 5/31/78.
- Kinsella, Paul L., Associate Professor in the Community College System, Jefferson Community College, Leave without pay, 1/1/78 through 6/30/78.
- Kraal, Jan H., Associate Professor, Department of Periodontics, College of Dentistry, Sabbatical leave with half-salary, 7/1/78 through 6/30/79.
- Lasheen, Aly M., Associate Professor of Horticulture, Department of Horticulture, College of Agriculture, Leave without pay, 5/2/78 through 5/1/79.
- McAllister, Russell G., Associate Professor, Department of Medicine, College of Medicine, Sabbatical leave with full-salary, 10/1/78 through 3/31/79, and Special Assignment for period 4/1/79 through 6/30/79.
- McKenna, Marion, Professor and Dean, College of Nursing, Military Leave with pay, 4/24/78 through 5/5/78.
- McKibben, Vivian, Assistant Professor-Applied Physical Education*, Department of Health, Physical Education, and Recreation, College of Education, Extension of sick leave through spring semester 1978.
- Maultsby, Maxie C., Associate Professor, Department of Psychiatry, College of Medicine, Sabbatical leave with full-salary, 7/1/78 through 12/31/78.
- Moore, James T., Professor, Department of Curriculum and Instruction, College of Education, Sabbatical leave with full-salary, fall semester 1978.

*Special Title Series

Nacke, Phil L., Associate Professor, Department of Curriculum and Instruction, College of Education, Sabbatical leave with full-salary, fall semester 1978.

Noe, Roger, Assistant Professor in the Community College System, Southeast Community College, Leave without pay, 1/1/78 through 6/30/78.

Poneleit, C. G., Associate Professor, Department of Agronomy, College of Agriculture, Sabbatical leave with full-salary, 7/1/78 through 12/31/78.

Ringe, Donald, Professor, Department of English, College of Arts and Sciences, Sabbatical leave with full-salary, 7/1/78 through 12/31/78.

Rishel, Raymond W., Professor, Department of Mathematics, College of Arts and Sciences, Sabbatical leave with half-salary, 7/1/78 through 6/30/79.

Robertson, John E. L., Associate Professor in the Community College System, Paducah Community College, Sabbatical leave with full-salary, 1/1/78 through 6/30/78.

Sandock, Mollis, Librarian IV, Reference, Library, Leave without pay, academic year 1978-79.

Schnee, Edward, Associate Professor, Department of Accounting, College of Business and Economics, Leave without pay, academic year 1978-79.

Sergent, Robert S., Assistant Professor (part-time), Department of Endodontics, College of Dentistry, Leave without pay, 2/1/78 through 8/31/78.

Shibata, Hirofumi, Professor, Department of Economics, College of Business and Economics, Sabbatical leave with half-salary, academic year 1978-79.

Skelland, A.H.P., Professor, Department of Chemical Engineering, College of Engineering, Sabbatical leave with full-salary, fall semester 1978.

Slatin, Gerald T., Associate Professor, Department of Sociology, College of Arts and Sciences, Sabbatical leave with full-salary, 7/1/78 through 12/31/78.

Steuer, Ralph E., Associate Professor, Department of Business Administration, College of Business and Economics, Sabbatical leave with half-salary, academic year 1978-79, changed from Sabbatical leave with full-salary.

Stoll, Ruth, Associate Professor*, College of Nursing, Sabbatical leave with half-salary, 7/1/78 through 6/30/79.

Stroup, Robert H., Professor, Department of Economics, College of Business and Economics, Sabbatical leave with full-salary, fall semester 1978.

Taylor, Norman L., Professor, Department of Agronomy, College of Agriculture, Leave without pay, 5/1/78 through 5/31/78.

Teraslinna, Pentti, Professor, Department of Health, Physical Education, and Recreation, College of Education, Sabbatical leave with half-salary, academic year 1978-79.

Weeks, M. O'Neal, Associate Professor, Department of Family Studies, College of Home Economics, Sabbatical leave with full-salary, 7/1/78 through 12/31/78.

Weinberg, Harold R., Associate Professor, College of Law, Sabbatical leave with half-salary, academic year 1978-79.

Action: Approved ✓ Disapproved _____ Other _____

Date: April 4, 1978.

Office of the President
April 4, 1978

PR3

Members, Board of Trustees:

SUPPLEMENTARY RECOMMENDATIONS OF THE PRESIDENT

I. Names for University Buildings

Recommendation: that the Board of Trustees approve the name Ezra Gillis Building for the building now known as Administration Annex; the name Joe B. Hall Wildcat Lodge for the new basketball dormitory; and the name Frank D. Peterson Service Building for the building now known as the Service Building on South Limestone.

Background: The above recommendations come to the Board of Trustees from the Committee for Naming University Buildings and have the concurrence of the University administration.

The Administration Annex on Administration Drive houses the offices of Admissions and the Registrar. Built in 1888 as U.K.'s first agricultural experiment station building, the structure also has housed the chemistry department, college of law and health and hygiene facilities. Ezra Gillis, who died in 1958 at the age of 91, was U.K.'s first registrar and served in that position for 27 years.

The basketball house, located between Lexington and Harrison avenues near Memorial Coliseum, has just been completed and is the residence of the U.K. varsity basketball team. The building name was recommended by the members of the team.

The Service Building on South Limestone Street is headquarters for the U.K. Physical Plant Division. It was completed in 1950 when Frank D. Peterson was University Comptroller. A Lexington resident, Peterson was U.K. vice president for business administration from 1955 to 1963.

II. Appointments and/or Other Staff Changes

Recommendations: (1) that approval be given to the appointments and/or other changes which require Board action; and (2) that the report relative to appointments and/or changes already approved by the administration be accepted.

Background: The following recommended appointments and/or other staff changes require approval by the Board of Trustees in accordance

with Part VIII-B of the Governing Regulations of the University. These recommendations are transmitted to the Board by the appropriate vice president through the President and have his concurrence.

Under the Governing Regulations the authority to make certain appointments and/or other staff changes is delegated to the President or other administrators who are required to report their actions to the Board. This report follows the recommendations requiring Board approval.

BOARD ACTION

Administrative Appointment

Haney, Donald C., Director, The Kentucky Geological Survey, effective 7/1/78.

Non-Academic Appointments

Ames, Peggy, Media Development Officer, Department of Dental Hygiene, College of Allied Health Professions, 3/20/78 through 6/30/78.

Brands, Joy M., Public Health Nurse II, Department of Pediatrics, College of Medicine, 3/1/78 through 6/30/78.

Gambrel, Laurel, Media Development Specialist, Department of Dental Hygiene, College of Allied Health Professions, effective 3/6/78.

Action: Approved ✓ Disapproved _____ Other _____

Date: April 4, 1978.

Office of the President
April 4, 1978

PR 4

Members, Board of Trustees:

1977-78 BUDGET REVISIONS

Recommendation: that the following revisions in the 1977-78 budget be authorized and approved.

	<u>Approved Budget</u>	<u>Revised Budget</u>	<u>Change</u>
A. <u>General Fund</u>			
1. Income Estimates			
State Appropriation	\$93,835,000	\$94,196,200	\$ 361,200
Student Fees			
Continuing Education	1,413,300	1,458,400	45,100
Federal Appropriations			
Vocational Education	601,500	644,700	43,200
Agricultural Experiment Station	3,331,400	3,345,500	14,100
Gifts and Grants			
University of Kentucky Research Foundation			
General Fund Grants	1,499,700	1,628,100	128,400
Other Gifts and Grants	861,000	861,900	900
Sales and Services			
Departmental Sales and Services	2,665,500	2,911,100	245,600
Designated Fund			
Balances	4,695,600	5,028,500	332,900
			<u>1,171,400</u>
2. Expenditures			
Academic Affairs			
College of Education			
Vocational Education - Special Projects	150,000	193,200	43,200
College of Engineering			
Continuing Education and Extension	267,100	293,100	26,000
College of Fine Arts			
Music	726,300	730,200	3,900
College of Home Economics			
Human Development - Family Relations	191,500	191,900	400
College of Social Professions	632,100	634,700	2,600

	<u>Approved Budget</u>	<u>Revised Budget</u>	<u>Change</u>
2. Expenditures (Cont'd)			
Agricultural Experiment Station	\$ 8,457,300	\$ 8,479,200	\$ 21,900
Administration and Support			
Art Museum	56,700	57,900	1,200
Undergraduate Studies			
Instructional Resources	500,000	508,100	8,100
Graduate School			
Office of Sponsored Projects Administration	251,900	306,900	55,000
General Research Support	436,000	576,300	140,300
Seminars and Conferences	-0-	15,700	15,700
Graduate Fellowships	244,000	494,200	250,200
Community College System			
Henderson Community College	756,600	762,300	5,700
Jefferson Community College	3,874,800	3,876,100	1,300
Madisonville Community College	581,100	635,300	54,200
Paducah Community College	1,193,500	1,200,500	7,000
Medical Center			
College of Dentistry			
Educational Resources	139,700	142,700	3,000
Student Affairs			
Kentuckian	22,000	39,500	17,500
University-Wide			
Central Administration			
Computing Center	1,265,500	1,418,500	153,000
General Expenses			
Reserve for Enrollment and Special Projects	240,000	601,200	361,200
			<u>1,171,400</u>

3. Comments - An increase in the state appropriation will provide additional support for the enrollment and special projects reserve. Additional student fees generated by continuing education programs will support expenditure increases for the Colleges of Social Professions, Engineering, and Fine Arts, Henderson Community College and Paducah Community College. An increase in federal appropriations for vocational education will fund an expenditure increase in special projects. Increases in research support and student aid for the Graduate School is funded by an increase in the grants from the University of Kentucky Research Foundation and reappropriation of designated fund balances. Additional gifts and grants will provide additional support for the art museum and the early childhood laboratory. The proposed expenditure increase for the Agricultural Experiment Station is supported by additional federal appropriations and departmental sales income. An expenditure increase in Jefferson

3. Comments (Cont'd)

Community College's parking lot account is matched by collection of additional parking fees. The College of Dentistry's expenditure increase for Educational Resources is supported by insurance recoveries. An increase in book sales and advertising income will fund the Kentuckian budget increase. An increase in computing sales will fund an expenditure increase for the Computing Center. Additional expenditure authority for the Office of Instruction Resources is supported by an increase in photographic services and royalty income. An increase in rental income will support a budget change for Madisonville Community College.

	<u>Approved Budget</u>	<u>Revised Budget</u>	<u>Change</u>
B. <u>Restricted Funds</u>			
1. Income Estimates	\$14,661,700	\$14,997,900	\$336,200
2. Expenditures			
Academic Affairs			
College of Business and Economics			
Business Administration	500	1,800	1,300
College of Education			
Administration	24,600	25,100	500
College of Engineering			
Civil Engineering	13,000	15,500	2,500
College of Fine Arts			
Theatre Arts	4,700	5,600	900
Administration	-0-	800	800
Agricultural Cooperative Extension			
Agricultural Programs	2,000	6,500	4,500
Administration and Support			
Office of Instructional Resources	-0-	900	900
Graduate School			
Faculty Enrichment and Graduate Education Fund	-0-	5,700	5,700
Spindletop Research	-0-	15,000	15,000
Community College System			
Community Colleges - Area			
Health Education System	210,100	236,100	26,000
Maysville Community College	23,400	24,000	600
Hazard Community College	24,800	27,400	2,600
Madisonville Community College	3,300	4,300	1,000
Medical Center			
College of Dentistry			
Community Dentistry	-0-	191,400	191,400
College of Medicine			
Cancer Research Fund	65,000	110,000	45,000
Obstetrics and Gynecology	40,000	50,900	10,900
Student Affairs			
Handicapped Attendant Program	-0-	15,000	15,000
Counseling and Testing	-0-	700	700

	<u>Approved Budget</u>	<u>Revised Budget</u>	<u>Change</u>
2. Expenditures (Cont'd)			
Student Aid			
Gifts and Grants for			
Scholarships			
Community College			
Scholarships	\$ 184,600	\$ 190,100	\$ 5,500
General Scholarships	342,800	348,200	5,400
			<u>336,200</u>

3. Comments - Income restricted for the purposes indicated above will fund the proposed additional expenditures.

	<u>Approved Budget</u>	<u>Revised Budget</u>	<u>Change</u>
C. <u>Auxiliary Services</u>			
1. Income Estimates	\$15,035,800	\$15,267,000	\$231,200
2. Expenditures			
Community College System			
Ashland Community College	131,300	133,200	1,900
Jefferson Community College	469,300	471,800	2,500
Business Affairs			
Campus Bookstore	1,082,000	1,092,700	10,700
Housing and Dining			
System			
Food Services	4,524,700	4,583,100	58,400
Food Storage	570,800	604,700	33,900
Housing	4,741,000	4,857,000	116,000
Student Center	626,500	634,300	7,800
			<u>231,200</u>

3. Comments - The proposed expenditure increase will be supported by additional income generated by the respective auxiliary services operations.

Action taken: Approved ✓ Disapproved _____ Other _____

Date: April 4, 1978

Office of the President
April 4, 1978

PR 5

Members, Board of Trustees:

EXCEPTION TO RETIREMENT RESOLUTION

Recommendation: That the Board of Trustees authorize the President of the University to grant exceptions to the deductions mandated for civil service benefits received by retirees by the Retirement Plan as adopted on April 5, 1977, upon the presentation of documented evidence that contractual commitments to that effect were made between the institution and an employee prior to the effective date of the Retirement Plan revision referred to above.

Background: The Retirement Resolution requires that civil service benefits are treated as a reduction of benefits otherwise payable by the University to retirees. In certain cases, contractual commitments entered into with individuals prior to the adoption of the plan provided that this deduction would not be made. This action would authorize the President to honor such contractual arrangements on an individual basis.

Action taken: Approved ✓ Disapproved _____ Other _____

Date: April 4, 1978

Office of the President
April 4, 1978

PR6

Members, Board of Trustees:

HONORARY DEGREE RECIPIENTS

Recommendation: that approval be granted to awarding the honorary degree of Doctor of Laws to Mr. Robert T. McCowan; and the Doctor of Letters to Mr. Thomson R. Bryant and Mr. James A. King.

Background: The Committee on Honorary Degrees has recommended to the Graduate Faculty and the University Senate that these honorary degrees be awarded to the persons listed above, and these two bodies have expressed their approval of the recommendation.

Biographical sketches of each recipient are attached.

Action taken: Approved ✓ Disapproved _____ Other _____

Date: April 4, 1978

THOMSON R. BRYANT

Mr. Thomson R. Bryant was born in Fayette County, January 8, 1885. He won a scholarship in 1902 to attend Kentucky A & M College, received a B. S. in Agriculture from the University of Kentucky in 1908 and a Master of Science Degree from the University in 1931. Mr. Bryant was appointed Superintendent of the Extension Division of The Agricultural Experiment Station when it was formed in 1910 and remained a strong guiding force in The Division until his retirement in 1955. He was instrumental in establishing the County Agent System and in 1929 the goal of one extension agent in each county was reached.

Mr. Bryant's college career set a pattern for his life - hard work toward his own objectives and service to others. He earned his own way through college, yet found time to play center on the basketball team, manage the football team, and serve as president of the senior class. He did all these well enough to be asked to join Lamp and Cross and O. D. K., both organizations which stress scholarship in addition to leadership. Following graduation, he performed distinguished work both in the classroom and in Extension for the College of Agriculture. His excellent work in extension was recognized nationally and he was elected President of the Extension Section of the Land-Grant College Association in 1935.

Mr. Bryant was, and is, active in many community and civic organizations. He has received many awards including the University's own Sullivan Award in 1966.

For his teaching and service in the College of Agriculture at the University of Kentucky, for his contributions to the citizens of Kentucky and for his service to the community at large, Mr. T. R. Bryant is recommended for the honorary degree of Doctor of Letters.

JAMES A. KING

James A. King was born at Dodge City, Kansas, May 22, 1925. He received a Bachelor of Music degree from L. S. U. in 1950 and a Master of Arts degree from the University of Kansas City, Missouri, in 1952. He became a member of the University of Kentucky faculty in the Department of Music, where he stayed until 1961 when a series of grants, including a full scholarship to study with Martial Singher, a distinguished Metropolitan Opera artist and renowned teacher, in 1959 led him to give full attention to performance.

Mr. King's singing career was an immediate success. In a short time, he was a leading dramatic tenor in Europe and the United States, singing regularly with the most prestigious opera companies in the world - the Metropolitan Opera, Covent Garden, San Francisco, Vienna Staatsoper, and at two of the most famous of all music festivals, the Mozart Festival in Salzburg and the Wagner Festival at Bayreuth. He stands now at the very pinnacle of Wagnerian singers in the world.

For his teaching and service in the field of music, and his distinguished contribution in the performance of operatic music, Mr. James King is being recommended for the degree Doctor of Letters.

ROBERT T. MCCOWAN

Robert T. McCowan was born in Carlisle, Kentucky and reared in Lexington. He graduated from the University of Kentucky in 1951 at which time he became associated with Ashland Oil, Inc.

During his student days Mr. McCowan was active in student organizations and leadership societies. He served as Vice President of Keys, Lamp and Cross, and his fraternity. He was president of Lances and the Student Center Board. He was a member of Omicron Delta Kappa and the Commerce Honor Society, Beta Gamma Sigma.

Mr. McCowan is a University of Kentucky Fellow, a member of the University Development Council and is entering his third year as Chairman of the University Annual Giving Fund. Each of the past two years he has brought new records in dollars raised through the Annual Giving Drive. Much of this must be attributed to Mr. McCowan's leadership and personal commitment to the program.

In his company, Mr. McCowan has risen through the ranks to President of the Petroleum Branch of Ashland Oil, Inc. In addition, he is Director of the Second National Bank of Ashland, the American Petroleum Institute, and formerly, a Director of the Asphalt Institute. He has also served as the Director of the University of Kentucky Boyd County Alumni Association.

For his outstanding service to the University, Mr. McCowan is being recommended for the degree of Doctor of Laws.

Office of the President
April 4, 1978

PR 7

Members, Board of Trustees:

UNIVERSITY RESEARCH PROFESSORSHIPS

Recommendation: that the Board of Trustees approve the naming of Professor Richard C. Birkebak, Department of Mechanical Engineering; Professor Thomas Chapman, Department of Mathematics; Professor Malcolm E. Jewell, Department of Political Science; and Professor Marcus McEllistrem, Department of Physics and Astronomy as University Research Professors for 1978-79.

Background: In April 1976 the University Senate recommended to the President the establishment of one-year Research Professorships as soon as possible and that priority be given to the goal of establishing permanent Research Professorships as funds became available. At its meeting in May 1976 the University of Kentucky Research Foundation voted to support four one-year Research Professorships to be activated in the fall of 1977. The first four Research Professors were named by the Board of Trustees at its meeting on March 8, 1977.

The purpose of the University Research Professorships is to enhance and encourage scholarly research productivity, provide an opportunity for concentrated research effort for selected faculty members, recognize outstanding research achievement by members of its faculty, emphasize its research function, and to publicize its research accomplishments in order that the research function of the University be appropriately recognized and understood.

Action taken: Approved ☒ Disapproved ☐ Other ☐
Date: April 4, 1978

Office of the President
April 4, 1978

PR8

Members, Board of Trustees

PROPOSED AMENDMENTS TO THE GOVERNING REGULATIONS

Recommendation: that the following proposed amendments to the Governing Regulations of the University of Kentucky which were received and tabled at the December 13, 1977 meeting of the Board of Trustees be removed from the table and approved.

(Note: Proposed additions are underlined; proposed deletions are bracketed.)

First Amendment - Change the first paragraph of Part VII-B-2 (pages 23a and 24) to read:

The Dean of the Graduate School and Coordinator of Research is chairman of the Graduate Faculty and the Graduate Council. Under the broad direction of the President and the Vice President for Academic Affairs, he provides general planning, guidance and review for all of the University's endeavors in graduate instruction and research. He bears responsibility for the total research activity of the University, including the University of Kentucky Research Foundation, and for the coordination of research and graduate education. He has direct administrative responsibility for the interdisciplinary research institutes. He appoints associate members of the Graduate Faculty and recommends the appointment of regular members for the approval of the President. He recommends on the appointment, promotion and granting of tenure to faculty members who may be involved in research and graduate programs of the University. He also recommends on budgets as they may affect research and graduate programs. He shall have the same authority and responsibilities as those of a dean of a college in the administration of educational units that might be transferred to or developed under his office.

Background: This amendment is appropriate since the Dean of the Graduate School and Coordinator of Research already has, as a result of prior actions by the Board of Trustees, the authority and responsibility for the administration of educational units such as the Graduate Center for Toxicology and several interdisciplinary research institutes.

Second Amendment - Change Part VIII-A-4-c (page 29) to read:

The term of a division chairman's appointment shall be three years and he normally shall serve for no more than two consecutive terms. Reappointment beyond the second term may occur under exceptional circumstances when it is deemed to be in the best interest of the community college and has been recommended by the faculty advisory committee [appointed to review the work of the division (Part IX)].

Background: This amendment will make the Governing Regulations consistent with the current University practice of reviewing each community college as a whole and not further reviewing each division within the community college as a separate educational unit.

Third Amendment - Change the footnote to Part IX (page 30) to read:

¹Includes departments, schools, institutes, interdisciplinary units, colleges, the Community College System, the individual community colleges and the Lexington Technical Institute [, and divisions].

Background: This amendment will make the Governing Regulations consistent with the current University practice of reviewing each community college as a whole and not further reviewing each division within the community college as a separate educational unit.

Fourth Amendment - Change Part X-B-4 (page 32) to read:

Part-time, visiting or temporary short-term appointments with explicit terminal dates of one academic year or less, terminate at the expiration of the term without notice. For those employed year-to-year on a fiscal or academic year basis, notification of non-renewal or appointment at the end of the first year of service shall be given not later than March 1 if the appointment expires at the end of that year or three months in advance if the one-year appointment terminates during the academic year. Notification of non-renewal of appointment at the end of the second year of service shall be given not later than December 15 if the appointment expires at the end of the year or six months in advance if the appointment expires during the year. Notification of non-renewal of appointment after more than two years of service shall be given at least 12 months before expiration of the appointment. Notice of non-renewal of appointment of those on post-retirement appointment shall be no less than six months.

Any related appeal(s) through administrative channels and/or the Advisory Committee on Privilege and Tenure of the University Senate or the Senate of the Community College System must be initiated in writing by the concerned faculty member within 60 days after being notified in writing by the dean or director about non-renewal of appointment.

Fourth Amendment - continued

Background: Earlier this year the University Senate Advisory Committee on Privilege and Tenure recommended to the President that a definite time period be established during which a faculty member could initiate an appeal relative to notification of non-renewal of appointment. Both the University Senate Advisory Committee on Privilege and Tenure and the University Senate Council concur that 60 days after notification in writing is a reasonable period for a faculty member to initiate any related appeal(s).

Fifth Amendment - Change Part X-B-6 (page 34) to read:

If a faculty member on a non-tenure appointment or a member on post-retirement appointment alleges that a decision not to reappoint him was caused by considerations violative of academic freedom, or that he was given less advance notice than specified in these regulations, he must present his allegations in writing to the Advisory Committee on Privilege and Tenure of the University Senate or the Senate of the Community College System within 60 days after being notified in writing by the dean or director about the decision not to reappoint. [, his allegations] Allegations so presented shall be given preliminary considerations by the appropriate Advisory Committee on Privilege and Tenure [of the University Senate or the Senate of the Community College System], which will seek to settle the matter by informal methods. His statement shall be accompanied by a statement that he agrees to the presentation, for the consideration of the committee, or such reasons and evidence as the University may allege in support of its decision. If the difficulty is unresolved at this stage, and if the committee so recommends, the procedures set forth in 5-b shall be applied, except that the faculty member making the complaint is responsible for stating the grounds upon which he bases his allegations, and the burden of proof shall rest upon him. If he succeeds in establishing a prima facie case, it is incumbent upon those who make the decision not to reappoint him to come forward with evidence in support of their decision.

Background: Earlier this year the University Senate Advisory Committee on Privilege and Tenure recommended to the President that a definite time period be established during which a faculty member could initiate an appeal relative to a decision not to reappoint. Both the University Senate Advisory Committee on Privilege and Tenure and the University Senate Council concur that 60 days after notification in writing is a reasonable period for a faculty member to initiate any related appeal.

Sixth Amendment - Replace all of Part X-C-8 (page 41) with the following abbreviated section:

8. Retirement

The University of Kentucky Retirement Plan (April 5, 1977) represents a consolidation of the original Retirement Resolution (April 7, 1964) and its numerous subsequent amendments into a unified statement of University policy and guidelines relative to retirement of employees in Groups I, II, III, and IV. The University of Kentucky Retirement Plan, which has been adopted by the Board of Trustees and may be amended only by that body, is presented in its entirety in the Administrative Regulations (AR II-8.0-4).

Background: This amendment is appropriate since Part X-C-8 heretofore dealt only with the retirement policy and guidelines for employees in Group I. The recently adopted University of Kentucky Retirement Plan is comprehensive in that it provides retirement policy and guidelines for employees in Groups I, II, III, and IV.

Action taken: Approved ✓ Disapproved _____ Other _____

Date: April 4, 1978

Office of the President
April 4, 1978

PR9

Members, Board of Trustees:

CAPITAL CONSTRUCTION PROJECTS

Recommendation: that the Board approve for submission to the Council on Higher Education an energy related renovation project in three dormitories (\$283,200), a new Medical Center Storage facility (\$400,000), a covering for the Rose Street pedestrian bridge (\$118,800), and fourth floor alteration of Chandler Medical Center - Phase I of Neo Natal Care facility (\$205,000).

Background: The residence halls project at a total cost of \$283,200 is for the replacement of windows and the installation of thermostat control valves in Boyd, Patterson and Jewell Halls. Funding for this project will come from a U. S. Department of Housing and Urban Development College Housing Program loan which will be repaid from housing revenue.

The Medical Center Storage facility at a total cost of \$400,000 is needed to solve a critical shortage of storage space. Funds are available in the University Plant Fund for this project.

The covering for the pedestrian bridge at a total cost of \$118,800 will join the new Nursing/Health Sciences Learning Center to the main Medical Center building. This project was part of the original plan for the construction of the bridge and funds are available.

The fourth floor alteration of the Chandler Medical Center will temporarily provide space for 8 additional neo natal beds increasing the total to 39. Hospital expansion currently being programmed will be necessary before the full 50 beds can be made available.

Action: Approved ☒ Disapproved ☐ Other ☐

Date: April 4, 1978.

Office of the President
April 4, 1978

FCR 1

Members, Board of Trustees:

INTERIM FINANCIAL REPORT

Recommendation: that the financial report for the eight months ending February 28, 1978, be accepted.

Background: The February, 1978, report reflects income of \$144,832,732 for the period of the report; the income figure is 72% of the annual income estimate of \$199,856,470.

The expenditures and commitments represent a total of \$124,518,008 for this period of eight months, or 62% of the expenditure authority of \$199,856,470 approved by the Board.

Action taken: Approved ✓ Disapproved _____ Other _____

Date: April 4, 1978

University of Kentucky
Balance Sheet
February 28, 1978
With Comparative Figures for 1976-77

Schedule 1

ASSETS

	<u>1977-78</u>	<u>1976-77</u>
Current Funds:		
Unrestricted:		
Cash in banks:		
Depository funds	\$ 2,725,629	\$ 1,048,265
Federal funds	102,972	
Imprest funds	40,575	
Cash on deposit with State Treasurer:		
Trust and agency funds	3,761,700	4,047,334
General fund appropriation	<u>153,264</u>	<u>3,160,095</u>
Total cash	<u>6,784,140</u>	<u>8,255,694</u>
Due from other funds and affiliated corporations		
Accounts receivable	5,714,694	951,460
Notes receivable	1,532,005	1,705,556
Investments short-term	72,094	72,094
Inventories	14,324,961	11,731,538
Unrealized income	3,825,892	3,623,072
	<u>36,089,603</u>	<u>31,256,431</u>
Total unrestricted	<u>68,343,389</u>	<u>57,595,845</u>
Restricted:		
Cash in banks	1,880,232	1,305,204
Imprest funds	33,419	24,933
Cash on deposit with State Treasurer	<u>1,700,954</u>	<u>1,937,297</u>
Total cash	<u>3,614,605</u>	<u>3,267,434</u>
Petty cash advances	244,521	232,059
Travel advances	199,706	124,977
Accounts receivable	4,767	55,910
Accrued Interest Receivable	85,543	
Investments:		
Short-term	7,610,000	5,503,000
Other	<u>248,987</u>	<u>410,515</u>
Unrealized income:		
Restricted	4,372,397	3,525,306
Tobacco Research Trust Fund	<u>1,466,841</u>	<u>1,617,568</u>
Total restricted	<u>17,847,367</u>	<u>14,736,769</u>

University of Kentucky
Balance Sheet
February 28, 1978
With Comparative Figures for 1976-77

LIABILITIES AND FUND BALANCES

	<u>1977-78</u>	<u>1976-77</u>
Current Funds:		
Unrestricted:		
Outstanding encumbrances	\$ 4,310,246	\$ 3,383,626
Accounts payable-county funds	44,516	
Accrued expenses	751,000	591,000
Advance from state for imprest cash fund	1,300,000	1,300,000
Deferred Income	430,885	
Accrued vacation and sick pay	2,400,000	
Unencumbered balance, departmental appropriations	51,684,290	45,704,736
Fund balances:		
Allocated for working capital	7,422,452	6,610,160
Unallocated		<u>6,323</u>
Total unrestricted	<u>68,343,389</u>	<u>57,595,845</u>
Restricted:		
General Fund collections	3,223,791	1,899,134
Outstanding encumbrances	341,395	473,381
Due to other funds and affiliated corporations	2,960,535	2,029,792
Advance from state for imprest cash fund	50,000	50,000
Outstanding check liability	83,245	66,966
Unencumbered balance, departmental appropriations	3,994,819	2,471,302
Unencumbered balance, Tobacco Research Trust		
Fund Appropriation	2,677,926	2,752,192
Fund balances:		
Restricted	4,515,656	4,694,385
Tobacco Research Trust Fund-unallocated funds		<u>299,617</u>
Total restricted	<u>17,847,367</u>	<u>14,736,769</u>

University of Kentucky
Balance Sheet
February 28, 1978
With Comparative Figures for 1976-77

ASSETS

	<u>1977-78</u>	<u>1976-77</u>
Hospital and clinics:		
Due from other funds and affiliated corporations	\$ 1,563,519	\$ 2,335,838
Accounts receivable, net of allowance for doubtful accounts of \$3,195,670 in 1978 and \$4,342,209 in 1977	7,988,845	4,780,780
Inventories	500,304	563,509
Unrealized income	<u>9,075,529</u>	<u>9,819,226</u>
Total hospital and clinics	<u>19,128,197</u>	<u>17,499,353</u>
Housing and dining system:		
Cash in bank	218,010	5,330
Cash on deposit with State Treasurer	2,229,798	1,003,563
Accounts receivable	303,629	183,480
Investments short-term	2,323,442	2,076,550
Inventories	1,340,408	1,128,521
Prepaid expenses	<u>20,494</u>	<u>208,295</u>
Total housing and dining system	<u>6,435,781</u>	<u>4,605,739</u>
Auxiliary enterprises:		
Cash in banks	331,848	214,574
Cash on deposit with State Treasurer	<u>656,777</u>	<u>929,347</u>
Total cash	<u>988,625</u>	<u>1,143,921</u>
Accounts receivable	23,733	17,269
Inventories	480,137	517,945
Unrealized income	<u>1,266,027</u>	<u>946,094</u>
Total auxiliary enterprises	<u>2,758,522</u>	<u>2,625,229</u>
TOTAL CURRENT FUNDS	<u>\$ 114,513,256</u>	<u>\$ 97,062,935</u>

University of Kentucky
Balance Sheet

Schedule 1

February 28, 1978

With Comparative Figures for 1976-77

LIABILITIES AND FUND BALANCES

	<u>1977-78</u>	<u>1976-77</u>
Hospital and clinics:		
Outstanding encumbrances	\$ 631,759	\$ 562,208
Accrued vacation	400,000	
Unexpended balance, departmental appropriation	12,316,240	10,740,969
Fund balances-allocated for working capital	<u>5,780,198</u>	<u>6,196,176</u>
Total hospital and clinics	<u>19,128,197</u>	<u>17,499,353</u>
Housing and dining system:		
Accrued expenses	415,493	346,983
Accrued wages	217,859	135,912
Accounts payable	527,040	133,396
Due to other funds and affiliated corporations	2,050,012	1,401,263
Refundable deposits	30,250	27,150
Deferred income	2,282,017	2,104,620
Fund balances:		
Allocated for future operating purposes	<u>913,110</u>	<u>456,415</u>
Total housing and dining system	<u>6,435,781</u>	<u>4,605,739</u>
Auxiliary enterprises:		
Outstanding encumbrances	137,304	94,054
Due to other funds and affiliated corporations	213,100	357,530
Unencumbered balances, departmental appropriation	1,251,356	1,179,807
Fund balances-allocated:		
Working capital	512,614	570,964
Future operating purposes	644,148	422,874
Total fund balances	<u>1,156,762</u>	<u>993,838</u>
Total auxiliary enterprises	<u>2,758,522</u>	<u>2,625,229</u>
TOTAL CURRENT FUNDS	<u>\$ 114,513,256</u>	<u>\$ 97,062,935</u>

University of Kentucky
Balance Sheet
February 28, 1978
With Comparative Figures for 1976-77

ASSETS

	<u>1977-78</u>	<u>1976-77</u>
Loan Funds:		
Cash in bank	\$ 548,024	\$ 601,937
Notes receivable, net allowance for doubtful accounts of \$580,859	10,140,628	9,495,422
Due from other funds and affiliated corporations	5,625	427
Due from United Student Aid loan fund	<u>2,000</u>	<u>2,003</u>
TOTAL LOAN FUNDS	<u>\$ 10,696,277</u>	<u>\$ 10,099,789</u>
Endowment Funds:		
Cash	\$ 75,000	\$ 202,487
Due from other funds and affiliated corporations	3,412,655	8,988
Investments		<u>1,766,608</u>
TOTAL ENDOWMENT FUNDS	<u>\$ 3,487,655</u>	<u>\$ 1,978,083</u>
Plant Funds:		
Unexpended:		
Cash on deposit with State Treasurer	\$ 4,851,239	\$ 7,029,766
Trust and agency	<u>18,838,942</u>	<u>17,120,767</u>
Capital and construction funds		
Total cash on deposit with State Treasurer	<u>23,690,181</u>	<u>24,150,533</u>
Due from other funds and affiliated corporations	1,157,667	195,774
Due from Federal Government		339,860
Construction in progress	20,494,983	22,049,452
Funded future construction	<u>11,728,934</u>	<u>23,283,294</u>
Total unexpended plant funds	<u>57,071,765</u>	<u>70,018,913</u>

University of Kentucky
Balance Sheet
February 28, 1978
With Comparative Figures for 1976-77

LIABILITIES AND FUND BALANCES

	<u>1977-78</u>	<u>1976-77</u>
Loan Funds:		
Federal sponsored loan funds:		
Federal Government	\$ 8,399,541	\$ 8,071,045
University matching funds	920,913	885,709
Accumulated interest income	<u>828,578</u>	<u>712,699</u>
Total sponsored loan funds	<u>10,149,032</u>	<u>9,669,453</u>
University loan funds:		
University student aid funds	86,615	78,484
University special student loan funds	458,630	349,852
United Student Aid loan funds	<u>2,000</u>	<u>2,000</u>
Total University loan funds	<u>547,245</u>	<u>430,336</u>
TOTAL LOAN FUNDS	<u>\$ 10,696,277</u>	<u>\$ 10,099,789</u>
Endowment Funds:		
Fund balances	<u>\$ 3,487,655</u>	<u>\$ 1,978,083</u>
TOTAL ENDOWMENT FUNDS	<u>\$ 3,487,655</u>	<u>\$ 1,978,083</u>
Plant Funds:		
Unexpended:		
Outstanding encumbrances	\$ 11,558,922	\$ 10,787,195
Bonds payable	8,376,442	8,935,173
Appropriations-unencumbered balances	12,122,755	13,484,160
Fund balances allocated for construction-renovation	<u>25,013,646</u>	<u>36,812,385</u>
Total unexpended plant funds	<u>57,071,765</u>	<u>70,018,913</u>

University of Kentucky
Balance Sheet
February 28, 1978
With Comparative Figures for 1976-77

ASSETS

	<u>1977-78</u>	<u>1976-77</u>
Renewal and replacements:		
Cash on deposit with Trustees	\$ 48,630	\$ 48,410
Cash on deposit with State Treasurer	401,309	739,820
Investments held by Trustees	<u>911,929</u>	<u>872,261</u>
Total renewal and replacements	<u>1,361,868</u>	<u>1,660,491</u>
Retirement of indebtedness:		
Cash on deposit with State Treasurer	50,000	50,000
Cash on deposit with Trustees	38,910	40,733
Investments held by Trustees	<u>46,808,965</u>	<u>48,284,247</u>
Total retirement of indebtedness	<u>46,897,875</u>	<u>48,374,980</u>
Investment in plant:		
Land	16,447,306	15,553,756
Buildings	232,530,227	217,366,781
Equipment	<u>71,033,421</u>	<u>63,353,233</u>
Total investment in plant	<u>320,010,954</u>	<u>296,273,770</u>
TOTAL PLANT FUNDS	<u>\$ 425,342,462</u>	<u>\$ 416,328,154</u>
Agency Funds:		
Cash in bank	\$ 425,337	\$ 283,220
Investments short-term	<u>18,000</u>	<u>18,000</u>
TOTAL AGENCY FUNDS	<u>\$ 443,337</u>	<u>\$ 301,220</u>

University of Kentucky
Balance Sheet
February 28, 1978
With Comparative Figures for 1976-77

LIABILITIES AND FUND BALANCES

	<u>1977-78</u>	<u>1976-77</u>
Renewal and replacements:		
Due to other funds and affiliated corporations	\$ 228,285	\$ 182,949
Outstanding encumbrances	49,891	14,650
Fund balances:		
Restricted	827,877	830,000
Unrestricted	255,815	632,892
Total fund balances	<u>1,083,692</u>	<u>1,462,892</u>
Total renewal and replacements	<u>1,361,868</u>	<u>1,660,491</u>
Retirement of indebtedness:		
Bonds payable	33,095,000	33,224,000
Fund balances	13,802,875	15,150,980
Total retirement of indebtedness	<u>46,897,875</u>	<u>48,374,980</u>
Investment in plant:		
Bonds payable	100,464,058	101,947,827
Lease purchase obligation	5,305,000	5,445,000
Net investment in plant	214,241,896	188,880,943
Total investment in plant	<u>320,010,954</u>	<u>296,273,770</u>
TOTAL PLANT FUNDS	<u>\$ 425,342,462</u>	<u>\$ 416,328,154</u>
Agency Funds:		
Due to other funds and affiliated corporations	\$ 29,285	\$ 9,251
Funds held in custody for others	414,052	291,969
TOTAL AGENCY FUNDS	<u>\$ 443,337</u>	<u>\$ 301,220</u>

University of Kentucky
Schedule of Changes in Fund Balances-Current Funds
For the Eight Months Ended February 28, 1978

	Unrestricted Allocated	Restricted	Tobacco Research Trust Fund	Hospitals and Clinics	Housing Dining System Funds for Future Operating Purposes	Auxiliary Enterprises
Balances July 1, 1977	\$ 11,699,164	\$ 4,515,656	\$ 1,439,473	\$ 6,198,503	\$ 252,620	\$ 1,156,762
Allocations:						
Current operations:						
Original	(4,276,712)		(700,000)	(418,305)	81,059	
Current year operation			(739,473)		579,431	
BALANCES FEBRUARY 28, 1978	\$ 7,422,452	\$ 4,515,656	\$ -0-	\$ 5,780,198	\$ 913,110	\$ 1,156,762

University of Kentucky
 Schedule of Change in Unrestricted Fund and
 Hospital Estimated Income
 For the Eight Months Ended February 28, 1978

	Original Budget	Revisions	Adjusted Budget
Unrestricted Funds:			
Student fees	\$ 20,321,300	\$ 122,029	\$ 20,443,329
State appropriations	88,732,324	(76,724)	88,655,600
Federal appropriations	10,099,583	1,261,767	11,361,350
County appropriations	1,577,968	209,225	1,787,193
Endowment and trust fund income	162,000		162,000
Investment income	1,835,691		1,835,691
Gifts and grants-affiliated corporations	7,019,800	689,298	7,709,098
Gifts and grants-other	472,322	403,700	876,022
Sales, services, and other income	4,212,890	86,525	4,299,415
Fund balances allocated	4,276,712		4,276,712
Total unrestricted	<u>\$ 138,710,590</u>	<u>\$ 2,695,820</u>	<u>\$ 141,406,410</u>
Hospital and clinics:			
State appropriations	\$ 5,102,676	\$ 76,724	\$ 5,179,400
Hospital income	25,299,100		25,299,100
Fund balance allocated	418,305		418,305
Total hospital and clinics	<u>\$ 30,820,081</u>	<u>\$ 76,724</u>	<u>\$ 30,896,805</u>

University of Kentucky
 Schedule of Changes in Unrestricted Funds
 and Hospital Expenditure Appropriations
 For the Eight Months Ended February 28, 1978

	<u>Unrestricted</u>	<u>Hospitals and Clinics</u>	<u>Total</u>
Original budget	\$ 138,710,590	\$ 30,820,081	\$ 169,530,671
Increases (decreases) as approved by the Board of Trustees:			
July and August			
September	833,205	495,000	1,328,205
October	902,582	(418,276)	484,306
November			
December	723,701		723,701
January			
February	236,332		236,332
	<u>236,332</u>		<u>236,332</u>
Total per report	\$ 141,406,410	\$ 30,896,805	\$ 172,303,215

University of Kentucky
Summary of Current Revenues and Appropriated Balances
Eight Months Ended February 28, 1978
With Comparative Figures for 1976-77

	1977-1978			1976-1977		
	Estimated for the Year	Realized to Date	% Realized to Date	Estimated for the Year	Realized to Date	% Realized to Date
Fund and Source:						
Unrestricted:						
Student fees	\$ 20,443,329	\$ 19,746,459	97	\$ 18,033,374	\$ 17,614,440	98
Federal appropriations	11,361,350	6,240,744	55	10,431,331	5,959,404	57
County appropriations	1,787,193	965,361	54	1,480,800	898,986	61
Endowment and trust fund income	162,000	97,582	60	162,000	99,335	61
Investment income	1,835,691	385,254	21	1,157,900	327,641	28
Gifts and grants:						
Affiliated corporations	7,709,098	109,525	1	6,665,750	359,135	5
Other	876,022	435,958	50	297,600	615,873	207
Sales, service, other income	4,299,415	3,216,956	75	3,967,587	2,746,149	69
Subtotal	48,474,098	31,197,839	64	42,196,342	28,620,963	68
State appropriations	88,655,600	69,842,256	79	83,161,800	65,480,748	79
Fund balances appropriated	4,276,712	4,276,712	100	5,434,867	5,434,867	100
Total unrestricted	141,406,410	105,316,807	74	130,793,009	99,536,578	76
Restricted						
Tobacco Research Trust Fund:						
Receipts	7,278,029	2,905,632	40	10,806,417	7,281,111	67
Fund balances appropriated	3,800,000	2,333,159	61	4,000,000	2,382,432	60
Total Tobacco Research Trust Fund	1,439,473	1,439,473	100	750,000	750,000	100
	5,239,473	3,772,632	72	4,750,000	3,132,432	66
Hospital and Clinics:						
State appropriations	5,179,400	3,842,537	74	4,919,700	3,613,901	74
Hospital earned income-net	25,299,100	17,560,434	69	23,037,700	14,524,273	63
Fund balances appropriated	418,305	418,305	100	920,000	920,000	100
Total Hospital and Clinics	30,896,805	21,821,276	71	28,877,400	19,058,174	66
Housing and Dining System	11,544,925	8,791,584	76	10,847,461	7,440,377	69
Auxiliary Enterprises	3,490,828	2,224,801	64	3,278,265	2,332,171	71
TOTAL CURRENT FUNDS AND APPROPRIATED BALANCES	\$ 199,856,470	\$ 144,832,732	72	\$ 189,352,552	\$ 138,780,843	73

University of Kentucky
Summary of Current Funds Expenditures
Eight Months Ended February 28, 1978

	1977-1978			1976-1977		
	Appropriations for the Year	Expended to Date	% Expended Encumbered to Date	Appropriations for the Year	Expended to Date	% Expended Encumbered to Date
<u>Fund or Function:</u>						
<u>Unrestricted:</u>						
Departments of instruction						
and research	\$ 56,329,760	\$ 34,685,930	62	\$ 51,313,952	\$ 31,588,869	62
Summer session-1977	1,151,694	1,012,884	88	1,127,757	904,191	80
Organized activities	1,398,582	849,619	61	1,368,618	831,170	61
Organized research	11,676,960	7,708,246	66	10,892,740	7,206,763	66
Libraries	4,420,720	3,110,200	70	4,169,269	2,690,878	63
Extension and public service	15,492,310	9,536,064	61	14,223,375	8,907,056	63
Maintenance and operation of plant	10,834,614	6,950,313	64	9,872,695	5,858,421	59
Renovation, office furniture, etc.	1,849,515	1,772,515	96	2,349,100	2,324,100	99
General administration	5,706,156	3,471,496	61	5,513,639	3,429,105	62
Student services	4,096,226	2,515,963	61	3,806,268	2,437,139	64
Staff benefits	14,581,105	8,827,706	61	12,467,994	7,822,667	63
General institutional services	6,173,004	3,937,821	64	5,897,719	3,807,626	65
Service enterprises	257,543	173,170	67	204,311	192,232	94
Debt service cost	5,925,500	3,679,266	62	5,925,500	5,834,203	95
Student aid	1,491,740	1,490,927	99	1,513,510	1,253,853	83
Reserves	20,981			146,562		
Total unrestricted	141,406,410	89,722,120	63	130,793,009	85,088,273	65

University of Kentucky
Summary of Current Funds Expenditures
Eight Months Ended February 28, 1978
With Comparative Figures for 1976-77

Fund or Function: Restricted:	1977-1978			1976-1977		
	Appropriation for the Year	Expended or Encumbered to Date	% Expended or Encumbered to Date	Appropriation for the Year	Expended or Encumbered to Date	% Expended or Encumbered to Date
Departments of instruction and research	\$ 3,364,836	\$ 1,554,289	46	\$ 3,114,649	\$ 1,576,545	51
Organized activities	90,701	10,443	12			
Organized research	315,390	146,976	47	396,323	159,304	40
Libraries	38,011	9,676	25	45,425	10,299	23
Extension and public services	89,252	74,972	84	41,550	129,804	312
General institutional services	543,143	386,384	71	560,360	226,327	40
Student aid	525,446	1,100,470	209	4,710,442	6,232,836	132
Reservies	2,311,250			1,937,668		
Total restricted	7,278,029	3,283,210	45	10,806,417	8,335,115	77
Tobacco Research Trust Fund	5,239,473	2,561,547	49	4,750,000	1,997,808	42
Hospital and Clinics	30,896,805	18,580,565	60	28,877,400	18,136,431	63
Housing and Dining System	11,544,925	8,131,094	70	10,847,461	7,374,914	68
Auxiliary Enterprises	3,490,828	2,239,472	64	3,278,265	2,098,457	64
TOTAL CURRENT FUND EXPENDITURES	\$ 199,856,470	\$ 124,518,008	62	\$ 189,352,552	\$ 123,030,998	65

University of Kentucky
Schedule of Short Term Investments
February 28, 1978

	<u>Maturity Value</u>	<u>Cost</u>
Restricted Current Fund:		
Government securities:		
Banks for Cooperatives, 6.25%, 3/1/78	\$ 300,000	\$ 300,000
Banks for Cooperatives, 6.30%, 4/3/78	300,000	300,000
FICB, 6.45%, 6/1/78	300,000	300,000
FICB, 7.05%, 8/1/78	400,000	400,000
FHLB, 6.70%, 11/25/80	125,000	125,000
U. S. Treasury Notes, 7.875%, 5/15/86	485,000	485,000
		<u>1,910,000</u>
Total government securities		
Certificates of deposit:		
First Security National Bank & Trust Co., 6.90%, 3/29/78	2,500,000	2,500,000
Bank of Commerce & Trust Co., 7.16%, 4/3/78	1,000,000	1,000,000
Bank of Lexington, 6.40%, 6/29/78	400,000	400,000
Second National Bank & Trust Co., 6.39%, 7/20/78	400,000	400,000
Bank of Commerce & Trust Co., 6.75%, 8/20/78	500,000	500,000
Second National Bank & Trust Co., 6.88%, 9/15/78	500,000	500,000
Bank of Lexington, 7.20%, 10/11/78	400,000	400,000
		<u>5,700,000</u>
Total certificates of deposit		
TOTAL RESTRICTED FUNDS		<u>\$ 7,610,000</u>
Agency Funds:		
Government securities:		
U. S. Treasury Notes, 7.875%, 5/15/86	\$ 15,000	\$ 15,000
Certificate of deposit:		
First Security National Bank & Trust Co., 5.5%, 3/3/78	3,000	3,000
		<u>3,000</u>
TOTAL AGENCY FUNDS		<u>\$ 18,000</u>

University of Kentucky
Schedule of Retirement of Indebtedness Funds
For the Eight Months Ended February 28, 1978

Source of Funds:	Estimated	Realized	% Realized
Unrestricted current funds	\$ 5,925,500	\$ 3,679,266	62
Housing and dining system funds	1,489,971	832,624	56
Auxiliary enterprises current funds	191,807	85,055	44
	<u>\$ 7,607,278</u>	<u>\$ 4,596,945</u>	<u>60</u>
TOTAL RETIREMENT OF INDEBTEDNESS FUNDS			
Debt Service:	Appropriated	Expended	% Expended
Unrestricted funds debt:			
Consolidated Educational Buildings-Series A	\$ 506,775	\$ 74,468	15
Consolidated Educational Buildings-Series B	468,807	76,857	16
Consolidated Educational Buildings-Series C	234,496	50,284	21
Consolidated Educational Buildings-Series D	2,445,140	1,082,778	44
Consolidated Educational Buildings-Series E	271,512	135,756	50
Consolidated Educational Buildings-Series F	565,063	239,018	42
Community Colleges Educational Buildings-Series A	846,525	363,112	42
Community Colleges Educational Buildings-Series B	197,350	60,000	30
Community Colleges Educational Buildings-Series C	389,832	151,760	39
	<u>5,925,500</u>	<u>2,234,033</u>	<u>38</u>
Subtotal			
Housing and Dining System Revenue Bonds-Series A-I	<u>1,489,971</u>	<u>564,378</u>	<u>38</u>

University of Kentucky
Schedule of Retirement of Indebtedness Funds
For the Eight Months Ended February 28, 1978

	<u>Appropriated</u>	<u>Expended</u>	<u>% Expended</u>
Auxiliary Enterprises:			
Chi Omega	\$ 2,777	\$ 2,762	99
Alpha Delta Pi	13,004	10,560	81
Dorms A-F	52,774	3,658	7
Dorms G-L	50,861	14,321	28
Phi Delta Theta	14,827	2,195	15
Delta Delta Delta	5,003	4,540	91
Alpha Tau Omega	7,581	2,273	30
Housing Bonds of 1960	14,048	13,969	99
Student Housing Bonds of 1964	30,932	30,752	99
Subtotal	<u>191,807</u>	<u>85,030</u>	<u>44</u>
 TOTAL RETIREMENT OF INDEBTEDNESS FUNDS	 <u>\$ 7,607,278</u>	 <u>\$ 2,883,441</u>	 <u>38</u>

University of Kentucky
Schedule of Sinking Funds
February 28, 1978

Schedule 9

Bond Issues with Reserves Fully Funded:

Housing and Dining System Revenue Bond and Interest Sinking Fund
Consolidated Educational Building Project and Interest Sinking Fund:

Series A
Series B
Series C
Series D
Series E
Series F

Student Housing Bond and Interest Sinking Fund of 1964
Community College Educational Buildings Project Bond and Interest
Sinking Fund:

Series A
Series B
Series C

Student Housing Bond and Interest Sinking Fund of 1960
Dormitory Revenue Bonds of 1956

Total Bond Issues with Reserves Fully Funded

	Total Sinking Fund	Bonds Payable	Fund Balances
\$	2,110,964		\$ 2,110,964
	775,911		775,911
	763,522		763,522
	288,192		288,192
	2,772,360		2,772,360
	323,738		323,738
	2,110,985		2,110,985
	96,558		96,558
	1,312,358		1,312,358
	313,238		313,238
	587,588		587,588
	68,678		68,678
	50,000		50,000
	11,574,092		11,574,092

Bonds Fully Funded by Escrow Accounts:

Bowman, Keeneland, Cooperstown, and Student Union Future Bond
and Interest Fund

Consolidated Educational Series D Refunding Issue:

Bonds Payable
Premium on Sale of Bonds
Amortization of Discount on Investment
Investment Income
Interest Paid

Total Series D Refunding Issue

TOTAL SINKING FUNDS

\$	2,665,626	\$	2,095,000	\$	570,626
	31,000,000		31,000,000		839,150
	839,150				1,861,875
	1,861,875				7,492,486
	7,492,486				(8,535,354)
	(8,535,354)				
	32,658,157		31,000,000		1,658,157
\$	46,897,875	\$	33,095,000	\$	13,802,875

University of Kentucky
Schedule of Renewal and Replacement Funds
February 28, 1978

	<u>Restricted</u>	<u>Unrestricted</u>	<u>Total Fund Balances</u>
Repair and Maintenance Reserves:			
Housing and Dining	\$ 750,000	\$ 124,216	\$ 874,216
Student Housing Buildings of 1964	47,877		47,877
Student Housing Buildings of 1960	30,000	8,317	38,317
Total repair and maintenance reserves	<u>827,877</u>	<u>132,533</u>	<u>960,410</u>
 Renewal and Replacement Funds:			
Housing and Dining Funds		18,333	18,333
Other Auxiliary Enterprises		104,949	104,949
Total renewal and replacement funds		<u>123,282</u>	<u>123,282</u>
GRAND TOTAL	<u>\$ 827,877</u>	<u>\$ 255,815</u>	<u>\$ 1,083,692</u>

University of Kentucky
Summary of Other Fund Transactions
For the Eight Months Ended February 28, 1978

	Balances July 1, 1977	Additions	Deductions	Balances February 28, 1978
Loan Funds:				
Federal sponsored loan funds:				
Federal government	\$ 7,831,721	\$ 724,041		\$ 8,399,541
University of Kentucky	853,403	71,238	\$ 156,221	920,913
Accumulated interest income	772,734	55,844	3,728	828,578
University loan funds:				
University student loan funds	78,339	8,276		86,615
University special student loan funds	355,846	192,603	89,819	458,630
University Student Aid loan funds	2,000			2,000
TOTAL LOAN FUNDS	<u>\$ 9,894,043</u>	<u>\$ 1,052,002</u>	<u>\$ 249,768</u>	<u>\$ 10,696,277</u>
Endowment Funds	<u>\$ 3,201,596</u>	<u>\$ 452,930</u>	<u>\$ 166,871</u>	<u>\$ 3,487,655</u>
Agency Funds	<u>\$ 191,803</u>	<u>\$ 1,441,448</u>	<u>\$ 1,219,199</u>	<u>\$ 414,052</u>

Office of the President
April 4, 1978

FCR 2

Members, Board of Trustees:

RESOLUTION NAMING OFFICERS AUTHORIZED
TO SIGN CHECKS, DRAFTS, AND ORDERS

Recommendation: That the following Resolution be adopted:

RESOLVED, that the following named officers of the University are hereby authorized to sign and endorse checks, drafts and orders for the payment of money upon the active accounts of the University of Kentucky and its affiliated corporations:

<u>Account</u>	<u>Authorized Individual</u>	<u>University Office Held</u>
UK Vendor	Jack C. Blanton	Vice Pres. & Treasurer
UK Payroll	Jack C. Blanton	Vice Pres. & Treasurer
UK Restricted Trust	Jack C. Blanton	Vice Pres. & Treasurer
UK General	Jack C. Blanton	Vice Pres. & Treasurer
UK Imprest Cash Fund	H. C. Owen R. R. Marshall	Controller Assistant Controller
UK Athletics	Jack C. Blanton	Vice Pres. & Treasurer
The Fund (Lock Box)	Jack C. Blanton	Vice Pres. & Treasurer
UK Tobacco Research Trust Fund	H. C. Owen R. R. Marshall	Controller Assistant Controller
The Fund	Jack C. Blanton	Vice Pres. & Treasurer
UK Research Foundation	Jack C. Blanton	Vice Pres. & Treasurer

<u>Account</u>	<u>Authorized Individual</u>	<u>University Office Held</u>
UK Ashland CC	Jack C. Blanton	Vice Pres. & Treasurer
UK Elizabethtown CC	Jack C. Blanton	Vice Pres. & Treasurer
UK Fort Knox CC	Jack C. Blanton	Vice Pres. & Treasurer
UK Hazard CC	Jack C. Blanton	Vice Pres. & Treasurer
UK Henderson CC	Jack C. Blanton	Vice Pres. & Treasurer
UK Hopkinsville CC	Jack C. Blanton	Vice Pres. & Treasurer
UK Jefferson CC	Jack C. Blanton	Vice Pres. & Treasurer
UK Madisonville CC	Jack C. Blanton	Vice Pres. & Treasurer
UK Maysville CC	Jack C. Blanton	Vice Pres. & Treasurer
UK Paducah CC	Jack C. Blanton	Vice Pres. & Treasurer
UK Prestonsburg CC	Jack C. Blanton	Vice Pres. & Treasurer
UK Somerset CC	Jack C. Blanton	Vice Pres. & Treasurer
UK Restricted Fund (Southeast CC)	Jack C. Blanton	Vice Pres. & Treasurer
University of Kentucky College of Agriculture	Jack C. Blanton	Vice Pres. & Treasurer
University of Kentucky West Kentucky Substation	Jack C. Blanton	Vice Pres. & Treasurer
UK Forestry and Wood Technician-General Fund	Jack C. Blanton	Vice Pres. & Treasurer
UK 4-H Camps	Jack C. Blanton	Vice Pres. & Treasurer

Action taken: Approved ✓ Disapproved _____ Other _____

Date: April 4, 1978

Office of the President
April 4, 1978

FCR 3

Members, Board of Trustees

ACCEPTANCE OF AUDIT OF SPINDLETOP HALL, INC.

Recommendation: that the Board of Trustees accept the financial statement of Spindletop Hall, Inc. for the years ended December 31, 1977 and 1976.

Background: In accordance with the agreement between Spindletop Hall, Inc. and the University of Kentucky, it is required of Spindletop Hall, Inc. to submit to the University of Kentucky Board of Trustees audited Financial Reports.

Note: The audit is not included in the Minutes but is in the official files of the meeting.

Action taken: Approved ☒ Disapproved ☐ Other ☐

Date: April 4, 1978

Office of the President
April 4, 1978

FCR 4

Members, Board of Trustees:

EXTERNAL AUDITOR FOR FISCAL YEAR 1977-78

Recommendation: that the Board of Trustees engage the firm of Coopers & Lybrand, Certified Public Accountants, to perform an examination of the accounts of the University of Kentucky, the University of Kentucky Research Foundation, The Fund for the Advancement of Education and Research in the University of Kentucky Medical Center, the University of Kentucky Athletics Association, Health Care Collection Service, Inc., and the University of Kentucky Credit Union, for the fiscal year ending June 30, 1978, and render reports for a fee, including expenses, of not more than \$49,000.00.

Background: The firm of Coopers & Lybrand examined the accounts of the University of Kentucky and its affiliated corporations for the fiscal year ended June 30, 1977. The audit was both thorough and timely. The experience of the members of the firm in the examination of accounts of colleges and universities enables them to render an audit report which verifies the fiscal status of the University and evaluates the integrity of fiscal controls. The firm also possesses the ability to evaluate policies, procedures and practices utilized in fiscal management. This ability is especially valuable to administrative officers responsible for the conduct of financial administration.

Action taken: Approved ☒ Disapproved ☐ Other ☐

Date: April 4, 1978

Office of the President
April 4, 1978

FCR 5

Members, Board of Trustees:

AUTHORIZATION TO REQUEST RENOVATION COSTS
FROM MAINTENANCE FUND

Recommendation: That the Vice President for Business Affairs be authorized and directed by the Board of Trustees to request the Trustee of University of Kentucky Housing Bonds of 1960 to make available the sum of \$2,500.00 from the "Maintenance Fund" of said Bonds for the purpose of paying the costs of installing new floor tile in the Alpha Gamma Rho Fraternity House located at 700 Woodland Avenue.

Background: This bond issue provides for the establishment of a "Maintenance Fund" which may be drawn and used by the Board for the purpose of renovating the project facilities, provided the "Maintenance Fund" retains a minimum balance of \$30,000.00. This fund has a present balance in excess of \$38,000.00.

Action taken: Approved ☒ Disapproved ☐ Other ☐

Date: April 4, 1978

Office of the President
April 4, 1978

FCR 6

Members, Board of Trustees:

ROOM AND BOARD RATES 1978-79

I. Adjustment of Room and Board Rates-- Undergraduate Residence Halls
--Regular Semester

Recommendation: That the semester room and board rates be adjusted to \$818 for the three meals, seven days per week plan (20 meals per week); \$760 for the choice of any two meals, seven days per week plan; \$691 for the choice of any two meals per day, five days per week (Monday through Friday); and \$741 the three meals, five days per week plan (Monday through Friday). The three meals, five days per week plan is an addition to the three plans offered during 1977-78.

Background: The present room and board rates (\$773 for the three meals, seven days per week; \$690 for the choice of any two meals, seven days per week; and \$641 for the choice of any two meals, five days per week) are not sufficient to meet the higher operating costs and financial demands of the Housing and Dining System. The proposed adjustments result primarily from increased labor, food and utility costs. These rates cover debt service, all operating costs, and funds for replacement of furniture and equipment.

II. Adjustment of Room Rates-- Undergraduate Residence Halls--
Summer School

Recommendation: That the Summer School rates be adjusted to \$195 for double occupancy and \$244 for single occupancy effective the 1979 Summer Session.

Background: The present rate is \$180 for double occupancy and \$225 for single occupancy. The summer rate is based on the same weekly rate as the regular semester with the single rate being 125% of the double occupancy rate. The calculation is based on a 16 week regular semester and an eight week summer session.

III. Adjustment of Apartment Rates for Married Student Housing

Recommendation: That the monthly rental rate be adjusted to \$125 for the efficiency apartments, \$140 for the one-bedroom apartments and \$150 for the two-bedroom apartments effective September 1, 1978.

Background: The present monthly rates (\$115 for an efficiency apartment, \$130 for a one-bedroom apartment and \$140 for a two-bedroom apartment) were established in 1977. The proposed adjustment results primarily from increased labor and utility costs. The rental rates include basic furnishings and utilities.

IV. Adjustment of Single Graduate Apartment Rates—Cooperstown

Recommendations: That the monthly rental rate for graduate efficiency apartments in Cooperstown be adjusted to \$125, and that the one-bedroom rate be adjusted to \$140.

Background: The present rates of \$117.50 for an efficiency apartment and \$132.50 for a one-bedroom apartment have included cleaning supplies, which will no longer be furnished. The rate for the graduate apartment will be the same monthly rate charged for married apartments.

V. Adjustment of Single Graduate Apartment Rates—Commonwealth Village and Rose Lane-Linden Walk

Recommendations: That the monthly rental rate for graduate efficiency apartments in Commonwealth Village and Rose Lane-Linden Walk be adjusted to \$135 and that the one-bedroom rate remain at \$150.

Background: The present rate of \$130 for the efficiency apartment and \$150 for the one-bedroom apartment is not sufficient to meet the higher operating costs and financial demands of this facility. The increase of \$5.00 per month for the efficiency apartment will provide the additional funds necessary to meet the operating costs and will maintain the same \$15.00 per month differential between the efficiency apartment and the one-bedroom apartment that exists in Cooperstown and Shawneetown. The proposed adjustments results primarily from increased labor and utility costs.

Action taken: Approved ☒ Disapproved ☐ Other ☐

Date: April 4, 1978

Office of the President
April 4, 1978

FCR7

Members, Board of Trustees:

SALE OF SURFACE RIGHTS, OKLAHOMA PROPERTY

Recommendation: That the Board of Trustees authorize the Vice President, Business Affairs and Treasurer to execute the documents necessary to convey the University's interest (being an undivided one-half interest) in the surface rights to three hundred thirty (330) acres of land located in Garvin County, Oklahoma, to A. E. Shamley and Pauline Shamley for a total consideration of One Hundred Seven Thousand Five Hundred (\$107,500.00) Dollars.

Background: The property which is the subject of this recommendation came to the University in June, 1973, as a part of the estate of Violette Renaker, deceased. There are, at present, three oil wells located on the property from which considerable income is being derived. However, relatively little income is being derived from the farming operation being conducted on the surface. Hence, efforts have been underway for several months to dispose of the surface rights.

The present offer for a total price of \$215,000.00 is acceptable to the owners of the remaining one-half interest in the property (Mary Jo F. and Floyd Leary, Frances F. and Sammie F. Lee and Mary Gray Gibson). Although slightly lower than an estimate of value submitted by a realtor (\$222,000.00), a real estate commission will not be due on this sale.

Action: Approved ✓ Disapproved _____ Other _____

Date: April 4, 1978.

Office of the President
April 4, 1978

ICR1

Members, Board of Trustees:

REPORT OF INVESTMENTS

Recommendation: that the report of changes made in investments for the University of Kentucky and its Affiliated Corporations for the quarter ended December 31, 1977, be accepted.

Background: A part of the Board policy regarding investments is a provision that a quarterly report be submitted by the Investment Committee of the Board. The attached reports reflect the purchases and sales made during the Fourth Quarter of 1977, for the University of Kentucky Athletic Association, The Fund for Advancement of Education and Research in the University of Kentucky Medical Center, the University of Kentucky and the University of Kentucky Research Foundation.

Action taken: Approved ✓ Disapproved _____ Other _____

Date: April 4, 1978

UNIVERSITY OF KENTUCKY ATHLETIC ASSOCIATION
Statement of Portfolio Changes
For the Fourth Quarter, 1977

<u>Purchases:</u>	<u>Purchase Date</u>	<u>Yield</u>	<u>Net Amount of Purchase</u>
FICB	11/01/77	7.05%	\$ 200,000
Cer. of Deposit # 4736	12/14/77	6.89%	<u>200,000</u>
Total - Purchases			<u>\$ 400,000</u>

<u>Sales:</u>	<u>Maturity Date</u>	<u>Yield</u>	<u>Par Value</u>
FICB	11/01/77	5.45%	\$ 200,000
Cer. of Deposit # 115-885	12/14/77	6.15%	<u>200,000</u>
Total - Sales			<u>\$ 400,000</u>

THE FUND FOR ADVANCEMENT OF EDUCATION AND RESEARCH
IN THE UNIVERSITY OF KENTUCKY MEDICAL CENTER
Statement of Portfolio Changes
For the Fourth Quarter, 1977

<u>Purchases:</u>	<u>Purchase Date</u>	<u>Yield</u>	<u>Net Amount of Purchase</u>
Cer. of Deposit # 10846	10/11/77	6.92%	\$ 300,000
FICB	11/01/77	7.05%	200,000
Cer. of Deposit # 11259	12/14/77	7.10%	<u>800,000</u>
Total - Purchases			<u>\$ 1,300,000</u>

<u>Sales:</u>	<u>Maturity Date</u>	<u>Yield</u>	<u>Par Value</u>
	N O N E		

UNIVERSITY OF KENTUCKY
Statement of Portfolio Changes
For the Fourth Quarter, 1977

<u>Purchases:</u>	<u>Purchase Date</u>	<u>Yield</u>	<u>Net Amount of Purchase</u>
Banks for Cooperatives	10/03/77	6.30%	\$ 300,000
Cer. of Deposit # 775	10/11/77	7.20%	400,000
FICB	11/01/77	7.05%	400,000
Cer. of Deposit # 50-1177	11/30/77	7.16%	1,000,000
Cer. of Deposit # 50-1178	12/08/77	7.01%	<u>2,000,000</u>
Total - Purchases			<u>\$ 4,100,000</u>

<u>Sales:</u>	<u>Maturity Date</u>	<u>Yield</u>	<u>Par Value</u>
FICB	11/01/77	5.45%	\$ 300,000
Cer. of Deposit # 115-886	12/14/77	6.15%	<u>100,000</u>
Total - Sales			<u>\$ 400,000</u>

UNIVERSITY OF KENTUCKY RESEARCH FOUNDATION
Statement of Portfolio Changes
For the Fourth Quarter, 1977

<u>Purchases:</u>	<u>Purchases Date</u>	<u>Yield</u>	<u>Net Amount of Purchase</u>
Banks for Cooperatives	10/03/77	6,30%	\$ 200,000
Cer. of Deposit # 10847	10/11/77	6,92%	300,000
FICB	11/01/77	7,05%	200,000
Cer. of Deposit # 11257	12/14/77	7,10%	<u>300,000</u>
Total - Purchases			<u>\$1,000,000</u>

<u>Sales:</u>	<u>Maturity Date</u>	<u>Yield</u>	<u>Par Value</u>
	N O N E		

UNIVERSITY OF KENTUCKY
AND
UNIVERSITY OF KENTUCKY RESEARCH FOUNDATION
Statement of Portfolio Changes for the Pooled Endowment Funds
For the Fourth Quarter, 1977

PURCHASES:

<u>No. of Shares</u>	<u>Security</u>	<u>Date of Purchase</u>	<u>Amount of Purchase</u>
2,000	Master Note-South Central Bell Telephone Co. Current Rate 6.72%	10/24/77	\$ 2,000.00
20,000	Master Note-General Electric Co. Current Rate 6.72%	10/31/77	20,000.00
248,000	Master Note-South Central Bell Telephone Co. Current Rate 6.72%	11/22/77	248,000.00
1,000	Master Note-South Central Bell Telephone Co. Current Rate 6.72%	12/05/77	1,000.00
	U.S. Treasury Notes, 7 1/8%, 11-15-80	12/20/77	99,671.88
6,000	Master Note-General Electric Co. Current Rate 6.875%	12/23/77	6,000.00
500	Bendix Corp.	12/20/77	18,725.00
200	Coca Cola Co.	12/20/77	7,375.95
100	Procter & Gamble Co.	12/20/77	8,313.45
1,000	Master Note-General Electric Co.	12/30/77	<u>1,000.00</u>
	Total - Purchases		<u><u>\$412,086.28</u></u>

SALES:

<u>No. of Shares</u>	<u>Security</u>	<u>Net Proceeds from Sales</u>	<u>Book Value</u>	<u>Gain or (Loss)</u>
2,000	Master Note-Louisville Gas & Electric Co. Current Rate 6.72%	\$ 2,000	\$ 2,000	
20,000	Master Note-Sears Roebuck Acceptance Corp. Current Rate 6.72%	20,000	20,000	
100,000	Master Note-South Central Bell Telephone Co. Current Rate 6.875%	100,000	100,000	
35,000	Master Note-General Electric Co. Current Rate 6.85%	35,000	35,000	
	Total - Sales	<u><u>\$ 157,000</u></u>	<u><u>\$ 157,000</u></u>	

UNIVERSITY OF KENTUCKY
UNIVERSITY OF KENTUCKY RESEARCH FOUNDATION
AND
THE FUND FOR ADVANCEMENT OF EDUCATION AND RESEARCH
IN THE UNIVERSITY OF KENTUCKY MEDICAL CENTER
Pooled Endowment Funds - Fixed Income Type Securities
For the Fourth Quarter, 1977

PURCHASES:

<u>No. of Shares</u>	<u>Securities</u>	<u>Date of Purchase</u>	<u>Amount of Purchase</u>
71,000	Collective Temporary Investment Fund First Kentucky Trust Company	11/22/77	\$ 71,000.00
9,053	Collective Fixed Income Fund First Kentucky Trust Company	11/30/77	<u>71,337.64</u>
Total - Purchases			<u>\$142,337.64</u>

SALES:

<u>No. of Shares</u>	<u>Securities</u>	<u>Net Proceeds from Sales</u>	<u>Book Value</u>	<u>Gain or (Loss)</u>
71,000	Collective Temporary Investment Fund	<u>\$ 71,000.00</u>	<u>\$ 71,000.00</u>	<u> </u>
Total - Sales		<u>\$ 71,000.00</u>	<u>\$ 71,000.00</u>	<u> </u>

Office of the President
April 4, 1978

MCCR 1

Members, Board of Trustees:

BY-LAWS OF THE MEDICAL STAFF AND
OF THE COUNCIL OF SUPERVISORS, UNIVERSITY HOSPITAL

Recommendation:

That the Board approve, in principle, the By-Laws of the Medical Staff (Attachment A) and the By-Laws of the Council of Supervisors, University of Kentucky Hospital (Attachment B) with the following provisos:

(a) That subsequent Board action will be requested to empower the Council of Supervisors to commence exercising the functions to be delegated to it by the Board.

(b) That subsequent Board action will be requested to amend the By-Laws of the Medical Staff to provide, consistent with the action relating to (a) above, for the substitution of the Council of Supervisors for the Board of Trustees regarding certain functions now provided to be performed by the Trustees.

Background:

The creation of a Council of Supervisors for the Hospital is sought for the purpose of providing a mechanism for more closely monitoring the quality of patient care and to insure compliance with applicable Federal and State law and the requirements of the Joint Commission on Accreditation of Hospitals.

The By-Laws of the Medical Staff provide for the categorization of the medical staff, the manner in which medical staff members are appointed, reappointed and disciplined and the mechanism for granting, modifying, and revoking clinical privileges. In addition, they provide for a formalization of the organizational structure of the hospital and its committee structure. The related medical staff rules and regulations deal with matters such as the admission and discharge of patients, pronouncements of death, medical records, and the general conduct of care.

Action taken: Approved ✓ Disapproved _____ Other Attachment B amended.
as amended

Date: April 4, 1978

See page 2

A

BYLAWS OF THE MEDICAL STAFF
UNIVERSITY HOSPITAL
ALBERT B. CHANDLER MEDICAL CENTER
UNIVERSITY OF KENTUCKY
LEXINGTON, KENTUCKY

PREAMBLE

The University Hospital, Albert B. Chandler Medical Center is a part of the University of Kentucky, a publicly supported institution of Higher Learning established and maintained pursuant to Chapter 164 of the Kentucky Revised Statutes. A primary function of the Medical Staff of the University Hospital is the delivery of health care services to the patients in the University Hospital. In order to provide a framework within which the Medical Staff shall function, these bylaws, rules and regulations shall govern those physicians, dentists, house staff, Research and Education Staff and allied health professionals who practice or seek to practice at the University Hospital.

DEFINITIONS

1. Medical Staff - means all medical physicians, dentists, house staff, Research and Education Staff, and Allied Health Professionals who are privileged to attend patients at the Hospital.
2. Hospital - means the University Hospital, Albert B. Chandler Medical Center, University of Kentucky.
3. Board of Trustees - means the Board of Trustees of the University of Kentucky.
4. Clinical Board - means that body composed of the following: Chiefs of Hospital Clinical Services as described in Article IX, Section 3 herein, the Chairman of the Department of Community Medicine, Deans of the Colleges of Medicine, the Associate Dean for Clinical Affairs of the College of Medicine, the Hospital Director and ex-officio non-voting members shall consist of the Deans of the Colleges of Dentistry, Nursing, Pharmacy and Allied Health Professions, the Director of the University Student Health Service, the Associate Dean for Veterans Affairs, the Director of Nursing of University Hospital, and the Vice President for the Medical Center, or their respective designates.

5. Hospital Director - means the individual who oversees the overall management of the hospital.
6. Associate Dean for Clinical Affairs - means the individual bearing that title within the College of Medicine who oversees the quality of patient care, the proper functioning of the Medical Staff, compliance with these bylaws, rules and regulations by the staff, and coordination of the work of the clinical departments.
7. Vice President - means the Vice President for the Medical Center, University of Kentucky.
8. President - means the President of the University of Kentucky.
9. Medical staff year - means that period of time commencing on the first day of July of any calendar year and ending on the thirtieth day of June of the following calendar year.
10. Use of the terms, "he", "his", "him", "chairman" herein shall refer to female or male.

ARTICLE I

These bylaws, rules and regulations shall operate to:

1. Establish a framework within which the fundamental objective of the Hospital to provide comprehensive medical services, including diagnostic and curative medical care, preventive medical care, care and rehabilitation of the chronically ill and disabled, dental care, ambulatory services, and facilities for education and research for those engaged in activities related to comprehensive medical services may be effectuated;
2. Facilitate effective cooperation with other affiliated and nonaffiliated hospitals and other community health agencies serving the Central and Eastern Kentucky area;
3. Facilitate effective affiliation with other hospitals and educational institutions to assist in the education of physicians, dentists, nurses, pharmacists, and allied health professionals;

4. Insure that all patients served receive a high standard of personalized, continuous quality care;
5. Facilitate the formulation of long-range and short-range health planning goals;
6. Provide a method of continuous self-evaluation of the medical services through the delineation of staff privileges and review of clinical activities;
7. Insure the development and maintenance of high standards in medical education programs;
8. Provide a means whereby issues concerning the Medical Staff and the Hospital may be discussed and resolved.

ARTICLE II

CATEGORIES OF THE MEDICAL STAFF

Section 1. The Medical Staff shall be divided into categories denominated: honorary, active, associate, consulting, research and education, house staff, and allied health professional.

Section 2. The honorary category shall be comprised of physicians and dentists previously members of the active staff who are no longer active in the hospital. These may be physicians and dentists who have retired from active hospital practice or who are of outstanding reputation, not necessarily residing in the community. Honorary staff members shall not be eligible to admit patients, vote, hold office or serve on standing Medical Staff committees.

Section 3. The active category shall be comprised of physicians and dentists who are Full-time Faculty Members of the University of Kentucky College of Medicine or Dentistry who held unlimited Kentucky licenses to practice their profession in the Commonwealth of Kentucky and who have been endorsed by their respective departments, divisional, and sectional chairmen as being active in the teaching program of the University. Only members of the active staff shall be eligible to vote at any meetings of the Medical Staff. Privileges shall be delineated upon appointment and with each reappointment. Members of the active staff shall be required to attend meetings of the Medical Staff and to serve on standing Medical Staff committees.

Section 4. The associate category shall be comprised of physicians and dentists who are Voluntary and Part-time Faculty of the University of Kentucky College of Medicine or Dentistry who hold unlimited Kentucky licenses to practice their profession in the Commonwealth of Kentucky and who have been endorsed by their respective departmental, divisional, and sectional chairmen as contributing to the programs of the University. Privileges shall be delineated upon appointment and with each reappointment. In general, admission privileges shall be limited to periods of active involvement in teaching. Members of the associate staff do not have voting privileges at meetings of the Medical Staff, but they may attend Medical Staff meetings and serve on standing Medical Staff committees.

Section 5. The research and education category shall be comprised of members of the Faculty of the University of Kentucky College of Medicine or Dentistry who have been endorsed by their respective departmental, divisional and sectional chairmen as participating actively in the research and teaching programs of the Hospital and University, but do not possess licensure to practice medicine or dentistry in the Commonwealth of Kentucky. Members of the research and education staff may be identified as research and education staff of a particular department. Members of the research and education staff shall not be eligible to admit patients, vote at any Medical Staff meeting, hold office, or serve on standing Medical Staff committees.

Section 6. The consulting category shall be comprised of specialists who are Board qualified, and/or recognized as having special competence in their field, and are endorsed by the relevant departmental, divisional and sectional chairmen as contributing to the programs of the University. Privileges shall be delineated upon each appointment and re-appointment. Members of the consulting staff shall not be entitled to vote at any Medical Staff meeting, hold office or serve on standing Medical Staff committees, nor shall such consulting staff members be required to attend Medical Staff meetings.

Section 7. The house staff category shall be comprised of medical and dental residents, fellows, and trainees who are employed by the University of Kentucky upon the recommendation of the relevant department chairman. Members of the house staff shall not be eligible to admit patients, vote at any Medical Staff meeting or hold office. Members of the house staff may serve on standing Medical Staff committees and attend Medical Staff meetings.

Section 8. The Health Related Professions category shall be comprised of Faculty members of the University of Kentucky and/or employees of the University of Kentucky who are endorsed by the Chief of the relevant Clinical Service and the Hospital Clinical Board. Members of the Health Related Professions staff shall be identified as Health Related Professions Staff of a particular Clinical Service. Privileges shall be delineated upon appointment and re-appointment. Members of the allied health professions staff shall not be eligible to admit patients, vote at any meeting of the Medical Staff committees or serve on standing Medical Staff committees. Members of the health related professions staff may attend Medical Staff meetings.

ARTICLE III

MEDICAL STAFF MEMBERSHIP

Section 1. Membership on the Medical Staff of the Hospital is a privilege extended only to those health professionals who continuously meet the qualifications, standards and requirements set forth herein.

Section 2. Eligibility for Membership. The following shall be eligible to apply for membership on the Medical Staff:

a. Physicians and dentists licensed to practice in Kentucky, and who are or were members of the faculty of the University of Kentucky College of Medicine or Dentistry.

b. Physicians and dentists not licensed to practice in the Commonwealth of Kentucky, but who are members of the faculty or visiting consultants of the University of Kentucky College of Medicine or Dentistry engaged in teaching and research.

c. Medical and dental residents, fellows and trainees licensed to practice in Kentucky employed by the University of Kentucky.

d. Health related professions who are members of the faculty of the University of Kentucky and/or employed by the University of Kentucky.

Section 3. Conditions and Periods of Appointment.

a. Acceptance of membership on the Medical Staff shall

constitute the staff member's agreement to abide by these bylaws, rules and regulations. In addition, acceptance of membership on the Medical Staff constitutes the staff member's agreement to abide by the Principles of Medical Ethics of the American Medical Association, or the Code of Ethics of the American Dental Association, as applicable, or in the case of non-physicians and dentists, the code of ethics which has been adopted by his profession, as applicable, as if the same were appended to and made a part of these bylaws.

b. Appointments shall be for a period extending to the end of a current Medical Staff year. Reappointments shall be for periods of not more than one Medical Staff year.

c. Appointment to the Medical Staff shall confer on the appointee only such clinical privileges as have been set forth in the appointment.

ARTICLE IV

PROCEDURE FOR APPOINTMENT AND REAPPOINTMENT

Section 1. Application Process

a. All applications for appointment to the Medical Staff shall be submitted on a form prepared by the Associate Dean for Clinical Affairs. Such forms are to be completed by all applicants, signed by the applicant, and shall contain the applicant's specific acknowledgment of his obligation to provide continuous care and supervision of his patients, to accept, attend and complete required committee assignments, and to accept consultation assignments. In addition, the applicant shall specifically acknowledge that any misrepresentation or failure to fully disclose requested information shall be sufficient to result in the immediate revocation of his appointment or denial of his application for appointment. By applying for appointment to the Medical Staff, each applicant authorizes consultation by his department chairman (Chief of Clinical Service), the Dean of College of Medicine, the Associate Dean for Clinical Affairs, the Clinical Board, the Vice President for the Medical Center, the President, and members of the Board of Trustees, with members of Medical Staffs of other hospitals with which the applicant has been associated, and with others who may have information bearing on his competence, character and ethical qualifications. He

consents to the inspection, by any of the persons holding the above described offices, of all records and documents bearing upon his qualifications for clinical privileges and staff membership. He releases from any liability all representatives of the University of Kentucky and its Medical Staff for their acts performed without actual malice in connection with evaluating the applicant and his credentials, and releases from any liability all individuals and organizations who provide information to the University of Kentucky or its Medical Staff without actual malice concerning the applicant's competence, ethics, character and other qualifications for staff appointment and clinical privileges, including otherwise privileged or confidential information. As a minimum, the applicant shall supply detailed information as to the following:

- i. the applicant's professional training and qualifications
 - ii. whether the applicant's membership status and/or clinical privileges have ever been revoked, suspended, reduced or not renewed at any other hospital or institution;
 - iii. whether the applicant's license to practice any profession in any jurisdiction has ever been suspended or terminated;
 - iv. whether the applicant's membership in local, state or national medical or dental or other societies has ever been revoked, suspended or not renewed;
 - v. all hospitals, clinics, or medical centers where the applicant has held or currently holds privileges.
- b. Upon completion of his application form, the applicant shall submit his signed application to his department chairman, or in the case of allied health professionals the appropriate Chief of Clinical Services.
- c. The department chairman (Chief of Clinical Service) shall, with respect to each application form, verify in writing on the form the accuracy of the information supplied by the applicant. In addition, the department chairman (Chief of Clinical Service) shall prepare his own written recommendation concerning the applicant which shall include an evaluation of the applicant's abilities to carry out staff responsibilities and a specific delineation of proposed privileges. The depart-

ment chairmen's (Chief's of Clinical Service) recommendation shall become a part of the application.

d. The department chairman (Chief of Clinical Service) shall forward the application to the Associate Dean for Clinical Affairs who shall obtain or inspect any and all records, letters of recommendation or other materials deemed pertinent. The Associate Dean for Clinical Affairs shall summarize his findings in the form of a recommendation including a delineation of clinical privileges which shall become a part of the application.

Section 2. Appointment Process

a. The Associate Dean for Clinical Affairs shall forward the completed application to the Clinical Board.

b. The Clinical Board shall review the completed application and prepare its written recommendation to become a part of the application. All recommendations to appoint must also specifically recommend the clinical privileges to be granted, which may be qualified by probationary conditions relating to such clinical privileges.

c. The Clinical Board shall forward its recommendation through the Hospital Director to the Vice President for the Medical Center who shall review the application and prepare his written recommendation including delineation of clinical privileges which shall become a part of the application. If the Vice President recommends approval of the application, the application shall be forwarded to the President. If the Vice President determines that the application should be rejected or deferred for further consideration he shall return the application to the Associate Dean for Clinical Affairs and notify the applicant in writing by certified mail, return receipt requested, that the application has been rejected or deferred.

d. Upon receipt of an affirmative recommendation of appointment from the Vice President, the President shall review the application and make a written recommendation thereon including a delineation of clinical privileges which shall become a part of the application. If the President recommends approval of the application, the application shall be forwarded to the Board of Trustees. If the President determines that the application be rejected or deferred for further consideration, he shall return the application through the Vice President to the Associate Dean for Clinical Affairs and notify the applicant in writing by certified mail, return receipt requested, that the application has been rejected or deferred.

e. At its next regular meeting following receipt of a favorable recommendation from the President, the Board of Trustees or its Executive Committee shall act upon the application.

- i. If the Board of Trustees or its Executive Committee approves the application as submitted by the President, including his recommended delineation of clinical privileges, it shall return the application through the President and Vice President to the Associate Dean for Clinical Affairs who shall notify the applicant in writing.
- ii. If the Board of Trustees or its Executive Committee approves the application as submitted by the President, but grants clinical privileges differing from those recommended by the President, it shall return the application through the President and Vice President to the Associate Dean for Clinical Affairs who shall notify the applicant in writing.
- iii. If the Board of Trustees or its Executive Committee disapproves the application as submitted by the President, it shall return the application through the President and Vice President to the Associate Dean for Clinical Affairs who shall notify the applicant in writing.

f. Upon receipt of the action of the Board of Trustees or its Executive Committee on any application, the Associate Dean for Clinical Affairs shall send written notice to the Hospital Director, the Clinical Board and the Chairman of the Department concerned (Chief of Clinical Service).

g. All actions of the Board of Trustees or its Executive Committee shall be effective when taken including the delineation of clinical privileges.

Section 3. Reappointment Process

a. All applications for reappointment shall be submitted by the applicant by January 1 of each year in which the reappointment is sought on a form prepared by the Associate Dean for Clinical Affairs. The reappointment form shall be supplemental to the original application for appointment or the most recent application for reappointment, and the applicant shall

supply any information about himself which is additional to that furnished on the original application form or that furnished on his most recent reappointment application. All application for reappointment forms shall contain the acknowledgments, authorizations and releases set forth in Article IV, Section 1. a. herein. Any request for a change in clinical privileges shall be included by the applicant on his reappointment form.

b. Upon completion of his reappointment application, the applicant shall submit it to his Department Chairman, or in the case of allied health professionals, the appropriate Chief of Clinical Service. The Department Chairman (Chief of Clinical Service) shall with respect to each application form verify in writing on the form the accuracy of the information supplied by the applicant. In addition, the department chairman (Chief of Clinical Service) shall prepare his own written recommendation concerning the applicant which shall include an evaluation of the applicant's abilities to carry out staff responsibilities and a specific delineation of proposed privileges. The department chairman's (Chief's of Clinical Service) recommendation shall become a part of the application.

c. The department chairman (Chief of Clinical Service) shall forward the application to the Associate Dean for Clinical Affairs who shall obtain or inspect any and all records, letters of recommendation or other materials deemed pertinent. The Associate Dean for Clinical Affairs shall summarize his findings in the form of a recommendation including a delineation of clinical privileges which shall become a part of the application.

d. The Associate Dean for Clinical Affairs shall forward the completed application to the Clinical Board.

e. The Clinical Board shall review the completed application and prepare its written recommendation to become a part of the application. All recommendations to appoint must also specifically recommend the clinical privileges to be granted, which may be qualified by probationary conditions relating to such clinical privileges.

f. The Clinical Board shall forward its recommendation through the Hospital Director to the Vice President for the Medical Center who shall review the application and prepare his written recommendation including delineation of clinical privileges which shall become a part of the application. If the Vice President recommends approval of the application, the

application shall be forwarded to the President. If the Vice President determines that the application be rejected or deferred for further consideration he shall return the application to the Associate Dean for Clinical Affairs and notify the applicant in writing by certified mail, return receipt requested, that the application has been rejected or deferred.

g. Upon receipt of an affirmative recommendation of reappointment from the Vice President, the President shall review the application and make a written recommendation thereon including a delineation of clinical privileges which shall become a part of the application. If the President recommends approval of the application, the application shall be forwarded to the Board of Trustees. If the President determines that the application be rejected or deferred for further consideration, he shall return the application through the Vice President to the Associate Dean for Clinical Affairs and notify the applicant in writing by certified mail, return receipt requested, that the application has been rejected or deferred.

h. At its next regular meeting following receipt of a favorable recommendation from the President, the Board of Trustees or its Executive Committee shall act upon the application.

- i. If the Board of Trustees or its Executive Committee approves the application as submitted by the President, including his recommended delineation of clinical privileges, it shall return the application through the President and Vice President to the Associate Dean for Clinical Affairs who shall notify the applicant.
- ii. If the Board of Trustees or its Executive Committee approves the application as submitted by the President but grants clinical privileges different from those recommended by the President, it shall return the application through the President and Vice President to the Associate Dean for Clinical Affairs who shall notify the applicant in writing.
- iii. If the Board of Trustees or its Executive Committee disapproves the application as submitted by the President, it shall return the application through the President and Vice President to the Associate Dean for Clinical Affairs who shall notify the applicant in writing.

i. Upon receipt of the action of the Board of Trustees or its Executive Committee on any application, the Associate Dean for Clinical Affairs shall send written notice to the Hospital Director, the Clinical Board and the Chairman of the Department concerned (Chief of Clinical Service).

j. All actions of the Board of Trustees or its Executive Committee shall be effective when taken, including the delineation of clinical privileges.

ARTICLE V

CLINICAL PRIVILEGES

Section 1. Delineation of Privileges in General.

a. Each applicant for appointment or reappointment to the Medical Staff must request the specific clinical privileges desired by said applicant. All applications for clinical privileges, including modifications to existing privileges, must be supported by documentation of training and/or experience.

b. Each member of the Medical Staff shall exercise only those clinical privileges specifically granted to him by the Board of Trustees.

c. Surgical procedures performed by dentists shall be under the overall supervision of the chief of surgery. A physician member of the Medical Staff shall be responsible for the treatment of any medical problem that may be present in a patient at the time of admission to the hospital or that may arise during the hospitalization of the patient.

d. A Related Health Professional may exercise only those clinical privileges specially granted by the Board of Trustees and may, subject to any licensure requirements or other legal limitations, exercise his independent judgment within the areas of his professional competence. A Related Health Professional shall be directly responsible to the relevant Chief of Clinical Services and must be supervised during patient treatment by the physician or dentist attending the patient.

e. Medical Staff members desiring Joint Appointments shall have their requests to perform specific patient services evaluated by the department(s) and specialty division(s) within

which the services of the Medical Staff member will be provided.

Section 2. Temporary Privileges

a. Upon receipt of an application for appointment to the Medical Staff from a physician, dentist or allied health professional licensed to practice in the Commonwealth of Kentucky, the Associate Dean for Clinical Affairs may, upon the basis of:

- i. the information he gathers or reviews;
- ii. information provided by the applicant and his department chairman (Chief of Clinical Service)
- iii. recommendation of the applicant's department chairman (Chief of Clinical Service) approving the application, grant temporary privileges to the applicant; but in exercising such temporary privileges, the applicant shall act under the general supervision of the chairman (Chief of Clinical Service) of the department to which he is assigned. The Associate Dean shall forward the application in accordance with Article IV, Section 1. e. and shall notify, in writing, the Hospital Director and the applicant of the specific temporary privileges granted and their duration.

b. Temporary privileges for the care of a specific patient may be granted to a physician or dentist licensed to practice in the Commonwealth of Kentucky who is not an applicant for membership to the Medical Staff, by the Associate Dean for Clinical Affairs. Such temporary privileges may be granted only after the Associate Dean has received from the physician or dentist his signed acknowledgment that he has received and read copies of the Medical Staff's bylaws, rules and regulations and that he agrees to be bound by the terms thereof in all matters relating to his temporary privileges. Such temporary privileges shall be restricted to the treatment of not more than ten (10) patients in any one year by any physician or dentist, after which such physician or dentist shall be required to apply for membership on the Medical Staff before being allowed to attend additional patients.

c. Special requirements of supervision and reporting may be imposed by the department chairman (Chief of Clinical Service) on any physician or dentist granted temporary privileges.

Section 3. Emergency Privileges

a. In the case of an emergency, (i.e. a condition in which serious permanent harm would result to a patient or in which the life of a patient is in immediate danger and any delay in administering treatment would add to that danger), any physician or dentist to the degree permitted by his license and regardless of department or staff status or lack of it, shall be permitted and assisted to do everything possible to prevent serious permanent harm or to save the life of the patient, using every facility of the hospital necessary, including calling for any consultation necessary or desirable. When an emergency situation no longer exists, such physician or dentist must request the privileges necessary to continue to treat the patient. In the event such privileges are denied or the physician or dentist does not desire to request privileges, the patient shall be assigned to an appropriate member of the Medical Staff.

ARTICLE VI

CORRECTIVE ACTION

Section 1. Types of Corrective Action

a. The following forms of corrective action are available to be taken against any member of the Medical Staff:

1. oral warning to Medical Staff member
2. informal written reprimand to Medical Staff member
3. formal written reprimand to Medical Staff member with notice to his immediate superior
4. summary suspension of privileges
5. automatic suspension of privileges
6. reduction of privileges
7. revocation of privileges

Section 2. Grounds for Corrective Action

a. Whenever any member of the Medical Staff conducts himself or his activities in a manner which is either at

variance with these bylaws, rules and regulations or considered lower than the standard or aims of the Medical Staff or disruptive of the operations of the hospital, or which is unprofessional or unethical, corrective action may be requested by any active staff member, the chairman of any clinical department, the Chief of any Clinical Service, the chairman of any standing committee of the Medical Staff, the Dean of the College of Medicine, the Hospital Director, the Vice President for the Medical Center, the President or the Board of Trustees. No corrective action except summary or automatic suspension may be taken until a request for corrective action has been made and acted upon. All requests for corrective action shall be in writing, shall be supported by reference to the specific activities or conduct which constitute the grounds for the request, and shall be made to the Associate Dean for Clinical Affairs.

b. Summary Suspension

Whenever action must be taken immediately in the interests of patient care in the hospital, the Associate Dean for Clinical Affairs, the Chairman (Chief) of a Clinical Department (Service), or the Hospital Director shall have the authority to suspend all or any portion of the privileges of a Medical Staff member. Such summary suspension shall be effective immediately upon imposition. Notification may first be made orally to the Medical Staff member, but must be made in writing to the Medical Staff member, the relevant department chairman (Clinical Chief), the Associate Dean for Clinical Affairs, and the Hospital Director as soon as practicable after imposition. As soon as practicable after the imposition of the summary suspension, the party who has imposed it shall prepare a written request for corrective action in the manner set forth in Article VI, Section 2. a.

c. Automatic Suspension

Automatic suspension may be imposed upon a Medical Staff member by the Associate Dean for Clinical Affairs whenever:

1. The Medical Staff member, after receipt of a warning of delinquency for failure to complete medical records within 30 days of patient's discharge (See Part 2, Rules and Regulations, Medical Records) fails to complete the records. Such automatic suspension shall be temporary and effective until the records are complete and need not be followed by a written request

for corrective action. Notification of the automatic suspension must be made in writing to the Medical Staff member, the relevant department chairman (Chief of Clinical Service) and the Hospital Director.

2. The State Board of Medical Examiners, the State Board of Dentistry, or other state licensing agency revokes or suspends a Medical Staff member's license to practice or places such Medical Staff member on probation. Such automatic suspension shall be effective at least until the Medical Staff member regains a full and unrestricted license to practice his profession. Notification of the automatic suspension must be made in writing to the Medical Staff member, the relevant department chairman (Chief of Clinical Service) and the Hospital Director. In addition, the Associate Dean shall, as soon as practicable after imposing the automatic suspension, prepare a written request in the manner set forth in Article VI, Section 2. a. and forward it to the Clinical Board.
3. The Medical Staff member's faculty or employment status at the University is terminated. The Medical Staff member shall notify the Associate Dean for Clinical Affairs whenever said Medical Staff member's faculty or employment status is terminated. In the case of a full-time faculty member changing to a voluntary or part-time faculty member, his Medical Staff membership shall automatically change from active to associate, and the Associate Dean shall notify the relevant department chairman (Chief of Clinical Service), the relevant Dean, the Hospital Director and the Vice President.

d. Procedures for Other Corrective Actions

Upon receipt of a request for corrective action, under circumstances not requiring summary or Automatic Suspension, the Associate Dean may meet together with the party requesting the corrective action and the Medical Staff member against whom action is requested to attempt to mediate the request. The Associate Dean may waive this discussion and immediately forward the request to the Clinical Board. Following the mediation discussion, the Associate Dean may:

1. deliver an oral warning to the Medical Staff member

2. deliver an informal written reprimand to the Medical Staff member
3. deliver a formal written reprimand to the Medical Staff member with notice to his immediate superior
4. terminate a summary or automatic suspension

e. Whenever the Clinical Board receives from or through the Associate Dean for Clinical Affairs a request for corrective action, the Chairman shall require of the Medical Staff member his written response to the request. Upon receipt of the written response, the Chairman of the Clinical Board shall appoint three members of the Board to investigate the activities and conduct of the Staff Member. The three members shall report their findings to the full Clinical Board. The Clinical Board shall determine whether to act upon the request, response and findings or to hold a hearing. If the Clinical Board decides to hold a hearing, the following procedures shall be observed:

1. the hearing shall be closed
2. the Medical Staff member against whom corrective action has been requested may be represented by counsel
3. the party requesting corrective action may be represented by counsel
4. the Clinical Board may have an attorney sit with the board as a hearing officer to make all decisions on evidence and procedures, but not to vote on the substantive merits of the request
5. witnesses shall be separated and allowed into the hearing only when called to testify, after which testimony they shall leave the hearing
6. a stenographic transcript of the hearing shall be made at the expense of the Clinical Board

f. Following the hearing, if one is held, the Clinical Board shall confer together in private with the hearing officer to determine what action shall be taken. The Clinical Board may impose any of the corrective actions set forth in Article VI, Section 1. a. and shall notify the Medical Staff member

in writing by certified mail, return receipt requested, with copies of such notification being sent to the relevant department chairman (Chief of Clinical Service), the Dean of College of Medicine, the Associate Dean for Clinical Affairs, the Hospital Director and the Vice President.

ARTICLE VII

CRITERIA FOR RECOMMENDATIONS FOR APPOINTMENT AND REAPPOINTMENT TO MEDICAL STAFF AND RECONSIDERATION

Section 1. Criteria for Recommendations for Appointment and Reappointment to Medical Staff

a. Whenever a department chairman (Chief of Clinical Service), dean, Associate Dean for Clinical Affairs, the Clinical Board, the Vice President or the President is called upon to review an application for appointment or reappointment to the Medical Staff and to make a recommendation concerning the application, the applicant shall be evaluated on the basis of his education, training, experience, demonstrated ability, current observed teaching ability, clinical performance, documented results of patient care audit, competence and clinical judgment in the treatment of patients, his ethics, conduct, attendance at Medical Staff meetings, participation in staff affairs, his compliance with hospital bylaws, his compliance with Medical Staff bylaws, rules and regulations, cooperation with hospital personnel, use of hospital facilities for his patients, faithfulness in assigned department duties, relations with other practitioners, general attitude toward patients, mental and physical abilities to carry out staff responsibilities, and any other areas of concern relevant to the practice of his profession.

Section 2. Reconsideration

a. Whenever an applicant for appointment or reappointment receives notice that his application for staff membership has been rejected or deferred at any level or that the clinical privileges delineated by the Board of Trustees are at variance with those requested by the applicant, he may request reconsideration of his application by the Joint Conference Committee,

requesting to be heard in his own behalf, but without being represented by counsel.

b. The Joint Conference Committee shall reconsider the application and shall notify in writing, the applicant and the decision making person or body of its recommended action which may be one of the following:

1. approval of the application for staff membership
2. rejection of the application for staff membership
3. further processing of a deferred application for staff membership
4. continued deferral of an application for staff membership
5. granting of all or part of the privileges requested by the applicant
6. denial of all or part of the privileges requested by the applicant

c. Upon receipt of the reconsidered recommendation of the Joint Conference Committee, the decision making body or person shall act upon the application and recommendation and such action shall be final.

ARTICLE VIII: ASSOCIATE DEAN FOR CLINICAL AFFAIRS

SECTION 1. Qualifications and Selection

The Associate Dean for Clinical Affairs shall be a member of the active Medical Staff who shall be nominated by the Dean of the College of Medicine of the University of Kentucky, approved by the Clinical Board and appointed by the Board of Trustees according to University Governing Regulations.

SECTION 2. Term of Office

The Dean and the Clinical Board shall periodically review the duties, activities, accomplishments and appointment of the Associate Dean for Clinical Affairs. Such review shall be completed at least every four years. Reappointment, if deemed appropriate, shall be carried out as defined in Section 1 of this Article. There shall be no limit to the number of terms an individual may serve. Changes in duties shall be carried out as defined in Article XV.

SECTION 3. Vacancies in Office

- a. In the event the Associate Dean should be temporarily unable to fulfill his duties, his duties shall be assumed by the Dean or his appointee.
- b. In the event the position becomes permanently vacant, an Acting Associate Dean shall be nominated by the Dean of the College of Medicine of the University of Kentucky recommended by the President and appointed by the Board of Trustees. Within one year from the time the post becomes vacant, a permanent appointment shall be made or a written review of the reason why an acting appointment must be continued for an additional period shall be made to the Clinical Board and the Board of Trustees.

SECTION 4. Duties of the Associate Dean for Clinical Affairs

The Associate Dean for Clinical Affairs shall serve as the Chief Administrative Officer of the Medical Staff and assume appropriate delegated authority from the Hospital Director to:

- a. act in coordination and cooperation with the Hospital Director in all matters of mutual concern within the Hospital;
- b. serve in the absence of the Dean as Chairman of the Clinical Board;
- c. call, be responsible for the agenda for all regular and special meetings of the Medical Staff and the Clinical Board;
- d. serve on the Joint Conference Committee;
- e. serve as ex officio member of all other Medical Staff committees without vote;
- f. be responsible for the enforcement of Medical Staff Bylaws and Rules and Regulations, for implementation of corrective action where these are indicated, and for the Medical Staff's compliance with procedural safeguards in all instances where corrective action has been requested against a practitioner;
- g. annually recommend to the Dean for appointment, committee chairmen and committee members to all standing, special and multi-disciplinary Medical Staff committees except the Clinical Board;

- h. represent the views, policies, needs and grievances of the Medical Staff to the Hospital Director;
- i. be responsible for the continuing educational activities of the Medical Staff through the department chairmen;
- j. represent the views, policies, and needs of the Medical Staff to the Administration of the University of Kentucky Medical Center; and be the spokesman for the Medical Staff in its external professional and public relations;
- k. maintain accurate up-to-date files on all staff members, which shall include all application and reapplication forms, recommendations, evaluations and any other information pertainate the medical staff members functions and membership status.

ARTICLE IX: ORGANIZATIONAL STRUCTURE

SECTION 1. Departmental Organization

The direct patient care segment of the University Hospital administrative organization shall be structured parallel to the major clinical activities of the Albert B. Chandler Medical Center.

The Clinical Departments shall be as follows:

Anesthesiology	Pathology
Dentistry	Pediatrics
Family Practice	Psychiatry
Medicine	Diagnostic Radiology
Neurology	Radiation Medicine
Obstetrics - Gynecology	Surgery
Ophthalmology	

SECTION 2. Chiefs of Services

Chiefs of the Clinical Services within the University Hospital shall usually be those appointed as Chairmen of the respective departments, and/or divisions, in the Colleges of Medicine and Dentistry with concurrence of the Clinical Board, upon recommendation of the President and upon concurrence of the Board of Trustees. In unusual circumstances, an individual may be made chief of a clinical service who is not a department or division chairman. Such appointments shall be made by the deans of the specific colleges, subject to approval by the Hospital Clinical Board and the Board of Trustees of the University of Kentucky in accordance with the Governing Regulations. The chiefs of the various services shall have corporate responsibility for the care and treatment of the patients in their respective departments and heads of divisions shall be responsible to the chiefs of services for the care and treatment of patients in the divisions.

SECTION 3. Hospital Clinical Board

There shall be established a Hospital Clinical Board for the purpose of correlating the activities of the Medical Staff and its committees which, in turn, are charged with the supervision and maintenance of excellent patient care as well as with other factors specifically designated. The function of the Hospital Clinical Board shall be to:

- a. make recommendations, through regular administrative channels, to the Board of Trustees regarding modification in medical policy and programs;

- b. provide general guidance and assistance to the Medical Staff;
- c. review and evaluate the quality of patient care;
- d. review and approve applications and recommend to the governing body for staff membership, to include definition of privileges and reappointment to the Medical Staff.
- e. assist with the creation and maintenance of good Medical Staff organization and management;
- f. transact the majority of the business of the Medical Staff so that general Medical Staff meetings can remain professionally oriented;
- g. act as an Executive Committee of the Medical Staff;
- h. ensure that the Medical Staff is kept abreast of the accreditation program and is informed of the accreditation status of the Hospital.

The Hospital Clinical Board shall consist of the Chiefs of the Hospital Clinical Services as described in Definition 4, the Chairman of the Department of Community Medicine, the Dean and Associate Dean for Clinical Affairs of the College of Medicine, and the Hospital Director. The Deans of all the Colleges of the Medical Center, the Director of the University Student Health Service, the Associate Dean for Veterans Affairs, the Director of Nursing of University Hospital and the Vice President for the Medical Center (or their respective designates) shall be ex-officio without vote.

The Dean of the College of Medicine shall serve as Chairman of the Hospital Clinical Board; the Hospital Director as Secretary.

The Hospital Clinical Board shall meet on a monthly basis. Minutes of the Clinical Board shall be circulated after the review and approval to the active Medical Staff.

SECTION 4. Duties of the Chief of Service (Department Chairman)

Each Chief of Services shall:

- a. be accountable for all professional and administrative activities within his department;
- b. be a member of the Clinical Board, giving guidance on the overall medical policies of the Hospital and making specific recommendations and suggestions regarding his own department in order to assure quality patient care;
- c. maintain continuing peer review of the professional performance of all practitioners with clinical privileges in his department and report regularly thereon to the Clinical Board;
- d. appoint departmental committees to conduct the initial phase of patient care review required by these Bylaws;
- e. be responsible for enforcement of the Hospital Bylaws and the Medical Staff Bylaws and Rules and Regulations within his department;

- f. be responsible for implementation within his department of actions taken by the Clinical Board of the Medical Staff;
- g. transmit to the Associate Dean for Clinical Affairs his department's recommendations concerning the staff classification, the reappointment, and the delineation of clinical privileges for all practitioners in his department;
- h. be responsible for education and research programs in his department;
- i. participate in every phase of administration of his department through cooperation with the Nursing Service and the Hospital Administration in matters affecting patient care, including personnel, supplies, special regulations, standing orders and techniques;
- j. assist in the preparation of such annual reports, including budgetary planning, pertaining to his department as may be required by the Clinical Board, Associate Dean for Clinical Affairs, Hospital Director or the Board of Trustees.
- k. may appoint an Associate Chief of Service who shall, in case of the Chief of Service's incapacity or absence from the community, assume the duties of Chief of Service. This Associate shall be identified to the Dean, the Associate Dean for Clinical Affairs and the Hospital Director. The Associate Chief shall be the only acceptable alternate to attend Clinical Board meetings.

SECTION 5. Functions of Departments

- a. Each department shall establish its own rules and regulations regarding departmental function and patient care consistent with the overall policies of the Medical Staff.
- b. Each clinical department shall establish its own criteria, consistent with the policies of the Medical Staff and of the Board of Trustees for the granting of clinical privileges and for the holding of office in the department.
- c. Each department shall establish a Medical Care Evaluation Committee responsible for conducting a primary retrospective review of completed records of discharged patients and other pertinent departmental sources of medical information relating to patient care for the purposes of selecting cases for presentation at the monthly departmental meetings that will contribute to the continuing education of every practitioner and to the process of developing criteria to assure optimal patient care. Such reviews shall be conducted monthly and should include a consideration of selected deaths, unimproved patients, patients with infections, complications, errors in diagnosis and treatment and such other instances as are believed to be important, such as patients currently in the Hospital with unsolved clinical problems.
- d. Each department or division shall meet separately, at least monthly, to review and analyze on a peer-group basis the clinical work of the department or division. Each surgical division of the Medical Staff shall also conduct a comprehensive tissue review for justification of all surgery performed whether tissue was removed or not and for the acceptability of the procedure chosen. Specific consideration shall be given to the agreement or disagreement of the preoperative and pathological diagnoses.
- e. A report shall be submitted within fifteen days of the monthly meeting to the Associate Dean for Clinical Affairs, detailing such departmental analysis of patient care.

ARTICLE X: COMMITTEES

SECTION 1. Clinical Board

The Clinical Board shall be a standing committee. It shall be organized and carry the responsibilities as outlined in Article X: Section 3.

SECTION 2. Joint Conference Committee

a. Membership:

The Joint Conference Committee shall be a standing committee composed of two members of the Board of Trustees, the Vice President for the Medical Center, two members of the Medical Staff elected by the Medical Staff, two members of the Clinical Board elected by the Clinical Board, the Dean and the Associate Dean for Clinical Affairs of the College of Medicine and the Hospital Director. The Vice President for the Medical Center shall serve as Chairman of the Committee.

The elected representatives of the Medical Staff and of the Clinical Board shall be elected for two year terms. One member shall be elected each year at the annual meeting of the Medical Staff and the June meeting of the Clinical Board for the Medical Staff and Clinical Board, respectively. A representative may succeed himself.

b. Duties:

The Joint Conference Committee shall conduct itself as a forum for the discussion of matters of Hospital policy and practice, especially those pertaining to efficient and effective patient care, and shall provide medico-administrative liaison with the Board of Trustees and the Hospital Director. It shall also have the following specific duties:

- (1) Accreditation: The Committee shall be responsible for acquisition and maintenance of JCAH accreditation for which purpose it shall form a subcommittee that includes key Hospital personnel who are important in implementing the accreditation program. From time to time, it shall require that the Joint Commission's survey forms be used as a review method to estimate the accreditation status of the Hospital, and it should supervise a trial survey during the interim year between regular JCAH surveys for purposes of constructive self-criticism. It shall identify areas of suspected non-compliance with JCAH Standards and shall make recommendations to the Clinical Board for appropriate action and thru regular administrative channels to the Board of Trustees.
- (2) Disaster Planning: The Committee shall be responsible for the development and maintenance of methods for the protection and care of hospital patients and others at the time of internal and external disaster. Specifically, it shall form subcommittees to:

adopt and periodically review a written plan to safeguard patients at the time of an internal disaster, particularly fire and shall assure that all key personnel rehearse fire drills at least two times a year; and

adopt and periodically review a written plan for the care, reception and evacuation of mass casualties and shall assure that such plan is coordinated with the inpatient and outpatient services of the Hospital, that it adequately reflects developments in the Hospital community and the anticipated role of the Hospital in the event of disasters in nearby communities and that the plan is rehearsed by key personnel at least twice yearly.

- (3) Long-term Planning: The Committee shall be responsible in conjunction with members of the Medical Staff, the College of Medicine and Hospital Administration for the annual development and up-dating of one, two and five year plans for the University Hospital. They will communicate these plans to the Clinical Board and through regular administrative channels to the Board of Trustees and work with the two bodies to assure their acquisition and implementation.

c. Meetings:

The Joint Conference Committee shall meet quarterly and shall transmit written reports to the Clinical Board of its activities thru regular administrative channels to the Board of Trustees.

SECTION 3. Utilization Review Committee

a. Composition:

The Utilization Review Committee shall consist of a Chairman and one representative from each of the departments. Ex-officio members of the Committee shall include the Hospital Director or his representative, the Chairman of the Medical Audit Committee, the Nurse Coordinator for PSRO Utilization Review, Director of the Emergency Room, the Director of Medical Records, the Chief Resident of Medicine, the Chief Resident of Surgery and a Medical Records Administrator who shall serve as Secretary for the Committee. The Utilization Review Committee may utilize consultants from the department or from the Hospital as needed.

b. Duties:

- (1) Utilization Review Studies. The Utilization Review Committee shall conduct utilization review studies designed to evaluate the appropriateness of admissions to the Hospital, lengths of stay, discharge practices, use of medical and hospital resources and all related factors which may contribute to the effective utilization of Hospital and physician or dentist services. Specifically, it shall analyze how under-utilization and over-utilization of each of the Hospital's services affects the quality of patient care provided in the Hospital, shall study patterns of care and obtain criteria relating to average or normal (usual) lengths of stay by specific disease categories and shall evaluate systems of utilization review employing such criteria. It shall also be interested in and work toward proper continuity of care upon discharge. The Committee shall communicate the results of its studies and other pertinent data to the Clinical Board through the Associate Dean for Clinical Affairs and shall make recommendations for the optimum utilization of Hospital resources and facilities commensurate with quality of patient care and safety.
- (2) Written Utilization Review Plan. It shall also formulate a written utilization review plan for the Hospital. Such plan, as approved by the Clinical Board, must be in effect at all times and must include all of the following elements:
 - (a) the organization and composition of committee(s) which will be responsible for the utilization review function;
 - (b) frequency of meetings;
 - (c) the types of records to be kept;
 - (d) the method to be used in selecting cases on a sample or other basis;
 - (e) the definition of what constitutes the period of extended duration;
 - (f) the relationship of the utilization review plan to claims administered by a third party;
 - (g) arrangements for committee reports and their dissemination;
 - (h) responsibilities of the Hospital's Administrative Staff in support of utilization review.
- (3) Professional Services Review Plan. It shall be formulated in accordance with Federal and Kentucky Peer Review Organization Guidelines for Delegate Hospitals. Admission, concurrent and quality care reviews shall be carried on under these Guidelines.
- (4) Extended Duration Evaluation. At regular intervals the Committee shall evaluate the medical necessity of continued Hospital services for particular patients not involved in the ongoing federally mandated review. This review shall be carried out in a manner entirely similar to that dictated by the Professional Service Review Plan. Periodic retrospective review of particular extended stay patients will also be carried out.

- (5) Hospital Bed Utilization. On a yearly basis, the Committee shall evaluate the utilization of beds in relation to patient need, service bed assignment and the teaching requirement of the Medical Center. The Committee shall make periodic recommendations of assignment and utilization of beds to the Associate Dean for Clinical Affairs and the Clinical Board.

SECTION 4. Medical Records and Audit Committee

a. Responsibility:

The Audit Committee shall be responsible to the Clinical Board and Associate Dean for Clinical Affairs and shall see that there is an effectively functioning system for auditing the quality of care given in the University Hospital.

b. Duties:

The Committee shall be responsible for assuring that all medical records meet the highest standards of patient care usefulness and of historical validity. The Medical Staff representatives shall be specifically responsible for assuring that the medical records reflect realistic documentation of medical events. The Committee shall conduct a monthly review of currently maintained medical records to assure that they properly describe the condition and progress of the patient, the therapy provided, the results thereof, and the identification of responsibility for all actions taken, and that they are sufficiently complete at all times so as to meet the criterion of medical comprehension of the case in the event of transfer of physician or dentist responsibility for patient care. It shall also conduct a review of records of discharged patients to determine the promptness, pertinence, adequacy and completeness thereof.

c. Membership:

The Committee on Medical Record and Auditing shall consist of a Chairman and one member from each clinical service with admitting privileges, the Hospital Director or his representative and the Director of the Medical Record Department; a representative of Nursing Service shall serve ex-officio. The Medical Record Administrator shall serve as Secretary for the Committee. Other members may be invited to participate as the Committee desires.

d. Function:

- (1) Meetings: The Committee shall meet at least ten times a year. Minutes of the meetings shall be transmitted to the Clinical Board, the Associate Dean for Clinical Affairs, the Hospital Director and also those persons responsible for taking corrective action recommended by the Committee. When appropriate, copies may be sent to the Nursing Service, Laboratory and other bodies.
- (2) Auditing quality of care in the Hospital is too large a task for this single committee. Therefore, each department shall be responsible for conducting its own audit. It is the responsibility of the committee member representing each department to see that regular and appropriate audits are conducted in his department. These peer review audits shall each contain the following elements:
 - (a) criteria development
 - (b) description of the actual practice level
 - (c) evaluation of the comparison of a & b
 - (d) planned corrective action
 - (e) reassessment after a suitable period

- (3) The Audit Committee shall receive all audit reports from each of the departments and shall analyze these reports. After completion of such review, the Committee shall report its judgment to the Clinical Board in cases where departmental audits are not considered adequate.
- (4) The Audit Committee itself shall be responsible for conducting audits (according to the same five-step process) for those aspects of care which cut across departmental lines.
- (5) Once a year the Audit Committee shall prepare a formal report showing the criteria for care developed by all departments and committees, the reports of all audits performed during that time period, its own analysis of the level of care given in the institution during the previous twelve months and any suggestions it has for improvement.

e. Review:

- (1) This Committee will serve as a review board for appeals based on decisions made by the various departmental audit committees.
- (2) In turn, appeals from decisions of the Audit Committee shall be brought before the Clinical Board.

SECTION 5: Pharmacy and Therapeutics Committee

a. Composition:

Membership shall consist of a chairman and at least four representatives of the Medical Staff. Ex-officio members shall include representatives of the College of Pharmacy, a Hospital pharmacist, a member of the house staff, and a representative from Hospital Administration and from Nursing Service. The Hospital pharmacist shall act as Secretary for the Committee.

b. Duties:

This Committee shall be responsible for the development and surveillance of all drug utilization policies and practices within the hospital in order to assure optimum clinical results and minimum potential for hazard. The Committee shall assist in the formulation of broad professional policies regarding the evaluation, appraisal, selection, procurement, storage, distribution, use, safety procedures and all other matters relating to drugs in the Hospital. It shall also perform the following specific functions:

- serve as an advisory group to the Hospital Medical Staff and the pharmacists on matters pertaining to the choice of available drugs;
- make recommendations concerning drugs to be stocked on the nursing floors and by other services;
- develop and review periodically a formulary or drug list for use in the Hospital;
- prevent unnecessary duplication in stocking drugs and drugs in combination having identical amounts of the same therapeutic ingredients;
- evaluate clinical data concerning new drugs or preparations requested for use in the Hospital;
- to act on recommendations from the department chairmen as to the addition or deletion of drugs from the formulary; any recommendation from a member of the staff concerning new drug additions or deletions must be forwarded through his department chairman;
- establish standards concerning the use and control of investigational drugs and of research in the use of recognized drugs;
- maintain liaison with the Medical Center Human Investigation Subcommittee.

c. Meetings:

This Committee should meet at least quarterly and send quarterly reports to the Associate Dean and Clinical Board regarding its activities.

SECTION 6: Infection Control Committee

a. Composition:

This Committee shall consist of a chairman, the Hospital epidemiologist and at least three representatives from the clinical departments including Pathology. At least one representative from Nursing Service and from Hospital Administration shall serve as ex-officio members.

b. Duties:

The Infection Control Committee shall be responsible for the surveillance of Hospital infection potentials, the review and analysis of actual infections, the promotion of a preventative and corrective program designed to minimize infection hazards and the supervision of infection control in all phases of the Hospital's activities including:

- operating rooms, delivery rooms, recovery rooms, special care units;
- sterilization procedures by heat; chemicals or otherwise;
- isolation procedures;
- prevention of cross-infection by anesthesia apparatus or inhalation therapy equipment;
- testing of hospital personnel for carrier status;
- disposal of infectious material;
- other situations as requested by the Clinical Board.

c. Meetings:

This Committee shall meet at least ten times a year, shall maintain a record of its proceedings and activities and shall report quarterly to the Associate Dean for Clinical Affairs and Clinical Board.

SECTION 7: House Staff Committee

a. Composition:

This Committee shall consist of at least five members of the Medical Staff who supervise resident training programs.

b. Duties:

The Committee shall act as an advisory committee to the Associate Dean for Clinical Affairs and Clinical Board in the selection of house staff, to assume responsibility for the organization, supervision and evaluation of the plan of instruction of house staff and to assist the Associate Dean and Hospital Administration in matters of house staff government and discipline.

c. Meetings:

The Committee shall meet at least quarterly, shall be chaired by the Associate Dean and shall report to the Clinical Board.

SECTION 8: Laboratory Advisory and Transfusion Committee

a. Composition:

This Committee shall consist of the Director of the Clinical Laboratories, who shall act as Chairman and representatives of the Departments of Anesthesiology, OB/GYN, Medicine, Pediatrics, Surgery and other departments that are major users of the Blood Bank and Laboratory. The representative of Hospital Administration in charge of the Clinical Laboratories shall serve ex-officio on the Committee.

b. Duties:

This Committee shall concern itself with the adequacy, quality and safety of the supply of blood and blood components used in the Hospital. It shall maintain continuing review of the records of transfusions and make recommendations to the Clinical Board concerning policy in such practices. The Committee shall require the preparation of records of blood disease and general use of blood and blood products. Review and advise on all problems of relationship between Central Clinical Laboratories and Clinical Services. It shall advise on the scope of services to be provided, especially new procedures, which should be incorporated into the laboratory services and those which should be discontinued.

c. Meetings:

The Committee shall meet at least quarterly.

SECTION 9: Standardization and Equipment Committee

a. Composition:

This Committee shall consist of a chairman and no fewer than five members of the active Medical Staff. The Director of Pharmacy Central Supply, a representative of the Nursing Service and two representatives of the house staff shall be ex-officio members of this Committee.

b. Duties:

- (1) to make recommendation regarding the purchase of medical equipment and supplies that best serve the needs of patients and Medical Staff within reasonable fiscal limits;
- (2) to make recommendations concerning the standardization of equipment and supplies to best serve the needs of the Medical Staff where standardization is feasible and financially sound.

This Committee shall report its recommendations to the Associate Dean for Clinical Affairs and Clinical Board and to the Hospital Director.

c. Meetings:

This Committee shall meet at least quarterly or more often as needed.

SECTION 10: Ambulant Services Committee

a. Composition:

In addition to physician or dentist membership from each of the services running any outpatient programs, the Medical Director of the Emergency Room, the Hospital Director

or his designee and Nursing Service shall be represented. This Committee shall be chaired by a member of the University medical faculty appointed by the Associate Dean for Clinical Affairs.

b. Function and Responsibilities:

The Ambulant Services Committee shall:

- coordinate the activities of the outpatient clinics and the emergency room;
- assure the availability of ancillary Medical Center services to ambulant patients as indicated;
- maintain close contact with the Medical Record Department concerning ambulant services;
- assist the clinical services in the development of new or expanded ambulant services;
- study problems which arise in ambulant care and make appropriate recommendations.

c. Meetings:

The Committee shall meet at least ten times a year and report to the Associate Dean for Clinical Affairs and the Clinical Board.

SECTION 11: Sterilization and Therapeutic Abortions Committee

a. Composition:

The Committee shall consist of the Chairman of the Department of Obstetrics and Gynecology who shall chair the Committee and the Chairman of the Department of Urology plus one active staff obstetrician-gynecologist and one acting staff urologist.

b. Duties:

It shall be the duty of this Committee to recommend appropriate rules and regulations concerning sterilization and abortion to the Associate Dean and Clinical Board.

SECTION 12: Tissue Committee

a. Composition:

In addition to other physicians or dentists on the Committee, at least one member shall be appointed from the Department of Pathology. The Hospital Director or his designee shall be represented.

b. Duties and Responsibilities:

- (1) assure that all tissue removed at a surgical procedure is sent to the Pathology Laboratory and that a report is submitted;
- (2) study periodically agreement or disagreement among preoperative, postoperative and pathologic diagnosis for the purpose of determining the justification for surgical procedures undertaken in University Hospital, including those procedures where no tissue was removed.

c. Meetings:

The Committee shall meet at least quarterly and shall report to the Associate Dean for Clinical Affairs and the Clinical Board.

SECTION 13: Hospital Safety Committee

a. Composition:

In addition to the physician or dentist membership, this Committee shall include administrative and staff personnel in its membership to provide expertise needed in specific areas.

Within the Committee, the following positions of specific responsibility shall be created and shall report to the Committee:

- Safety Officer
- Disaster Officer
- Fire Marshall
- Radiation Safety Officer

b. Duties and Responsibilities:

- (1) survey safety hazards and recommend safety policies and practices to be followed in University Hospital;
- (2) conduct periodic inspections of University Hospital; report to the offenders and appropriate administrative officials such violations as may be found; make appropriate recommendations for correction;
- (3) review monthly all accident reports, including study of the circumstances attendant upon accidents under review and of the resulting injuries; recommended action or policies, as appropriate, for the prevention of similar accidents and injuries;
- (4) develop an appropriate system for classifying accident reports in order that accident trends can be analyzed for guidance in developing an accident prevention program;
- (5) provide mechanisms to monitor radiation safety and patient medication safety;
- (6) assure compliance of University Hospital to Standards of Hospital Safety of the Joint Commission's "Standards for Accreditation of Hospitals" except those relating to control of infections.

c. Meetings:

The Committee shall meet at least quarterly and shall report to the Hospital Director, the Associate Dean for Clinical Affairs and the Clinical Board.

SECTION 14: Operating Room Committee

a. Composition:

The Operating Room Committee shall consist of a Chairman and one representative from General Surgery, Anesthesiology, Obstetrics/Gynecology, the surgical sub-specialties, Ophthalmology and Dentistry. The Nursing supervisor of the Operating Room and the representative of Hospital Administration in charge of the OR are ex-officio members.

b. Duties:

This Committee shall make recommendations concerning proper utilization of the operating rooms and recommend rules and regulations for the operating room areas to the Associate Dean for Clinical Affairs and the Clinical Board. The Committee shall supervise the proper utilization of the operating room and enforce adopted rules and regulations.

c. Meetings:

The Committee shall meet at least quarterly.

SECTION 15: Committees for Special Services and/or Functions

As Hospital interests and services expand, the Medical Staff shall develop appropriate committees to direct or monitor and review and analyze these services on a regular basis. These may include, but are not limited to, committees for the following:

a. Patient Care Procedures:

Patient special or intensive care procedures committee(s) shall be responsible for the formulation, evaluation and improvement of all Hospital patient special or intensive care procedures.

b. Medical Center Affairs:

This Committee would address the cooperation and collaborative teaching research and care programs that are present and may be developed between the various colleges of the Medical Center.

c. Medical Staff Bylaws:

The Bylaws Committee shall be responsible for making recommendations relating to revisions to and updating of the Bylaws and Rules and Regulations of the Medical Staff.

ARTICLE XI :
MEDICAL STAFF MEETINGS

SECTION 1. Regular Meetings

- a. An annual staff meeting shall be held the third Wednesday (or other suitable date) in June. The agenda of such meetings shall include reports of review and evaluation of the work done in the clinical departments and the performance of the required Medical Staff functions by the Associate Dean for Clinical Affairs. The Dean of the Medical College shall provide a review of the Medical Center and College of Medicine plans and activities. The Hospital Director shall review the Hospital fiscal and program performance for the year and plans and program for the coming year. Complex reviews and reports shall be provided in writing prior to the meeting and only briefly reviewed at the meetings. Appropriate new and old business shall be transacted.
- b. Three other regular meetings shall be held each year on an approximate quarterly basis. These meetings shall consist of brief reports by the Dean, the Hospital Director and the Associate Dean for Clinical Affairs; necessary business of the staff and a scientific presentation of general interest to the staff by one of the clinical departments.

SECTION 2. Special Meetings

- a. The Dean or Associate Dean for Clinical Affairs may call a special meeting of the Medical Staff at any time. The Dean or Associate Dean shall call a special meeting within thirty days after receipt by him of a written request for same, signed by not less than one-fourth of the active staff and stating the purpose of such meeting. The Associate Dean shall designate the time and place of any special meeting.

- b. Written or printed notice stating the purpose, the place, day and hour of any special meeting of the active Medical Staff shall be delivered, either personally or by mail, to each member of the active staff not less than seven nor more than thirty days before the date of such meeting, by or at the direction of the Associate Dean for Clinical Affairs (or other persons authorized to call the meeting).

SECTION 3. Quorum

The presence of fifty percent of the total membership of the active Medical Staff at any regular or special meeting shall constitute a quorum for purposes of amendment of these Bylaws and Rules and Regulations and the presence of twenty percent of such membership, a quorum, for all other actions. If an appropriate quorum is not present, the Clinical Board shall, at its next meeting, act for the staff on all issues requiring vote.

SECTION 4. Attendance Requirements

Each member of the active and associate Medical Staffs shall be required to attend no less than 50% of the regular meetings of the Medical Staff. A member who is compelled to be absent from any regular staff meeting shall promptly submit to the Associate Dean for Clinical Affairs in writing, his reason for such absence. Unless excused for cause by the Associate Dean, the failure to meet the foregoing annual attendance requirements shall be grounds for corrective action possibly leading to revocation of Medical Staff membership. Reinstatement of staff members whose membership has been revoked because of absence from staff meetings shall be made only upon application and all such applications shall be processed in the same manner as applications for original appointment.

SECTION 5. Parliamentary Authority

All meetings of the Medical Staff shall be conducted according to Robert's Rules of Order, Revised, except in cases where such rules are inconsistent with these Bylaws.

ARTICLE XII : COMMITTEE AND DEPARTMENT MEETINGS

SECTION 1. Regular Meetings

Committees may, by resolution, provide the time for holding regular meetings without notice other than such resolution. Departments shall hold regular meetings at least ten times a year to review and evaluate the clinical work of practitioners with privileges in the department. Reports of all committee and departmental meetings shall be forwarded to the Associate Dean for Clinical Affairs within fifteen days of the meeting.

SECTION 2. Special Meetings

A special meeting of any committee or department may be called by or at the request of the Chairman; by the Associate Dean for Clinical Affairs; or by one-third of the group's then members, but not fewer than two members.

SECTION 3. Notice of Meetings

Written or oral notice stating the place, day and hour of any special meeting or of any regular meeting not held pursuant to resolution shall be given to each member of the committee or department not less than five days before the time of such meeting, by the person(s) calling the meeting.

SECTION 4. Quorum

Thirty percent of the active Medical Staff members of a committee or department, but not fewer than two members, shall constitute a quorum at any meeting.

SECTION 5. Manner of Action

The action of a majority of the members present at a meeting at which a quorum is present shall be the action of a committee or department. Action may be taken without a meeting by unanimous consent in writing (setting forth the action so taken) signed by each member entitled to vote thereat.

SECTION 6. Rights of Ex-Officio Members

Persons serving under these Bylaws as ex-officio members of a committee shall have all rights and privileges of regular members except they shall not be counted in determining the existence of a quorum and they shall not be entitled to a vote.

SECTION 7. Minutes

Minutes of each regular and special meeting of a committee or department shall be prepared and shall include a record of the attendance of members and the vote taken on each matter. The minutes shall be signed by the presiding officer and copies thereof shall be promptly submitted to the attendees for approval and after such approval is obtained, forwarded to the Associate Dean. Medical Staff Committee Minutes shall also be forwarded to the Clinical Board and Hospital Director for appropriate review and action. Each committee and department shall maintain a permanent file of the minutes of each meeting.

SECTION 8. Clinico-Pathological Conferences

At least six clinico-pathological conferences with the cooperation of the Hospital pathologists must be held each year by each appropriate department and may be a part of the regular departmental meeting.

SECTION 9. Attendance Requirements

- a. Each member of the active or associate Medical Staff who is a full-time or part-time University of Kentucky faculty member shall be required to attend not less than fifty percent of all meetings of each department and committee of which he may be a member in each year. Any member of the active or associate Medical Staff who is compelled to be absent from a meeting of a department or committee of which he is a member shall submit to the regular chairman thereof, in writing, the reason for such absence. The failure to meet the foregoing annual attendance requirements, unless excused by such chairman for good cause shown, shall be grounds for corrective action leading to removal from such department or committee and to revocation of Medical Staff membership in the same manner and to the same effect as provided in Article VI, Section 2 of these Bylaws. Committee and department chairmen shall report all such failures to attend to the Associate Dean for Clinical Affairs.
- b. The honorary Medical Staff, the Research and Education Staff and Consulting Staff shall not be required to attend meetings. The Dental Staff shall be required to attend meetings. The Dental Staff shall be required to fulfill the attendance obligation of whatever staff category to which they are assigned. The house staff shall not be required to attend meetings except as specified for specific committees and specific house staff members, in these Bylaws.

ARTICLE XIII: IMMUNITY FROM LIABILITY

The following shall be express conditions to any practitioner's application for, or exercise of, clinical privileges at this Hospital:

First, that any act, communication, report, recommendation, or disclosure, with respect to any such practitioner, performed or made in good faith and without malice and at the request of an authorized representative of this or any other health care facility, for the purpose of achieving and maintaining quality patient care in this or any other health care facility, shall be privileged to the fullest extent permitted by law.

Second, that such privilege shall extend to members of the Hospital's Medical Staff and of its governing body, its other practitioners, its executive officers and representatives and to third parties, who supply information to any of the foregoing authorized to receive, release, or act upon the same. For the purpose of this Article XIII, the term "Third Parties" means both individuals and organizations from whom information has been requested by an authorized representative of the governing body or of the Medical Staff.

Third, that there shall, to the fullest extent permitted by law, be absolute immunity from civil liability arising from any such act, communication, report, recommendation, or disclosure, even where the information involved would otherwise be deemed privileged.

Fourth, that such immunity shall apply to all acts, communications, reports, recommendations, or disclosures performed or made in connection with this or any other health care institution's activities related, but not limited to:

- applications for appointment or clinical privileges,
- periodic reappraisals for reappointment or clinical privileges,
- corrective action, including summary suspension,
- hearings and appellate reviews,
- medical care evaluations,
- utilization and PSRO reviews,
- other Hospital, departmental, service or committee activities related to quality patient care and inter-professional conduct.

Fifth, that the acts, communications, reports, recommendations and disclosures referred to in this Article XIII may relate to a practitioner's professional qualifications, clinical competency, character, mental or emotional stability, physical condition, ethics, or any other matter that might directly or indirectly have an effect on patient care.

Sixth, that in furtherance of the foregoing, each practitioner shall upon request of the Hospital execute releases in accordance with the tenor and import of this Article XIII in favor of the individuals and organizations specified in paragraph "second", subject to the requirements, of good faith and absence of malice.

Seventh, that the consents, authorizations, releases, rights, privileges and immunities provided by Article IV, Section 1a of these Bylaws for the protection of this Hospital's practitioners, other appropriate Hospital officials and personnel and third parties, in connection with applications for initial appointment, shall also be fully applicable to the activities and procedures covered by this Article XIII.

ARTICLE XIV: RULES AND REGULATIONS

The Medical Staff shall adopt such rules and regulations as may be necessary to implement more specifically the general principles found within these Bylaws, subject to the approval of the Board of Trustees. These shall relate to the proper conduct of Medical Staff organizational activities as well as embody the level of practice that is to be required of each practitioner in the Hospital. Such rules and regulations shall be a part of these Bylaws, except that they may be amended or repealed at any regular meeting of the Clinical Board at which a quorum is present and without previous notice or at any special meeting on notice by a two-thirds vote of those present of the active Medical Staff. Such changes shall become effective when approved by the Board of Trustees.

ARTICLE XV : AMENDMENTS

These Bylaws may be amended after submission of the proposed amendment at any regular or special meeting of the Clinical Board. A proposed amendment shall be referred to a special committee which shall report on it at the next regular meeting of the Clinical Board or at a special meeting called for such purpose. To be adopted, an amendment shall require a two-thirds vote of total Clinical Board members. Amendments so made shall be effective when approved by the Board of Trustees.

ARTICLE XVI : ADOPTION

These Bylaws together with the appended Rules and Regulations, shall be adopted at any regular or special meeting of the Clinical Board, shall replace any previous Bylaws and Rules and Regulations and shall become effective when approved by the Board of Trustees of the Hospital.

Adopted by the Hospital Clinical Board
on

_____, 1977

Dean

Vice President

President

Approved by the Joint Conference
Committee _____

Approved by the Board of Trustee's
_____, 1977

Chairman of the Board of Trustees
University of Kentucky

PART II
MEDICAL STAFF RULES AND REGULATIONS

A. ADMISSION, TRANSFER, AND DISCHARGE OF PATIENTS

1. Admission for Inpatient Care: It will be the general rule that patients are admitted to University Hospital by members of the active Medical Staff upon referral by a licensed physician or dentist. Voluntary or public agencies may refer patients not having a personal physician or dentist through physicians or dentists who are on the staff of the agency. Patients will be returned to the referring doctors for continuing care. To assure availability of beds, it will be necessary for referring doctors to make advance arrangements for hospitalization.

- a. Relation with Admitting Department:

Each clinical service will appoint an Admitting Physician or Dentist to screen referrals, directly or indirectly, for appropriateness. When patients are accepted for admission, it is the responsibility of the Admitting Physician, Dentist or Resident to notify the Admitting Department of the patient's date and time of arrival. This should be done as far in advance of admission as possible to assure smooth functioning and efficient utilization of the Hospital. Patient referrals will be evaluated on the basis of the need of the patient for the special abilities of the faculty or resources of the Medical Center and their fulfillment of the teaching and research responsibilities of the Medical Center.

- b. Obstetrical Admissions:

Obstetrical patients are eligible to be admitted to University Hospital for delivery if they have been previously enrolled in the Outpatient Prenatal Program or if they are to be attended by members of the voluntary faculty. Complicated deliveries may be referred in accordance with regular procedures.

Outpatients requiring admission for inpatient care will be scheduled in the same manner as patients referred for inpatient care or admitted directly to the inpatient floor following notification of the Admitting Office.

2. Admission for Outpatient Care:

- a. With Appointment:

Patients will be seen in the Outpatient Department by appointment upon the referral by a licensed physician, dentist or by request of the patient. Voluntary or public agencies may refer patients without physician's or dentist's involvement or under the same conditions applicable to the referral of patients for inpatient care. Advance arrangements are desirable to assure availability of appointments.

- b. Without Appointment:

Patients appearing for outpatient care without an appointment will be managed as follows:

1. Patients who are currently registered for outpatient care or who have previously registered for outpatient care will be seen as "walk-in" patients insofar as schedules permit.

2. Unscheduled patients with acute problems should be scheduled either on the day the patient presents himself/herself or as soon as possible. If a patient's condition is acute and arrangements cannot be made to see the patient in the clinic, the patient may be referred to the Emergency Room for care. However, once the clinic agrees to see the patient, he/she should be followed through in the clinic and not referred to the Emergency Room during the course of the visit.
 3. If clinic schedules cannot accommodate patients with non-acute problems on a "walk-in" basis, unscheduled patients will be given an appointment for care on a subsequent date or be advised to seek care elsewhere.
3. Admission for Emergency Care:

Any patient presenting himself/herself to University Hospital for emergency care will be eligible to receive such care with the following regulations applicable to those requiring admission for inpatient care.

 - a. Referred Emergency Patients:

Emergency patients referred by a physician or dentist, with prior consultation and approval of the appropriate service, will be admitted for inpatient care by that service.
 - b. Non-Referred Emergency Patients:

Emergency patients who are not referred under the conditions stated above will be admitted for inpatient care, subject to the availability of a bed on the particular service. If the service involved is operating at a maximum capacity, a full-time faculty member or resident designated by the service will assure appropriate disposition of the patient by borrowing a bed from another service, returning the patient to his referring physician or dentist and medical facility of origin, or arranging for the transfer of the patient to another Lexington hospital after an attending physician or dentist is identified.
 - c. Emergency Admission Justification:

Physicians or dentists admitting a patient on an emergency basis shall be prepared to justify to the Utilization Review Committee that the admission was a bona fide emergency. The history and physical examination must clearly justify the patient's admission on an emergency basis and findings must be recorded on the patient's medical record as soon as possible after admission.
 - d. Out-of-State Admissions:

A patient from out of state is eligible for admission to University Hospital by referral of his physician or dentist or, in case of emergency, through the Emergency Room. Such patients, however, are not eligible for allowance customarily provided to certain Kentucky residents.
4. Attending Physician - Attending Dentist:

Each patient admitted to University Hospital for inpatient services must be attended by a physician or dentist who is a member of the active or associate Medical Staff and who assumes responsibility for the patient's overall medical care.

The attending physician or dentist shall ensure the prompt completeness and accuracy of the patient's medical record. It is the responsibility of each attending physician or dentist to make entries in the patient's medical record sufficient to indicate his approval of the treatment to be rendered.

5. Admission Diagnosis:

Except in an emergency, no patient shall be admitted to the Hospital until a provisional diagnosis or valid reason for admission has been stated. In the case of an emergency, the provisional diagnosis shall be stated as soon as possible, but within 24 hours after admission.

6. Admission Classification:

The seriousness of a patient's condition will determine whether he is admitted to a bed on the appropriate clinical service. The date and time of admission for any patient will be coordinated through consultation with the Admitting Department. The following order of admission priority has been developed:

- a. Emergency - Patient will be admitted immediately subject to availability of an appropriate bed in the Hospital.
- b. Urgent Arrangements Made for Transfer from Another Physician or Dentist - Patient must be admitted as soon as possible.
- c. Elective - Patient admitted when advance arrangements and bed availability permit. It is recognized that the staff and Hospital have obligations to patients who have scheduled admissions. Only real emergencies should delay a scheduled admission.

7. Admissions To or Discharge From Intensive and Cardiac Care Units:

If any question as to the validity of admission to or discharge from an intensive care or cardiac care unit should arise, that decision is to be made through consultation with the respective Special Care Unit designated representative or the Associate Dean for Clinical Affairs.

8. Responsibility of Admitting Attending Physician or Dentist:

The admitting attending physician or dentist shall be held responsible for giving such information as may be necessary to assure the protection of the patient from self harm and to assure the protection of others whenever his patients might be a source of danger from any cause whatever.

9. Admission of Suicidal Patients:

For the protection of patients, the Medical Staff, and employees of the Hospital, certain principles are to be met in the care of the potentially suicidal patient:

- a. Any patient known or suspected to be suicidal in intent and who is to be admitted, will ordinarily be admitted to the Psychiatric Unit of the Hospital. If the patient's physical condition warrants, the patient may be admitted to another unit of the Hospital and a psychiatric consultation requested. If no accommodations are available on the Psychiatric Unit, the patient may be transferred to another institution where suitable facilities are available. When transfer is not possible, the patient may be admitted to a general area of the Hospital where special precautionary measures will be taken.

- b. Any patient known or suspected to be suicidal must have consultation by a member of the Psychiatry Staff.

10. Patient Transfers:

a. Between Services:

When a patient is to be transferred between major clinical services (e.g., Medicine, Surgery, etc.) or between major divisions of a service (e.g., Orthopedics, Urology), the patient's attending physician or dentist (or his house staff designee) and the appropriate accepting attending physician or dentist of the service to which the patient is being transferred must mutually agree upon the written order of the physician or dentist requesting the transfer. Notification of such transfer will be made to the Admitting Office.

b. Between Physicians or Dentists:

When two attending physicians or dentists within a service agree to transfer a patient from one to the other, the physician or dentist from whom the patient is being transferred is responsible for writing a transfer order. The physician or dentist who is accepting responsibility for the patient will so indicate in the Progress Notes. In the case of a transfer between two attending physicians or dentists within a service, the absence of a written order will result in the original physician or dentist remaining the responsible physician or dentist of record for legal purposes, for purposes of completing the record, for purposes of setting professional fees, etc. Notification of such transfer will be made to the Admitting Office. When scheduled changes in attendings are made for reason of illness, absence from the city or teaching purposes, notes and notification of these changes are required as above.

11. Patient Discharge:

- a. When the attending physician or dentist (or physician or dentist acting on his behalf) determines an inpatient no longer needs hospital lodging and care on a continuous daily basis, a written discharge order with appropriate instructions will be entered in the patient's medical record. When any of the following conditions exist, the attending physician or dentist (or physician or dentist acting on his behalf) will also issue the patient discharge order with appropriate instructions:

- (1) The patient did not return to the Hospital from an authorized leave of absence at the time specified. Unless specific information is available with respect to the patient's delay in returning, a discharge order should be entered into the patient's medical chart within five hours, and in no event later than the date the patient was due to return.
- (2) The patient left the Hospital without a physician's or dentist's authorization and failed to return. Discharge order should be written within two hours except where circumstances indicate that the patient had left the Hospital unauthorized and, therefore, is being discharged "Against Medical Advice."
- (3) Patient leaves the Hospital against medical advice. Discharge order should be written immediately, regardless of whether or not the patient or his responsible agent signed the release form. Writing the discharge order does not in any way relieve the physician or dentist of his responsibility to take all reasonable steps to dissuade the patient from leaving against medical advice or to take any subsequent reasonable steps which he believes to be in the patient's best interests.

- b. To the extent possible, the attending physician or dentist should schedule patients for discharge the day prior to the dismissal date so relatives or friends can be notified and transportation arranged. Discharge orders need to be recorded in the patient's medical record prior to 8:30 p.m. the night before discharge. Discharges normally will be processed between the hours of 9:00 a.m. and 11:00 a.m., but patients shall be allowed until 12:00 noon to check out. Patients awaiting special diagnostic reports on work done the preceding day shall be discharged by 2:00 p.m.

B. DEATHS:

1. Guidelines for Determining the Diagnosis of Death - UKMC:

a. In Ordinary Circumstances (Organ Transplantation not Contemplated)

The traditional signs of death are unresponsiveness, absence of pulse and heart beat, absence of spontaneous respiratory movement, and all other movement, absence of all reflexes including fixed, dilated pupils.

b. In Potential Organ Donors

- (1) The determination of death in organ donors shall be made by no fewer than two physicians who are not involved in determining the suitability of the donor and who are not members of the surgical team performing the transplant.
- (2) The time of death shall be determined by the physician(s) who attend(s) the donor at death and, if none, the physician who certifies the death.
- (3) The presumptive cause of death should be determined and if the decision involves irreversible coma or cerebral death, the fact of death should be ascertained by scientific evidence which in the opinion of the physicians making the determination is current, acceptable and adequate.
- (4) Acceptable scientific evidence forming the criteria for determination of cerebral death in the presence of heart beat and relatively normal blood pressure, whether or not artificial means are used to maintain the circulation of oxygenated blood, shall include:
 - a. Unconsciousness and total unresponsivity to stimuli which are normally intensely painful.
 - b. Absence of spontaneous movements for an observation period of at least one hour.
 - c. Absence of reflexes which involve cranial nerves. The pupils must have dilated and be nonreactive.
 - d. A completely flat (iso-electric) electroencephalogram done under the supervision of a recognized electroencephalographer, provided that severe hypothermia is not present. The iso-electric quality should be determined by the absence of activity of greater than two or three microvolts in all leads with maximum gains.
 - e. Absence of spontaneous breathing. If artificially ventilated, absence of respiratory effort when the artificial ventilation is discontinued for a trial period of three minutes. (Due care should be taken to insure that the patient, if on a mechanical respirator has not been over-oxygenated or unduly hyperventilated so as to reduce the $p\text{CO}_2$ below normal during the 10 minutes preceding the trial.)

- f. All of the five conditions described earlier in this guideline must persist unchanged for at least 24 hours. In cases of brain injury where there is such gross anatomical damage visible on physical examination or craniotomy as to indicate that the brain is irreparably damaged, extruded, divided or destroyed, the period of observation for the persistence of the conditions described in a, b, c, d, and e may be reduced to one hour.
- g. There shall be a demonstration of absence of barbiturates, sedative drugs, and central nervous system depressants of clinically significant levels in the patient's serum.

(5) In all cases in which artificial ventilation is employed, the pronouncement of death, based on the foregoing criteria, shall be made before artificial ventilation is permanently discontinued.

2. Pronouncing a Patient's Death:

Upon suspicion of death, the observing nurse will ask the physician closest at hand to see the patient. If death is confirmed and the physician is from another service, the nurse will immediately notify the service physician involved, giving the name of the physician who confirmed the death. The physician pronouncing the patient dead shall indicate such pronouncement and the time of death in the patient's medical record. The formal death note shall be written and signed by the physician pronouncing or confirming death from the service involved before the body will be released from the Hospital.

3. Notification of Next-of-Kin:

Responsibility for providing immediate notices of death to the immediate next-of-kin rests with the attending physician or dentist or his physician designee.

4. Request for Autopsy:

The duty of all staff members or his physician designee shall be to secure an autopsy whenever possible. An autopsy may be performed only with a written consent, signed in accordance with state law. All autopsies shall be performed by the Department of Pathology. Provisional anatomic diagnoses shall be recorded on the medical record within 48 hours and the complete protocol should be made a part of the record within three months of the autopsy.

5. Donation of Organs:

Donation of organs may be accomplished only with a written consent signed and in accordance with state law. This written consent may be signed in the same manner as an autopsy consent or initiated by the deceased having previously completed an organ donation form or the consent on the Kentucky driver's license. The appropriate service to receive the donation must be notified by the staff member obtaining the autopsy consent.

6. Notification of Funeral Home:

The Admitting Office is responsible for coordinating with the funeral director relative to the time of body release.

C. MEDICAL RECORDS:

1. General Guidelines:

The attending physician or dentist shall be responsible for the preparation of a complete and legible medical record for each patient. Its contents shall be pertinent and current. This record shall include identification data, complaint; personal history, family history; history of present illness; physical examination; special reports such as consultations, clinical laboratory and radiology services and others; provisional diagnosis; medical or surgical treatment; operative report; pathological findings; progress notes; final diagnosis; condition on discharge; discharge summary; and autopsy report when performed.

a. History and Physical:

A complete admission history and physical examination shall be recorded within 24 hours after the admission of the patient. This report should include all pertinent findings resulting from an assessment of all systems of the body. When the history and physical examination are not recorded before an operation or any potentially hazardous diagnostic procedure, the procedure shall be cancelled, unless the attending practitioner states in writing that such delay would be detrimental to the patient. The attending physician or dentist shall countersign the history and physical examination when they have been recorded by a member of the house staff. This may be performed in an attending note within the first 48 hours after admission.

b. Progress Notes:

Pertinent progress notes shall be recorded at the time of observation, sufficient to permit continuity of care and transferability. Wherever possible, each of the patient's clinical problems should be clearly identified in the progress notes and correlated with specific orders as well as results of tests and treatment. Progress notes shall be written at least daily on critically ill patients and those where there is difficulty in diagnosis or management of the clinical problem. Progress notes on inpatients must be written at least three times a week to show significant changing conditions of the patient.

The attending practitioner is required to document the need for continued hospitalization identified by the Utilization Review Committee and PSRO plans of this Hospital, and approved by the Clinical Board. This documentation must contain:

- an adequate written record of the reason for continued hospitalization; a simple reconfirmation of the patient's diagnosis is not sufficient;
- the estimated period of time the patient will need to remain in the Hospital;
- plans for post-hospital care.

c. Operative Reports:

Operative reports shall include indications for surgery, a detailed account of the findings at surgery as well as the details of the surgical technique. Operative reports shall be dictated immediately following surgery for outpatients as well as inpatients and the report promptly signed by the surgeon and made a part of the patient's medical record.

d. Clinical Entries:

All clinical entries in the patient's medical record shall be accurately dated and signed by the responsible physician or dentist. All entries must be written in blue, blue-black or black ink or ball-point pen.

e. Corrections in Clinical Entries:

Corrections in clinical entries may be made only by crossing through as neatly as possible without obliteration of the error. Corrections must be labeled as such and signed by the responsible physician or dentist.

f. Abbreviations:

Abbreviations are not to be used in recording final diagnosis or operations. Abbreviations and symbols should be limited to those listed in the approved list of UKMC located on each inpatient floor and in the Medical Record Department.

g. Final Diagnosis:

Final diagnosis and operative procedures must conform to preferred terminology listed in the Standard Nomenclature of Diseases and Operations. The disease of first importance (primary diagnosis) should be named first. The final diagnosis shall be recorded, signed and dated by the responsible physician or dentist at the time of discharge of each patient.

h. Discharge Summary:

A discharge summary shall be dictated on the day of discharge on all patients hospitalized over 48 hours except for normal obstetrical deliveries; normal newborn infants; and certain selected patients with problems of a minor nature. These minor cases shall be identified by the Medical Record and Audit Committee and approved by the Hospital Clinical Board. On these minor cases, a final summation-typed progress note shall be sufficient. In all cases, the content of the medical record shall be sufficient to justify the diagnosis and warrant the treatment and end result.

i. Release of Medical Information:

Written consent of the patient is required for release of medical information to persons not otherwise authorized to receive this information. Any information released from the medical record should be handled through the Medical Record Department.

j. Removal of Medical Records:

The medical records are the property of the Hospital. Under no circumstances shall physicians or dentists remove the medical records from the Hospital's custody except in accordance with a court order, subpoena or statute.

k. Access to Medical Records:

Free access to all medical records of all patients shall be afforded to members of the Medical Staff for bona fide study and research consistent with preserving the confidentiality of personal information concerning the individual patient. All such projects shall be approved by the respective department chairman and, where appropriate, the approval of the Human Investigation Sub-committee before records can be studied.

2. Medical Record Deficiencies:

*A list of medical record deficiencies by physician or dentist and clinical services shall be sent to each department chairman, chief resident, individual physicians or dentists who exceed the deficiency limits, and Associate Dean for Clinical Affairs the second Wednesday of each month. A warning shall be issued by the Associate Dean for Clinical Affairs.

Deficient records or ANY incomplete records older than 30 days post discharge. This will constitute grounds for suspension.

For those deficiencies which have not been eliminated by the following Tuesday, a further deficiency report shall be submitted and suspension action shall be initiated by the Associate Dean for Clinical Affairs. If any staff member wishes to contest the suspension, he may show cause to the Associate Dean for Clinical Affairs by Wednesday, 12:00 noon, as to why he has been unable to complete the records.

The suspension will last until the deficiencies have been corrected. The resident staff member or active staff member will be placed on leave without pay for the duration of the suspension.

For resident staff, the time period of suspension will be added to the length of internship or residency. Lost time will be made up at the end of the regular period of internship or residency without pay; otherwise, the physician will lose credit for the entire year.

For active staff, three such suspensions of admitting privileges within any 12 month period may be sufficient cause for permanent suspension of the privileges of the Hospital for that practitioner. In such a case a deficiency report will be submitted by the Associate Dean for Clinical Affairs regarding the matter to the Hospital Clinical Board. Suspension of staff appointment will be considered by the Hospital Clinical Board for the delinquent faculty member.

3. Consultation:

An adequate consultation shall consist of an examination of the patient and his record and a written or typed report entered in the patient's medical record. Consultation may be performed by residents, fellows, or attending physicians and dentists. When an intern or medical student is involved in the consultation, the consulting attending will be indicated on the report.

a. Requested:

When consultation from another physician or dentist is desired, a request form should be fully completed with the necessary information and should make clear the questions being asked of the consultant. It should be initiated as early as possible in the course of the patient's hospitalization so that any pertinent findings in the consultation may be incorporated in the evaluation of the patient and so that action on any recommendation may be initiated prior to discharge. If a consultation is needed urgently, e.g., within 24 hours, the consultation request form should be supplemented by telephone or personal contact with the resident or staff physician or dentist on call.

b. Emergency:

The responsible physician or dentist shall proceed without consultation in emergencies when it is his opinion that to delay surgery or treatment in order to obtain consultation would endanger the life of the patient. In these situations, the responsible physician or dentist shall make a note in writing in the patient's medical record of both the indications for the operation and the nature of the emergency. In those emergency situations in which the surgery or treatment does involve sterilization or the termination of a known or suspected pregnancy, the attending physician or dentist will be responsible to inform another attending

physician or dentist of the situation and the treatment or surgery contemplated, prior to carrying out the surgery or treatment. The physician or dentist so informed will be responsible to confirm such notification at the earliest opportunity by means of a note in writing in the patient's medical record.

D. GENERAL CONDUCT OF CARE:

1. Consent for Care:

a. General Consent:

General consent is obtained by the Admitting Department at the time of a patient's admission, and is designed to cover all procedures in the Hospital which are not of a nature to require a special consent. If it is not possible to obtain the general consent at the time of admission or registration, the responsibility for securing the general consent will rest with the nurse in charge of the division accepting the patient. This includes, but is not limited to, routine hospital care, laboratory procedures, intravenous feedings, diagnostic x-ray procedures and most outpatient treatments. It provides protection for procedures done by Hospital personnel, the attending physician or dentist, his assistants, or any other physician or dentist called into the case by the attending physician or dentist. It has the merit of providing personal coverage for all persons who have a legitimate reason for touching or ministering to the patient, and protects both the Hospital, physician or dentist.

b. Special Consent:

A special consent form must be prepared before any of the following procedures are carried out:

- all major and minor surgery which involves an entry into the body, either through an incision or through one of the natural body openings;
- any procedure in which anesthesia is used, whether or not an entry into the body is involved;
- all non-operative procedures which involve more than a slight risk of harm to the patient, or which involve the risk of a change in the patient's body structure;
- all procedures where radium or x-ray is used in treatment of the patient;
- all procedures which involve electroshock therapy;
- all uses of investigational drugs on patients;
- all other procedures which in the physician's or dentist's judgment require a special consent; any question as to the necessity of obtaining a special consent from a patient should be resolved in favor of procuring the consent.

Responsibility for securing a special consent will rest with the physician or dentist or person performing the procedure. In all cases the physician, dentist, or person performing the procedure shall be responsible to confirm that a special consent has been signed before the procedure is performed.

c. Special Consent Concerning Minors:

KRS214.185 as amended, provides for treatment of minors under the following:

- (1) The physician to examine and prescribe treatment for a minor with the minor's consent only in cases of venereal disease, pregnancy, alcohol and other drug abuse or addiction.
- (2) Any emancipated minor or any minor who has contracted a lawful marriage or borne a child may give consent to the furnishing of hospital, medical, dental or surgical care to his or her child, or himself or herself and such consent shall not be subject to disaffirmance because of majority.

- (3) Health services may be rendered to minors without consent of a parent or legal guardian in an emergency situation.
- (4) The consent of a minor who represents that he may give consent for the purpose of receiving health care services but who may not, in fact, do so should be deemed effective without the consent of the minor's parent or legal guardian, if the professional rendering care relied in good faith upon the word of the minor.
- (5) The professional MAY inform the parent of the minor patient of any treatment given or needed where informing the parent or guardian would benefit the health of the minor.

d. Emergency Consent:

Where an emergency exists which requires immediate action of the Hospital or physician or dentist to preserve the patient's life, or prevent a possible permanent impairment of the patient's health, and it is impossible to obtain the consent of the patient or someone legally authorized to consent for him, the required procedure should be undertaken only under the following two conditions:

- (1) it can be shown that the emergency is of sufficient magnitude to justify action without consent;
- (2) it can be shown that under the circumstances there is not sufficient time to obtain consent.

In order to constitute an emergency, the threat of life or health must be immediate. If delay in performance of the procedure would not increase the hazard, then a bona fide emergency does not exist. The Hospital and physician or dentist must make every effort to document the pathological necessity of proceeding with treatment without consent. Consultations should be undertaken, and the findings recorded in the patient's medical chart. Notations should clearly indicate the conditions stated above.

When an emergency consent is needed, the Hospital Director or the Associate Dean for Clinical Affairs must be contacted, informed in detail and must give approval. This approval must be documented in the medical record at the earliest possible time.

2. Physicians' Orders:

a. Verbal Orders:

Verbal orders may be initiated only when the life of a patient would be jeopardized by failure to take immediate action, and are applicable only to orders given by the physician or dentist in the presence of a professional nurse. Such verbal order(s) shall be recorded on the physician order sheet by the physician or dentist not later than 24 hours following the order.

b. Telephone Orders:

As defined in the nursing policy on telephone orders, a registered nurse may accept telephone orders from an active staff member or resident physician. Such orders must be countersigned by the ordering physician within 12 hours, should be limited to orders necessary for patient management and by circumstances which make direct personal attendance difficult. The nurse may, if she sees fit, require the personal attendance and review of the patient by the physician before carrying out the telephone order.

c. Written Orders:

All orders, except in the emergency situation described above must be signed by a physician or dentist before they are executed. Senior students may write orders

when they are appointed as acting interns by the Department Chairman. Hospital Administration will be notified in writing prior to student assuming these responsibilities by the Department Chairman of such appointment. The Dean will present the appointment for confirmation at the next meeting of the Hospital Board. Nursing Services will recognize the orders of acting interns only if the notification of Hospital Administration has been received and these orders are countersigned by a physician or dentist.

d. X-ray Request:

All x-ray requests except in the emergency situation described above, require a completed x-ray request signed by an attending or resident physician or dentist or a validly appointed acting intern.

e. Cancellation of Orders:

Cancellation of all existing orders for a patient is effected on change in service or when the patient is sent to the Operating Room or Delivery Room. An exception may be made if the physician or dentist so indicates in the preoperative orders.

3. Nursing Involvement in Care of Patients:

If a nurse has any reason to doubt or question the order written on or the care provided to any patient or believes that appropriate consultation is needed and has not been obtained, the nurse shall call this to the attention of the Assistant Director, Nursing, or the patient's attending physician. If warranted, the Assistant Director of Nursing may bring the matter to the attention of the Director of Service wherein the physician or dentist treating the patient in question has clinical privileges. Where circumstances are such as to justify such action, the Director of Service shall personally request a consultation.

4. Drugs, Medications and Radioactive Materials:

a. General Guidelines:

(1) Generic Name:

Physicians and dentists must use generic names as listed in the Hospital Formulary. Trade names will be accepted on physicians' or dentists' orders if available in Pharmacy. If not available, the physician or dentist will be contacted by PCS to rewrite his orders.

(2) Orders in Metric System:

Drugs will be ordered in the metric system. If the physician or dentist orders a drug in the apothecary system, and the nurse recognizes the error before the physician or dentist leaves the unit, the nurse will ask that he rewrite the order in the metric system. If the order reaches PCS in the apothecary system, a pharmacist will then contact the physician or dentist and ask that the order be rewritten in the metric system.

(3) Take Home Drugs:

All prescriptions for take home drugs must be signed by a licensed physician or dentist.

b. Ordering Drugs:

(1) Formulary Drugs:

Members of the house staff are authorized to use only those drugs listed in the Formulary.

(2) Non-Formulary Drugs:

Attending physicians and dentists may order non-formulary drugs for particular patients whenever justified. Since non-formulary drugs are not routinely stocked by Pharmacy Central Supply, a quantity of the drug must be ordered specially, and the patient must be billed for the entire supply. Frequently this results in a time lag before the drug can be obtained and therapy begun. In order to use a non-formulary drug repeatedly, the attending staff member is expected to request approval of the drug by the Pharmacy and Therapeutics Committee.

If a member of the attending staff requests a member of the house staff to use a non-formulary drug, the house staff physician or dentist may obtain the drug by calling the pharmacist, giving him the name of the attending physician or dentist who requested the drug, justification for the drug, etc. Each non-formulary drug request is followed up by the staff of the Drug Information Center and is reviewed by the Pharmacy and Therapeutics Committee.

c. Automatic Stop Orders:

At the time of this printing, drug orders are discontinued automatically according to the following timetable:

Orders for narcotic drugs (Schedules II and III) will be discontinued automatically after five days when no stop date is indicated by the physician or dentist in his order. Orders for antibiotic drugs will be discontinued automatically after five days when no stop date is indicated by the physician or dentist in his order. All other drugs will not have Automatic Stop Order limits.

Physicians or dentists are encouraged to write for a specific length of therapy on appropriate drugs and to limit their orders for drugs which require frequent monitoring of response such as anticoagulants and cancer chemotherapeutic agents. Daily, the floor pharmacists are provided with a list of all drug orders which are stopping due either to the stated Automatic Stop Policy or to the end of therapy as specified by the physician or dentist.

d. Controlled Substances:

Each member of the house staff should be registered by the Drug Enforcement Administration (formerly BNDD) in order to prescribe controlled substances. This registration is required in addition to the Kentucky license to practice. All orders for Schedule II Controlled Substances must be written in ink or indelible pencils; outpatient prescriptions for Schedule II substances must be written on special Schedule II prescription blanks supplied by the Outpatient Pharmacy.

e. Investigational Drugs:

Investigational drugs shall be used only under the direct supervision of the principal investigator who shall be a member of the Medical Staff, and who shall obtain the informed consent of the patient prior to the administration of the drug. To initiate use of an investigational drug, the principal investigator shall submit a written protocol to the Human Investigations Committee for review. The protocol should also be reviewed by the Pharmacy and Therapeutics Committee.

f. Radioactive Materials:

Radioactive materials shall be used only under the supervision of a qualified Radiation Medicine physician and personnel. All radioactive materials for human use shall be administered only by individuals approved by the Chairman of the Department of Radiation Medicine, with advice of the Radiation Safety Office and the Medical Center Radiation Safety Committee. They will follow regulations set forth in Hospital Policy 1-05-30.

E. GENERAL RULES REGARDING SURGICAL CARE:

Each Medical Staff member involved in patient care in the operating rooms agrees to practice within the guidelines of the OR Committee. The Committee's Rules and Regulations are as follows:

1. General Considerations:

All surgery performed will be under the control of the Chairman of the Department or the attending physician or dentist of the case in question.

2. Surgery Scheduling:

Operating Room time for all elective cases of each surgical specialty will be determined and assigned by the Chairman of the OR Committee, or his designee. The OR Committee in cooperation with the Chairman of the Department of Anesthesiology, the Chairman of the Department of Surgery, and the Chairman of OB/GYN will develop definitions for both emergency and urgent cases and these definitions will be used in assigning priority of unscheduled, non-elective cases.

3. Change in Schedules:

Any addition or deletion to the Operating Room schedule 48 hours prior to the date of surgery can be made by calling the Operating Room scheduling nurse. However, changes occurring within the 48 hour time period preceding surgery will require calls to both the Operating Room nurse in charge of scheduling, plus the Anesthesiologist responsible for the surgery date's activities.

4. Emergency Operations:

An emergency operation must meet one of the following criteria:

- the patient's life is in immediate danger if the operation is not performed;
- the patient's limb is in immediate danger of loss if the operation is not performed.

The Chairman of the OR Committee or the attending physician and the anesthesia attending-on-call will make the determination on emergency cases and assigning priority.

5. Identification of Patient:

Neither preparation of the patient for surgery nor surgery shall be initiated until positive identification of the patient is made by checking the armband of the patient against the operating room schedule. A record shall always be made of this positive identification in the patient's medical record.

6. Preoperative Evaluation and Documentation:

Prior to preparing the patient for surgery, the medical record will always be examined to see that a consent for the particular surgical procedure to be performed exists. Surgery will not take place without consent except in cases of immediate life threatening emergency. The preoperative diagnosis and current required laboratory work must be recorded on the patient's record, except in cases of an immediate life threatening emergency. If not recorded, the operation will be cancelled. In any emergency, the surgeon shall make at least a comprehensive note regarding the patient's condition prior to initiation of anesthesia and start of surgery.

7. Time of Admission:

All patients scheduled for surgery must be in the Hospital by 3:00 p.m. the day prior to surgery. The Operating Room Nurse Supervisor will be responsible for checking with the Admitting Office at 3:00 p.m. each day, and those patients scheduled for surgery the next day, but who have not reported at that time will be removed from the Operating Room schedule and rescheduled.

8. Starting Time of Operations:

Elective surgical cases will be cancelled and rescheduled if the attending surgeon is more than 15 minutes late for the case.

9. Outpatient Operations Requiring General Anesthesia:

Any outpatient procedures done in the Outpatient Clinic with general anesthesia will require a minimal three hour recovery time period, and a note must be placed in the patient's chart by the anesthesiologist at the time of discharge. Also, the patient must always be accompanied by another individual who will transport the patient safely from the Hospital.

10. Care in Transport of Patients:

All Operating Room transport personnel shall receive training in first aid techniques including the ability to recognize immediately symptoms of cardiac or respiratory arrest.

11. Efficient Utilization of Operating Room:

The Chairman of the OR Committee coordinating with the Anesthesia Director of Clinical Services shall be responsible for the efficient utilization of Operating Room resources.

12. Contaminated Cases:

All Operating Rooms in which surgery on a contaminated patient is performed shall be thoroughly scrubbed on completion of surgery. A contaminated patient shall be housed in an isolated area of the Recovery Room. Procedures throughout his stay in the Operating Room and Recovery Room shall be in accordance with the Communicable Disease Center's Handbook on Infection Control and Isolation Techniques pending available facilities.

13. Conductivity Environmental Control:

Quarterly tests will be made on the conductive properties of all appropriate instrumentation and equipment within the Operating Room. Environmental control will include periodic monitoring of the humidistats in all of the Operating Rooms to insure that they are registering accurately and not in need of calibration.

14. Radiation Safety:

Safety of radiation sources will be the responsibility of the Radiation Safety Officer of the Medical Center and the Chairman of the Radiation Medicine Department. Specific safety control procedures are outlined in Hospital Policy 1-05-30.

15. Tissue Removed:

All tissue removed during an operation shall be sent (specific handling in laboratory manual) to the anatomical laboratories so that a pathologist can make such examination as he may consider necessary to arrive at a diagnosis. His authenticated report shall be made a part of the patient's medical record.

16. Oral Surgery:

The Oral Surgery Service, a section of the Hospital Dental Service, will be responsible for all patients referred directly to it and for unreferral patients admitted to its service. All dental patients must receive the same basic medical appraisal as patients admitted to other clinical services. A history and physical will be completed by a surgical house staff member. A physician member of the Medical Staff will be responsible for the care of any medical problem that may be present or that may arise during the hospitalization of dental patients.

Requests for consultation will be made to the appropriate medical or surgical services. An attending dentist will be named for each dental patient. All surgical procedures performed by oral surgeons will be in keeping with the guidelines for accreditation of oral surgery postgraduate programs as prescribed by the American Board of Oral Surgery, Council on Dental Education of the American Dental Association, and the Kentucky Board of Dentistry.

17. Surgical Consent:

Written, signed, informed, surgical consent shall be obtained prior to the operative procedure except in those situations wherein the patient's life is in jeopardy and suitable signatures cannot be obtained due to the condition of the patient. In emergencies involving a minor or unconscious patient in which consent for surgery cannot be immediately obtained from parents, guardian, or next of kin, these circumstances should be fully explained on the patient's medical record. A consultation in such instances may be desirable before the emergency operative procedure is undertaken if time permits.

18. Anesthesia Record:

The anesthetist shall maintain a complete anesthesia record to include evidence of pre-anesthetic evaluation and post-anesthetic follow-up of the patient's condition. The circumstances surrounding all deaths occurring in the Operating Room or Recovery Room, after the administration of an anesthetic, shall be reported in writing to the Chairman of the Department of Anesthesiology within twenty-four (24) hours by the person administering the anesthetic and report by the Chairman of the Department of Anesthesiology to the Associate Dean for Clinical Affairs within forty-eight (48) hours.

F. SPECIFIC RULES REGARDING:

1. Abortions and Sterilizations:

a. Elective Abortions:

May be performed by a member of the Obstetrics and Gynecology Department at the request of the female without consent of spouse or sexual partner.

b. Therapeutic Abortions:

Therapeutic abortions may be performed only by a member of the Obstetrics and Gynecology Service.

c. Abortions Incident to Therapy:

In the case of surgical procedures which result in abortions incident to therapy, the physician conducting the operation will indicate in the patient's medical record that the procedure will result in the termination of pregnancy.

d. Sterilizations:

The operation is performed for the sole purpose of sterilization of the patient, whether male or female. The general rule is that sterilization may be performed under one or more of the following circumstances:

- when medical disease complicates pregnancy or may be injurious to the health of the mother or the baby;
- many times, socio-economic factors may be used to support the sterilization decision;
- at the request of the patient when informed consent is evident.

The written request for sterilization and the report of the consultant shall be filed in the patient's medical record.

e. Sterilization Incident to Therapy:

A sterilization incident to therapy performed primarily for some other medically valid purpose must be documented in the patient's medical record.

2. Admission of Non-Obstetrical Patients to Obstetrics Division:

"Clean" surgical patients with a negative chest x-ray within the last 48 hours may be admitted to the Obstetrical Division only on the order of the Director of Obstetrics or his designee who will review the situation daily with the senior Nursing Service staff member on duty on the Division.

G. EMERGENCY SERVICES:

1. Emergency Room Medical Coverage and Responsibilities:

Patient Care in the Emergency Room is under the direction of the Medical Director of Emergency Services. The Medical Staff of the Emergency Room shall have primary responsibility for the care of all patients in the Emergency Room until such time as the patient is admitted or formally transferred to the care of another physician, dentist, service, or clinic. Attending physicians and dentists, and a staff of house officers, who are assigned to the Emergency Room, will personally see each patient and be responsible for:

- a. Initiating early and appropriate consultation with the proper service ascertaining that the patient has been:
 - treated and released with the indicated instructions for further follow-up by a private physician or dentist or an appointment made for OPD visit;
 - accepted by a written note in the chart for care by another service, either on an outpatient basis, or for hospital admission; or
 - sent to another hospital or another physician or dentist for care after that hospital, physician, or dentist has agreed to assume such care.
- b. Appropriate documentation of care and treatment rendered will be made by the treating physician or dentist and reviewed by an attending physician or dentist.
- c. Limiting treatment of patients who will be referred to other services to emergency measures until the consultant arrives and is delegated responsibility for the patient's care.

2. Emergency Room Consultation Coverage:

All clinical departments will furnish the Medical Director of Emergency Services, with a list of house officers and active staff on Emergency Room call who can be notified by the assigned Emergency Room physicians as soon as it is determined that service should be called for consultation, or when the case might be of teaching interest to them.

3. Admission of Patients from the Emergency Room:

a. Admission with Prior Consultation:

An Emergency Room physician will ordinarily obtain the consultation and approval of the appropriate service prior to admitting the patient.

b. Direct Admission with Prior Consultation:

The Medical Director of Emergency Services, or the Emergency Room attending physician may admit any patient at any time if he believes this is the correct disposition of the patient and that failure to admit the patient will result in death or serious complication.

4. Referral to Another Hospital:

In the rare instance where a patient requiring hospital admission must be sent to another hospital, such transfer will only be carried out with the prior approval of the patient's attending physician.

5. Use of Observation Room:

The expected period of observation to facilitate diagnosis is four (4) hours with a maximum of twelve (12) hours. At this time, the patient is either admitted or discharged. (This may be waived in individual cases, such as when the twelve (12) hour limit terminates at early a.m. hour.) Progress notations are to be entered onto the chart every four hours by the physician or dentist caring for the patient.

H. CLINICAL STAFF DISASTER ASSIGNMENTS:

All Medical Staff members shall be assigned to locations in the Hospital and it is their responsibility to report to their assigned stations upon notification of a disaster. The Associate Dean for Clinical Affairs, or his designee will coordinate and work with all assignments and specific procedures for a disaster as set forth in the University of Kentucky Medical Center Disaster Plan.

The Chiefs of Clinical Services and the Chief Executive Officer of the Hospital will work as a team to coordinate activities and directions. In cases of evacuation of patients from one section of the Hospital to another or evacuation from the Hospital premises, the Chiefs of Clinical Services during the disaster will authorize the movement of patients. All policies concerning direct patient care will be joint responsibility of the Department Chairmen and the Chief Executive Officer of the Hospital. In their absence, the deputy chairmen and alternative in administration are next in line of authority respectively. The disaster plan should be rehearsed at least twice a year, preferably as part of a coordinated drill in which other community emergencies and agencies participate. There should be a written evaluation of all drills which must involve the Medical Staff, House Staff and Hospital Employees.

I. SPECIAL CARE UNITS:

Special Rules and Regulations are available for each Special Care Unit in the Hospital to include:

- Respiratory/Cardiothoracic Intensive Care
- Surgical Intensive Care
- Medical Intensive Care
- Coronary Care
- Pediatric Intensive Care
- Premature and High Risk Nursery
- Care-by-Parent
- Burn Unit
- Model Care Unit 3 North

Please refer to these specific Rules and Regulations located in each of the above units.

J. CLINICAL DEPARTMENTS:

Rules and Regulations of Clinical Departments will be added to these Rules and Regulations as they are completed.

Approved by the Board of Trustees.

B

BOARD OF TRUSTEES
UNIVERSITY OF KENTUCKY

RESOLUTION

WHEREAS the Board of Trustees of the University of Kentucky has established within the University of Kentucky Medical Center a University Teaching Hospital for the purpose of serving as the basic clinical facility for teaching, research, patient care and service programs of the Medical Center; and

WHEREAS the Board of Trustees has determined that to further this purpose, the present structure of the University does not adequately provide for the proper governance and operation of the University of Kentucky Hospital and that the recognition of this distinction requires the establishment of a governing mechanism which does not parallel the University structure for academic governance; and

WHEREAS the Board of Trustees has determined that a supervisory board should be established to participate in those aspects of the governance of the University of Kentucky Hospital relating to the quality of care and to insure compliance with applicable Federal and State laws, and to insure compliance with regulations and requirements of the Joint Commission on Accreditation of Hospitals;

THEREFORE, the Board of Trustees hereby creates the University of Kentucky Hospital Council of Supervisors, which shall, subject to the authority of the Board of Trustees and established University policies and procedures, be charged with certain responsibilities for the governance of the University Hospital including responsibility for appointments to the Medical Staff, delineation of clinical privileges, approval of the Medical Staff Bylaws and amendments thereto, subject to the concurrence of the Board of Trustees, and appropriate action on matters involving the quality of patient care in the University Hospital and its affiliated programs.

THEREFORE, the Board of Trustees here-by adopts the following Bylaws for the University of Kentucky Hospital Council of Supervisors.

BYLAWS OF THE
COUNCIL OF SUPERVISORS
UNIVERSITY OF KENTUCKY HOSPITAL

ARTICLE I: Council of Supervisors

SECTION 1. Council of Supervisors. The body participating in the governance of the University of Kentucky Hospital (hereafter called Hospital) shall be known as the Council of Supervisors of University of Kentucky Hospital (hereafter called Supervisors). There shall be thirteen (13) Supervisors appointed by the Board of Trustees: three (3) of the members of the Board of Trustees of the University of Kentucky, one of whom shall be designated as Chairman of the Supervisors, two (2) members of the Medical Staff recommended by the Hospital Clinical Board, [four (4) public members recommended by the President^{*}] and four (4) members by virtue of their University appointment - the Vice-President for the Medical Center, the Vice-President for Business Affairs, the Dean of the College of Medicine and the Hospital Director.

The term of office of Trustee members, the public members and the Medical Staff members shall be for a period of three years from the date of appointment, except that members appointed to the initial Council of Supervisors, shall, as near as practicable, be appointed one-third to one year terms, one-third to two year terms, and one-third to three year terms. No Supervisor in these member categories shall serve longer than two successive terms.

In addition to the Supervisors, the Associate Dean for Clinical Affairs shall participate in all supervisor deliberations and exercise the authority of a supervisor, including voting privileges, when representing the Dean at Supervisor meetings.

SECTION 2. Powers. Except as specifically provided in this document, the Board of Trustees and the President retain their normal authority and responsibility for the governance and operation of University Hospital. The governance of the Hospital in all matters involving the quality of patient care at University Hospital and its affiliated programs shall be the responsibility of the Supervisors within the following specific delegation.

* amended to read:
* and four (4) public members recommended by the President, one of whom shall be a student of the University of Kentucky,

The Supervisors shall have the responsibility and authority to amend and to approve with concurrence of the Board of Trustees of the University of Kentucky the Bylaws of the Medical Staff. The Supervisors shall have responsibility and authority to ammend and approve the Rules and Regulations of the Medical Staff, to appoint, suspend or otherwise discipline or terminate privileges of any member of the Medical Staff, consistent with such Bylaws and Rules and Regulations.

The Supervisors shall have responsibility and authority to act in all matters involving compliance with applicable laws and regulations focusing particularly on quality of care and requirements of the Joint Commission on Accreditation of Hospitals.

The Supervisors shall have responsibility and authority subject to the ultimate authority of the Board of Trustees in matters related to implementing, altering and deleting patient care programs and the participation of students in the care of patients.

The Supervisors shall have responsibility and authority for adopting and implementing administrative policies which are consistent with established University Policy and Procedures and are required for the Hospital in managing its patient care operations.

The Supervisors shall have recommending authority with respect to submissions of the Hospital through established procedures in all matters related to (1) the mission of the Hospital, (2) operating budgets, (3) capital expenditure budgets and (4) long-range plans.

Where questions arise regarding the responsibility and authority of the Supervisors to act, a written request shall be forwarded to the President for clarification and direction.

If the President determines that any actions of the Supervisors are or may be in conflict with policy actions and authority of the Board of Trustees of the University of Kentucky, he may refer the matter with his recommendation to the Board of Trustees. Furthermore, he may stay the action of the Supervisors until the matter is resolved by the Board of Trustees.

SECTION 3. Meetings and Notice.

- 3.1 Regular meetings of the Supervisors will be held at least six times per year at times which shall be established and publicly announced by the Chairman. An annual meeting shall be scheduled each June.
- 3.2 Special meetings may be called by the Chairman at any time, and shall be called by the Chairman at the request of three (3) members of the Supervisors provided that written notice to all the Supervisors be given not less than five (5) days prior to the meeting stating the time, place and purpose of the meeting.
- 3.3 Except as otherwise specified within these Bylaws, all meetings of the Supervisors and its committees shall be conducted in accordance with Roberts Rules of Order, revised.

SECTION 4. Quorum. A majority of the current membership shall be necessary for a quorum.

SECTION 5. Vacancies. Whenever a vacancy occurs on the Council of Supervisors, for whatever reason, notice shall immediately be provided to the Board of Trustees so that a new Supervisor may be appointed as soon as possible.

SECTION 6. Removal. The Supervisors may recommend to the Board of Trustees that a Supervisor be removed or suspended. This action may be taken at any meeting by a vote of nine of the Supervisors, provided that the affected Supervisor has been given at least ten (10) days written notice of such intended action and has been advised of the basis for the action. The Supervisor affected shall have the right to be heard and explain to the Supervisors why he or she should not be removed or suspended. Recommendations for suspension or removal by the Supervisors shall be made directly to the Board of Trustees but shall not be effective until approved by the Board of Trustees.

SECTION 7. Liability. All Supervisors and persons serving at the request of the Supervisors shall, subject to policy limits, exemptions, and qualifications stated in the Liability Policy and applicable State laws, be considered agents of the University while acting within the scope of their duties here under.

SECTION 8. Compensation of Supervisor and Committee Members. No Supervisor nor any member of any committee appointed by the Supervisors shall receive any compensation for services rendered, in his or her capacity as a committee member or Supervisor. However, nothing herein shall be construed to preclude any Supervisor or committee member from receiving compensation from the Hospital or the University for other services actually rendered or reimbursement for actual expenses incurred for serving the Hospital as a Supervisor or committee member or in any other capacity.

SECTION 9. Conflict of Interest. No Supervisor or any person appointed by the Supervisors in any capacity may act as agent on his or her behalf for any person or organization where such act would create a conflict of interest with the terms of the person's service to the Hospital or Supervisors. The policies, rules and regulations adopted by the Board of Trustees relating to conflicts of interest shall apply to any person appointed by the Supervisors in any capacity and to the Supervisors themselves.

ARTICLE II: Officers

SECTION 1. Officers. The officers of the Council of Supervisors shall consist of a Chairman, Vice Chairman, Secretary, and such other officers as the Supervisors may deem advisable. The Chairman and Vice Chairman shall be designated by the Board of Trustees at the Trustees meeting wherein new Supervisors are appointed.

SECTION 2. Chairman. The Chairman of the Supervisors shall appoint all committee members; shall preside at all meetings of the Supervisors; shall make an annual report to the President and the Board of Trustees, shall serve as an ex-officio member, without vote, on all standing and special committees, unless otherwise specified in these Bylaws; and shall perform all of the acts usually attendant upon the office of the Chairman or which may be set forth by these Bylaws or the Supervisors.

SECTION 3. Vice Chairman. During the absence of the Chairman or his inability to act, the Vice Chairman shall perform the duties and exercise the powers of the Chairman.

ARTICLE III: Hospital Director

SECTION 1. Appointment of the Hospital Director. The Hospital Director shall be appointed by the Board of Trustees upon the recommendation of the President with the advice of the Vice-President for the Medical Center and the Dean of the College of Medicine in accordance with established University procedures, except that such recommendations shall be submitted to the Council of Supervisors for its review and recommendation prior to submission.

SECTION 2. Duties of the Hospital Director. The Hospital Director shall be the chief executive officer of the Hospital and shall possess the necessary authority and responsibility for the operation of the Hospital in all its activities and departments. The Hospital Director shall be accountable to the Vice President for the Medical Center for the overall operation of the Hospital and to the Dean of the College of Medicine for the coordination of all academic and patient care programs in accordance with the established policies. The Hospital Director may act as the duly authorized representative of the Supervisors in all matters in which Supervisors have not formally designated some other person. The Hospital Director shall also perform the duties of the Secretary of the Council of Supervisors, assist the Chairman in developing an agenda for each meeting; keep records of the minutes of the meetings of the Supervisors and furnish timely copies of such minutes to each Supervisor, to the President of the University of Kentucky, and insure that copies of all minutes of the Supervisors and its committees are deposited promptly with the Secretary of the Board of Trustees. The Secretary shall regularly advise the Vice President of the Medical Center of the activities and actions of the Supervisors. As Secretary, the Hospital Director shall be custodian of, and shall faithfully keep all records, books, documents and other valuable papers relating to the Hospital. The Hospital Director shall be responsible for giving all meeting notices and attending to all correspondence which may be ordered by the Supervisors.

SECTION 3. Hospital Director Unable to Act. In the event that the Hospital Director is unable to perform the functions of the office, the President with the advice of the Vice-President for the Medical Center and the Dean of the College of Medicine may designate an acting Hospital Director until such time as a permanent Hospital Director may be recommended.

ARTICLE IV: Committees

SECTION 1. Committee Designations. The Supervisors shall appoint a Joint Conference Committee and such other committees as the Supervisors may, from time to time, deem advisable.

SECTION 2. Joint Conference Committee.

- 2.1 Purpose. The Joint Conference Committee shall provide a forum in which representatives of the Trustees, Medical Staff and the Hospital Administration meet to discuss matters of Hospital medical policy and practice. The Committee shall review and make recommendations to the Supervisors with regard to programs of assurance of quality and appropriateness of patient care, including those required by regulatory agencies and accrediting organizations. The Committee shall review and make recommendations to the Supervisors prior to a final decision by the Supervisors whenever the Supervisors have not concurred in a Medical Staff recommendation regarding clinical privileges. The Committee shall be responsible for acquisition and maintenance of accreditation of the Hospital by the Joint Commission on Accreditation of Hospitals. It shall be responsible for the development and maintenance of methods for the protection and care of hospital patients and others at the time of internal and external disasters. It shall be responsible for providing advice and assistance to the Hospital Director in up-dating of one, two and five year plans for the Hospital and making recommendations to the Supervisors with respect to the plans. In addition, the Committee shall perform such other duties as may be prescribed by the Supervisors.
- 2.2 Composition. The Joint Conference Committee shall consist of the Vice Chairman; the Hospital Director, the Dean of the College of Medicine; one other Supervisor; the Associate Dean for Clinical Affairs; two members of the Hospital Clinical Board selected by the Clinical Board, two members of the Medical Staff elected by the Medical Staff and the Vice President for the Medical Center.
- 2.3 Meetings. The Joint Conference Committee shall meet at least quarterly and advise both the Supervisors and the Medical Staff of its activities.

ARTICLE V: Relationship of Hospital to Academic
and Research Programs Under the Aegis of
the Medical Center

The College of Medicine and other professional Colleges within the Medical Center shall continue to carry out a portion of their educational and research programs in the University Hospital usually in collaboration with patient care activities. In accordance with the mission of the Hospital, collaborative relationship shall be appropriately developed and maintained. The Deans of the Colleges within the Medical Center shall retain authority and responsibility for their respective educational and research activities. In order to assure excellence in both academic and patient care programs which frequently are related, collaborative decision making between the Dean of the College of Medicine, the Hospital Director and the Deans of other Medical Center Colleges will take place under the overall guidance of the Vice President for the Medical Center.

ARTICLE VI: Medical Staff

SECTION 1. General. While the medical care of patients in the Hospital is the responsibility of the Supervisors, it shall be the policy of the Supervisors to delegate this function, insofar as may be legally permissible, to the Medical Staff. In so doing, the Supervisors recognize that such delegation does not reduce their basic responsibilities and therefore retain responsibility and authority to approve or rescind the Medical Staff Bylaws as delineated in Article II, Section 1 and take other actions as required in carrying out their basic responsibility for the care of patients.

SECTION 2. Medical Staff. For purposes of these Bylaws, the words "Medical Staff" shall include all physicians and dentists and other related health professions who are privileged to attend patients in the Hospital or in any other medical care activity administered by the Hospital.

SECTION 3. Organization of the Medical Staff. The Supervisors shall approve and authorize the organization of the Medical Staff so as to discharge those duties and responsibilities assigned to it by the Supervisors and specifically to accomplish the following functions:

- (a) To monitor the quality of medical care in the Hospital and make recommendations to the Supervisors to assure that all patients admitted to or treated at any of the facilities, departments or services of the Hospital shall receive high quality medical care.

- (b) To recommend to the Supervisors the appointment or reappointment of an applicant to the Medical Staff of the Hospital, the clinical privileges each such applicant shall be granted in the Hospital and appropriate action that may be necessary in connection with any member of the Medical Staff, to the end that at all times there shall be a high level of professional performance of all persons authorized to practice in the Hospital.
- (c) To represent the Medical Staff of the Hospital and to provide a means whereby issues concerning the Medical Staff of the Hospital may be discussed both within the Medical Staff organization and with the Supervisors and the Hospital Director.
- (d) To establish specific rules and regulations governing actions of members of the Medical Staff, which are adequate and effective for the protection of patients and the maintenance of quality of care.
- (e) To institute all appropriate disciplinary or corrective actions, including suspension, that may be necessary in connection with any Medical Staff member.

SECTION 4. Medical Staff Bylaws. The Hospital Clinical Board acting for the Medical Staff shall recommend to the Supervisors Bylaws, Rules and Regulations setting forth the Medical Staff organization and governance in such a manner as to accomplish the functions set forth above. When such Bylaws, Rules and Regulations are adopted by the Supervisors, as delineated in Article I, Section 2, they shall become effective and become a part of the Regulations of the Hospital applicable to all members of the Medical Staff.

SECTION 5. Appointment to the Medical Staff and Assignment of Clinical Privileges. Upon recommendation of the Hospital Clinical Board acting for the Medical Staff and in accordance with the Medical Staff Bylaws, the Supervisors may appoint licensed graduates of recognized medical, dental and osteopathic schools and related health professionals meeting the personal and professional requirements prescribed in the Medical Staff Bylaws for membership on the Medical Staff of the Hospital and shall assign clinical privileges to such persons. Appointment to the Medical Staff shall carry with it full responsibility for the treatment of individual Hospital patients subject only to such provisions as may be imposed by the Supervisors or the Bylaws, Rules and Regulations of the Medical Staff. Appointments to the Medical Staff shall be for one year, renewable each year in accordance with the reappointment procedure set forth in the Medical Staff Bylaws. Reappointment to the Medical Staff will be made at the annual June meeting of the Supervisors.

SECTION 6. Appointment and Reappointment Requirements. Each person initially appointed to membership on the Medical Staff of the Hospital shall be provided with a current copy of the Regulations of the Hospital and the Medical Staff, Bylaws, Rules and Regulations. Each new person shall affirm in writing that he/she has read and understands the Bylaws, Rules and Regulations and agrees to abide by them. Each person who is reappointed to the Medical Staff of the Hospital shall acknowledge in writing that he/she has read, understands and agrees to abide by the current Hospital Regulations and Medical Staff Bylaws, Rules and Regulations. The statement to be signed by each new appointment or reappointment shall include as a minimum:

- (a) An obligation as a member of the Medical Staff to provide care and supervision to all patients within the Hospital for whom such Medical Staff member has responsibilities.
- (b) Agreement to abide by the Hospital Regulations and Medical Staff Bylaws, Rules and Regulations, and policies and directives that are in force during the time such person is a member of the Medical Staff of the Hospital.
- (c) Agreement to accept committee assignments and such other duties and responsibilities as may be reasonably assigned by the Supervisors or the Medical Staff.

Submission of such signed statement to the Chief Administrative Officer of the Medical Staff shall be necessary before an appointment or reappointment is effective.

SECTION 7. Hospital Clinical Board.

- 7.1 Composition. The Hospital Clinical Board shall be composed of the Chiefs of Clinical Services, the Chairman of the Department of Community Medicine, the Dean and Associate Dean for Clinical Affairs of the College of Medicine and the Hospital Director. The Deans of the other colleges of the Medical Center, the Director of the University Student Health Service, the Associate Dean for Veterans Affairs, the Director of Nursing Services and the Vice President for the Medical Center shall be ex-officio non-voting participants. The Dean of the College of Medicine shall serve as Chairman of the Hospital Clinical Board.
- 7.2 Function. The Hospital Clinical Board acting for the Medical Staff shall establish a framework for governance and a means of accountability to the Council of Supervisors. It will function as the medico-administrative unit for the Medical Staff. It shall concern itself primarily with the quality of care within the Hospital and report its activities

to the Supervisors. It shall receive and act upon all committee reports, appoint Medical Staff members on a temporary basis until the next regular meeting of the Council of Supervisors and make recommendations regarding final Medical Staff status and privileges to the Council of Supervisors.

7.3 Meetings. The Hospital Clinical Board shall meet monthly.

SECTION 8. Hospital Clinical Services.

- 8.1 The Supervisors may delegate, through approval of the Medical Staff Bylaws or by appropriate Supervisor resolution, to the Chiefs of the Clinical Services, responsibility for monitoring the quality of medical care in their services, and for recommending an applicant's appointment or reappointment to the Medical Staff of the Hospital and including a delineation of privileges for such applicant.
- 8.2 The Supervisors upon the joint recommendation of the Hospital Director and the Dean of the College of Medicine, shall appoint the Chief of each Clinical Service of the Hospital. If the Chief of Clinical Service is to be other than the corresponding Department Chairman, the endorsement of the Clinical Board and the approval of the Board of Trustees is also required. All such appointments shall be periodically reviewed by the Supervisors. Chief of Clinical Service vacancies may be filled on an interim basis at any time by the joint action of the Hospital Director and the Dean.
- 8.3 The Supervisors upon the recommendation of the Dean of the College of Medicine, shall appoint the Chief Administrative Officer of the Medical Staff of the Hospital.
- 8.4 The Supervisors may establish new clinical services upon the recommendation of the Hospital Director and the Dean of the College of Medicine, the endorsement of the Clinical Board and subject to the approval of the Board of Trustees.
- 8.5 The Hospital Director shall act for the Council of Supervisors in discharging its overall responsibility for maintaining high quality patient care. In matters relating to medical care, responsibility for clinical services is delegated by the Hospital Director to the Chief Administrative Officer of the Medical Staff.

ARTICLE III: Amendments

Change in these Bylaws, either amendments or replacement, may be made by a two-thirds vote of the Supervisors, subject to approval by the Board of Trustees.

Chairman, Board of Trustees

Secretary, Board of Trustees

Chairman, Council of Supervisors