

## The Veterans Administration's Role in Helping Establish Three Legacy Physician Assistant Programs

**Brief History of Veteran Health Administration (VHA)** - The origins of the modern Veterans Health Administration (VHA) began with the establishment of the National Asylum for Disabled Volunteer Soldiers on March 3, 1865, by an act of the United States Congress to provide care for Union Soldiers who had been disabled during the American Civil War. Additional "soldier homes" were opened by the US Army and Navy but housed only small numbers of Civil War Veterans. In following years more "National Homes" were built to provide medical care and housing for thousands of Civil War Veterans. Just as the numbers of these veterans were dwindling, the USA entered World War 1 (WW1) and the need for the national homes increased, especially the need to provide hospital care. On August 9, 1921, the Veterans Bureau was created by combining three World War I Veterans programs into one bureau. The Veterans Bureau and National Home for Disabled Volunteer Soldiers joined efforts to provide medical care to all veterans at this time. Following World War II, there was a vast increase in the Veteran population which has been sustained overtime by USA military involvement in Korea, Vietnam, and the middle east. Over time, the VA health care system has grown from 54 hospitals in 1930 to 1,600 health care facilities in 2021, including 144 VA Medical Centers and 1,232 outpatient sites providing various medical and surgical services. **Reference:** *Our History: A Brief History of the Veterans Health Administration (VHA)*. (May 27, 2021) US Department of Veteran Affairs: VA History Office. Accessed on June 8, 2021 at [VA History - VA History Office](#).



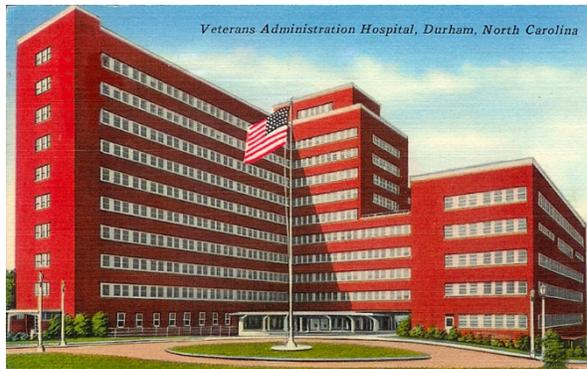
An article appearing in the **Atlanta Daily World** newspaper on December 25, 1970, announced that three VA hospitals had hired six physician assistants (PAs) to "relieve doctors of routine medical tasks." The six graduates of the Duke University's PA program were working in VA hospitals in Durham, NC, Muskogee, OK and Houston, TX. Veterans' Administrator Donald E. Johnson said these were only the first to be employed; others would soon follow to work in VA hospitals and clinics throughout the USA. He mentioned a college-degree, pilot PA program underway at the University of Oklahoma that would involve the Muskogee VA Hospital for clinical training. Johnson noted that other medical schools and universities were exploring starting PA programs and that such programs would become part of the vast health training program conducted in VA Hospitals. More than 40,000 health professionals were trained that year in VA Hospitals and the numbers were expected to increase to 90,000 by 1975.<sup>1</sup>

### The Duke University Experience

On April 6, 1953, the Veterans Administration Hospital opened in Durham, NC on April 6, 1953, with 120 beds, 600 employees who included 24 full-time physicians, 65 residents and interns, and 154 nurses. Built on land adjacent to the Duke Hospital, there is a rich history of partnership and collaboration between the two institutions with joint faculty appointments and health professional students using both facilities for

didactic and clinical training.<sup>2</sup> Although the Duke PA program never relied on the VA as a direct funding source, it did take advantage of using VA based faculty to teach didactic courses and VA attending physicians and residents to teach and evaluate students during clinical rotations. The Duke Medical Center Archives contains a memorandum written in 1969 by John Laszlo, MD, Chief of Staff, Durham Veterans Administration Hospital, to Chief of Medical Services that he had received a request from Mrs. Katherine Andreoli to "introduce her students from the Physician's Assistant Program to our hospital wards."

He goes on to say that he supported Ms. Andreoli's request and asked that students be welcomed.<sup>3</sup> One of the first graduates of the Duke University PA Program, Victor Germino, was employed by the Durham VA Hospital in 1967.<sup>4</sup>



**VA Hospital Durham NC**

In 1970, the Veterans Administration Medical Media Network produced a film titled "Status Report: The Physician's Assistant" that was filmed on location at Duke University, the Durham VA Hospital, and surrounding areas. In the foreword of a study guide that accompanied the film, Marc J. Musser, MD, Chief Medical Director, Veterans Administration Central Office, wrote that "The Veterans Administration is increasing the output of Physician's Assistants simply because, as the largest health care delivery system in the United States, we have many areas where they might be used."<sup>5</sup> Throughout the 1970s and 1980s, the Durham VA Hospital continued to provide in-kind support to the Duke PA program. An Allied Health Education Building was open in October 1971 adjacent to the VA Hospital that provided classroom, laboratory and private study space for PA and other health professional students. The building also provided office space for the VA's Associate Director of Medical and Allied Health Education and staff. The VA facility was used until the mid-1980s when classroom space was provided to the PA program back on the Duke University Medical Center campus (R. Carter, personal communication, June 9, 2021).

### **The Baylor College of Medicine Experience**



**VA Hospital Houston TX**

The history of the Houston, Texas VA Hospital is an intriguing but complex story. It begins with the construction of a new hospital for the U.S. Navy that was opened 1946 on 118 acres of land adjacent to the fledgling Texas Medical Center in Houston. However, two years earlier, President Franklin D. Roosevelt had issued a memorandum that the Navy hospital in Houston, as well as other specified military hospitals, would be transferred to the Veterans Administration at the end of WWII. Because of internal squabbling, the transfer eventually required an executive order from President Harry Truman. The transfer took place in April 1949, the official date of the beginning of the Houston VA Hospital. A concurrent development was happening during this time that would impact

the Houston VA Hospital and others throughout the USA. In 1945, the Task Force on Federal Medical Services (a committee of the Hoover Commission), who included renown Baylor University surgeon Dr. Michael DeBakey as a member, recommended that VA hospitals (1) create resident and teaching fellowships, (2) affiliate with leading medical schools where possible, and (3) establish Dean's Committees to collaborate on VA-affiliated residency training programs to assure that they met professional standards. At the time, the VA had 5,600 beds throughout its system that were idle for lack of clinical personnel to staff hospitals and the Task Force on Federal Medical Services projected that these shortages would only become worse. Their recommendations would provide VA hospitals medical and surgical residents to help with the workload, and hopefully attract more of these newly minted physicians to work in VA hospitals after completing their residencies.<sup>6</sup> In time, medical schools located at Duke University, Baylor University and Oklahoma University would partner with their local VA Hospitals, which in turn, would be designated as Dean's Committee VA Hospitals.

The impetus to establish a physician assistant program at Baylor College of Medicine was included in the College's new Ten-Point Expansion Plan for the '70s. One of the goals called for the establishment of a Center for Allied Health Manpower Development that would prepare individuals to help physicians meet the unmet need for medical care in Texas. Fortuitously, the college's newly appointed professor and chair of Medicine, Henry MacIntosh, M.D., had prior experience in PA education as a member of the Duke University Medical Center faculty. With the arrival and support of Robert J. Luchi, M.D., as vice chair, and chief of Medicine at the Houston VA Medical Center, the willingness to develop a jointly sponsored VA/Baylor University moved ahead. The impact that a PA could have on a medical service was evident by the excellent service provided by Ronald Peterson, the first PA to be employed within the Texas Medical Center and the Department of Medicine at the College.<sup>7</sup> He worked in the division of cardiology, basically serving as a member of the house staff. Peterson preferred to remain in clinical practice and was not interested in the administrative aspects of developing and managing a PA program. Two other PAs, Tom Godkins and Roger Whittaker also investigated job opportunities in Houston, but decided to take jobs in Oklahoma City. Finally, after an initial stage of planning, Carl Fasser, who was serving as the academic coordinator for the Duke PA Program, was recruited to further develop and implement the PA Program (C. Fasser, personal communication, March 2, 2021).

The VA/Baylor PA Program was funded initially by the VA Central Office and was referred to as the Houston VA Hospital/Baylor College of Medicine (BCM) PA Program. With the VA's and later federal grant support, the PA program needed little direct financial support from the BCM. It was not until the mid-1980s that the Baylor College of Medicine began directly supporting administrative elements of the PA program to conform to national accreditation standards. In addition to supporting administrative and clinical training, the VA Central Office also provided students enrolled in the PA program stipends. Stipend support continued until the 1990s. Soon after arriving, Fasser recruited other PAs to join him and Ron Peterson in Houston. Russell Lawrence and Jim Bartow, both Duke University PA graduates, were among the first two to be recruited. They were hired by the VA Hospital to work fulltime clinically in fellowship positions. Consequently, it was difficult to have them teach didactic courses. They could however precept students assigned to their services, evaluate student clinical skills and find additional teaching resources for the PA program. Since the Houston VA was a Dean's Committee Hospital, Fasser was able to use VA and Baylor

faculty and house staff and if needed, community-based physicians to teach clinical aspects of the didactic curriculum (C. Fasser, personal communication, March 2, 2021).

### **The Oklahoma University Experience**

The Soldiers Memorial Hospital was opened in Muskogee on June 14, 1923, and leased to the Veterans Bureau by the State of Oklahoma. Two years later the hospital was purchased by the US government and became US Veterans Hospital No.9 and was expanded to approximately 350 beds. Muskogee was the first Federal Veterans Hospital located in the state of Oklahoma. The bed capacity was expanded to 791 beds in 1938. On June 15, 2006, Congress authorized renaming the Muskogee VA Medical Center to honor Jack C. Montgomery, a WWII Medal of Honor recipient; the first VA facility named after a Native American veteran.<sup>8</sup>



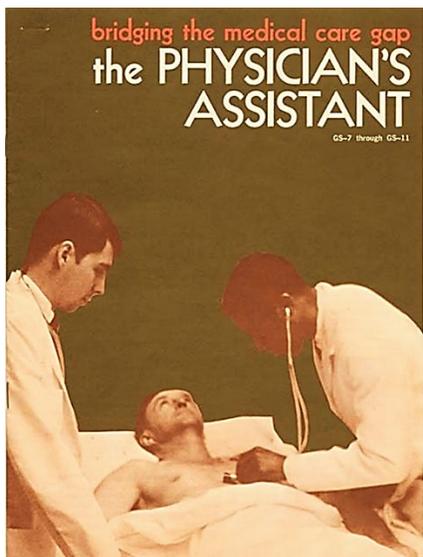
**VA Hospital Muskogee OK**

As stated previously, Ron Peterson decided to take the job in Houston instead of Oklahoma City. Since he had spent a year with Bill Stanhope helping Dr. Hu Myers establish the Alderson-Broadus College PA Program in West Virginia, Peterson told Stanhope that he should investigate helping establish the PA program being planned in Oklahoma. Peterson was aware of Stanhope's interest in developing PA programs as he was always talking about how to improve the PA curriculum when he was at Duke and Alderson-Broadus.

Like the BCM/VAH PA Program, the Oklahoma University/VAH PA Program was entirely funded by the VA Central Office and students in the program were given VA student stipends. Originally, the PA program was to be based entirely at the Muskogee VAH, but it soon became apparent that Muskogee lacked the resources to teach basic medical sciences. Consequently, the basic sciences were taught at the medical school in Oklahoma City. Because of the short turnaround time, PA students took the same basic science courses taught to medical students. They were told to dress professionally, sit on the front row in classes, be attentive, and ask and answer questions appropriately. The faculty soon began to appreciate the PA students' learning habits. As originally planned, the rest of the teaching was carried out in Muskogee. Although the Oklahoma VAH was a Dean's Committee hospital affiliated with the Oklahoma University School of Medicine, the motivation for placing the PA program at the Muskogee VAH was to attract physicians who, in turn, would have a cadre of PA house staff available to help them deliver health care. Some of the first PAs recruited to work at the Muskogee VAH included Nelson Myers, Jim Konopa, Larry Gonzalez and Roger Whittaker from Duke University and later PAs from Alderson-Broadus College (W. Stanhope, personal communication, March 2, 2021).

Whereas Fasser struggled during the initial years of the BCM/VAH PA Program to gain departmental support (especially from surgery) to teach didactic and clinical courses, Stanhope found top-down support for the PA program in Oklahoma. On arrival he was given good news and bad news. The "good news" was that the State Board of Regents had approved the PA program; the "bad news" was that they liked the idea so well they wanted the program to be operational in three months. With a memorandum of support from the top brass to department heads saying that Stanhope was to be given what he needed to get the program up and running, the pieces began to fall in place very shortly and the deadline of 3-months was met (W. Stanhope, personal communication, March 2, 2021).

## Additional VA Support of the PA Concept



### US Civil Service Announcement No. 428 March 1971

In addition to the film previously mentioned that was produced to introduce the PA profession to health personnel in the VA Healthcare system, a memorandum was distributed in 1971 by the VA's Department of Medicine and Surgery titled "Physician's Assistants – Guidelines for Utilization." The memorandum was addressed to directors, VA Hospitals, Domiciliary, and outpatient clinics. The purpose of the document was to provide "guidelines for utilization and levels of activity for PAs employed at VA stations." The guidelines provided general considerations, areas of utilization, levels of assignment (duties which may be performed).<sup>9</sup> These were among the first guidelines to be published about how to place and use PAs in inpatient and outpatient clinical facilities. Also, in 1971, the VA conducted its 11<sup>th</sup> Annual Conference at the VAH in Cincinnati, OH devoted to "Physician's Assistants." Presenters included Wendell Musser, MD, Assistant Chief Medical Director for Planning and Evaluation, Veterans Administration, Washington, DC; Darrel J. Mase, Ph.D., Dean, College of Health-Related Professions,

University of Florida, Gainesville, FL; and D.R. Howard, MD, Director, Physician's Assistant Program, Duke University, Durham, NC.<sup>10</sup> The VA used newspapers to recruit PAs. A good example is an article that appeared in the *Afro American* on April 17, 1971, titled "Physician's Assistants Wanted." The article begins "WASHINGTON – In response to a need for physician's assistants, largely in the Veterans Administration, the Civil Service Commission is inviting applications." The article goes on to explain what PAs will do under physician supervision and ask applicants to contact their Civil Services Commission's local office and ask for Announcement No. 428.<sup>11</sup> The announcement issued in March 1971 provided information on availability of physician's assistant jobs within the Federal Government stating that "most PAs will be hired to work in the hospitals and clinics of the Veterans Administration, with smaller numbers needed in the Indian Health Service, Public Health Service hospitals, and the government of the District of Columbia." Qualifications for GS-7 to GS-11 entrance positions would be based on education, training, and experience. An application form and instructions on how to apply were provided in the announcement.<sup>12</sup>

## Epilogue

The VA sponsored PA programs at the Baylor College of Medicine in Houston, TX, and the University of Oklahoma in Oklahoma City, OK, like other emerging programs, played pivotal roles in (1) introducing the PA concept to physicians, (2) opening the way for state enacted PA legislation and (3) the development of AAPA state constituent chapters, the Texas Academy of Physician Assistants (TAPA) and the Oklahoma Academy of Physician Assistants (OAPA), respectively. Since the early 1970s, the VHA has been a leading component in advocating for and employing PAs. Currently the VHA is the largest single employer of PAs and continues to play an important role in the clinical education of PA students. In 2011, Denni Woodmansee, PA-C was appointed to fill a newly established position, Chief PA for the VHA; a position that he held until his retirement from the VA in 2018. In 2014, the VHA updated its Utilization Guidelines for PAs to enhance their use, continuing to embrace a patient-centered and team-based approach to practicing medicine by allowing PAs, within defined limits, to exercise autonomous medical decision-making.<sup>13</sup>

After more than two decades on not providing financial support for the education of PA students, the VA implemented a mechanism whereby VA facilities collaborating in the education of PAs could apply for fund to pay students during the time they were training in VA facilities. The Michael E. DeBakey VA Medical Center (MEDVAMC) in Houston and the West Roxbury Campus of the VA Boston Health Care System were the two centers that received funding to do so. After three years, the Department of Veterans Affairs, through its Office of Academic Affiliations, shifted its support to VA Physician Assistant Postgraduate Residencies. There are currently 14 such residencies encompassing emergency medicine, geriatrics, mental health and primary care. The BCM PA Program has collaborated with the MEDVAMC in Houston to sponsor the residency programs in geriatrics and mental health since 2013. (C. Fasser, personal communication, June 22, 2021)

Looking ahead, PAs need to understand and appreciate the important role that the VHA has and continues to play in promoting and using PAs, not only in the VHA, but in other public and civilian healthcare sectors throughout the USA. This article only highlights three legacy programs that received VHA support, but there are many more that have benefited directly or indirectly from VHA support. May the collaborative support continue for many years to come.

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***By Reginald Carter, Historian Emeritus, PAHx Society with assistance of E. Carl Fasser and William Stanhope***