

## MEMORANDUM

To: James W. Holsinger, Jr., M.D., Ph.D.  
Chancellor

Phyllis Nash, Ed.D.  
Associate Vice President for Academic & Student Affairs

From: Emery A. Wilson, M.D.  
Dean

Re: Proposed Name Change

Date: August 6, 2002

The faculty in the Department of Family Practice has proposed changing the name of the department to the Department of Family Practice and Community Medicine. I have attached Dr. Matheny's letter explaining the rationale for this proposed change.

I support the proposed name change.

As this request was originally submitted January 10, 2002 (copy attached) and was evidentially misdirected, I would appreciate any special consideration that could be given to expedite this request.

Enclosure (2)

cc: Charlotte Baker  
Jane Serumgard Harrison, Ph.D.  
Samuel C. Matheny, M.D., M.P.H.  
Cathy Owen  
David S. Watt, Ph.D.  
Phoebe A. Wellman

EAW:lma

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Date: January 10, 2002

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Enclosure (1)

cc: Charlotte Baker  
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Samuel C. Matheny, M.D., M.P.H.  
David S. Watt, Ph.D.  
Phoebe A. Wellman

EAW:lma

January 9, 2002

Emery Wilson, MD  
Dean, College of Medicine  
University of Kentucky  
Lexington, KY 40536

Dear Dr. Wilson:

At a recent faculty meeting of the Department of Family Practice, the Department faculty members unanimously voted to request a name change for the Department to that of the Department of Family Practice and Community Medicine. This vote was first taken over a year ago, but the decision was made to not send this earlier request forward until organizational changes proposed within the College of Medicine concerning the creation of the new School of Public Health were delineated.

This combined mission is a natural merger of historical interests in many academic institutions. Over one-half of all the family medicine academic programs in American medical schools are currently in departments with similar joint titles, including the University of Louisville.

As you are aware, this College of Medicine had the first Department of Community Medicine in the United States. Dr. Sydney Kark stated that “a community’s health is an expression and a consequence of interdependent characteristics of the community and its environment.” There has been, from the inception of both of these disciplines, a strong interdigitation between primary care and family medicine, with the former focusing on the individual and the family, and the latter focusing on the community as a patient and an area of study.

The reasons for this request are several:

- Many of the **research** activities of the Department are not related exclusively to clinical family practice, but have a much broader scope of interest, specifically in areas of health services research, community benefits analysis, and studies in population-based research. It is important that faculty wishing to pursue these intellectual interests are able to assure other faculty in the College of Medicine as well as external funding organizations that this Department’s mission includes these areas. It is equally important that when faculty are being considered for promotion and tenure, that this scholarly activity is considered appropriate and relevant by the College to support their endeavors.
- The Department also has a strong **education** interest in Community Medicine. The Healthy Human course in the first year, the clinical clerkship, and proposed new tracks in rural medicine, have attempted to integrate the issues of the community along with those

of the family. At the graduate level, the residency program now has a required community-oriented primary care project, in which all residents diagnose a community problem, develop an intervention, and assess the effectiveness of the intervention in some measure of health change in the concerned community.

- The Department has also been heavily involved in **service** as part of its community medicine efforts, with initiatives such as the Salvation Army free clinic as the best examples.

There is no attempt through this request to be duplicative to the activities of the newly developed School of Public Health, but rather to be complimentary, and to assure the presence of the community focus in the College of Medicine. We understand that the name change would come with no new resources. However, it will assist in verifying that the Department has a mission and an interest in a broader scope of concerns in research, education and patient care.

Respectfully submitted on behalf of the Department of Family Practice,

Samuel C. Matheny, MD, MPH  
Claire Louise Caudill Professor and Chair