The annual meeting of the College of Medicine was called to order at 4:05 pm by President Renate Rosenthal. Approximately 75 faculty were in attendance.

As the first order of business, Dr. Bob Shreve presented the 2008 graduating class, summarizing relevant statistics concerning board pass rates for various steps, residency match figures, and the like. For Step One national boards, for instance, UT's class of 2008 achieved a 97% first time pass rate. It was moved, seconded, and approved that the 2008 graduating class be approved for graduation.

Dr. Rosenthal then turned the meeting over to Dr. Art Geller, the new DFAC President. Dr. Geller's term will be brief, in that he will be moving to Cincinnati in June. He invited Dr. Schwab to present an update on the State of the College.

Dr. Schwab noted that the CoM has several overall goals: to be in the top quartile in 4 years, for clinical, education, and research. Dr. Schwab then discussed budgetary affairs, including financial growth that has come almost entirely from clinical care, hospital contributions and GME. State dollars have shrunk, if anything, and only about 12% of the budget comes from state appropriations.

This year UT CoM has added over 100 full-time faculty and is recruiting another 30 or so. UT is working aggressively to raise additional monies beyond the $25 M currently available.

Regarding chair searches Dean Schwab informed the CoM:
- Radiology: the new chair will be Dr. Harris Cohen;
- Medicine: a candidate has signed and, pending required state disclosures, background checks, etc., is expected to arrive in July;
- Neurobiology: a finalist is currently in negotiations;
- Ophthalmology: a search committee is interviewing candidates, and finalists are anticipated for a June 2008 timeline.

Regarding medical students, Dean Schwab stated that the current class size is 150 for students, and that LCME has approved an increase to 165-180. Financial constraints will probably keep the number to 165 for the foreseeable future. Beyond this, we have around 1000 residents in training. Across the system (including Knoxville and Chattanooga as well as Memphis), new residencies have been approved for vascular surgery, cardiology and pulmonary medicine, child and geriatric psychiatry, and emergency medicine, with anesthesiology pending for the Memphis campus.

Dr. Schwab indicated that efforts to increase research funding are growing, though not as much as hoped.

Dr. Schwab also briefly addressed other issues, such as the reappointment letters. A new template will be crafted for next year, which it is hoped will still meet the CoM's needs while better meeting faculty needs. Another issue on which forward movement is expected is variable
compensation--tying clinical remuneration to clinical effort, to collections, and/or to other
touchstones. Two pilot programs are currently being evaluated, so that after a testing period, a
suitable kind of variable compensation scheme can eventually be adopted.

The annual department evaluation process is being restructured. It is integral to the CoM's
budget, and also to faculty. As the CoM evaluates the department for its performance, the
department/division chief should be evaluating each faculty member as specifically as possible.

Dr. Schwab also presented a list of accomplishments:
- Reorganizing the CoM into a statewide institution, across the three campuses;
- Renewing LCME accreditation and securing LCME class expansion;
- Adding GME training programs;
- Reorganizing and filling the Dean structure;
- Filled/soon will fill 7 vacant chairs;
- Recruited over 100 faculty;
- Added over $25 M to funding.

He also discussed upcoming challenges:
- The CoM has received almost no incremental additions to state revenue support;
- state revenue will likely be reduced this year, by as much as 5-9%;
- there are also 'bricks and mortar' issues.

This was to be a year for UT new buildings and for renovations, but in fact those will not occur
this year. Internally and previously funded renovations and construction continue (Coleman
renovation and a new College of Pharmacy), but due to statewide budget challenges, new
building projects are held in abeyance for at least two years.

Additionally unresolved issues remain regarding what to do with newly raised funding--
particularly the $25M that the CoM has raised in recent years. It is now agreed that these monies
will stay with CoM to fund other entities' losses or needs. However, it is still unresolved as to
where this money will reside. UT CoM prefers that it would sit in a foundation account, so that
only UT CoM can gain access. Other issues concern "who owes what to whom ".

Regarding the Med, Dr. Schwab stated that the Med has not yet chosen its long-term strategic
partner. Any such choice will obviously affect the CoM.

A question and answer period followed, concerning such issues as why the medical student class
has not yet been increased. Dr. Schwab indicated that, while we have clinical rotations sufficient
to encompass up to 200 students, nevertheless other facilities, such as anatomy, have limits that
can not yet accommodate a substantially larger class. Also, as more education is delivered to
students in smaller groups, the GEB facilities are not entirely adequate. Another topic concerned
clinical compensation as individual physicians' productivity is affected by practical issues such as
location of patients, insurance status of one's patients, and the like. The likely focus of variable
compensation will be RVUs, actual collections, or some combination of both. Other questions
concerned funding equity with ETSU, financial structures to support new construction, and
specific changes in the reappointment letters.

Dr. Len Lothstein has been elected the new President of DFAC to succeed Dr. Art Geller when he
departs for Cincinnati. Dr. Martin Croce was elected President-elect. There were two write-in
candidates, which have been duly noted for possible future reference.

Respectfully submitted,
Haavi Morreim, PhD
DFAC secretary