

## RECRUITMENT OF OFFICERS IN THE UNITED STATES ARMY MEDICAL DEPARTMENT

BY

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WHEN the war ended in 1946 recruitment for regular medical and dental commissions in the United States Army Medical Department was at a low ebb. The outlook indeed was critical for the Medical Department had heavy long-term post-war commitments. Doctors and dentists, with and without army war service, seemed to have little interest in the regular army as a career. Those who had served in the war had had enough; the excitement was over, they wanted to get back to their families and their civilian jobs. They remembered the separation, often lengthy, from their families, the frequent moves, the many irksome non-professional tasks, and the "red tape." What could the peacetime regular army offer them anyway in comparison with a civilian career? They felt army service lacked the independence of civilian practice, that the pay was inadequate and that professional opportunity was limited. Those who had not seen war service thought the same way and even regular officers were being tempted by the lure of lucrative and settled civilian practice. Peacetime army service was looked upon as a priesthood in which a wife and family constituted a disadvantage owing to the shortage of housing in overseas stations. It would seem as if even the glamour of army uniform, now too drab, and the opportunity of a good time, now too expensive, had ceased to be attractive while the description of army service being "a good life" rang rather hollow.

Realizing it had to compete with the civilian market for doctors and to hold what officers it had, the Army Medical Department, with the co-operation of the General Staff, government agencies and the civilian medical profession, examined the reasons and sought remedial measures for the unattractiveness of a regular army medical career. The immediate necessity was economy in the use of the professional men; medical and dental officers were relieved of time-consuming non-professional duties by the use of carefully selected and trained Medical Service Corps (non-medical) officers. Medical work was assisted by the provision of clerical staff and the modernization of office equipment. Administrative procedures were simplified to save time. The resultant professional output by fewer doctors increased and improved. Pay has improved and an extra thirty-five pounds per month given to medical and dental officers, while priority in housing at overseas stations has been given to medical and dental officers with families.

The most powerful inducements, however, to regular army medical and dental recruitment were the introduction of the Graduate Professional Training Programme and the Career Guidance Plan. The former provided for one-year Army internships at Army and civilian hospitals (with an obligation of one year's subsequent general duty), and offered residency training (registrarships) in the specialties to those who took regular commissions. The Career Guidance Plan made it possible for a regular officer in any corps of the Army Medical Department to be given a chart outlining to him what he could achieve in his army career by his military proficiency and professional attainments. This system assures the officer that he is being considered as an individual and that his employment will be based on the premeditated career plan in which he himself has been consulted.

The profession and the public had to be told of these post-war improvements in order to dispel the prejudices and misconceptions which existed about regular army medical service and to foster interest in it as a career. This was effected by means of an extensive information programme in which full support was given by the medical and lay Press. In addition the Surgeon General's Personnel Division has been sharing its problems with Medical Department officers by means of articles on personnel matters in the monthly "Armed Services Medical Bulletin." Participation by leading and able regular officers in the meetings of national, state and local medical societies has also done much to present the Army in a favourable light. The fruits of all these well-planned and executed efforts are now appearing: an increasing number of fine young doctors and dentists in the United States are finding that the Army offers an attractive medical career with plenty of incentive, and older regular officers are finding a professional stimulus in the new order.

The following article deals with the important subject of career management in the United States Army and in its Medical Department. Colonel Fielding, who is joint author of the article, is one of several in the Surgeon General's Personnel Division who has been specially groomed for personnel administration. After completing his medical training at the University of Southern California from which he graduated M.D. in 1937, he joined the United States Army Medical Corps, and served a year's internship at the Army's Letterman General Hospital, San Francisco. He was appointed to the Personnel Division of the Surgeon General's Office in 1943 and was sent in 1946 to the University of Maryland for an intensive course in personnel administration. In the following year he studied the practical aspect of this subject in three well-known American industrial concerns, Schenley's Distilleries, General Foods Corporation and E. R. Squibb and Sons. With this training, and with his experience in personnel matters, Colonel Fielding is able, with Colonel Robinson, to give us a concise picture of career management in the various corps forming the United States Army Medical Department.