60.2648. Indoctrinate medical schools in policies, procedures and philosophy of medical benefits: AT 89 (DAV); DC2T 332 (DAV)

60.2652. Advise VA personnel that veterans are eligible for hospitalization and treatment regardless of their state of residence: OT 314 (DAV); DC2T 192 (AMVETS).

60.2656. Orient admitting physicians with physician's guide: OT 448

(DAV). 60. 2660. Inform hospital admission personnel of veterans rights and conduct admission examinations early in the day: AT 332

60.2664. Make patient care a priority over teaching in VA Hospital:
PT 150 (AL); PT 287 (VFW); OT 515 (AL).
60.2668. Make hospital admission a VA policy—not a medical school policy: OT 42 (WWI).
60.2672. Admit veteran on basis of need of hospitalization not edutionary peads of hospital: PT 150 (AL)

tionary needs of hospital: PT 150 (AL).

60.2676. Liberalize admision by limiting power of medical schools: DC2T 192 (AMVETS).

60.2680. Curtail power of Dean's Committee: CT 112 (VFW).

60.2684. Surpervise Dean's Committee directly under Hospital Director: CT 130 (VFW).
60.2688. Do not allow medical schools to select cases for admission:

DCT 513 (ANV)

60.2692. Allow VA Hospital Director to determine the admission and treatment policies of hospitals regardless of state requirements concerning the teaching program of the medical center: OT 313 (DAV).

60.2696. Restore dignified status to hospital program (admitting and counseling): DC2T 264 (AL).
60.2700. Interview veteran seeking hospitalization privately when filling out 10-P-10: PT 153 (AL).

60.2704. Eliminate counseling procedure on hospital admission: DCT 488 (FRA); DC2T 100 (VFW).

60.2708. Eliminate information requirement and counseling practice associated with hospital admission applications: PT 278 (VFW); AT 524 (VFW); AT 533.

60.2712. Provide competent medical and administrative personnel at

each VA Hospital to counsel veterans and families at admission and discharge as to available benefits: AT 332 (AL).

60.2716. Apply private medical and hospitalization insurance carried by non service connected veteran toward treatment in a VA Hospital: DC2T 154 (PLAV).

60.2720. Provide beds for WWI veterans regardless of income: PT 159 (WWI).

60.2724. Continue VA medical treatment for those veterans who cannot afford it: DC2T 385 (JWV).

60.2728. Liberalize inability to pay oath for VA Hospital admission: DC2T 90 (VFW).