10. The establishment of a network of coronary care units in small community hospitals in Appalachia, North Carolina

This is a proposal to develop coronary care units in seven hospitals in this rural, mountainous area. RMP will supply the monitoring equipment (the hospital provides suitable space) when adequately trained physicians and nurses are available. An intensive training course for physicians will be conducted in the geographic region, and continuing education programs will be conducted when necessary.

ROCHESTER REGIONAL MEDICAL PROGRAM

On March 1, 1968 the Rochester Program began its operational activities with a modest operational grant award of \$255,487. Approximately 15 people are currently serving on the staff which will expand with additional recruitment. The current staff includes 13 physicians, and two allied health personnel. A majority of the staff are from community hospitals, and are working closely with medical center and RMP staff to improve the quality of local patient care.

Approximately eleven hospitals from the region are now participating in the program, and this will expand as the program moves forward over the next few years. Four hospitals are initially participating in the operational projects. Three of these four are represented on the Regional Advisory Committee. Seven additional hospitals are serving on the Advisory Committee and planning subcommittees.

Operational Projects

1. Renovation and equipping of facilities for a learning center for projected training programs related to heart disease, cancer, and stroke, direct cost—\$26,400

The awarded funds are for the purpose of altering and renovating space in Helen Wood Hall, which houses the Departments of Nursing at the University of Rochester. It is planned to convert five rooms into two rooms for self-instructional learning. These facilities initially will be used for four 4-week coronary care training courses for nurses and physicians in the region. New techniques that are disseminated by means of these courses will then be caried to the various community hospitals and rural areas in the region by the training course participants.

2. Postgraduate training program for the physicians in the Rochester 10-county region, direct cost—\$83,900

The objectives of this project are centered around the further development of a postgraduate program in cardiology. Learning opportunities will be made available for general practitioners and internists, as well as cardiologists practicing in the region. Several different programs are planned and vary in length from one-half day to two weeks. It is anticipated that a number of the participating physicians will represent community hospitals in rural areas.

3. Registry of patients with acute myocardial infarction in the Rochester regional hospitals, direct cost—\$21,200

One objective of this registry is to provide a uniform data collection system from which both periodic information as well as longitudinal analyses may be extracted. Appropriate information as to prognosis and treatment will be disseminated to participating hospitals and cooperating physicians in the region. Strong Memorial Hospital in Elmira, New York is already participating in this project, and it is anticipated that several other community hospitals, especially those in rural areas, will soon also be participating.

4. Proposal for establishment and support of a regional laboratory for the educacation and training in the care of patients with thrombotic and hemorrhagic disorders, direct cost—\$69,400

At the present time no single, central facility concerned with the diagnosis and therapy of patients with thrombotic or hemorrhagic disease exists in the Rochester region. Laboratory technicians from the regional hospitals will be invited to spend three or four days in the new facility. In addition, the physicians directing this project will visit the participating communities so that a continuing educational program for practicing physicians in the care of patients with thrombotic diseases will be maintained.

## TENNESSEE MID-SOUTH REGIONAL MEDICAL PROGRAM

On February 1, 1968, the Tennessee Mid-South Regional Medical Program began its operational activities with a diverse array of programs designed to