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Meeting No. 821

THE MINUTES OF THE BOARD OF REGENTS
OF
THE UNIVERSITY OF TEXAS SYSTEM

VOLUME XXXIV - A

Pages 1 - 210

October 9, 1986

Dallas, Texas

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 OF
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MEETING NO. 821

THURSDAY, OCTOBER 9, 1986.--The members of the Board of Regents of The University of Texas System convened in regular session at 1:20 p.m. on Thursday, October 9, 1986, in Room E6.200 of the Fred F. Florence Bioinformation Center at The University of Texas Health Science Center at Dallas, Dallas, Texas, with the following in attendance:

ATTENDANCE.--

<u>Present</u>	<u>Absent</u>
Chairman Hay, presiding	*Regent (Mrs.) Milburn
Vice-Chairman Baldwin	
Vice-Chairman Ratliff	
Regent Blanton	
Regent (Mrs.) Briscoe	
Regent Rhodes	
Regent Roden	
Regent Yzaguirre	

Executive Secretary Dilly

Chancellor Mark
Executive Vice Chancellor Duncan
Executive Vice Chancellor Mullins
Executive Vice Chancellor Patrick

Chairman Hay announced a quorum present and called the meeting to order.

WELCOME BY KERN WILDENTHAL, M.D., PRESIDENT OF THE UNIVERSITY OF TEXAS HEALTH SCIENCE CENTER AT DALLAS.--Chairman Hay stated that the Board was pleased to be meeting in Dallas and then called on Kern Wildenthal, M.D., President of The University of Texas Health Science Center at Dallas (the host institution).

On behalf of the faculty, staff and students of the U. T. Health Science Center - Dallas, President Wildenthal welcomed the members of the Board and other guests to Dallas. In view of the Regents' full agenda, President Wildenthal elected to forego the usual institutional presentation.

U. T. BOARD OF REGENTS: APPROVAL OF MINUTES OF SPECIAL MEETING HELD ON AUGUST 4, 1986, AND REGULAR MEETING HELD ON AUGUST 14-15, 1986.--Upon motion of Regent Rhodes, seconded by Regent Briscoe, the Minutes of the special meeting of the Board of Regents of The University of Texas System held on August 4, 1986, in Austin, Texas, and the Minutes of the regular meeting held on August 14-15, 1986, in Austin, Texas, were approved as distributed by the Executive Secretary. The official copies of these Minutes are recorded in the Permanent Minutes, Volume XXXIII, Pages 4740 - 5840.

*Regent Milburn was absent due to illness in her family.

INTRODUCTION OF FACULTY AND STUDENT REPRESENTATIVES.--Chairman Hay called on the chief administrative officers of the component institutions to introduce their respective faculty and student representatives and other guests:

U. T. Arlington

President Nedderman introduced:

Faculty Representative:	Dr. Jack Gibson, Chairman Faculty Senate
Student Representatives:	Ms. Cathey Bloom, President, Student Congress Ms. Molly Ann Riley, Vice President, Student Congress Mr. Michael Rupe, News Editor, Student Publications

U. T. Austin

President Cunningham introduced:

Student Representatives:	Ms. Lisa Gaumnitz, General Reporter, <u>The Daily Texan</u> Ms. Andrea Greene, General Reporter, <u>The Daily Texan</u>
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U. T. Dallas

President Rutford introduced:

Faculty Representative:	Dr. Cy Cantrell, Speaker of the Faculty
Student Representative:	Ms. Dawn Tindall, President, Student Government

U. T. El Paso

President Monroe introduced:

Faculty Representative:	Dr. Thomas McClean, Chairman of Faculty Senate and Professor of Mechanical and Industrial Engineering
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U. T. San Antonio

President Wagener introduced:

Faculty Representative:	Dr. Paul E. Hemmeter Assistant Professor, Division of Accounting and Information Systems, College of Business
Student Representative:	Mr. Stephen Koebele Parliamentarian, Student Government

U. T. Tyler

President Hamm introduced:

Faculty Representative:

Dr. Thomas A. Keagy, President, Faculty Senate

U. T. Health Science Center - Dallas

President Wildenthal introduced:

Faculty Representative:

Bruce Carr, M.D., President Faculty Senate

Student Representative:

Mr. Rob Wills, Sophomore Class President

U. T. Medical Branch - Galveston

President Levin introduced:

Faculty Representative:

Katherine Nugent, R.N.
Assistant Professor
U. T. Nursing
School - Galveston

Student Representative:

Ms. Sara Miller, Semester III Nursing Student, U. T. Nursing School - Galveston

U. T. Health Science Center - Houston

President Bulger introduced:

Faculty Representative:

John Ribble, M.D., Dean
U. T. Medical
School - Houston

U. T. Health Science Center - San Antonio

President Howe introduced:

Faculty Representative:

Dr. Elaine Neenan, Director, External Affairs and Assistant Professor, Community Dentistry, U. T. Dental School - San Antonio

Student Representative:

Ms. April Ernst, Graduate Student, U. T. Nursing School - San Antonio

U. T. Cancer Center

President LeMaistre introduced:

Faculty Representative:

Dr. Frederick F. Becker
Vice President for
Research

U. T. SYSTEM: STATEMENT BY CHAIRMAN HAY REGARDING ACTIONS OF THE THIRD CALLED SESSION OF THE 69TH LEGISLATURE AND APPROVAL OF AMENDMENTS TO THE PERSONNEL ASPECTS OF THE 1986-1987 OPERATING BUDGETS, INCLUDING AUXILIARY ENTERPRISES, GRANTS AND GOVERNMENT CONTRACTS, DESIGNATED FUNDS, RESTRICTED CURRENT FUNDS AND MEDICAL SERVICES, RESEARCH AND DEVELOPMENT PROGRAMS RESULTING FROM ACTIONS OF THE THIRD CALLED SESSION OF THE 69TH LEGISLATURE.--Chairman Hay reported that the Board had received a comprehensive briefing on the fiscal consequences to The University of Texas System and to higher education in general of the actions taken by the recent Special Session of the 69th Legislature. He then presented the following statement:

Statement by Chairman Hay

As the long debated and difficult compromise budget package for the 1986-1987 fiscal year is completed, the Board of Regents of The University of Texas System would like to send a special message to those who were involved and concerned with funding for higher education.

To our faculty, staff, students and thousands of alumni and supporters we say that the approximately 13.2 percent reduction in general revenue resourcing for the 1987 fiscal year, which is equivalent to a 6.6 percent general revenue reduction from the original biennial general revenue resourcing for the U. T. System, is extremely serious but not devastating. Because of the System's carefully implemented savings measures in response to Governor White's Executive Order MW-36 issued in February 1986, the general effect of the reductions will be spread over both years of the biennium thus making the reductions more comparable to 6.6 percent rather than 13.2 percent for the remaining year of the biennium.

The total general revenue reduction is about \$107 million for the biennium, about \$16 million more than we had voluntarily proffered under Governor White's earlier executive order. Reductions of this magnitude will be difficult to achieve without a marked decrease in our ability to maintain our academic, research and patient care missions. However, with your understanding and cooperation we will succeed in this difficult task.

The Legislature, through a pool of funds to compensate for a shortfall of tuition income and through a permissive rider which allows for the transferability of funds between components, will allow the Board of Regents some discretion to lessen the impact of these reductions. We pledge to our employees, students and friends that the Board of Regents will expend its best efforts to minimize the effect of these substantial reductions and allocate the available resources so as best to maintain the academic and research momentum for which we have so long cooperatively strived.

To members and observers of the national academic and research community we say that it would be premature and unwise to eliminate Texas from the intense competition for national and international

ranking. The current deficit problem has resulted in the perception of a temporary slowing of our quest for excellence, but we fully believe that the leadership of this State has not abandoned its historical commitment to higher education and will, at the earliest opportunity, provide the resources essential to a full scale and unrestrained pursuit of excellence in the delivery of our educational, research, and patient care services. All interested observers should know that we remain on that course and that we still are fully committed to providing the very best academic environment in the nation. Remember that Texans are a proud people, and, even in the face of a transient fiscal deficit, remain deeply committed to our State and to its destiny which truly is to be the very best. Our citizens realize that the future of their State will be built upon an economic and technological diversification fueled by the educated and highly trained minds which are the product of the higher education enterprise.

Lastly, and most importantly, to Governor White, Lt. Governor Hobby, Speaker Lewis and the members of the Legislature we say that we recognize and appreciate the literally unprecedented fiscal pressures which surrounded this Special Session. We realize that higher education, along with most of the other services of State Government, had to participate in resolving the fiscal deficit. We acknowledge both your statesmanship and your dedication in reaching a reasonable and responsible compromise. The reductions which were agreed upon were significantly less than had been originally discussed and for this we are deeply grateful. You have challenged all institutions of higher education to sustain their academic, research and patient care missions for a year with this level of reduction. You may be assured that, with the patience and understanding of our faculty, staff, students and friends, we will succeed.

The much more serious problem for Texas higher education, for the State's vision of economic diversification and for the national perception of Texas will come in January 1987. Quite simply, the 70th Legislature will have to decide whether higher education is important to the future economic well-being of this State. If that answer is affirmative, as we all know it must be, then the Legislature and our elected State leaders must accept the challenge to provide for a level of fiscal support which will rekindle the academic and research momentum compromised to some extent during the current biennium. A first priority is to restore the substantial reductions that have been made in the State's contributions to higher education. The second priority must be to translate into a monetary commitment the increase in higher education funding necessary to return to a high level of momentum. If the answer is in the negative then, to the State's everlasting shame, we will recede into the back waters of also rans, content to reside there with recollections of a glorious past clouded by the certainty of a limited future.

The momentum of excellence is indeed fragile. It must be carefully crafted and continuously nurtured. We may prevent permanent damage through one biennium of reduced funding, but we will not endure, without serious and long-term damage, a second biennium of legislative uncertainty regarding the value of higher education.

If our young people are to be educated to leadership roles, if our research and technology programs are to impact positively upon the business/industrial growth of our State, if our programs of patient care and medical research are to be of benefit to our citizens and if Texas is to be recognized as a leader in the national academic and research community, then realistic funding levels will have to be provided.

Indeed, that is the challenge to the 70th Legislature, and its response will determine the future economic vitality of our State. Or, as the Dallas Times Herald editorialized on September 28, 1986, "the Legislature, by enacting deep cuts in higher education, is undermining the very institutions that hold the greatest promise of real economic recovery and future prosperity."

With that reality in mind, we sincerely hope that the Texas Legislature, in its next regular session, will clearly manifest its spiritual alliance with higher education's aspiration for excellence -- an aspiration incidentally which is in perfect harmony with the best hope for a rich and abundant future for the State of Texas and its people.

Following Chairman Hay's statement, Vice-Chairman Ratliff moved that in accordance with Rider Item 2 on Page III-39 of Senate Bill 1, Third Called Session, 69th Legislature, the Comptroller of Public Accounts be instructed to reduce the general revenue expenditures of The University of Texas Medical Branch at Galveston by \$6 million and The University of Texas System Cancer Center by \$9 million for the 1986-1987 fiscal year and that for budgetary purposes these same amounts be replaced with increased collections of "other educational, general, and patient income."

Further, Vice-Chairman Ratliff moved that in accordance with Rider Item 5 on Page III-109 of Senate Bill 1, Third Called Session, 69th Legislature which provides the Board of Regents with full transfer flexibility between component institutions the Office of the Chancellor be directed to take all actions necessary and appropriate to implement the interinstitutional transfers for the 1986-1987 fiscal year as shown on Table I and that revised operating budgets consistent with these transfers be developed for subsequent approval by this Board via the Executive Committee Letter process.

In this connection, Vice-Chairman Ratliff also moved that the component institutions be instructed that where possible their revised budgets shall incorporate the flexibility to award faculty and staff merit increases and to otherwise meet the demands of recruiting and retaining the quality of personnel necessary to carry out the academic, research and patient care missions of the U. T. System in a nationally competitive manner as well as the need to fill nonacademic positions and/or restore support functions, eliminated or curtailed during freezes under both Executive Orders MW-36 and MW-39, which are critical to the maintenance of these missions.

In keeping with the expressed intent of the Legislature, these transfers are being implemented in such a manner as to be least harmful to The University of Texas System as a complete academic, research and patient care enterprise. We are grateful to the Legislature for providing us with the authority to make these funding transfers in the best interests of the U. T. System. It should be noted that this is the first time that the Board has found it necessary to utilize this transfer authority and that we do so with great reluctance. These transfers remove funding from U. T. Austin, U. T. Medical Branch - Galveston, and the U. T. Cancer Center which was intended for both current operations and future institutional improvement and we regret that such transfers are necessary.

After giving effect to these institutional fund transfers, reductions in net appropriations to the respective components will be in substantial compliance with the cuts voluntarily proffered by the System in response to the Governor's Executive Order MW-36 as shown on Table II.

In summary, the effect of these motions is (1) to comply with the requirements of the recently enacted 1986-1987 Appropriations Bill and (2) to enable the components of the U. T. System to develop revised operating budgets for the current fiscal year which are essentially consistent with the reductions we had voluntarily proffered under Governor White's Executive Order MW-36.

Regent Rhodes seconded the motions which carried by unanimous vote.

TABLE I

Interinstitutional Funding Transfers Applicable
to the 1986-1987 Operating Budgets as Directed
by the Board of Regents in Accordance with
Rider Item 5 on Page III-109 of Senate Bill 1,
Third Called Session, 69th Legislature

1. From savings related to the refunding of Tuition Revenue Bonds, \$1,400,000 shall be transferred from System Administration to U. T. Austin
2. From The University of Texas at Austin, \$7,950,000 of general revenue funding shall be transferred as follows:
 - U. T. Arlington \$3,900,000
 - U. T. Dallas 1,100,000
 - U. T. El Paso 1,000,000
 - U. T. Permian Basin 250,000
 - U. T. San Antonio 1,200,000
 - U. T. Tyler 500,000
3. From the general revenue funds available to The University of Texas Medical Branch at Galveston and The University of Texas System Cancer Center there shall be transferred \$10 million and \$12,056,000 respectively for the 1986-1987 fiscal year, and this amount shall be allocated as follows:
 - U. T. Health Science Center - Dallas \$4,350,000
 - U. T. Medical Branch - Galveston 5,720,000
 - U. T. Health Science Center - Houston 6,357,000
 - U. T. Health Science Center - San Antonio 5,583,000
 - U. T. Health Center - Tyler 46,000

TABLE II

The Budgetary Reductions Voluntarily Proffered by the U. T. System Under MW-36 Compared with the Budgetary Reductions Resulting from Actions of the Third Called Session, 69th Legislature, Following Utilization of the Transfer Authority by the Board of Regents

<u>Component</u>	<u>Reductions</u>		
	<u>Voluntarily Proffered</u> (000)	<u>Final</u> (000)	<u>Difference</u> (000)
System Administration	\$ 37	\$ 96	\$ (59)
<u>Academic Institutions</u>			
U. T. Arlington	2,274	2,323	(49)
U. T. Austin	26,394	24,698	1,696
U. T. Dallas	1,121	1,131	(10)
U. T. El Paso	1,214	1,223	(9)
U. T. Permian Basin	358	371	(13)
U. T. San Antonio and Institute of Texan Cultures	1,228	1,228	--
U. T. Tyler	371	405	(34)
Subtotal -- Academic	<u>\$32,960</u>	<u>\$31,379</u>	<u>\$1,581</u>
<u>Health Institutions</u>			
UTHSC - Dallas	2,462	2,462	--
UTMB - Galveston	20,833	20,833	--
UTHSC - Houston	3,942	3,942	--
UTHSC - San Antonio	3,144	3,144	--
UT Cancer Center	25,496	25,496	--
UT Health Center - Tyler	1,757	1,757	--
Subtotal -- Health	<u>\$57,634</u>	<u>\$57,634</u>	<u>\$ --</u>
Total U. T. System	<u>\$90,631</u>	<u>\$89,109</u>	<u>\$1,522</u>

To achieve this result, it has been necessary to appropriate an aggregate \$37,056,000 of unexpended operating balances at U. T. Cancer Center and U. T. Medical Branch - Galveston, which total is \$5,056,000 higher than the planned use of operating balances under the System's response to MW-36. Thus, the net result of the recent special session has been the extraction of \$3,534,000 more in resources from the System than had been initially planned.

RECESS FOR COMMITTEE MEETINGS AND COMMITTEE REPORTS TO THE BOARD.--At 1:45 p.m., the Board recessed for the meetings of the Standing Committees and Chairman Hay announced that at the conclusion of each committee meeting, the Board would reconvene to approve the report and recommendations of that committee.

The meetings of the Standing Committees were conducted in open session and the reports and recommendations thereof are set forth on the following pages.

REPORTS AND RECOMMENDATIONS OF STANDING COMMITTEES

REPORT OF EXECUTIVE COMMITTEE (Pages 11 - 32).--In compliance with Section 7.14 of Chapter I of Part One of the Regents' Rules and Regulations, Chairman Hay reported to the Board for ratification and approval all actions taken by the Executive Committee since the last meeting. Unless otherwise indicated, the recommendations of the Executive Committee were in all things approved as set forth below:

1. U. T. System: Approval and Certification of Incidental Fees Levied by U. T. Component Institutions in Accordance with Requirements of Section 54.504, Texas Education Code (Catalog Change) (Exec. Com. Letter 86-26).--The 69th Legislature enacted a general incidental fee statute applicable to all public institutions of higher education (Section 54.504 of the Texas Education Code) which became effective August 26, 1985. In order to ensure that the previously approved incidental fee charges for The University of Texas System are enacted in compliance with current law, the Board, upon recommendation of the Executive Committee, approved assessment of the incidental fees listed on the following pages effective for Fall Semester 1986.

Further, the Board:

- a. Found, based upon cost information provided to and reviewed by the Office of the Chancellor, that each fee assessed reasonably reflects the cost to the University of the materials and services for which the fee is to be collected;
- b. Authorized future proposals to change these incidental fee rates or to establish new incidental fees to be submitted annually via the U. T. System Docket for the August U. T. Board of Regents' meeting unless individual circumstances require off-schedule handling; and
- c. Repealed the uniform Systemwide returned check charge policy approved by the U. T. Board of Regents in July 1980.

The list includes all incidental fees currently assessed by U. T. System institutions including those fees approved within the last year but does not include fees covered by another statute, fees for non-students, or fees which the University collects and forwards to a third party, e.g. insurance premiums, standardized test fees, and certain rental fees. Laboratory fees up to a maximum of \$8.00 per semester can be assessed under separate statutory authority and are not listed herein. However, U. T. System component institutions do not assess overlapping laboratory and incidental fees covering the same academic discipline or course.

It was ordered that the next appropriate catalog published at the respective institutions be amended to reflect this action.

THE UNIVERSITY OF TEXAS SYSTEM
INCIDENTAL FEES

U. T. SYSTEM

	<u>Amount</u>
Medical and Dental Application Fee To help recover expenses associated with processing medical and dental school applications	For Texas residents \$35 for one school; \$ 5 each additional school For nonresidents \$70 for one school; \$10 each additional school

U. T. ARLINGTON

Audit Fee To defray administrative costs incurred in registering non-credit participants in scheduled classes	\$25 - non-enrolled UTA students \$ 5 - enrolled UTA students
Computer Use Fee To defray costs of computer time for students in courses requiring access to computers. Amount charged dependent on course requirement classification: limited (\$5), moderate (\$10), or extensive (\$15) access	\$ 5 - \$15/course
Field Trip Fee To defray transportation and related costs associated with field trips	Varies based on actual costs. Specific fees to be approved by Docket.
Graduation Fee To defray costs of diploma and cover	\$ 5/undergraduate \$10/graduate
Graduation Fees for Doctoral and Master's Candidates	
In Absentia To defray administrative costs of processing graduation applications for students who are not currently enrolled	\$15
Dissertation Costs	
Binding	\$16.50
Microfilming	\$40
Copyright Registration (optional)	\$20
Mailing	\$ 8 - \$25
Instrument Users Fee - Biology and Geology To defray costs of replacement and maintenance of microscopes and related equipment	\$ 5 - \$10/course
Instrument Users Fee - Music To defray costs of replacement and maintenance of University-owned musical instruments	\$25/student

	<u>Amount</u>
International Student Application Fee To defray costs of the individualized credential evaluations required in foreign student admission decisions	\$50/student
Late Registration Fee To defray costs associated with keeping registration open after published times	\$ 5 first day; \$ 2.50 each additional day to \$15 maximum
Library Fees To cover handling costs associated with computer searches, processing lost books and books returned after the due date	
Overdue Charges	
Regular check-out	\$0.25/day; maximum \$25
Reserve Books	\$0.25/hour; maximum \$25
Lost Books	Cost plus \$10 processing fee, plus any fines accrued
Computer Search	Variable based on on-line connect time and number of records/ references printed. Range \$2 - \$60
Orientation Fee To defray costs associated with new student advising and pre- registration	\$12.50/student
Physical Education Fees To defray costs of purchase of supplies, maintenance of equipment, rental of equipment, use of special facilities, and locker room service for special courses such as Golf, Bowling, Scuba Diving, and Fencing	\$ 5 - \$48
Returned Check Fee To defray administrative costs for reprocessing or collecting checks written on insufficient funds	\$10/check
Student Financial Aids Processing Fee To defray the costs of service to students who elect to submit their financial aid need analysis for 48-hour processing	\$10
Student Identification Card Fee To defray costs of producing and distributing student ID cards	\$ 4/card
Student Identification Card Replacement Fee To defray administrative costs of reissuing student ID card	\$ 4/card

	<u>Amount</u>
Student Loan Processing Fees To defray administrative costs of processing the Guaranteed Student Loan (GSL), the Parent Loan for Undergraduate Students (PLUS), and Auxiliary Loan to Assist Students (ALAS)	\$10
Student Resume Fee To defray costs of copying, printing, and administrative costs associated with providing placement services	\$ 3
Test Fee To defray costs associated with administering and scoring Advanced Standing Exams and other institutional academic tests	
Foreign Language	\$ 5
ISAT	\$25
Advanced Standing Exams	\$ 5
Correspondence Exams	\$ 5
Transcript Fee To defray costs of retrieving, duplicating, and mailing student transcripts	\$ 1/routine service \$ 3/on-demand service
<u>U. T. AUSTIN</u>	
Camera and Dark Room Fees To defray photography costs related to geological science coursework	
Camera	\$ 2/semester
Dark Room	\$ 5/semester
Catalog Fee To defray cost of printing and distributing catalogs	\$ 1 - \$ 2/each
Choral Ensembles Tuxedo Rental To defray costs of providing uniforms for choral ensembles	\$ 5
Duplicate Fee Receipt Charge To defray costs of retrieving, copying and mailing duplicate fee receipts	\$ 1
Field Trip Fees To defray transportation and related costs associated with field trips	Varies based on actual costs. Specific fees to be approved via Docket.
Graduate Dissertation Fees To defray costs of binding, microfilming, and obtaining copyright for dissertation	
Binding	\$ 4/each
Microfilming	\$35/each
Copyright Registration	\$20/each

	<u>Amount</u>
Graduate School of Business Application Fee To defray costs of the evaluations required in GSB admission decisions	\$25
Guaranteed Student Loan Processing Fee To defray administrative costs of processing guaranteed student loans	\$15
Health Professions Evaluation Processing Fee To defray costs of processing and mailing Health Professions Committee Evaluations for students applying to more than 4 medical or dental schools	\$ 2/each additional mailing after first 4 mailings
In Absentia Fee To defray administrative costs of processing graduation applications for students who are not currently enrolled	\$25
International Student Application Fee To defray costs of the individualized credential evaluations required in foreign student admission decisions	\$50
Late Registration Fee To defray costs associated with keeping registration open after published times	\$25
Law School Application Fee To defray costs of the evaluations required in Law School admission decisions	\$25
Library Fees To cover handling costs associated with processing lost or damaged books or books returned after the due date	
General Libraries	
2 hour or overnight item	\$0.50/hour; (\$12 max.)
3 day & Library use items	\$ 2/day or fraction thereof (\$12 max.)
7 day	\$0.50/day per item (\$12 max./item)
14 day; 28 day; and semester items	\$0.25/day (\$12 max.)
Lost item	Cost of replacement
Processing Fee	\$ 5
Repair Charge	\$ 2 (\$ 5 if rebound)
Chemical Engineering Library	
Lost Books	\$15/item
Overdue Charges	\$ 1/day (\$15 maximum)
Law School Library	
Lost Books	\$20/item

	<u>Amount</u>
Lost Equipment Replacement Fees Learning Resources Intramural Sports Music Choral Organization Military Property	Varies based on cost of equipment
Measurement and Evaluation Center To defray costs associated with administering and scoring academic tests and with provid- ing scanning and data processing services for selected graduate research projects	
Placement & Credit by Exam	\$25
Placement & No Credit by Exam	\$20
Optional (Student challenges course for credit by Exam)	\$40
Scanning and Data Processing Charges	\$25 - \$75
Military Uniform Handling Fee To defray administrative costs associated with issuing uniforms	\$ 3.50
Pharmacy Laundry Service Fee To defray administrative costs associated with cleaning laboratory jackets and linen (varies according to course requirements)	\$ 1 - \$ 2
Placement Service Fees To defray costs associated with student placement services	
College of Business Administration (Graduate increase from \$5; Senior increase from \$5)	\$25/graduate \$20/senior
College of Communication	\$25/graduate \$20/senior
College of Education	First mailing free \$ 5/five mailings after first mailing
Liberal Arts (Increase from \$5)	\$10/year
Returned Check Fee To defray administrative costs for reprocessing or collecting checks written on insufficient funds	\$10/check
Student Identification Card (Name Change) To defray administrative costs associated with changing ID card	\$ 2/card
Student Identification Card Replacement Fee To defray administrative costs of reissuing student ID card	\$ 5/card
Summer Orientation Fee To defray costs associated with new student advising and pre- registration	\$45

	<u>Amount</u>
Transcript Fees To defray costs of retrieving duplicating, and mailing student transcripts	\$ 5/routine service \$10/on-demand service
<u>U. T. DALLAS</u>	
Audit Fee To defray administrative costs for registering non-credit participants in scheduled classes	\$25/non-enrolled UTD student \$ 5/enrolled UTD students
Career Planning and Placement Fee To defray the costs of retrieving, duplicating, and distributing student credentials (increase from \$1 to \$5) (establishes \$2/packet fee after 5 mailings)	\$ 5/Registration and 1st five packets \$ 2/Each additional packet
Catalog Fee To defray costs of printing and distributing catalogs	\$ 2 local \$ 3 mailing in U. S. \$ 7 mailing outside U. S.
Computer Use Fee To defray costs of computer time for students in courses requiring access to computers	\$20/semester per student for stu- dents using com- puter resources
Diploma Fee To defray costs of printing and mailing diplomas	\$10
Dissertation Fee To defray costs of microfilming and filing with national registry (increase from \$42)	\$48.50
Field Trip Fee To defray transportation and related costs associated with field trips	Varies based on actual cost of transportation. Specific fees to be approved via Docket.
In Absentia Fee To defray administrative costs of processing graduation applications for students not currently enrolled	\$15/registration
International Student Application Fee To defray costs of the individualized credential evaluations required in foreign student admission decisions	\$50/student
Late Registration Fee To defray costs associated with keeping registration open after published times (increase from \$1/day maximum \$5 to \$10)	\$10

	<u>Amount</u>
Library Fees	
To defray costs of inter-library loans, thesis binding, computer searches, overdue and lost books, and rental of media equipment for extracurricular activities	
Inter-library Loans	\$ 1 handling + \$0.10/page
Computer Searches	Variable
Archival Research	\$0.10/page
Library Fines	\$ 5/item
Lost Books	Cost + \$10 processing
Thesis Binding	\$30/4 copies
Media Charges	Variable by equip- ment/service
Photography Fee	\$15/course
To defray the cost of film, chemicals, and related consumable items	
Returned Check Fee	\$15/check
To defray administrative costs for reprocessing or collecting checks written on insufficient funds (increase from \$10)	
Studio Art Fee	\$10/course
To defray the cost of art supplies	
Student Identification Card Replacement Fee	\$ 5/card
To defray administrative costs of reissuing student ID card	
Transcript Fee	\$ 2/routine service \$ 5/on-demand service
To defray costs of retrieving, duplicating, and mailing student transcripts	
 <u>U. T. EL PASO</u> 	
Add/Drop Fee	\$ 5/transaction
To defray costs incurred when a student makes a change in the initial registration	
Catalog Fee	\$ 1 - \$ 2
To defray catalog printing and mailing costs	
Computer Use Fee	\$10/class
To defray costs of computer time for students in courses requiring access to computers	
Field Trip Fee	Varies based on actual transpor- tation and related costs. Specific fees to be approved via Docket.
To defray transportation and related costs associated with field trips	

	<u>Amount</u>
Geology Field Course Transportation Fee To defray costs associated with regularly scheduled Geology field course	\$200
Graduation Fee To defray costs of degree checks	\$15/student
In Absentia Registration Fee To defray administrative costs of processing graduation applications for students who are not currently enrolled	\$15/semester
International Student Application Fee To defray costs of the individualized credential evaluations required in foreign student admissions decisions	\$50
Instrument Users Fee - Music To defray costs of replacement and maintenance of University- owned musical instruments (establish new fee)	\$15/student user/semester
Late Undergraduate Admission Application Fee To defray administrative costs incurred with processing applications submitted after the posted deadline	\$15/semester
Late Registration Fee To defray costs associated with keeping registration open after published times	\$ 5 first day; \$ 2.50 each additional day; \$15 maximum
Library Fees To cover handling costs associated with processing books returned after the due date	\$0.20/day; \$ 6 maximum/book
New Student Orientation Fee To defray costs associated with new student advising and pre-registration	\$15
Returned Check Fee To defray administrative costs for reprocessing or collecting checks written on insufficient funds	\$15/check
Special Exam Fee To cover costs of administering Advanced Standing Examinations, examinations to remove a condi- tion or examinations given at a time other than that for which it is regularly scheduled	\$ 1/exam

	<u>Amount</u>
Student Identification Card Replacement Fee To defray administrative costs of reissuing student ID card	\$10/card
Transcript Fee To defray costs of retrieving, duplicating, and mailing student transcripts	\$ 1/routine service \$ 2/on-demand service

U. T. PERMIAN BASIN

Computer Use Fee To defray costs of computer time for students requiring access to computers	\$20/student/semester
Geology Field Course Fee To defray costs associated with regularly scheduled six week Geology field course	\$400
Graduation Fee To defray costs of degree checks, diploma, and related costs. (This \$12 fee was approved 8/85 by the U. T. Board of Regents as a Diploma Fee. U. T. Permian Basin is requesting a name change to better reflect uses of fee.)	\$12
In Absentia Fee To defray administrative costs of processing graduation applications for students who are not currently enrolled	\$25
Late Registration Fee To defray costs associated with keeping registration open after published times	\$ 5
Library Fees To cover handling costs associated with processing lost books and books returned after the due date and with processing inter-library loans	
Overdue Charges	
Reserve Books	\$0.25/hour
Inter-library Loan	\$1/day on over due materials
Lost Book	Cost
Inter-library Loan	\$1.50 computer charge plus handling costs
Returned Check Fee To defray administrative costs for reprocessing or collecting checks written on insufficient funds	\$10/check

	<u>Amount</u>
Student Identification Card Replacement Fee To defray administrative costs of reissuing student ID card	\$ 3/card
Transcript Fee To defray costs of retrieving, duplicating, and mailing student transcript (increase from \$1 to \$3)	\$ 3
<u>U. T. SAN ANTONIO</u>	
Auditing Fee To defray administrative costs incurred in registering non-credit participants in scheduled classes	\$ 5/enrolled UTSA student \$25/non-enrolled UTSA student
Career Planning and Placement Registration To defray costs of providing copies of student credentials in excess of 3 copies	\$ 3
Challenge Examination Fee To defray costs related to supplies and materials, printing and collating the examination	\$15/course challenged
Computer Use Fee To defray costs of computer time for students in courses requiring access to computers	\$20
Degree Application Fee To defray costs associated with degree checks and related admin- istrative processing costs	\$12
Duplicate Fee Receipt/Duplicate Class Schedule To defray printing and administra- tive costs of replacing fee receipts or class schedules	\$ 2
Field Trip Fee To defray costs of field trip	Variable based on actual cost of field trip. Specific fees approved via Docket.
Late Registration Fee To defray costs associated with keeping registration open after published times	\$ 5 first day; additional \$ 2.50 per day; maximum of \$15

	<u>Amount</u>
Library Fees	
To cover handling costs associated with processing lost or damaged books or books returned after the due date and with search, copy, and binding charges for inter-library loans	
Overdue Charge	
2-hour materials	\$0.25/hour; maximum of \$10/item
2-day materials	\$1.00/day; maximum of \$10/item
1-week/2-week materials	\$0.05/day-first 14 days; \$0.25/day; maximum of \$10/item
Recalled for Reserve or use by another borrower	\$1/day-begins 5 days after recall
Lost/Damaged Items	Cost or \$0.05/page + \$2.75 binding + \$3 processing fee + accumulated fines
Inter-library Loans	Varies by actual cost
Printmaking Fee	\$ 8/student
To defray the cost of supplies and materials consumed by students enrolled in printmaking courses in the Art and Design curriculum	
Student Identification Card Fee	\$ 5/card
To defray costs of producing and distributing student ID cards	
Student Identification Card Replacement Fee	\$10/card
To defray administrative costs of reissuing student ID cards	
Thesis Binding Fee	\$10
To defray costs of binding dissertations	
Transcript Fee	\$ 3/routine service \$ 5/on-demand service
To defray costs of retrieving, duplicating, and mailing student transcripts	
<u>U. T. TYLER</u>	
Add Fee	\$ 2
To defray costs of adding courses after the end of the regular registration period	
Audit Fee	\$25/course
To defray administrative costs incurred in registering non-credit participants in scheduled classes	

	<u>Amount</u>
Computer Use Fee To defray costs of computer time for students in courses requiring access to computers. Amount charged dependent on course requirements (establish a new fee)	\$ 2/1st 1-5 minutes (CPU time) \$10/each additional minute (CPU time) (purchased at student's discretion)
Late Registration Fee To defray costs associated with keeping registration open after published times	\$ 5
Library Fees To cover handling costs associated with computer searches, microfilm/microfiche printing and with processing lost books or books returned after the due date	
Overdue Charges	
Regular	\$0.10/day
Curriculum books	\$0.25/day
Reserve materials	\$0.50/day
Inter-library loan	\$1/day
Lost books	Cost + \$10
Microfilm/microfiche printing	\$0.10/page
Bibliographic computer search	Cost + \$1
Returned Check Fee To defray administrative costs for reprocessing or collecting checks written on insufficient funds	\$ 7.50/check
Test Fee To defray costs associated with administering and scoring Miller Analogy Test	\$23
Transcript Fee To defray costs of retrieving, duplicating, and mailing student transcript (increase from \$1 to \$2)	\$ 2

U. T. HEALTH SCIENCE CENTER - DALLAS

Audit Fee To defray administrative costs incurred in registering non-credit participants in scheduled courses	\$25/course/non-student plus lab fee associated with course \$ 5/course/student plus lab fee associated with course
Filing Fee - School of Allied Health Sciences To defray costs of assessing applicant credentials and correspondence	\$ 5
Graduation Fee To defray costs of commencement activities and diploma	\$25

	<u>Amount</u>
In Absentia - Graduate School of Biomedical Sciences To defray administrative costs of processing applications for students who are not currently enrolled	\$12/semester/resident \$50/semester/non- resident
Late Registration Fee To defray costs associated with keeping registration open after published times	\$25
Library Fees To cover handling costs associated with equipment, computer searches, photocopying, processing lost and late books	
Computer Search Computer-assisted reference service	Varies based on on-line connect time and number of records/ references printed. Average charge \$8; Complex search is charged at cost plus 25%
End-User Search	Any amount over \$10/month is charged to student at cost
Inter-library Loan Charge	Variable based on lending institution's fee
Laminating Fee To defray material costs	\$40/hundred for transparencies \$ 0.50/12" film \$ 0.20/6" film \$ 0.25/transparency frame \$ 0.10/sheet for drymount tissue
Lost Books	List price plus \$10 processing fee and accrued fines
Microfilm/Microfiche To defray material costs	\$ 0.10/page
Photocopying Cards To defray material costs and machine maintenance	\$ 0.25/card; plus 0.07/copy Cards available in \$2, \$5, \$10, & \$20 denominations
Coin-Operated Machines	\$ 0.10/copy without card
Typewriter Rental To defray material costs and machine maintenance	\$ 0.25/hour

	<u>Amount</u>
Photocopying - School of Allied Health Sciences	\$ 0.05/copy
Radio Pager Fee To defray cost of pager and maintenance for medical students	\$16.50/month
Returned Check Fee To defray administrative costs for reprocessing or collecting checks written on insufficient funds	\$15/check

U. T. MEDICAL BRANCH - GALVESTON

Graduation Fee To defray costs of commencement activities and diploma	\$32
Identification Badge Fee To defray cost of badge materials and manufacturing	\$ 2/badge
Late Registration Fee To defray costs associated with keeping registration open after published times	\$25
Microscope Rental Fee To defray cost of replacement maintenance	\$60/year
Returned Check Fee To defray administrative costs for reprocessing or collecting checks written on insufficient funds	\$15/check

U. T. HEALTH SCIENCE CENTER - HOUSTON

Application Fee To defray costs associated with analyzing student credentials and correspondence	\$10
Audit Fee To defray costs incurred in registering non-credit partici- pants in scheduled courses	\$ 5/course
Exam Card Replacement Fee To defray administrative and materials costs to reissue	\$ 1/card
Graduation Fee To defray costs of commencement activities and diploma	\$25

	<u>Amount</u>
Late Registration Fee To defray costs associated with keeping registration open after published times	\$15
Library Fees - Nursing School To cover handling costs associated with processing books returned after due date	\$ 1/day
Microscope Fee - Medical School To defray purchase cost and maintenance	\$25/year
Printing Fee - Nursing School To defray costs for classroom handouts and test materials	\$10/quarter
Returned Check Fee To defray administrative costs for reprocessing or collecting checks written on insufficient funds	\$15/check
Student Identification Card Replacement Fee To defray administrative and materials cost to process card	\$ 6/card
Transcript Fee To defray costs of retrieving, duplicating, and mailing tran- scripts	\$ 2.50

U. T. HEALTH SCIENCE CENTER - SAN ANTONIO

Audit Fee To defray registration costs for non-credit participants in scheduled courses	\$ 5/student \$25/non-student
Dissertation Fee To defray costs for binding and microfilming dissertations	\$40 One Time Fee
Graduation Fee To defray costs of commencement activities and diplomas	\$35
Identification Badge Fee To defray cost of materials and manufacturing	\$ 2/badge
Inter-library Loans To defray costs incurred for postage and supplies	\$ 1/transaction
Late Registration Fee To defray costs associated with keeping registration open after published times	\$25

	<u>Amount</u>
Library Fees for Overdue Reserve Books To defray special handling costs of maintaining reserved book section	\$ 0.50/hour \$ 5 Maximum
Library Med-line Research Fee To defray costs of computer and Med-line charge per search	\$ 8/search
Microscope Rental To defray replacement cost and maintenance	\$ 5/month
Student Identification Card Fee To defray cost of materials and manufacturing	\$ 5/card

2. U. T. System: Authorization for Automobile Liability Insurance Policy with Cigna Insurance Company, Philadelphia, Pennsylvania, for Officers and Employees' Use and Operation of University-Owned and Operated Motor Vehicles for the Period from September 1, 1986 Through September 1, 1987 (Replacement for Expired Policy with Royal Indemnity Company, New York, New York) (Exec. Com. Letter 87-1).--Upon recommendation of the Executive Committee, authorization was given to secure The University of Texas System automobile liability insurance policy for officers and employees' use and operation of University-owned and operated motor vehicles from the Cigna Insurance Company of Philadelphia, Pennsylvania, with a one-year premium of \$242,237, for the period from September 1, 1986 through September 1, 1987.

It was reported that Royal Indemnity Company of New York, New York, the underwriter for the automobile liability insurance policy for fiscal year 1985-86, notified U. T. System Administration on August 7, 1986, that it would not renew the policy for fiscal year 1986-87 without a change in premium rating which amounted to waiving an experience credit of approximately 52%.

The premium for the U. T. System automobile liability insurance policy is prorated among all U. T. component institutions according to their existing motor vehicle inventory.

3. U. T. System: Renewal of Executive Liability and Indemnification Insurance Policy with the Chubb Group Insurance Companies, Warren, New Jersey, for the Period August 1, 1986 Through August 1, 1987 (Exec. Com. Letter 86-24).--The Board, upon recommendation of the Executive Committee, authorized renewal of The University of Texas System executive liability and indemnification insurance policy with the Chubb Group Insurance Companies, Warren, New Jersey, at an annual premium of \$70,000, for the period August 1, 1986 through August 1, 1987.

4. U. T. Austin: Appointment of Dr. Shing-Tung Yau as Initial Holder of the First Sid W. Richardson Foundation Regents Chair in Mathematics in the College of Natural Sciences Effective September 1, 1986 (Exec. Com. Letter 86-24).--Upon recommendation of the Executive Committee, approval was given to appoint Dr. Shing-Tung Yau, Professor of Mathematics, University of California, San Diego, initial holder of the First Sid W. Richardson Foundation Regents Chair in Mathematics in the College of Natural Sciences at The University of Texas at Austin effective September 1, 1986, for the 1986-87 academic year only.
5. U. T. Austin: Proposed Appointment of Dr. Bernard H. Kear to the Dula D. Cockrell Centennial Chair in Engineering in the College of Engineering Effective September 1, 1986 (Withdrawn) (Exec. Com. Letter 86-24).--The recommendation related to the proposed appointment of Dr. Bernard H. Kear, Scientific Advisor, Materials and Science Laboratory, Exxon Corporation Research Center, to the Dula D. Cockrell Centennial Chair in Engineering in the College of Engineering at The University of Texas at Austin effective September 1, 1986, was withdrawn.
6. U. T. Austin: Appointment of Mr. Thomas J. Hirschfeld to the Distinguished Visiting Tom Slick Professorship of World Peace in the Lyndon B. Johnson School of Public Affairs Effective September 1, 1986, for the 1986-87 Academic Year Only (Exec. Com. Letter 86-25).--The Board, upon recommendation of the Executive Committee, appointed Mr. Thomas J. Hirschfeld, a retired U. S. State Department official, to the Distinguished Visiting Tom Slick Professorship of World Peace in the Lyndon B. Johnson School of Public Affairs at The University of Texas at Austin for the 1986-87 academic year only effective September 1, 1986.

Mr. Hirschfeld's appointment as Visiting Professor in the Lyndon B. Johnson School of Public Affairs at U. T. Austin became effective September 1, 1986.

7. U. T. Austin - George Kozmetsky Center for Business Education, Graduate School of Business (Sequence 3) (Project No. 102-481): Award of Contracts for Furniture and Furnishings to Architectural Interior Services, Houston, Texas; Clegg/Austin, Austin, Texas; Contract Sales for Interiors, Dallas, Texas; Carpet Services, Inc., Austin, Texas; and FullTech Services, Austin, Texas; and Authorization for the Chancellor to Sign the Contracts (Exec. Com. Letter 86-25).--The Executive Committee recommended and the Board awarded contracts for furniture and furnishings for the George Kozmetsky Center for Business Education in the Graduate School of Business (Sequence 3) at The University of Texas at Austin to the following lowest responsible bidders:

Architectural Interior Services
Houston, Texas

Base Proposal "A" (Wood Office Furniture)	\$35,133.43
Base Proposal "C" (Secretarial Seating)	6,364.55
Base Proposal "E" (Steel Furniture)	13,534.44

Base Proposal "F" (Stacking Chairs)	\$ 2,959.66
Total Contract Award to Architectural Interior Services	\$ 57,992.08
Clegg/Austin Austin, Texas	
Base Proposal "B" (Faculty Office Seating)	31,779.53
Contract Sales for Interiors Dallas, Texas	
Base Proposal "D" (Modular Waiting Seating)	23,328.01
Carpet Services, Inc. Austin, Texas	
Base Proposal "G" (Carpeting)	6,347.00
FullTech Services Austin, Texas	
Base Proposal "H" (Pre-Owned Landscape Furnishings)	<u>15,417.00</u>
GRAND TOTAL CONTRACT AWARDS	\$134,863.62

Further, the Chancellor was authorized to sign the contracts awarding these bids based on the results of the Executive Committee circularization.

8. U. T. Dallas: Approval to Modify Private Fund Resourcing Requirements for Engineering and Computer Science Programs and to Name the Proposed School of Engineering and Computer Science Subject to Coordinating Board Approval of the Establishment of the School (Exec. Com. Letter 86-27).--In February 1984, the U. T. Board of Regents approved establishment of Electrical Engineering and Computer Science degree programs at U. T. Dallas and the proposed establishment of a School of Engineering and Computer Science subject to approval of the Coordinating Board, Texas College and University System. In October 1985, the Coordinating Board approved establishment of the degree programs but deferred action on establishment of the proposed school with the understanding that such would be approved when the following conditions were met:

1. Financing for the School shall have been provided as follows:
 - a. Commitments from financially responsible private sources \$24.0 million
 - b. Permanent University Fund bond proceeds \$17.5 million
 - c. U. T. Dallas endowment funds \$11.0 million

Total \$52.5 million

2. A contract for the construction of a building to house the proposed School shall have been let.
3. A minimum of 700 students shall be enrolled in the degree programs to be included in the School.

Upon recommendation of the Executive Committee, the resourcing arrangements for Engineering and Computer Science programs at The University of Texas at Dallas were modified to the extent that income or principal from the proceeds of sale of Texas Research Foundation (TRF) lands were approved for use as a guarantee for any of the \$24 million in private gift resourcing committed as part of the total funding projected for these programs that has not been raised by 1991, the targeted date for completion of the fund campaign.

In approving the foregoing action, it was noted that the other conditions set by the Coordinating Board, e.g. Items 1b., 1c., 2 and 3 above, had been successfully met by other actions of the U. T. Board of Regents or U. T. Dallas.

Further, the School of Engineering and Computer Science at U. T. Dallas was named for a distinguished Texas and Dallas citizen whose encouragement and support for the School of Engineering and Computer Science were essential to its establishment. The identity of this individual and the name of the School will be released following formal approval by the Coordinating Board and at a time and place convenient to the honoree.

9. U. T. Tyler - Space Completion and Renovation - Phase I, School of Education Renovation (Project No. 802-607): Award of Construction Contract to Boone & Boone Construction, Inc., Tyler, Texas (Exec. Com. Letter 87-1).--The Board, upon recommendation of the Executive Committee, awarded a construction contract for the Space Completion and Renovation - Phase I, School of Education Renovation at The University of Texas at Tyler to the lowest responsible bidder, Boone & Boone Construction, Inc., Tyler, Texas, for the Base Bid and Alternates One and Two in the amount of \$540,500.

This project is within the scope of the Capital Improvement Program approved by the U. T. Board of Regents in October 1985 and was approved by the Coordinating Board, Texas College and University System in July 1986.

Any additional phases of work in excess of \$300,000 will be brought before the U. T. Board of Regents at future meetings.

10. U. T. Cancer Center - Additional Outpatient Clinic Facilities - Phase II (Project No. 703-459): Award of Sequence 1 Contracts for Furniture and Furnishings to Finger Office Furniture, Houston, Texas; Business Interiors, A Division of Miller Business Systems, Inc., Arlington, Texas; H. McCoy, Inc., San Antonio, Texas; and Bunting, Inc., Rockwall, Texas; and Authorization for the Chancellor to Sign the Contracts (Exec. Com. Letter 86-25).--The Executive Committee recommended and the Board awarded contracts for Sequence 1 furniture and furnishings for the Additional Outpatient Clinic Facilities - Phase II at The University of Texas System Cancer Center to the following lowest responsible bidders:

Finger Office Furniture
Houston, Texas

Base Proposal "A" (Upholstered Lobby Furniture)	\$15,766.50
Base Proposal "C" (Modular Seating)	34,958.94
Base Proposal "D" (Lobby Wood Casegoods)	17,643.74
Base Proposal "E" (Office Furniture)	23,576.94

Total Contract Award to
Finger Office Furniture \$ 91,946.12

Business Interiors, A Division of
Miller Business Systems, Inc.
Arlington, Texas

Base Proposal "B" (Waiting Room Furniture)	8,218.30
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H. McCoy, Inc.
San Antonio, Texas

Base Proposal "F" (Office Landscape)	114,755.08
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Bunting, Inc.
Rockwall, Texas

Base Proposal "G" (Closed Circuit Television)	<u>30,937.00</u>
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GRAND TOTAL CONTRACT AWARDS \$245,856.50

Further, the Chancellor was authorized to sign the contracts awarding these bids based on the results of the Executive Committee circularization.

11. U. T. Health Center - Tyler - Medical Resident Housing (Project No. 801-601): Award of Construction Contract to Tri-Phase Construction Company, Frankston, Texas; and Approval of Plaque Inscription (Exec. Com. Letter 87-1).--
Upon recommendation of the Executive Committee, the Board:

- a. Awarded a construction contract for Medical Resident Housing at The University of Texas Health Center at Tyler to the lowest responsible bidder, Tri-Phase Construction Company, Frankston, Texas, for the base bid in the amount of \$597,000
- b. Approved the inscription set out below for a plaque to be placed on the building. The inscription follows the standard pattern approved by the U. T. Board of Regents in June 1979.

MEDICAL RESIDENT HOUSING
1986

BOARD OF REGENTS

Jess Hay, Chairman
Robert B. Baldwin III, Vice-Chairman
Shannon H. Ratliff, Vice-Chairman
Jack S. Blanton
Janey Slaughter Briscoe
(Mrs. Dolph)
Beryl Buckley Milburn
Tom B. Rhodes
Bill Roden
Mario Yzaguirre

Hans Mark
Chancellor, The
University of Texas System
George A. Hurst
Director, The University
of Texas Health Center
at Tyler

Simons-Clark, Associates
Project Architect
Tri-Phase Construction Company
Contractor

This project is to be funded from gift funds designated for this purpose and was approved by the Coordinating Board, Texas College and University System in January 1986.

REPORT AND RECOMMENDATIONS OF THE FINANCE AND AUDIT COMMITTEE (Pages 33 - 34).--Committee Chairman Yzaguirre reported that the Finance and Audit Committee had met in open session to consider those matters on its agenda and to formulate recommendations for the U. T. Board of Regents. Unless otherwise indicated, the actions set forth in the Minute Orders which follow were recommended by the Finance and Audit Committee and approved in open session and without objection by the U. T. Board of Regents:

1. U. T. System: Approval of Docket No. 30 of the Office of the Chancellor (Catalog Change).--Upon recommendation of the Finance and Audit Committee, the Board approved Docket No. 30 of the Office of the Chancellor in the form distributed by the Executive Secretary. It is attached following Page 210 in the official copies of the Minutes and is made a part of the record of this meeting.

It was expressly authorized that any contracts or other documents or instruments approved therein had been or shall be executed by the appropriate officials of the respective institution involved.

It was ordered that any item included in the Docket that normally is published in the institutional catalog be reflected in the next appropriate catalog published by the respective institution.

Regents Hay and Ratliff abstained from voting on items within the Docket related to Exxon Corporation due to a possible conflict of interest.

2. U. T. Board of Regents - Regents' Rules and Regulations, Part One: Amendments to Chapter II (Administration) and Authorization for the Executive Secretary to the Board to Make Appropriate Editorial Changes Therein.--In order to reflect the dissolution of the Office of Public Affairs of The University of Texas System, approval was given to amend Chapter II (Administration) of Part One of the Regents' Rules and Regulations as set forth below:

- a. Subsection 8.3 (Duties of the Director of Public Affairs) was deleted.
- b. A new Section 16 was added to read as follows:

Sec. 16. Director of Public Information.

The Director of Public Information reports to the Office of the Chancellor under the day-to-day supervision of the Chancellor. His primary duties and responsibilities include:

- 16.1 The provision of staff assistance to the Chancellor, the Executive Vice Chancellors, and the Vice Chancellors in the execution of their responsibilities.
- 16.2 Supervising the staff of the Office of Public Information.
- 16.3 Communicating the activities of the Board and System Administration.

- 16.4 Coordinating news releases and other public information emanating from the component institutions, which releases and information involve the Board and System Administration.
- 16.5 Developing a format for the presentation of information about System institutions and activities to the general public.
- 16.6 Performing such other duties and responsibilities for the efficient operation of the System as shall be assigned by the Office of the Chancellor.

- c. Present Section 16 was renumbered as Section 17 and the title "Director of Public Affairs" was deleted from the lists of members of the System Council, the Council of Academic Institutions, the Council of Health Institutions, and the Business Management Council as set out in that Section.
- d. Present Sections 17 and 18 were renumbered as Sections 18 and 19, respectively.

Further, approval was granted for the Executive Secretary to the Board of Regents, in consultation with the Office of General Counsel, to make such editorial changes in the remainder of the Regents' Rules and Regulations as are necessary to conform to the foregoing changes.

- 3. U. T. Board of Regents - Regents' Rules and Regulations, Part Two: Amendment to Chapter I, Section 7 (Policy Against Discrimination).--The Board, upon recommendation of the Finance and Audit Committee, amended the Regents' Rules and Regulations, Part Two, Chapter I, Section 7 (Policy Against Discrimination) to read as follows:

Sec. 7. Policy Against Discrimination.--To the extent provided by applicable law, no person shall be excluded from participation in, denied the benefits of, or be subject to discrimination under, any program or activity sponsored or conducted by the System or any of its component institutions, on the basis of race, color, national origin, religion, sex, age, veteran status, or handicap.

REPORT AND RECOMMENDATIONS OF THE ACADEMIC AFFAIRS COMMITTEE (Pages 35 - 40).--Committee Chairman Baldwin reported that the Academic Affairs Committee had met in open session to consider those matters on its agenda and to formulate recommendations for the U. T. Board of Regents. Unless otherwise indicated, the actions set forth in the Minute Orders which follow were recommended by the Academic Affairs Committee and approved in open session and without objection by the U. T. Board of Regents:

1. U. T. Arlington: Approval of Memorandum of Affiliation with the Veterans Administration Health Care Facility, Waco, Texas.--Approval was given to the Memorandum of Affiliation set out on Pages 35 - 36 by and between The University of Texas at Arlington and the Veterans Administration Health Care Facility, Waco, Texas.

This agreement, executed by the appropriate officials of the institution and facility to be effective upon approval by the U. T. Board of Regents, will allow students in U. T. Arlington's social work program to participate in clinical training activities.

MEMORANDUM OF AFFILIATION
BETWEEN
THE UNIVERSITY OF TEXAS AT ARLINGTON
SCHOOL OF SOCIAL WORK
AND
VETERANS ADMINISTRATION HEALTH CARE FACILITY

It is mutually agreed by the University of Texas at Arlington School of Social Work and the Veterans Administration Medical Center, Waco, Texas that education experiences for graduate social work students will be provided at the VA facility.

The faculty of the University of Texas at Arlington School of Social Work will assume responsibility, in coordination with the VA staff, for the assignment of students. There will be coordinated planning by the facility and the faculty members. While in the VA facility, students will be subject to VA rules and regulations.

The facility will retain full responsibility for the care of patients and will maintain administrative and professional supervision of students insofar as their presence affects the operation of the facility and/or the direct and indirect care of patients.

Students will receive an orientation to the facility. Faculty members and facility staff supervisors will evaluate the students' performance in mutual consultation and according to the guidelines outlined in the approved curriculum.

The institution complies with title VI of the Civil Rights Act of 1964, title IX of the Education Amendments of 1972 and section 504 of the Rehabilitation Act of 1973, and related regulations, and assures that it does not and will not discriminate against any person on the basis of race, color, sex, creed, national origin, age, or handicap under any program or activity receiving Federal financial assistance from the VA.

Nothing in the agreement is intended to be contrary to State or Federal laws. In the event of conflict between terms of this agreement and any applicable State or Federal law, that State or Federal law will supersede the terms of this agreement. In the event of conflict between State and Federal laws, Federal laws will govern.

A periodic review of program and policies will be conducted under the auspices of the Office of Academic Affairs.

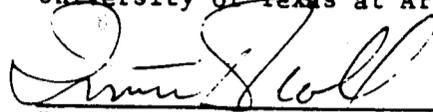
This Memorandum of Affiliation may be terminated by either party on notice to the other three months in advance of the next training experience.

Date Signed: 7-23-86



W. H. NEDDERMAN, Ph.D.
President
University of Texas at Arlington

Date Signed: 4/4/86



IRVIN D. NOLL, Director
VA Medical Center, Waco, Texas

FORM APPROVED:

CONTENT APPROVED:


Office of General Counsel
The University of Texas System
Executive Vice Chancellor
for Academic Affairs
The University of Texas System

I hereby certify that the foregoing Agreement was approved by the Board of Regents of The University of Texas System on the 9th day of October, 19 86.


Executive Secretary, Board of Regents
The University of Texas System

2. U. T. Austin: Approval to Name Room 2.218 in the New Chemical and Petroleum Engineering Building as the Robert P. Kuhlman Classroom and Room 3.150 in the Engineering Teaching Center as the C. E. Rowe Graphics Seminar Room in the College of Engineering (Regents' Rules and Regulations, Part One, Chapter VIII, Section 1, Subsection 1.2, Naming of Facilities Other Than Buildings).--In accordance with the Regents' Rules and Regulations, Part One, Chapter VIII, Section 1, Subsection 1.2, relating to the naming of facilities other than buildings, approval was given to name the following rooms in the College of Engineering at The University of Texas at Austin:

- a. Room 2.218 in the new Chemical and Petroleum Engineering Building as the Robert P. Kuhlman Classroom

See Page 169 for acceptance of a gift and establishment of a permanent endowment account.

- b. Room 3.150 in the Engineering Teaching Center as the C. E. Rowe Graphics Seminar Room

See Page 170 for acceptance of gifts and pledges and establishment of a permanent endowment account.

3. U. T. Austin: Adoption of Resolution Acknowledging Cooperation with Texas A&M University in Marine-Related Programs.--The Board, upon recommendation of the Academic Affairs Committee, adopted the following resolution acknowledging cooperation between The University of Texas at Austin and Texas A&M University in marine-related programs and urging even greater cooperation in these areas to further the development of marine educational and research programs along the Gulf Coast. This resolution parallels one adopted by The Texas A&M University System Board of Regents on May 23, 1986.

WHEREAS, Texas A&M University and The University of Texas at Austin have developed a number of marine-related programs along the Gulf Coast of Texas, and

WHEREAS, Exploration of areas of cooperation and sharing of facilities have been underway for some time between administrators of the two institutions, and

WHEREAS, The programs of each institution complement the programs of the other institution and are not duplicated by programs of the other and there is evidence that some programs can be strengthened through greater cooperation between the two institutions and the sharing of certain facilities by both institutions, now, therefore, be it

RESOLVED, That the U. T. Board of Regents acknowledges a Texas A&M University System Board of Regents' resolution dated May 23, 1986, regarding greater cooperation between the two universities in order to further the development of marine educational and research programs along the Gulf Coast and encourages U. T. Austin administration and

faculty to continue to seek appropriate areas of cooperation and sharing of facilities with Texas A&M University, and, be it further

RESOLVED, That the U. T. Board of Regents records its approval of cooperative actions leading to further development of marine programs at both U. T. Austin and Texas A&M University.

4. U. T. Austin: Approval of Memorandum of Agreement with the Darnall Army Community Hospital, Fort Hood, Texas.-- Approval was given to the Memorandum of Agreement set out on Pages 38 - 40 by and between The University of Texas at Austin and the Darnall Army Community Hospital, Fort Hood, Texas.

This agreement, executed by the appropriate officials of the institution and facility to be effective upon approval by the U. T. Board of Regents, will allow students in U. T. Austin's School of Nursing programs to participate in clinical training activities.

MEMORANDUM OF AGREEMENT
BETWEEN
THE UNIVERSITY OF TEXAS AT AUSTIN
AND
DARNALL ARMY COMMUNITY HOSPITAL

I. BACKGROUND

1. The Board of Regents of the University of Texas at Austin have established an approved professional program of special training in preparation for Bachelor, Master and Doctoral Degrees in Nursing. The program requires clinical facilities where the trainee can obtain the clinical learning experience required in the curriculum.
2. The U. S. Army medical facility, Darnall Army Community Hospital, has the needed clinical facilities for nursing students of the University of Texas at Austin, to obtain part of the clinical learning experience required. It is to the benefit of the University of Texas at Austin for nursing students to use the clinical facilities of the U. S. Army medical facility, Darnall Army Community Hospital, to obtain their clinical learning experience.
3. The U. S. Army medical facility, Darnall Army Community Hospital, and the Department of the Army will benefit from making clinical facilities available to nursing students of the University of Texas at Austin. The Army will obtain the students clinical learning experience while contributing to the educational preparation of a future supply of nurses.
4. Clinical students, during clinical training at the Army medical facility, will be under the jurisdiction of facility officials for training purposes and will follow facility rules.
5. The affiliation is controlled by and subject to Title 5, U. S. Code, Section 5351-6, 8144 and 8331-2.

II. UNDERSTANDING

1. The U. S. Army Medical Facility will -
 - a. Make available the clinical and related facilities needed for the clinical learning experience in Nursing by students enrolled in the School of Nursing Program at the University of Texas at Austin, and who are designated by the University of Texas at Austin for such learning experience under the supervision of the University of Texas at Austin.
 - b. Arrange clinical learning experience schedules that will not conflict with those of the educational institutions.
 - c. Designate an Army Nurse Corps Officer to coordinate the students' clinical learning experience in Nursing Service. This will involve planning with faculty or staff members for the assignment of trainees to specific clinical cases and experiences, including their attendance at selected conferences, clinics, courses, and programs conducted under the direction of the facility.
 - d. Provide, whenever possible, in connection with the students' clinical learning experience, reasonable classroom, conference room, office and storage space for participating trainees and their faculty or staff supervisors, if assigned, and if feasible, dressing and locker room space.
 - e. Permit, on reasonable request, the inspection of clinical and related facilities by agencies charged with the responsibility for accreditation of the University of Texas at Austin.
 - f. Meals will be provided on a reimbursable basis at authorized rates for civilian employees or guests if the training schedule requires students at the hospital during mealtime.
2. The University of Texas at Austin will -
 - a. Provide the Commanding Officer of the facility with the number of students to be assigned, the dates they will be assigned, and the clinical service to which they will be assigned, by the beginning of the training period.
 - b. Where indicated and upon mutual agreement, provide faculty or staff members to assume the responsibility for instruction and supervision of the students' clinical learning experiences.
 - c. Have the faculty or staff members, if any, coordinate with designated Army Nurse Corps officers, the assignment that will be assumed by the students while participating in their clinical learning experience, and their attendance at selected conferences, clinics, courses, and programs conducted under the direction of the facility.
 - d. Provide and maintain the personal records and reports necessary for conducting the students' clinical learning experience.
 - e. Enforce rules and regulations governing students that are mutually agreed on by the non-Federal institution and the facility.
 - f. Be responsible for health examination and such other medical examinations and protective measures as the facility and non-Federal institution mutually find necessary.
 - g. Prohibit the publication by the students and faculty or staff members of any material relative to their clinical learning experience that has not been reviewed by the Army medical facility in order to assure that no classified information is inadvertently published, that infringement of patients' right to privacy is avoided, and that accuracy with respect to military procedures is complete. Any article written by a student which has been based on information acquired through his clinical learning experience must clearly reflect that the Department of the Army does not endorse the article, even where a review has

been made prior to publication. This is accomplished by requiring a disclaimer paragraph to appear with each article written: "The opinion and conclusions presented herein are those of the author and do not necessarily represent the views of the Army Medical Facility, the Department of the Army, or any other governmental agency."

III. TRAINING

The training term shall be from 1 September through 31 August. This agreement may be terminated by either institution upon written notification. Except under unusual conditions, such information will be submitted prior to the beginning of a particular training period. The individual student may terminate his/her particular clinical training with the providing institution through notification to all parties concerned.

IV. NONDISCRIMINATION CLAUSE

Selections for this training will be made without regard to race, color, sex, creed, national origin, lawful political or other affiliation, marital status, age, or physical handicap. It is agreed by the parties that handicapped persons will not be provided different or separate benefits, services, or training than that which is provided to others unless such action is required to provide equity. The parties agree not to otherwise limit a qualified handicapped person in the enjoyment of any right, privilege, advantage, or opportunity granted to others receiving the training and benefits of this agreement.

8 AUG 86
(DATE)

August 28, 1986
(DATE)

for REGINALD G. MOORE, JR. MD COL MC
Colonel, Medical Corps *Acting Command*
Commanding
William H. Cunningham
WILLIAM H. CUNNINGHAM
President
The University of Texas at Austin

FORM APPROVED:

John L. Davoyst
Office of General Counsel
The University of Texas
System

CONTENT APPROVED:

James P. Duncan
James P. Duncan
Executive Vice Chancellor
for Academic Affairs
The University of Texas
System

I hereby certify that the foregoing Agreement was approved by the Board of Regents of The University of Texas System on the 9th day of October, 1986.

Arthur T. Kelly
Executive Secretary, Board of Regents
The University of Texas System

REPORT AND RECOMMENDATIONS OF THE HEALTH AFFAIRS COMMITTEE (Pages 41 - 160).--Committee Chairman Briscoe reported that the Health Affairs Committee had met in open session to consider those items on its agenda and to formulate recommendations for the U. T. Board of Regents. Unless otherwise indicated, the actions set forth in the Minute Orders which follow were recommended by the Health Affairs Committee and approved in open session and without objection by the U. T. Board of Regents:

1. U. T. Health Science Center - Dallas: Appointment of Vinay Kumar, M.B.B.S., as Initial Holder of the Dr. Charles T. Ashworth Professorship in Pathology Effective Immediately.--The Board appointed Vinay Kumar, M.B.B.S., Professor, Department of Pathology at The University of Texas Health Science Center at Dallas, as initial holder of the Dr. Charles T. Ashworth Professorship in Pathology effective immediately.
2. U. T. Health Science Center - Dallas: Approval of Affiliation Agreement with the Hendrick Medical Center, Abilene, Texas.--Approval was given to the affiliation agreement set out on Pages 41 - 47 by and between The University of Texas Health Science Center at Dallas and the Hendrick Medical Center, Abilene, Texas.

This agreement, executed by the appropriate officials of the institution and facility to be effective upon approval by the U. T. Board of Regents, will provide the opportunity to establish programs of excellence in medical education and coordinate medical care resources for the benefit of improved patient care to the citizens of Texas and the Southwest.

AFFILIATION AGREEMENT

THIS AGREEMENT, made the 9th day of October, 1986, by and between THE UNIVERSITY OF TEXAS HEALTH SCIENCE CENTER at DALLAS ("University"), a component of The University of Texas System ("System"), and the Board of Directors of HENDRICK MEDICAL CENTER ("Center"), a Texas nonprofit corporation, which operates a hospital in Abilene, Texas.

WITNESSETH:

WHEREAS, the University and the Center have the following objectives in concert: (1) a common commitment to offer the people of Texas and the Southwest programs of excellence in medical

education; (2) the desire to coordinate medical care resources for the benefit of improved patient care; and (3) a desire and intent to develop an agreement that will encourage and use, in future years, the strength of both institutions to the maximum extent consistent with the interests of each; and

WHEREAS, the University operates an accredited four-year school of medicine operated pursuant to the laws of the State of Texas and governed by the Board of Regents of System; and

WHEREAS, the Center operates the Hospital; and

WHEREAS, both the Center and the University are dedicated to the promotion of medical education in West Texas, and

WHEREAS, in order to accomplish such goals and objectives, the University and the Center intend to establish a broad framework of policy to facilitate cooperation between them and agree that the responsibility for establishing definitive relationships will be vested in the responsible department chairmen of the University and appropriately designated individuals within the Center, subject to approval of the respective governing bodies.

NOW THEREFORE, in consideration of the premises and benefits derived therefrom, and from the program or programs established and implemented by said parties, the University and the Center agree that any project agreed to and entered into by and between the University and the Center during the term of this Agreement shall be governed by the following terms and conditions:

1. FACULTY APPOINTMENTS WITHIN CENTER-SPONSORED PROGRAMS

Because both parties agree that academic status is an inducement for attracting well-qualified individuals for teaching positions within programs in medical education sponsored by the Center and the University, academic status may be granted by the University, on an individual basis. Such appointments will be made in the following categories:

1.1 Volunteer Clinical Appointments (without compensation). The University may offer volunteer clinical faculty appointments (without compensation) to West Texas area health care

professionals who contribute significantly their time and talents to programs sponsored by the University and Center. Such appointments shall be in accordance with the policies and procedures of System.

1.2 Part-time Clinical Faculty Appointments. The University may offer part-time compensation to health care professionals who contribute in a major way to educational programs sponsored by the Center and University. Such appointments shall be determined by the University and shall be in accordance with policies and procedures of System. Part-time clinical faculty appointments shall not be eligible for tenure.

1.3 Full-time Faculty Appointments:

A. For each individual serving in programs sponsored by the Center and University in the capacity of full-time faculty member of the University, the maximum compensation (salary plus augmentation) shall be that of System for the appropriate academic rank and title held by the faculty member as determined by the University.

B. Through separate contractual arrangements, University may provide Center-sponsored programs with key full-time faculty positions, and these faculty shall not be eligible for tenure provisions.

C. Such full-time faculty arrangements shall be determined by the parties taking into account mutually agreed need, budgetary, and professional manpower feasibility.

D. Such full-time faculty shall be subject to the personnel policies and credential requirements of the University and shall be mutually acceptable to the Center. These faculty shall abide by written policies and regulations of the Center and University.

E. Fringe benefits for full-time faculty shall be no less than those provided full-time faculty of clinical departments of the University and shall not be duplicated.

F. The University shall exempt full-time faculty or clinical departments of the University based within Center programs from participation in University's Medical Service, Research and Development Plan (MSRDP) if an equivalent plan, acceptable to University, is established by Center. Such a plan must be submitted to the University in writing at least 30 days prior to operation and approved in writing by University.

G. As a nonparticipant in the University's MSRDP, the Center shall reimburse the University for all University MSRDP-sponsored benefits and expenses provided full-time faculty employed in Center sponsored programs who are participants in a Center plan described in paragraph F. above.

2. RESEARCH FACILITIES. The Center will to the extent possible provide research facilities for members of the full-time faculty of the University who are assigned full-time to Center's programs. Research projects within Center programs may be jointly sponsored by the University. In such cases, there will be prior agreement as to the responsibility of each institution in the administration of research funds, provision of staff and facilities, and ownership of equipment purchased with research funds.

3. GRANT APPLICATION. The Center's application for federal, state, or local grants in aid of programs with the University's cosponsorship or faculty shall be reviewed by the University for comment and approval or proposed revisions prior to submission.

4. EMPLOYMENT OPPORTUNITIES. All announcements or publications concerning employment opportunities for faculty appointments at the University shall be submitted to the University for comment and approval prior to submission of such announcements for publication.

5. COMPLIANCE WITH LAWS. The Center shall comply with all federal, state, and local laws, ordinances, and regulations applicable to the Center and shall certify such compliance to the University upon request.

6. STANDARDS. The Center shall, at all times, provide facilities or affiliations with facilities which meet or exceed requirements and standards of the appropriate Residency Review Committees of the Accreditation Council for Graduate Medical Education.

7. PROGRAM DIRECTORS. The Center shall, subject to approval by University, designate a program director for each of its educational programs.

8. RECORDS. The Center shall maintain records of all educational, research, service, and fiscal activities for programs affiliated with the University. These records shall be made available at all times for inspection by designated officials of the University.

9. EDUCATIONAL MATERIALS. The University shall make available to the Center its educational materials, including programs and services provided by the University's Library and Department of Biomedical Communications pursuant to agreement between the Center's designated agents and the respective service head of the University.

10. ALLOWANCES. The Center shall provide reasonable and attractive allowances to University-based visits to Center-sponsored programs for the purpose of teaching, consultation, patient care, or research. All such allowances are subject to the rules and regulations of University.

11. CLINICAL CLERKSHIPS. The Center shall provide clinical clerkships for medical students. Priority for clerkships shall be given by the Center to senior medical students of the University. The number of such clerkships, and the scheduling of them, shall be determined by the Center. University will assure that medical students maintain an appropriate level of malpractice insurance coverage.

12. COMMUNICATION. Both parties agree that a productive and harmonious relationship between the University and the Center depends upon maintaining effective channels of communication. The parties anticipate that routine matters will be handled and decided mutually through continuous contacts at the department level.

13. JOINT CONFERENCE COMMITTEE. At least annually, and more frequently if necessary, a Joint Conference Committee representing each institution shall review and discuss overall relationships, policies, and other matters of common concern.

14. MISCELLANEOUS.

14.1 No oral representations of any officer, agent, or employee of the Center or the University either before or after the effective date of this Agreement, shall affect or modify any obligations of either party hereunder.

14.2 All of the agreements between the parties on the subject matter hereof have been reduced to writing herein. No amendments to the Agreement shall be valid unless in writing and signed by the duly authorized representatives of the parties and approved by the Board of Regents of System.

14.3 All notices under this Agreement shall be provided to the party to be notified in writing, either by personal delivery or by United States mail. All notices under this Agreement shall be deemed given to a party when received by such party's designated representative.

14.4 This Agreement shall be binding on, and shall inure to the benefit of the parties and their respective successors and assignees; provided, however, that no assignment by either party shall be effective without prior written approval of the other party. A delay in, or failure of, performance of either party shall not constitute default hereunder or give rise to any claim for damages, if and to the extent such delay or failure is caused by occurrences beyond the control of the non-performing party.

14.5 This agreement shall not become effective unless, and until, approved by the Board of Regents of System. If so approved, this Agreement shall become effective on the date of such approval and shall continue in effect for an initial term ending one year after the date and year of execution by the University and the Center and, after such initial term, from year to year unless one party shall have given a one-year advance written notice in accordance with this Agreement.

EXECUTED by the University and the Center on the day and year first above written, in duplicate copies, each of which shall be deemed an original.

ATTEST:

The Hendrick Medical Center

[Signature]

By: [Signature] July 8, 1986
Title: Michael C. Waters
President

CONTENT APPROVED:

[Signature]
Charles C. Sprague, M.D.
President

The University of Texas Health
Science Center at Dallas
(Name of U.T. Component)

FORM APPROVED:

[Signature]
Office of General Counsel
The University of Texas System

BOARD OF REGENTS OF THE UNIVERSITY
OF TEXAS SYSTEM

BY: [Signature]
Title: Executive Vice Chancellor
for Health Affairs

CERTIFICATE OF APPROVAL

I hereby certify that the foregoing Agreement was approved by the Board of Regents of The University of Texas System on the 9th day of October, 1986, and that the person whose signature appears above is authorized to execute such agreement on behalf of the Board.

[Signature]
Executive Secretary, Board of Regents
The University of Texas System

3. U. T. Medical Branch - Galveston: Approval of Cooperative Agreement with the West China University of Medical Sciences, Chengdu, Sichuan, People's Republic of China. -- Approval was given to the cooperative agreement set forth on Pages 48 - 52 by and between The University of Texas Medical Branch at Galveston and the West China University of Medical Sciences, Chengdu, Sichuan, People's Republic of China.

This agreement, executed by the appropriate officials of the institution and facility to be effective upon approval by the U. T. Board of Regents, will provide for joint programs for continuing medical education. Areas of study include medical education, clinical medicine, biomedical sciences, nursing, and allied health.

COOPERATIVE AGREEMENT FOR FUTURE
JOINT PROGRAMS OF ADVANCED CONTINUING MEDICAL EDUCATION

This Agreement, made and entered into on the 9th day of October, 1986, between The University of Texas Medical Branch (hereinafter UTMB) at Galveston, Texas, United States of America, a component institution of The University of Texas System, and West China University of Medical Sciences (hereinafter WCUMS) of Chengdu, Sichuan, People's Republic of China, in duplicate copies, each of which shall be deemed an original:

WHEREAS, UTMB and WCUMS desire to promote friendship between the peoples of America and of the People's Republic of China, to strengthen the relationship of educators and scientists in the field of health sciences and to advance these sciences, and

WHEREAS, the President of WCUMS and the President of UTMB have agreed to establish relationships in the fields of Medical Education, Clinical Medicine, Biomedical Sciences, Nursing, and Allied Health, and

WHEREAS, UTMB and WCUMS desire to establish an agreement of cooperation between their faculties in future programs for advanced continuing medical education,

NOW, THEREFORE, IT IS MUTUALLY AGREED AS FOLLOWS:

PART ONE: FUTURE JOINT PROGRAMS

Section 1. Joint Programs

UTMB and WCUMS shall cooperate to establish the basis for future joint programs of advanced continuing medical education.

Section 2. Purposes

The purposes of the future joint programs will be:

- (1) to provide opportunities for advanced continuing medical education experiences for participants in planned, annual programs;
- (2) to exchange as part of the planned programs educational materials, such as teaching programs, syllabi, text notes, slides, films, videotapes, periodicals, bulletins, monographs, and books;
- (3) to assist in the arrangement for any mutually interesting research in the health sciences; and
- (4) to pursue the accomplishment of these purposes by means of realistic, cooperative, active, and timely measures, consistent with the rules, regulations, and practices of their respective governing bodies.

Section 3. Participants

Participants in future joint programs shall be only those medical doctors, research scientists, and staff of UTMB and WCUMS who have been approved in advance by the Offices of the Presidents at UTMB and WCUMS from a list of nominees furnished to each office.

Section 4. Planning Programs

The Offices of the Presidents of UTMB and WCUMS shall be responsible for planning future joint programs under this Agreement.

Section 5. Evaluation of Programs

The Offices of the Presidents of UTMB and WCUMS shall be responsible for evaluating the effectiveness of joint programs prior to planning subsequent programs.

Section 6. Approval of Programs

- (a) Prior to commencing any joint programs under this Agreement, the joint programs shall be reduced to writing in a "Program Agreement."
- (b) The written program agreement shall be executed by duly authorized representatives of UTMB and WCUMS.
- (c) The executed program agreement shall not become effective until approved in writing by the Office of the Chancellor of The University of Texas System and equivalent officials of WCUMS.

PART TWO: FINANCIAL MATTERS

Section 7. Planning Visits

UTMB and WCUMS shall each fund their own representatives visits to their respective institutions for purposes of program planning.

Section 8. Participant Expenses

- (a) UTMB and WCUMS shall each be responsible for the travel expenses of medical doctors, research scientists, and staff who will participate in joint programs to the following extent. Each institution shall provide for round trip travel expenses to their participants' respective campuses. Once there for the program, the host institution shall provide local transportation related to the program. Such local transportation and expenses related thereto shall be planned for and set out in detail in each future joint program agreement.
- (b) UTMB and WCUMS shall each, as host institutions, provide for local living accommodations for participants. The provisions for such accommodations shall be detailed in each future joint program agreement.
- (c) Insurance and medical requirements shall be explained in detail in each future joint program agreement. Neither UTMB nor WCUMS shall provide for such requirements for the other's participants.

PART THREE: TERM, EXTENSION,
CONDITIONS OF AGREEMENT

Section 9. Term

- (a) This Agreement becomes effective on the date of its execution as formally and officially authorized by the governing bodies of both UTMB and WCUMS and continue in effect for five years unless otherwise terminated.

- (b) Notwithstanding the provisions of subsection (a), this Agreement may be cancelled without penalty by either UTMB or WCUMS at any time after notice of the Office of the President of the respective university.
- (c) If this Agreement is cancelled prior to the end of its term, UTMB and WCUMS agree not to hold the other institution liable for any resulting monetary losses.
- (d) Any program agreement shall be for only a one-year term.

Section 10. Extension

UTMB and WCUMS agree that they will discuss extension of this Agreement prior to its expiration.

Section 11. Conditions

- (a) Both UTMB and WCUMS expressly acknowledge that any commitment of funds for planning visits or for participants' expenses is subject to the availability of funds, and prior approval of such expenditures by appropriate authorities.
- (b) This Agreement and any future program agreements shall always be subject to any overriding provisions of United States federal law and State of Texas law regarding faculty exchanges, faculty or staff visits, visas, and the exportation of educational or research materials of all kinds and character.
- (c) This Agreement and any future program agreements shall always be subject to the Rules and Regulations of the Board of Regents of The University of Texas System regarding faculty and staff absences from regular duty hours and location.

PART FOUR: CONSTRUCTION OF AGREEMENT

Section 12. Entire Agreement

This written instrument constitutes the entire Agreement between UTMB and WCUMS and any oral or previously written agreements are of no force and effect.

Section 13. Translation

This Agreement shall be translated into Chinese and English in such a manner that, prior to its execution, both UTMB and WCUMS are fully satisfied that both translations are correct and represent the terms of agreement arrived at through all previous discussions.

Section 14. Construction of Agreement

- (a) This Agreement shall be liberally construed to give effect to the purposes and intent of the universities.
- (b) If any part of these articles is found to be invalid for any reason, the remaining parts continue in effect.
- (c) Anything to the contrary herein notwithstanding, these articles shall be construed consistent with the Rules and Regulations of the Board of Regents of The University of Texas System and the Handbook of Operating Procedures of UTMB and equivalent documents of WCUMS.
- (d) In the event of conflict between the text of any program agreement and the text of this Agreement, this Agreement shall govern.

Section 15. Amendments

This Agreement and any program agreements may be amended only in writing and executed by the duly authorized representatives of UTMB and WCUMS and approved by both the Office of the Chancellor of The University of Texas System and WCUMS.

PART FIVE: NOTICES

Section 16. Notices

All notices under this Agreement or any program agreement shall be provided in writing to the university to be notified either by personal delivery or by United States of America mail. All notices shall be deemed given to the university when received by the Office of the President of the university. Copies of notices shall be sent to the persons indicated at the following addresses:

If to UTMB, addressed to:

The University of Texas Medical Branch at Galveston
Galveston, Texas 77550-2774
Attention: Dr. William C. Levin, President

UTMB shall provide copies of all such notices to:

Office of the Executive Vice Chancellor for
Health Affairs
The University of Texas System
601 Colorado
Austin, Texas 78701
Attention: Dr. Charles B. Mullins

The Board of Regents
The University of Texas System
201 West Seventh Street
Austin, Texas 78701
Attention: Mr. Arthur H. Dilly, Executive
Secretary

Office of General Counsel
The University of Texas System
201 West Seventh Street
Austin, Texas 78701
Attention: Mr. John L. Darrouzet

If to WCUMS, addressed to:

West China University of Medical Sciences
Chengdu, Sichuan
The People's Republic of China
Attention: Dr. Cao Zeyi, President

with a copy to:

International Affairs Office
West China University of Medical Sciences
Chengdu, Sichuan
The People's Republic of China
Attention: Dr. Cheng Zhenyu, Director

Cooperative Agreement - The University of Texas Medical Branch at Galveston
and West China University of Medical Sciences

EXECUTION

This Agreement is executed in duplicate originals in Chinese and English.

ATTEST:

West China University of
Medical Sciences

By

Zeyi Cao

Title

CONTENT APPROVED:

William C. Levin
William Levin, M.D.

President

The University of Texas Medical
Branch at Galveston

FORM APPROVED:

John L. Danoyst
Office of General Counsel

The University of Texas System

BOARD OF REGENTS OF THE
UNIVERSITY OF TEXAS SYSTEM
ON BEHALF OF THE UNIVERSITY
OF TEXAS MEDICAL BRANCH
AT GALVESTON

By

Charles M. Williams

Title Executive Vice Chancellor
for Health Affairs

CERTIFICATE OF APPROVAL

I hereby certify that the foregoing Agreement was approved by the Board of Regents of The University of Texas System on the 9th day of October, 1986, and that the person whose signature appears above is authorized to execute such Agreement on behalf of the Board.

Arthur H. Kelly
Executive Secretary, Board of Regents
The University of Texas System

4. U. T. Medical Branch - Galveston: Appointment of James C. Thompson, M.D., as Initial Holder of the John Woods Harris Chair in Surgery Effective Immediately.--Upon recommendation of the Health Affairs Committee, the Board appointed James C. Thompson, M.D., Professor and Chairman, Department of Surgery at The University of Texas Medical Branch at Galveston, as initial holder of the John Woods Harris Chair in Surgery effective immediately.

Dr. Thompson's appointment is in keeping with the intent of the donors that the Chairman of the Department of Surgery be recognized by holding this Chair.

5. U. T. Health Science Center - Houston: Dr. Robert E. Marc Appointed Initial Holder of the Robert Greer Professorship in the Biomedical Sciences Effective Immediately.--The Board, upon recommendation of the Health Affairs Committee, appointed Dr. Robert E. Marc, Associate Professor at the U. T. G.S.B.S. - Houston, as initial holder of the Robert Greer Professorship in the Biomedical Sciences at The University of Texas Health Science Center at Houston effective immediately.

See Page 174 related to the establishment of this Professorship.

6. U. T. Health Science Center - Houston: Appointment of Dr. R. W. Butcher to Ashbel Smith Professorship Effective Immediately.--Approval was granted to appoint Dr. R. W. Butcher, Dean of the U. T. G.S.B.S. - Houston at The University of Texas Health Science Center at Houston, to an Ashbel Smith Professorship effective immediately.

7. U. T. Health Science Center - Houston: Approval of Affiliation Agreement with Shriners Hospitals for Crippled Children, Houston, Texas.--The Board, upon recommendation of the Health Affairs Committee, approved the affiliation agreement set out on Pages 54 - 55 by and between The University of Texas Health Science Center at Houston and the Shriners Hospitals for Crippled Children, Houston, Texas.

This agreement, executed by the appropriate officials of the institution and facility to be effective upon approval by the U. T. Board of Regents, will provide educational experiences for medical students.

HEALTH CARE
EDUCATIONAL EXPERIENCE PROGRAM
AFFILIATION AGREEMENT

THIS AGREEMENT made the 18th day of June, 1985, by and between the University of Texas Health Science Center at Houston ("University"), a component institution of The University of Texas System, ("System"), and Shriners Hospitals for Crippled Children of Texas ("Facility"), a non-profit corporation having its principal office at Houston, State of Texas.

WITNESSETH:

WHEREAS, Facility now operates hospital facilities located at 1402 Outer Belt Drive, in the City of Houston, State of Texas, and therein provides medical care and treatment services for persons in need of such services; and University provides an academic program with respect to health care; and,

WHEREAS, University periodically desires to provide health care related educational experiences for its students, which are not otherwise available to them under the existing program of University, by utilization of appropriate facilities and personnel of Facility; and,

WHEREAS, Facility is committed to a goal of providing the best obtainable supply of personnel educated in the field of medicine as being in the best interest of Facility, and believes that achievement of such goal can best be accomplished by affording medical students the opportunity to participate in meaningful educational experiences as part of an academic health program, through utilization of appropriate facilities and personnel of Facility; and,

WHEREAS, in order to accomplish such objectives, University and Facility intend to establish and implement from time to time, one or more educational experience programs which will involve the students and personnel of University, and the facilities and personnel of Facility;

NOW, THEREFORE, in consideration of the premises and of the benefits derived and to be derived therefrom and from the program or programs established and implemented by said parties, University and Facility agree that any program agreed to by and between Facility and University, during the term of this Agreement, for purposes of achieving the above described objectives of said parties (hereinafter called "Educational Experience Program," or "Program"), shall be covered by and subject to the following terms and conditions:

1. The Program shall not become effective until all agreements between the parties with respect to Program have been reduced to writing ("Program Agreement"), executed by the duly authorized representatives of Facility and University, and approved in writing by the Office of the Chancellor of The University of Texas System.

2. The Program may be cancelled by either party by giving such written notice to the other of its intention to terminate the Program as provided in the Program Agreement; provided, however, that the Program shall automatically terminate upon termination of this Agreement.

~~3. In the event of conflict between the text of Program Agreement and the text of this Agreement, this Agreement shall govern.~~

4. After Program Agreement becomes effective, no amendments thereto shall be valid unless in writing and executed by the duly authorized representatives of Facility and University, and approved by the Office of the Chancellor of The University of Texas System.

5. Except for certain acts to be performed by University pursuant to express provisions of this Agreement, Facility hereby agrees to furnish the premises, personnel, services, and all other things necessary for the Educational Experience Program, as specified in the Program Agreement, and, in connection with such Program, further agrees:

- (a) ~~To comply with all Federal, State and Municipal laws, ordinances, rules and regulations applicable to performance by Facility of its obligations under this Agreement, and all applicable accreditation requirements, and to certify such compliance to University or other entity when requested to do so by University.~~
- (b) To permit the authority responsible for accreditation of University's curriculum to inspect such facilities, services and other things provided by Facility pursuant to this Agreement as are necessary for accreditation evaluation.
- (c) To appoint a person to serve for Facility as liaison (Liaison) to the faculty and students engaged in the Program; ~~provided, however, that no person not having the prior written approval of University shall be appointed Liaison.~~ and, in such connection, Facility shall furnish in writing to University (not later than thirty (30) days prior to the date the Liaison appointment is to become effective) the name and professional and academic credentials of the ~~person proposed by Facility to be Liaison, and within ten days after receipt of same, University shall notify Facility of University's approval or disapproval of such person.~~ In the event the Liaison becomes unacceptable to University after appointment, and University so notifies Facility in writing, Facility will appoint another person to serve as Liaison in accordance with the procedure stated in the first sentence of this sub-paragraph e.

6. University hereby agrees:

- (a) To furnish Facility with the names of the students assigned by University to participate in the program.
- (b) To assign for participation in the Program only those students (1) who have satisfactorily completed those portions of its curriculum which, according to Program Agreement, are prerequisite to such participation, all as determined by University in its sole discretion, and (2) who have entered into a written agreement with University and Facility that they will not publish any material relating to the Program, or their experience in participating therein, without the prior written approval of University and Facility.
- (c) To designate a member of the University faculty to coordinate with Facility through its Liaison the learning assignment to be assumed by each student participating in the Program, and to furnish to Facility in writing the name of such faculty member.

7. All notices under this Agreement shall be provided to the party to be notified in writing, either by personal delivery or by United States mail. All notices under this Agreement shall be deemed given to a party when received by such party's designated representative. and in the Program Agreement.

8. All the agreements between the parties on the subject matter hereof have been reduced to writing herein. No amendments to this Agreement shall be valid unless in writing and signed by the duly authorized representatives of the parties, and approved by the Board of Regents of The University of Texas System.

9. No oral representations of any officer, agent, or employee of Facility or The University of Texas System, or any of its component institutions, (including, but not limited to University), either before or after the effective date of this Agreement, shall affect or modify any obligations of either party hereunder or under any Program Agreement.

10. This Agreement shall be binding on and shall inure to the benefit of the parties and their respective successors and assignees; provided, however, that no assignment by either party shall be effective without prior written approval of the other party. A delay in or failure of performance of either party shall not constitute default hereunder, or give rise to any claim for damages, if and to the extent such delay or failure is caused by occurrences beyond the control of either party.

11. This Agreement shall not become effective unless and until approved by the Board of Regents of The University of Texas System. If so approved, this Agreement shall become effective on the date of such approval, and shall continue in effect for an initial term ending one (1) year after the date and year of execution by Facility and University, and after such initial term, from year to year unless one party shall have given one hundred eighty (180) days' prior written notice to the other party of intention to terminate this Agreement. If such notice is given, this Agreement shall terminate: (a) at the end of the term of this Agreement during which the last day of such one hundred eighty (180) day notice period falls; or, (b) when all students enrolled in the Program at the end of the term of this Agreement have completed their respective courses of study under the Program: whichever event last occurs.

Executed by University and Facility on the day and year first above written, in duplicate copies, each of which shall be deemed an original.

ATTEST:

(Title)

ATTEST:

(Title)

FORM APPROVED:

John L. Dawson
(Title)
Office of General Counsel
The University of Texas System

UNIVERSITY

By: [Signature]
(Title) President

FACILITY - SHRINERS HOSPITALS FOR CRIPPLED

By: [Signature] CHILDREN
(Title) RICHARD B. OLFENE, President

CONTENT APPROVED:

[Signature]
(Title) Executive Vice Chancellor for Health Affairs
Office of the Chancellor
The University of Texas System

CERTIFICATE OF APPROVAL

I hereby certify that the foregoing Agreement was approved by the Board of Regents of The University of Texas System on the 9th day of October, 1986, and that the person whose signature appears above is authorized to execute such agreement on behalf of the Board.

[Signature]
Executive Secretary, Board of Regents
The University of Texas System

8. U. T. Health Science Center - Houston: Approval of Bylaws, Rules and Regulations of the Medical Staff for the Harris County Psychiatric Center.--In keeping with the operating agreement and the standards of the Joint Commission on Accreditation of Hospitals by which the Harris County Psychiatric Center will operate, the Board, for and on behalf of The University of Texas Health Science Center at Houston, approved the Bylaws, Rules and Regulations of the Medical Staff for the Harris County Psychiatric Center as set forth on Pages 57 - 159.

The Bylaws provide for, among other items: definitions and categories of medical staff; organization of the medical staff; meetings of the medical staff; clinical services and clinical privileges; committees; procedures for appointment to the medical staff; actions affecting members of the medical staff, and hearing and appeals procedures. The Rules and Regulations of the Medical Staff provide, in greater detail, for the various processes of the Center with which the medical staff and others with clinical privileges are expected to comply.

hpc

BYLAWS, RULES
& REGULATIONS
OF THE ORGANIZED
MEDICAL STAFF

Harris County Psychiatric Center

Houston, Texas

HARRIS COUNTY PSYCHIATRIC CENTER
 MEDICAL STAFF BYLAWS, RULES AND REGULATIONS
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BYLAWS, RULES AND REGULATIONS
OF THE
ORGANIZED MEDICAL STAFF
OF THE
HARRIS COUNTY PSYCHIATRIC CENTER
PREAMBLE

Pursuant to appropriation bill riders in the 67th and 68th Texas Legislatures, the Texas Department of Mental Health and Mental Retardation was appropriated funds to construct a 125-bed psychiatric hospital in Houston. Subsequently, Harris County agreed to fund another 125 beds and have a joined project with TDMHMR. Pursuant to Senate Bill 1295 in the 69th Legislature, TDMHMR, Harris County, the Mental Health and Mental Retardation Authority of Harris County (MHMRA), and the Board of Regents of The University of Texas System were authorized to enter into leases, subleases, and operating agreements whereby the U. T. Board of Regents would manage and operate the psychiatric hospital to be named the Harris County Psychiatric Center. Such leases, subleases, and operation agreements were entered into and the U. T. Board of Regents delegated the general authority to manage the day-to-day operations of the Center to The University of Texas Health Science Center at Houston. The U. T. Board of Regents also agreed that The University of Texas System and The University of Texas Health Science Center at Houston, consistent with the Rules and Regulations of the Board, would manage and operate the hospital through a Director appointed by the Board. Under the operating agreement, the Director "shall be the chairman of the U. T. Health Science Center's Department of Psychiatry or a person nominated by the Chairman and recommended by the President" of the Health Science Center to the Board.

The management objective is to fulfill the mission of the Harris County Psychiatric Center. As provided in the operating agreements: "The Texas Board of Mental Health and Mental Retardation on behalf of TDMHMR, the Commissioner's Court on behalf of Harris County, the Board of Trustees of MHMRA on behalf of MHMRA, and the Board of Regents recognize and agree that the Harris County Psychiatric Center has been established with the mission of caring for mentally ill persons of Harris County and with the uniquely special and additional missions of The University of Texas Health Science Center at Houston conducting research into the causes and cures of mental illness and the education of professionals in the care of the mentally ill, all in accordance with the legislative intent of S.B. 1295. The Harris County Psychiatric Center shall be operated pursuant to the provisions of laws, including S.B. 1295..., and any amendments thereto; any riders to General Appropriations Acts of the Legislature,...

the Rules and Regulations of the Board of Regents of The University of Texas System; and the Harris County Psychiatric Center Admission, Discharge, and Transfer Policy Statement, and any amendments thereto...." (HCPC Leases, Sublease, and Operating Agreement, December 5, 1985)

The Medical Staff of the Harris County Psychiatric Center is responsible for the quality of medical care and treatment rendered and must assume this responsibility subject to these bylaws, and the Rules and Regulations of the Board of Regents of The University of Texas System, the governing body of the hospital. The cooperation of organized medical staff, the Hospital Administration, and the Board of Regents are necessary in order to fulfill the HCPC's obligation to its patients in providing patient care, education, and research.

The physicians practicing in the Harris County Psychiatric Center hereby organize themselves in conformity with these bylaws, and rules and regulations hereinafter stated.

ARTICLE I
NAME

The name of this organization is the Medical Staff of the Harris County Psychiatric Center (herein referred to as the "Medical Staff".)

ARTICLE II
ORGANIZATIONAL SUMMARY

ARTICLE II - PART A: ORGANIZATION SUMMARY:

The Medical Staff is an organizational Unit of the Harris County Psychiatric Center (HCPC) to which physicians may be appointed to Membership by the U. T. Board of Regents. An "Organization Summary" prepared by the HCPC for distribution to new Applicants and Appointees is attached as Appendix "A" and contains a general description of (a) the interrelationships among the HCPC, the Medical Staff, and the various Units thereof, (b) of the Medical Staff's organization and procedures as established by these Bylaws, and (c) the policies of the HCPC relating to medical practice.

ARTICLE III
PURPOSES

ARTICLE III - PART A: PURPOSES

The purposes of the Medical Staff are:

- (a) To ensure that all patients treated in any service of the HCPC shall receive care, regardless of race,

- color, ethnicity, religion, creed, sex, sexual orientation, age, national origin, physical handicap, or other basis protected by law, or ability to pay;
- (b) To ensure a high level of medical care quality through an ongoing, objective review and evaluation of the collective care provided, and each member's performance in the delivery of that care;
 - (c) To provide an appropriate educational and scientific setting to promote continuous advancement in professional knowledge into the causes and cures of mental illnesses, and the education of professionals in the care of the mentally ill;
 - (d) To provide a mechanism for affording consultation to the governing body in defining the services which may be made available within the HCPC, the privileges which may be awarded for the provision of such services;
 - (e) To provide a mechanism by which physicians participate in the overall planning process of the HCPC, particularly with respect to the identification of community needs and the appropriate role for the HCPC in meeting such needs;
 - (f) To provide a mechanism for the submission of recommendations to the U. T. Board of Regents concerning the qualifications of specific privileges, if any, which practitioners may be appropriately awarded for the provision of approved services within the HCPC;
 - (g) To provide a mechanism for the development of standards of care, for the acquaintance of physicians and allied health professionals with such standards of care, for the monitoring of the performance of such persons in relation to such standards of care and for the institution of corrective action with respect to deviations of such persons from such standards of care, with the safety and interests of patients taking precedence over all other concerns; and
 - (h) To provide a means whereby issues concerning the organized medical staff and the hospital may be discussed by representatives of the organized medical staff, the U. T. Board of Regents, and the hospital administration.

ARTICLE IV
DEFINITIONS

ARTICLE IV - PART A: DEFINITIONS

- (a) The following definitions shall apply to terms used in these bylaws:

"Board" means the Board of Regents of The University of Texas System.

"Dean" means the Dean of the UTHSCH-MS.

"Director" means the chief executive officer of the HCPC who is appointed by the U. T. Board of Regents to manage and operate the Harris County Psychiatric Center consistent with the Rules and Regulations of the Board.

"Executive Committee" means the Executive Committee of the Medical Staff.

"Governing body" means the Board of Regents of The University of Texas System.

"HCPC" means the Harris County Psychiatric Center, Houston, Texas;

"Hospital Administration" means the the Director, the Hospital Administrator, and the Medical Director, or their designees.

"JCAH" means the Joint Commission on Accreditation of Hospitals.

"Leases, Sublease, and Operating Agreement" means those leases, sublease, and operating agreement entered into by the Texas Department of Mental Health and Mental Retardation, Harris County, the Mental Health and Mental Retardation Authority of Harris County, and the U. T. Board of Regents pursuant to Senate Bill 1295 of the 69th Legislature of the State of Texas.

"Medical Director" means that active staff physician appointed by the Director to fulfill medico-administrative duties as delegated by the Director.

"Medical Staff" means all physicians who are given privileges to treat patients in the hospital;

"Office of General Counsel" or OGC means the Office of General Counsel of The University of Texas System.

"Office of Health Affairs" means the Office of Health Affairs of the Chancellor's Office of UTS.

"Physicians" shall be interpreted to be an individual who has received a doctorate of medicine and who is currently fully licensed by the State of Texas to practice medicine.

"President" means the President of the Medical Staff.

"UTHSCH" means The University of Texas Health Science Center at Houston.

"UTHSCH-MS" means The University of Texas Health Science Center at Houston Medical School.

"UTS" means The University of Texas System Administration.

- (b) Whenever a personal pronoun is used, it shall be interpreted to refer to persons of either gender.

ARTICLE V
CATEGORIES OF THE MEDICAL STAFF

All appointments to the medical staff shall be made by the Board, and shall be to one of the following categories of the staff.

ARTICLE V - PART A: ACTIVE STAFF

The Active Staff shall consist of those physicians who desire appointment to the Active Staff and who are members of the full-time or part-time UTHSCH-MS psychiatric faculty. Each appointee to the Active Staff shall agree to assume all the functions and responsibilities of appointment to the Active Staff, including, where appropriate, service patients, emergency service care, consultation and teaching assignments. Active Staff appointees shall be entitled to vote, hold office (when applicable), serve on medical staff committees, and serve as chairman of such committees. They shall be required to attend medical staff meetings.

ARTICLE V - PART B: CONSULTING STAFF

The Consulting Staff shall consist of specialists with membership on the faculty of UTHSCH-MS who are appointed for the specific purpose of providing consultation in the diagnosis and treatment of patients and the administration of clinical services.

Appointment to the Consulting Staff does not entitle the appointee to admit patients, to vote or to hold staff offices, but such appointee may serve on medical staff committees and are not required to attend staff meetings.

ARTICLE V - PART C: FELLOW/RESIDENT STAFF

- (1) Physicians who are appointed as Fellows or Residents under applicable rules, regulations, and policies and who are approved by the Dean of UTHSCH-MS shall, as part of the Appointment Agreement with the HCPC, receive Appointment with the Fellow/Resident Staff Category. Service assignment, Privileges, Responsibilities, and all other matters relating to each Physician appointed to the Fellow/Resident Staff Category shall be governed by his Appointment Agreement, the policies of the HCPC applicable to medical education, those conditions and privileges contained in these Bylaws, and by the affiliation agreements between the Board on behalf of UTHSCH for the HCPC, and a school of medicine approved by the Liaison Committee for Medical Education of the American Medical Association and the Association of American Medical Colleges.
- (2) An Appointee to the Fellow/Resident Staff Category shall be afforded only such rights as may be specifically provided in his Appointment Agreement and, anything herein apparently to the contrary notwithstanding, shall have no rights to Hearing and Appeals Procedures under these Bylaws or other policies of the HCPC unless otherwise ordered by the Board.
- (3) The training, experience, and demonstrated current competence of the Fellow/Resident Staff shall be sufficient to permit their performing the following:
 - (a) The exercising of judgement within their area of competence, providing that a member of the medical staff shall have the ultimate responsibility for patient care;
 - (b) Participating in the management of patients under the supervision or direction of a member of the medical staff; and

- (c) Within the limits established by the medical staff and consistent with the State Practice Acts, the writing of orders and the recording of reports and progress notes in patient's medical records.

ARTICLE VI
ORGANIZATION OF THE MEDICAL STAFF

ARTICLE VI - PART A: GENERAL

Section 1. Medical Staff Year:

For the purpose of these bylaws the medical staff year commences on the 1st day of September and ends on the 31st day of August each year.

ARTICLE VI - PART B: OFFICERS OF THE MEDICAL STAFF

The officers of the medical staff shall be the President, the Vice President of the Medical Staff, and committee chairmen. The Medical Director shall be the President of the Medical Staff. The Vice President shall be elected. Failure to maintain such status shall immediately create a vacancy in the office involved.

ARTICLE VI - PART B:

Section 1. The President of the Medical Staff

The President of the Medical Staff shall:

- (a) act on behalf of the Medical Staff as its chief spokesman and shall coordinate and cooperate with Hospital Administration in matters of mutual concern involving the hospital;
- (b) call, preside at and be responsible for the agenda of all regular meetings of the medical staff;
- (c) appoint committee chairmen and members to all standing and special medical staff committees;
- (d) serve as ex officio member of all medical staff committees other than the Executive Committee, without vote;
- (e) represent the views, policies, needs and grievances of the medical staff and report on the medical

activities of the staff to the Hospital Administrator, the Director, and the President of UTHSCH; and

- (f) receive the policies of the Board and present them to the medical staff and report to the Director and the President of UTHSCH on the performance and maintenance of quality with respect to the delegated responsibility of the medical staff to provide medical care.

ARTICLE VI - PART B:

Section 2. Vice President of the Medical Staff:

The Vice President of the Medical Staff shall:

- (a) assume all the duties and have the authority of the President of the Medical Staff in the event of the President's temporary inability to perform due to illness, being out of the community or being unavailable for any other reason;
- (b) be a chairman of the Executive Committee of the medical staff;
- (c) provide day-to-day liaison on medical matters with the Director of the HCPC; and
- (d) perform such duties as are assigned to him by the President.

ARTICLE VI - PART B:

Section 3. Terms of Appointed Officers:

- (a) President of the Medical Staff. The appointment of the President of the Medical Staff shall continue unless the Director withdraws his approval.
- (b) Vice President of the Medical Staff. The Vice President of the Medical Staff shall be elected by the Active Staff annually.

ARTICLE VI - PART B:

Section 4. Removal of Officers:

The President of the Medical Staff may remove any medical staff officer for conduct detrimental to the interests of the hospital, or if he is suffering from a

physical or mental infirmity that renders him incapable of fulfilling the duties of his office, providing notice of such action shall have been given in writing to such officer at least ten days prior to the date of such action. Such removal will be effective when approved by the Director and the President of UTHSCH.

ARTICLE VI - PART B:

Section 5. Vacancies in Office:

If there is a vacancy in the office of the President of the Medical Staff prior to the expiration of the President's term, the Vice President of the Medical Staff may, at the direction of the Director and the President of UTHSCH assume the duties and authority of the President of the Medical Staff for the remainder of the unexpired term. If there is a vacancy in any other office, the President of the Medical Staff shall appoint another Active Staff appointee to serve out the remainder of the unexpired term. Such appointment will be effective when approved by the Director and the President of UTHSCH.

ARTICLE VI - PART C: MEETINGS OF THE MEDICAL STAFF

Section 1. Regular Staff Meetings:

The medical staff shall hold regular meetings quarterly during each year, on dates set at the beginning of the medical staff year by the President of the Medical Staff, for the purpose of reviewing and evaluating service and committee reports and recommendations, and to act on any other matters placed on the agenda by the President of the Medical Staff.

ARTICLE VI - PART C: MEETINGS OF THE MEDICAL STAFF

Section 2. Annual Staff Meeting:

The medical staff shall hold an annual staff meeting in September of each year, on a date set by the President of the Medical Staff, for the purpose of reviewing and evaluating service and committee reports and recommendations, appointment of officers and any member(s) at large for the Executive Committee for the ensuing year, and to act on any other matters placed on the agenda by the President on the Medical Staff.

ARTICLE VI - PART C:

Section 3. Special Staff Meetings:

Special meetings of the medical staff may be called at any time by the Board, the President of UTHSCH, the Director, the President of the Medical Staff, a majority of the Executive Committee or a petition signed by not less than one-fourth of the voting staff. In the event that it is necessary for the staff to act on a question without being able to meet, the voting staff may be presented with the question by mail and their votes returned to the President of the Medical Staff by mail. Such a vote shall be binding so long as the question is voted on by a majority of the staff eligible to vote.

ARTICLE VI - PART C:

Section 4. Quorum:

The presence of twenty-five percent of the active staff of the HCPC eligible to vote shall constitute a quorum for any regular or special meeting of the medical staff. This quorum must exist for any action to be taken. A quorum once having been found, the business of the meeting may continue and all actions taken shall be binding even though less than a quorum exists at a later time in the meeting.

ARTICLE VI - PART C:

Section 5. Agenda:

(a) The agenda at any regular medical staff meeting shall be, at the discretion of the President of the Medical Staff:

- Call to order
- Acceptance of the minutes of the last regular and of all intervening special meetings of the Medical Staff and the minutes of the Medical Staff Executive Committee since the last meeting of the Medical Staff
- Report from the Board
- Report of President of UTHSCH
- Report of Director

- Report of the President of the Medical Staff
- Report from Hospital Administration
- Committee Reports
- Unfinished business
- New business,
- Adjournment

(b) All important actions of the Executive Committee shall be included in the President's report to the medical staff at any regular or any special meeting called for this purpose.

ARTICLE VI - PART D: COMMITTEE MEETINGS

Section 1. Committee Meetings:

All committees shall meet at least quarterly, unless otherwise specified, at a time set by the chairman of the committee. The agenda for the meeting and its general conduct shall be set by the chairman.

ARTICLE VI - PART D:

Section 2. Special Unit Committee Meetings:

- (a) A special meeting of any committee may be called by or at the request of the chairman or by the President of the Medical Staff, or by a petition signed by not less than one-fourth of the members of the committee.
- (b) In the event that it is necessary for a committee to act on a question without being able to meet, the voting members may be present with the question, in person or by mail, and their vote returned to the chairman of the committee. Such a vote shall be binding so long as the question is voted on by a majority of the committee.

ARTICLE VI - PART D:

Section 3. Quorum:

The presence of twenty-five percent of the total membership of the committee eligible to vote at any regular or special meeting shall constitute a quorum for all

actions. A quorum once having been found, the business of the meeting may continue and all actions taken shall be binding even though less than a quorum exists at a later time at the meeting.

ARTICLE VI - PART D:

Section 4. Minutes:

Minutes of each meeting of each committee shall be prepared and shall include a record of the attendance of members, of the recommendations made, of the votes taken on each matter, and the time of adjournment. The minutes shall be signed by the presiding officer and copies thereof shall be promptly forwarded to the Executive Committee and to any committee otherwise specified elsewhere in these bylaws. Each committee and each service shall maintain a permanent file of the minutes of each of its meetings in the office of the Director of Quality and Standards of the HCPC.

ARTICLE VI - PART E: PROVISIONS COMMON TO ALL MEETINGS

Section 1. Notice of Meetings:

Notice of all meetings of the medical staff and committees shall be made by memorandum at least five days in advance of such meetings. Such notice shall be deemed to constitute actual notice to the persons concerned. The attendance of any individual at any meeting shall constitute a waiver of that individual's notice of said meeting.

ARTICLE VI - PART E:

Section 2. Attendance Requirements:

- (a) Each Active Staff appointee shall be required to attend at least fifty percent of all regular medical staff meetings and applicable committee meetings in each year but is expected to attend all meetings. Any person who is compelled to be absent from any meeting shall promptly submit to the Executive Committee, in writing, the reason for such absence if the individual desires to receive credit for attendance at that meeting. Credit shall then be at the discretion of the Executive Committee. The failure of any person required to do so, to meet the foregoing regular staff meeting and other attendance requirements shall constitute

voluntary relinquishment of clinical privileges. Reinstatement of clinical privileges that have been relinquished because of absence from the required number of staff meetings shall be made only upon application, and all such applications shall be processed in the same manner as applications for initial privileges.

- (b) Any person appointed to the medical staff whose clinical work is scheduled for discussion at a regular review meeting shall be so notified and shall be expected to attend such meeting. If such individual is not otherwise required to attend the meeting, the chairman shall give him advance written notice of the time and place of the meeting at which his attendance is expected.
- (c) The chairman of the applicable committee shall notify the Executive Committee of the failure of an individual to attend any meeting with respect to which he was given notice that attendance was mandatory. Unless excused by the Executive Committee upon showing of good cause, such failure shall result in an automatic suspension of all or such portion of the individual's admitting privileges as the Executive Committee may direct. Such suspension shall remain in effect until the matter is resolved. In all other cases, if the individual shall make a timely request for postponement supported by an adequate showing that his absence will be unavoidable, the presentation may be postponed by the chairman or by the Executive Committee if the chairman is the individual involved, until not later than the next regularly scheduled meeting. Otherwise, the pertinent clinical information shall be presented and discussed as scheduled.
- (d) Persons appointed to the Consulting categories of the medical staff shall be expected to attend and participate in staff and committee meetings unless unavoidably prevented from doing so but shall not be required to do so.

ARTICLE VI - PART E:

Section 3. Rules of Order:

Wherever they do not conflict with these Bylaws, the currently, revised Robert's Rules of Order shall govern all meetings and elections.

ARTICLE VI - PART E:

Section 4. Voting:

Any individual who, by virtue of position, attends a meeting in more than one capacity shall be entitled to only one vote.

ARTICLE VII
CLINICAL SERVICES

ARTICLE VII - PART A: CLINICAL SERVICES

Section 1. Organization of Services and Quality Assurance:

- (a) Until such time as clinical services are departmentalized at the HCPC, the ongoing monitoring and evaluation of the quality and appropriateness of the care and treatment provided to patients within the HCPC will be formally reported to the Executive Committee by the areas of care Chiefs at the regularly scheduled monthly meetings. Reports will cover the following areas of care:
- (1) Adult Acute Psychiatric Care
 - (2) Adult Intermediate Psychiatric Care
 - (3) Geriatric Psychiatric Care
 - (4) Child Psychiatric Care
 - (5) Adolescent Psychiatric Care
 - (6) Substance Abuse Care
- (b) The quality assurance committee, called the Clinical Care Committee in these Bylaws, shall consist of the chiefs of the services enumerated above. The committee shall report to the Executive Committee. Pursuant to Section 33 of the Leases, Sublease, and Operating Agreement, upon the recommendation of the President of UTHSCH, and upon the request of the Executive Vice Chancellor for Health Affairs of The University of Texas System, the Director shall develop, in consultation with the Texas Department of Mental Health and Mental Retardation, Harris County, and the Mental Health and Mental Retardation Authority of Harris County, and assist in the implementation of a Quality Assurance Program. Implementation services shall include preparation of forms and other documentation, training of

quality assurance personnel and the holding of orientation sessions for members of hospital staff.

ARTICLE VII - PART A:

Section 2. Review of Care:

- (a) The medical care within each area of care shall be evaluated on a retrospective, concurrent and/or prospective basis for the primary purpose of quality assurance and that will contribute to the continuing education of the members of the medical staff in that area of care. Such evaluations should include cases involving deaths, or complications, and such other cases believed to be important, such as those involving patients currently in the hospital with unsolved clinical problems.
- (b) In discharging these functions, a report shall be prepared on each area of care and presented to the Executive Committee on a monthly basis detailing the analysis of patient care and to the Executive Committee whenever further investigation and appropriate action involving any individual practicing in the area of care is indicated. Copies of these reports shall be filed with the Executive Committee.

ARTICLE VII - PART A:

Section 3. Chiefs:

- (a) The Director shall appoint a chief for each area of care who shall be an appointee to the Active Staff and who is qualified by training, experience and administration ability for the position.
- (b) Removal of a chief during his term of appointment may be effected by the Director.

ARTICLE VII - PART A:

Section 4. Functions of Chiefs:

Each chief shall:

- (a) Be responsible for the organization of all activities and for the general administration of the area of care;

- (b) Be a member of the Executive Committee, giving guidance on the overall medical policies of the hospital and making specific recommendations and suggestions regarding patient care in the area of care;
- (c) Review the professional performance of all individuals with clinical privileges in the area of care and report and recommend thereon to the Executive Committee as part of the reappointment process and at such other times as may be indicated;
- (d) Be responsible for enforcement within the area of the hospital policies and bylaws and the medical staff bylaws, rules and regulations;
- (e) Be responsible for implementation within the area of actions taken by the Board, the President of UTHSCH, the Director, the President of the Medical Staff, and the Executive Committee;
- (f) Make recommendations to the Executive Committee concerning the appointment and delineation of clinical privileges for all applicants seeking privileges in the area of care;
- (g) Be responsible for the establishment, implementation and effectiveness of the teaching, education and research program in the area;
- (h) Report and recommend to hospital management when necessary with respect to matters affecting patient care in the area, including personnel, supplies, special regulations, protocols and techniques;
- (i) Assist the hospital management in the preparation of annual reports and such budget planning pertaining to the area as may be required by the President of the Medical Staff, the Director, the President of UTHSCH, or the Board; and
- (j) Delegate to a vice chief of the area such duties as he deems appropriate.

ARTICLE VIII
COMMITTEES OF THE MEDICAL STAFF

ARTICLE VIII - PART A: APPOINTMENT

Section 1. Chairmen:

- (a) Appointment of all committee chairmen, unless otherwise provided for in these bylaws, will be approved by the President of the Medical Staff. All chairmen shall be selected from among persons appointed to the Active Staff.
- (b) Such appointments will be made by the President of the Medical Staff to begin with the medical staff year.

ARTICLE VIII - PART A:

Section 2. Members:

- (a) Members of each committee, except as otherwise provided by these bylaws, shall be appointed yearly by the President of the Medical Staff not more than 10 days after the end of the medical staff year, with no limitation in the number of terms they may serve. All appointed members may be removed and vacancies filled by the President of the Medical Staff at his discretion.
- (b) The Hospital Administration and the President of the Medical Staff or their respective designees shall be members, ex officio without vote, unless specifically named as a committee member, on all committees.

ARTICLE VIII - PART B: EXECUTIVE COMMITTEE

Section 1. Composition:

- (a) The Executive Committee shall consist of the officers of the medical staff, the chief of each area of care and other member(s) at large appointed from the Active Staff by the President of the Medical Staff.
- (b) The Executive Committee member(s) at large shall be appointed by the President of the Medical Staff at the annual medical staff meeting. The at-large member(s) shall be eligible for reappointment.

- (c) The Vice President of the Medical Staff shall be chairman of the Executive Committee.
- (d) The President of UTHSCH or his designated representative and the Hospital Administration may attend meetings of the Executive Committee and participate in its discussions, but without vote.

ARTICLE VIII - PART B:

Section 2. Duties:

The duties of the Executive Committee shall be:

- (a) to represent and to act, without requirement of subsequent approval, on behalf of the medical staff, in all matters between meetings of the medical staff, subject only to any limitations imposed by these bylaws;
- (b) to coordinate the activities and general policies of the various units;
- (c) to receive and act upon medical staff committee and other unit reports, and to make recommendations concerning them to Hospital Administration and the President of UTHSCH;
- (d) to implement policies of the medical staff which are not the responsibility of the chiefs;
- (e) to provide liaison among medical staff, Hospital Administration and the President of UTHSCH;
- (f) to recommend action to the President of the Medical Staff on matters of a medico-administrative and hospital management nature;
- (g) to ensure that the medical staff is kept abreast of the Joint Commission on Accreditation of Hospitals accreditation program, medical staff requirements for compliance to regulatory and accrediting agency standards, and informed of the accreditation status of the hospital;
- (h) to take steps to ensure the enforcement of hospital and medical staff rules in the best interest of patient care and of the hospital on the part of all persons who hold appointment to the medical staff, and to make recommendations to the President of

UTHSCH on actions described in ARTICLE XI (HEARING AND APPEAL PROCEDURES);

- (i) to review situations involving questions of the clinical competence, patient care and treatment or case management of any persons who hold appointments to the medical staff;
- (j) to be responsible to the Board for the general quality of medical care rendered to patients in the hospital;
- (k) to review the bylaws, rules and regulations of the medical staff at least once a year and recommend such changes thereto as may be necessary or desirable; and
- (l) to determine minimum continuing education requirements for appointees to the staff.

In any instance where a member of the Executive Committee has a conflict of interest in any matter involving another medical staff appointee which comes before the Executive Committee, or in any instance where a member of the Executive Committee brought the complaint against that appointee, that member shall not participate in the discussion or voting on the matter and shall be absent himself from the meeting during that time, although he may be asked and answer any questions concerning the matter before leaving.

The chairman of the Executive Committee, his representative and such members of his committee as may be necessary shall be available to meet with the Board or its applicable committee on all recommendations that the Executive Committee may make. Between meetings of the Executive Committee, an ad hoc committee composed of the officers of the staff and the chairman of the Credentials Committee shall be empowered to act in situations of urgent or confidential concern where not prohibited by these bylaws.

ARTICLE VIII - PART B:

Section 3. Meetings, Reports and Recommendations:

The Executive Committee shall meet at least once each month or more often if necessary to transact pending business. The Quality and Standards Department will maintain reports of all meetings, which reports shall include the minutes of the various committees and

services of the staff. Copies of all minutes and reports of the Executive Committee shall be transmitted to the President of the Medical Staff routinely as prepared, and important actions of the Executive Committee shall be reported to the staff as a part of the Executive Committee's report at each regular staff meeting. Recommendations of the Executive Committee shall be transmitted through the President of the Medical Staff to the Director who shall transmit the recommendations to the President of the UTHSCH who may transmit them to the Board.

ARTICLE VIII - PART C: CREDENTIALS COMMITTEE

Section 1. Composition:

The Credentials Committee shall consist of three physicians who are appointees to the Active Staff, one of which will be the Medical Director who will be appointed chairman by the President of the Medical Staff. The Director of Quality and Standards shall serve as ex officio and be responsible for maintenance of the Credentialing files.

ARTICLE VIII - PART C:

Section 2. Duties:

The duties of the Credentials Committee shall be:

- (a) to review the credentials of all applicants, to make such investigations of and interview applicants as may be necessary, and to make recommendations for appointment and delineation of clinical privileges in compliance with these bylaws;
- (b) to make a report to the Executive Committee on each applicant for medical staff appointment and clinical privileges;
- (c) to review as questions arise all information available regarding the professional and clinical competence of persons currently appointed to the medical staff, their care and treatment of patients and case management, and as a result of such review to make recommendations to the Executive Committee for the granting, reduction or withdrawal of promotions, privileges, reappointments, and changes in the assignment of appointees to the various areas of care within the HCPC;

- (d) to review reports concerning the clinical privileges of medical staff appointees referred by any other medical staff function, the President of the Medical Staff, Hospital Administration or the President of UTHSCH and to make such recommendations as provided by these bylaws.

In any instance where a member of the Credentials Committee has a conflict of interest in any matter involving an applicant or appointee to the staff which comes before the Credentials Committee that member shall not participate in the discussion or voting on the matter and shall be absent himself from the meeting during that time, although he may be asked and answer any questions concerning the matter before leaving.

The chairman of the Credentials Committee, the chairman's representative or such members of the committee as are deemed necessary shall be available to meet with the Executive Committee on all recommendations that the Credentials Committee may make.

ARTICLE VIII - PART C:

Section 3. Meetings, Reports and Recommendations:

The Credentials Committee shall meet as often as necessary to accomplish its duties but at least six times a year and shall maintain a permanent record of its proceedings and actions and shall report its recommendations to the Executive Committee, the President of the Medical Staff, the Director, and the President of the UTHSCH.

ARTICLE VIII - PART D: MEDICO-ADMINISTRATIVE CONFERENCE

Section 1. Composition:

The Medico-Administrative Conference shall consist of the President of the Medical Staff, the Director, the President of UTHSCH, and the Executive Vice Chancellor for Health Affairs. The Hospital Administrator and the Dean of UTHSCH-MS shall serve as ex-officio members without vote. The chairman shall be the Executive Vice Chancellor for Health Affairs.

ARTICLE VIII - PART D:

Section 2. Duties:

The Medico-Administrative Conference shall be a forum for the discussion of matters of hospital policy and practice, especially those pertaining to patient care and compliance with JCAH accreditation requirements, and shall provide medico-administrative liaison with the Medical Staff, the Board and Hospital Administration. The conference shall perform such duties as shall be given it by the Board and shall also have the following specific duties:

- (a) It shall make recommendations to the Board regarding any communications, requests or policy recommendations presented by the medical staff.
- (b) It shall receive and consider reports on the work of the medical staff and make such recommendations to the Board as the committee considers to be in the best interest of the hospital.
- (c) It shall receive and consider issues that may arise in the planning and management and medical staff including, but not limited to: development, implementation, and evaluation of a detailed plan for emergency preparedness.
- (d) The Medico-Administrative Conference shall be responsible for acquisition and maintenance of JCAH accreditation and shall periodically receive reports on the hospital status concerning compliance with JCAH requirements and recommendation to resolve any conditions of noncompliance.

ARTICLE VIII - PART D:

Section 3. Meetings, Reports and Recommendations:

The Medico-Administrative Conference shall meet at least yearly or more often as deemed necessary to conduct business and shall transmit written reports of its activities to the Board, the Executive Committee and the President of the Medical Staff.

ARTICLE VIII - PART E: CLINICAL CARE COMMITTEE

Section 1. Composition:

The Clinical Care Committee shall consist of the chiefs of the services as identified above at Article VII, Part A, Section 1(a). The Director of Quality and Standards shall be an ex-officio member.

Section 2. Duties:

- (1) Develop and recommend to the Executive Committee, a hospital-wide quality assurance plan to coordinate, supplement, and review the quality assurance activities of units of the Medical Staff and HCPC.
 - (a) Supervise the quality assurance program implemented pursuant to such plan;
 - (b) Receive, review, and act upon those quality assurance reports brought before it;
 - (c) At least annually, review the objectives, scope, organization, and effectiveness of the quality assurance plan and recommend revisions; and
 - (d) Act in such matters as may be assigned to it by the Executive Committee or the President of the Medical Staff.
- (2) Infection Control Duties:
 - (a) Develop and recommend policies and procedures to prevent and identify infections in patients, HCPC staff and personnel, and provide for their annual review; and
 - (b) Supervise infection control in all phases of the hospital's activities.

Section 3. Meetings, Reports and Recommendations:

- (a) Quality assurance and infection control activities shall be reported at least monthly to the Executive Committee and a permanent record of findings, proceedings and action maintained.
- (b) The Clinical Care Committee shall report (with or without recommendation) to the Executive Committee for its consideration and appropriate action any

situation involving questions of the clinical competency, patient care and treatment or case management of any individual appointed to the medical staff.

- (c) The Clinical Care Committee shall report (with or without recommendation) to the Executive Committee for its consideration and appropriate action any situation involving identified or suspected quality assurance or infection control problems, questions or professional ethics, infraction of hospital or medical staff bylaws or rules or unacceptable conduct on the part of any individual appointed to the medical staff.

ARTICLE VIII - PART F: UTILIZATION REVIEW SUBCOMMITTEE

Section 1. Composition:

The Utilization Review Subcommittee shall consist of a minimum of three appointees of the Active Staff, the Director of Social Work Services, the Utilization Review Coordinator, and the Director of Nursing.

Section 2. Duties:

- (a) Determine the extent to which the HCPC's facilities and services are appropriately used by the physicians;
- (b) Identify areas of inappropriate utilization;
- (c) Make recommendations to the Clinical Care Committee as to how such inappropriate utilization can be rectified;
- (d) Formulate, recommend and maintain a written Utilization Review Plan appropriate for the HCPC which meets the requirements of Titles XVIII and XIX of the Social Security Act of 1965 as amended;
- (e) Assure that such Utilization Review Plan is in effect, known to the physicians of the Medical Staff, and functioning at all times;
- (f) Conduct studies of utilization patterns of any physician or group of physicians of the Medical Staff as requested by the Clinical Care Committee, the Executive Committee or the President of the Medical Staff;

- (g) Act in such related matters as may be assigned to it by the Clinical Care Committee or the Executive Committee; and
- (h) Perform concurrent review of those diagnoses, procedures or physicians with identified or suspected utilization-related problems;
- (i) No physician shall have review responsibility for any extended stay cases in which he was professionally involved.

Section 3. Meetings, Reports and Recommendations:

- (a) The Utilization Review Subcommittee shall report on its activities at least monthly to the Clinical Care Committee and shall maintain a permanent record of its findings, proceedings and actions.
- (b) The Subcommittee shall report (with or without recommendation) to the Clinical Care Committee for its consideration and appropriate action any situation involving questions of the clinical competency, patient care and treatment or case management of any individual appointed to the Medical Staff.
- (c) The Subcommittee shall report (with or without recommendation) to the Clinical Care Committee for its consideration and appropriate action any situation involving identified or suspected utilization-related problems, questions of professional ethics, infraction of hospital or medical staff bylaws or rules or unacceptable conduct on the part of any individual appointed to the medical staff.

ARTICLE VIII - PART G: PHARMACY AND THERAPEUTICS COMMITTEE

Section 1. Composition:

The Pharmacy and Therapeutics Committee shall consist of at least two medical staff appointees, one of which shall serve as chairman, and one representative each from Nursing Services, Pharmacy, Dietary, and Hospital Administration.

ARTICLE VIII - PART G:

Section 2. Duties:

The Pharmacy and Therapeutics Committee shall examine and survey all drug utilization policies and practices within the hospital in order to achieve results and a minimum potential for hazard. The function shall assist in the formulation of policies regarding the evaluation, appraisal, selection, procurement, storage, distribution, use, safety procedures and all other matters relating to drugs in the hospital. It shall also perform the following specific functions:

- (a) develop or approve policies and procedures relating to the selection, distribution, handling, use and administration of drugs and diagnostic testing materials;
- (b) review the appropriateness of empiric, prophylactic, and therapeutic drugs through analysis of individual and/or aggregate patterns of drug practice;
- (c) make recommendations concerning drugs to be stored on patient care units and by other services;
- (d) develop and review periodically a formulary or drug list for use in the hospital, to include: the prevention of unnecessary duplication in stocking drugs and drugs in combination having identical amounts of the same therapeutic ingredients; and the evaluation of clinical data concerning new drugs or preparations requested for use in the hospital;
- (e) establish standards concerning the use and control of investigational drugs and of research in the use of recognized drugs;
- (f) review all cases of suspected untoward drug reactions;
- (g) review, recommend, and implement the HCPC diet manual;
- (h) evaluate and recommend supplemental feeding products, policies and procedures;
- (i) develop and recommend nutritional assessment plan(s); and

- (j) monitor and report on appropriate nutritional quality assurance matters.

ARTICLE VIII - PART G:

Section 3. Meetings, Reports and Recommendations:

- (a) The Pharmacy and Therapeutics Committee shall to the Executive Committee as often as necessary to transact its business, but at least monthly, shall maintain a permanent record of its findings, proceedings and actions.
- (b) The Pharmacy and Therapeutics Committee shall report (with or without recommendation) to the Executive Committee for its consideration and appropriate action any situation involving questions of the clinical competency, patient care and treatment or case management of any individual appointed to the medical staff.
- (c) The Committee shall report (with or without recommendation) to the Executive Committee for its consideration and appropriate action any situation within the jurisdiction of the committee involving questions of professional ethics, infraction of hospital or medical staff bylaws or rules or unacceptable conduct on the part of any individual appointed to the medical staff.

ARTICLE VIII - PART H: MEDICAL RECORDS COMMITTEE:

Section 1. Composition:

The Medical Records Committee shall consist of at least two medical staff appointees, the Director of Medical Records, the Director of Nursing, and a representative from Hospital Administration.

ARTICLE VIII - PART H:

Section 2. Duties:

The Medical Records Committee shall:

- (1) Make recommendations for the establishment of standards within the Policies of the HCPC and the Rules and Regulations of the Medical Staff for the timely maintenance of complete medical records including all requirements of applicable regulatory and accrediting agencies;

- (2) Review, analyze, and evaluate the quality of medical records in the HCPC;
- (3) Report material discrepancies revealed by its reviews and recommend appropriate educational and corrective action;
- (4) Assures that each medical record, or a representative sample of records, reflects the diagnosis, results of diagnostic tests, therapy rendered, condition and in-hospital progress of the patient, and condition of the patient at discharge as part of the review function;
- (5) Assure that the medical record standards provide for an adequate medico-legal document;
- (6) The Medical Records Committee shall also review staff and hospital policies, rules and regulations relating to medical records including: medical records completion, forms, formats, filing, indexing, the use of microfilming, if appropriate, storage and availability, and recommend methods of enforcement thereof and changes therein; and
- (7) The Committee shall also make recommendations on the operation of the medical library including the purchase or deletion of medical periodicals, books, tests, etc.

ARTICLE VIII - PART H:

Section 3. Meetings, Reports and Recommendations:

- (a) The Medical Records Committee shall report monthly to the Executive Committee, shall maintain a permanent record of its findings, proceedings and actions, thereof to the Executive Committee and the President of the Medical Staff.
- (b) The Committee shall report (with or without recommendation) to the Executive Committee for its consideration and appropriate action any situation involving questions of the clinical competency, patient care and treatment or case management of any individual appointed to the medical staff.
- (c) The Committee shall report (with or without recommendation) to the Executive Committee for its consideration and appropriate action any situation within the jurisdiction of the committee involving

questions of professional ethics, infraction of hospital or medical staff bylaws or rules or unacceptable conduct on the part of any individual appointed to the medical staff.

ARTICLE VIII - PART I: BYLAWS COMMITTEE

Section 1. Composition:

The Bylaws Committee shall consist of at least two members of the Active Staff appointed by the President of the Medical Staff.

ARTICLE VIII - PART I:

Section 2. Duties:

- (a) Conduct an annual review of Bylaws, Rules and Regulations of the Medical Staff to assure the appropriateness thereof.
- (b) Submit recommendations to the Executive Committee concerning the improvement of the Bylaws, Rules and Regulations of the Medical Staff.

ARTICLE VIII - PART I:

Section 3. Meetings, Reports and Recommendations:

- (a) The Bylaws Committee shall report as often as necessary to fulfill its duties, but at least quarterly, shall maintain a permanent record of its findings, proceedings and actions, and shall make quarterly reports thereof to the Executive Committee and the President.

ARTICLE VIII - PART J: CREATION OF STANDING COMMITTEES

The Executive Committee of the medical staff may, by resolution, without amendment of these bylaws, establish other standing committee to perform one or more medical staff functions. Any function required to be performed by these bylaws which is not assigned to a standing or special committee shall be performed by the Executive Committee.

ARTICLE VIII - PART K: SPECIAL COMMITTEES

Special committees shall be created and their members and chairman shall be appointed by the President of the Medical Staff as required. Such committees shall

confirm their activities to the purpose for which they were appointed, and shall report to the Executive Committee.

DUE PROCESS PROCEDURES

ARTICLE IX
APPOINTMENT TO THE MEDICAL STAFF

ARTICLE IX - PART A: QUALIFICATIONS FOR APPOINTMENT

Appointment to the medical staff is a privilege which shall be extended only to professionally competent individuals who continuously meet the qualifications, standards and requirements set forth in these bylaws. All individuals practicing medicine in this hospital, unless excepted by specific provisions of these bylaws, must first have been appointed to the medical staff.

Only physicians who (a) are currently licensed to practice in this state; (b) currently hold a full-time or part-time faculty appointment at the UTHSCH-MS; (c) are located within the geographic service area of the hospital, close enough to provide timely care for their patients; (d) can document their background, experience, training and demonstrated competence, their adherence to the ethics of their profession, their good reputation and character, their ability to work harmoniously with others sufficiently to convince the hospital that all patients treated by them in the hospital will receive quality care and that the hospital and its medical staff will be able to operate in an orderly manner, and (e) obtain a letter of recommendation from the President of the Medical Staff of the HCPC shall be qualified for appointment to the medical staff. The word "character" is intended to include the applicant's mental and emotional stability. No individual shall be entitled to appointment to the medical staff or to the exercise of particular clinical privileges in the hospital merely by virtue of the fact that (a) he is licensed to practice any profession in this or any other state, (b) he is a member of any particular professional organization, or (c) he had in the past, or currently has, medical staff appointment or privileges in another hospital. No individual shall be denied appointment on the basis of sex, race, creed, color or national origin, or other legally protected class.

ARTICLE IX - PART B: CONDITIONS OF APPOINTMENT

Section 1. Duration of Initial Provisional Appointment:

All initial appointments to the medical staff regardless of the category of the staff to which the appointment is made and all initial clinical privileges shall be provisional for a period of 12 months from the date of the appointment or longer if recommended by the Credentials Committee. During the term of this provisional appointment, the person receiving this provisional appointment shall be evaluated by the chief of the area or areas of care in which he has clinical privileges, and by the relevant committees of the medical staff and the hospital as to his clinical competence and as to his general behavior and conduct in the hospital. Provisional clinical privileges shall be adjusted to reflect clinical competence at the end of the provisional period, or sooner if warranted. Appointment after the provisional period shall be conditioned on an evaluation of the factors to be considered for reappointment set forth in ARTICLE X, PART A:, Section 2. of these bylaws.

ARTICLE IX - PART B:

Section 2. Rights and Duties of Appointees:

Appointment to the medical staff shall confer on the appointee only such clinical privileges as have been granted by the Board or its authorized representative with powers delegated for such purpose and shall require that each appointee assume such reasonable duties and responsibilities as the Board or the medical staff shall require.

ARTICLE IX - PART C: APPLICATION FOR INITIAL APPOINTMENT AND CLINICAL PRIVILEGES

Section 1. Information:

Applications for appointment to the medical staff shall be in writing, and shall be submitted on forms prescribed by the Board after consultation with the Credentials Committee. These forms shall be obtained from the President. The application shall require detailed information concerning the applicant's professional qualifications including:

- (a) the names and complete addresses of at least two physicians or other practitioners, as appropriate, who have had recent extensive experience in

- observing and working with the applicant and who can provide adequate information pertaining to the applicant's present professional competence and character;
- (b) the names and complete addresses of the chairman of each department of any hospital or other institution at which the applicant worked or trained;
 - (c) information as to whether the applicant's medical staff appointment or clinical privileges have ever been reassigned, denied, revoked, suspended, reduced or not renewed at any other hospital or health care facility;
 - (d) information as to whether his membership in local, state or national professional societies or his license to practice any profession in any state, or his narcotic license has ever been suspended, modified or terminated. The submitted application shall include a copy of all the applicant's current licenses to practice, as well as a copy of his narcotics license, medical school diploma, and certificates from all post graduate training programs completed;
 - (e) information as to whether the applicant has currently in force professional liability insurance coverage, the name of the insurance company and the amount and classification of such coverage;
 - (f) information concerning applicant's malpractice litigation experience;
 - (g) a consent to the release of information from his present and past malpractice insurance carriers;
 - (h) information on the applicant's physical and mental health;
 - (i) information as to whether the applicant has ever been named as a defendant in a criminal action and details about any such instance;
 - (j) information on the citizenship and visa status of the applicant;
 - (k) confirmation of current faculty appointment to the UTHSCH-MS; and
 - (l) such other information as the Board may require.

ARTICLE IX - PART C:

Section 2. Undertakings:

Every application for staff appointment or reappointment shall be signed by the applicant and shall contain:

- (a) the applicant's specific acknowledgement of his obligation upon appointment to the medical staff to provide continuous care and supervision to all patients within the hospital for whom he has responsibility;
- (b) an agreement to abide by all bylaws and policies of the hospital, including all bylaws, rules and regulations of the medical staff as shall be in force from time to time during the time he is appointed to the medical staff;
- (c) an agreement to accept committee assignments and such other reasonable duties and responsibilities as shall be assigned to him by the Board and the medical staff;
- (d) an agreement to provide the hospital, upon request or without request, current information regarding all questions on the application form at any time, new or updated information that is pertinent to any question on the application form;
- (e) a statement that the applicant has received and read a copy of the bylaws of the hospital and bylaws, rules and regulations of the medical staff as are in force at the time of his application and that he has agreed to be bound by the terms thereof in all matters relating to consideration of his application without regard to whether or not he is granted appointment to the medical staff or clinical privileges;
- (f) a statement of his willingness to appear for personal interviews in regard to his application; and
- (g) a statement that any misrepresentation or misstatement in, or omission from the application whether intentional or not, shall constitute cause for automatic and immediate rejection of the application resulting in denial of appointment and clinical privileges. In the event that an appointment has been granted prior to the discovery of such

misrepresentation, misstatement or omission, such discovery may result in summary dismissal from the medical staff.

ARTICLE IX - PART C:

Section 3. Burden of Providing Information:

The applicant shall have the burden of producing adequate information for a proper evaluation of his competence, character, ethics and other qualifications, and of resolving any doubts about such qualifications. He shall have the burden of providing evidence that all the statements made and information given on the application are factual and true. Until the applicant has provided all information requested by the hospital, the application will be deemed incomplete and will not be processed.

ARTICLE IX - PART C:

Section 4. Authorization to Obtain Information:

The following statements, which shall be included on the application form and which form a part of these bylaws, are express conditions applicable to any medical staff applicant, any appointee to the medical staff and to all others having or seeking clinical privileges in the hospital. By applying for appointment, reappointment or clinical privileges, the applicant expressly accepts these conditions during the processing and consideration of his application, whether or not he is granted appointment or clinical privileges. This acceptance also applied during the time of any appointment or reappointment.

(a) Immunity:

To the fullest extent permitted by law, the applicant or appointee releases from any and all liability, and extends absolute immunity to the hospital, its authorized representatives and any third parties as defined in subsection (c) below, with respect to any acts, communications or documents, recommendations or disclosures involving the applicant or appointee, concerning the following:

- (1) applications for appointment or clinical privileges, including temporary privileges;

- (2) evaluations concerning reappointment or changes in clinical privileges;
- (3) proceedings for suspension or reduction of clinical privileges or for revocation of medical staff appointment, or any other disciplinary sanction;
- (4) summary suspension;
- (5) hearings and appellate reviews;
- (6) medical care evaluations;
- (7) utilization reviews;
- (8) other activities relating to the quality of patient care or professional conduct;
- (9) matters or inquiries concerning the applicant's or appointee's professional qualifications, credentials, clinical competence, character, mental or emotional stability, physical condition, ethics or behavior; or
- (10) any other matter that might directly or indirectly have an effect on the individual's competence, on patient care or on the orderly operation of this or any other hospital or health care facility.

The foregoing acts, communications and documents, shall be privileged to the fullest extent permitted by law. Such privilege shall extend to the hospital and its authorized representatives, and to any third parties.

(b) Authorization to Obtain Information:

The applicant or appointee specifically authorizes the hospital and its authorized representatives to consult with any third party who may have information bearing on the applicant's or appointee's professional qualifications, credentials, clinical competence, character, mental or emotional stability, physical condition, ethics, behavior or any other matter reasonably having a bearing on the applicant's or appointee's satisfaction of the criteria for initial and continued appointment to the medical staff. This authorization also covers the right to inspect or obtain any and all

communications, reports, records, statements, documents, recommendations or disclosures of said third parties that may be material to such questions. The applicant or appointee also specifically authorizes said third parties to release said information to the hospital and its authorized representatives upon request.

(c) Definitions:

- (1) As used in this section, the term "hospital and its authorized representatives" means the hospital organization and any of the following individuals who have any responsibility for obtaining or evaluating the applicant's credentials, or acting upon the applicant's or appointee's application or conduct in the hospital; the members of its Board and their appointed representatives; Hospital Administration or its designees; other hospital employees; consultants to the hospital; the Office of General Counsel; and all appointee to the medical staff who have any responsibility for obtaining or evaluating the applicant's or appointee's credentials, or acting upon his application or conduct in the hospital.
- (2) As used in this section, the term "third parties" means all individuals, including appointees to the hospital's medical staff, and appointees to the medical staff of other hospitals or other physicians or health practitioners, nurses or other organizations, associations, partnerships and corporations or government agencies, whether hospitals, health care facilities or not, from whom information has been requested by the hospital or its authorized representatives.

ARTICLE IX - PART D: CLINICAL PRIVILEGES

Section 1. General:

Medical staff appointment or reappointment shall not confer any clinical privileges or right to practice in the hospital. Each individual who has been given an appointment to the medical staff of the hospital shall be entitled to exercise only those clinical privileges specifically granted by the Board, except as stated in policies adopted by the Board. The clinical privileges

recommended to the Board shall be based upon the applicant's education, training, experience, demonstrated competence and judgment, references and other relevant information, including an appraisal by the clinical service in which such privileges are sought. The applicant shall have the burden of establishing his qualifications for and competence to exercise the clinical privileges he requests. Recommendations of the clinical service in which privileges are sought shall be forwarded to the Credentials Committee and thereafter processed as a part of the initial application for staff appointment.

ARTICLE IX - PART D:

Section 2. Physicians Under Contract with Hospital:

- (a) The Director in consultation with and with approval of the President of UTHSCH shall have the authority from time to time to enter into contracts or employment relationships with physicians for the performance of certain services, including those in medico-administrative positions. All physicians functioning pursuant to such contracts or employment relationships shall obtain and maintain staff appointment and clinical privileges, in accordance with the provisions of these bylaws.
- (b) If a question concerning clinical competence arises that may affect the physician's staff appointment or clinical privileges during the term of the contract, that question shall be processed in the same manner as would pertain to any other medical staff appointee. If a modification of privileges or appointment resulting from such action is sufficient to prevent the physician from performing his contractual duties, the contract shall automatically terminate.
- (c) Clinical privileges or medical staff appointment that result from a contract or employment shall be valid only during the term of the contract. In the event that the contract or employment expires or is terminated, the clinical privileges and medical staff appointment resulting from the contract or employment shall automatically expire at the time the contract or employment expires or terminates. This expiration of clinical privileges and medical staff appointment or the termination or expiration of the contract itself, shall not entitle the physician to any hearing or appeal, unless there is

a specific provision to the contrary in the contract. In the event that only a portion of the physician's clinical privileges are covered by the contract or employment, only that portion shall be affected by the expiration or termination of the contract or employment.

- (d) Specific contractual or employment terms shall in all cases be controlling in the event of an actual or apparent conflict with the provisions of these bylaws.

ARTICLE IX - PART E: PROCEDURE FOR INITIAL APPOINTMENT

Section 1. Submission of Application:

The application for medical staff appointment shall be submitted by the applicant to the Medical Director or his designee. After collecting references and other information or materials, deemed pertinent, the Medical Director or his designee shall determine the application to be complete and transmit the application and all supporting materials including the recommendation of the Medical Director, to the Credentials Committee for evaluation. It is the responsibility of the applicant to provide that his application is complete, including adequate responses from references. An incomplete application will not be processed.

ARTICLE IX - PART E:

Section 2. Initial Credentials Committee Procedure:

Upon receipt of the completed application for appointment and the recommendation of the Medical Director the Credentials Committee shall:

- (a) inform the chief of each area of care in which the applicant seeks clinical privileges of the pending application, furnish a copy of the application to each chief concerned and request recommendations;
- (b) post the name of the applicant on the bulletin board so that each appointee to the medical staff may have an opportunity to submit to the committee, in writing, information bearing on the applicant's qualifications for staff appointment. In addition, any person currently holding an appointment to the medical staff shall have the right to appear in person before the Credentials Committee to discuss

in private and in confidence any concerns he may have about the applicant.

ARTICLE IX - PART E:

Section 3. Area Chief Procedures:

The chief of each area of care in which the applicant seeks clinical privileges shall provide the Credentials Committee with specific written recommendations for delineating the applicant's clinical privileges. These recommendations shall be made a part of the Credentials Committee's report. As part of the process of making this recommendation, the chief has the right to meet with the applicant to discuss any aspect of his application, his qualifications and his requested clinical privileges.

ARTICLE IX - PART E:

Section 4. Subsequent Credentials Committee Procedure:

- (a) The Credentials Committee shall examine the evidence of the character, professional competence, qualifications, prior behavior and ethical standing of the applicant and shall determine, through information contained in references given by the applicant and from other sources available to the committee, including an appraisal from the chief of the area of care in which privileges are sought, and the recommendation of the Medical Director whether the applicant has established and meets all of the necessary qualifications for the staff category and clinical privileges requested by him.
- (b) As part of this process, the Credentials Committee may require a physical and mental examination of the applicant by a physician or physicians satisfactory to the Committee and shall require that the results be made available for the committee's consideration.
- (c) If, after considering the recommendations of the clinical areas concerned, the Credentials Committee's recommendation for appointment is favorable, the Credentials Committee shall recommend provisional service assignment and provisional clinical privileges.
- (d) As part of the process of making its recommendation, the Credentials Committee shall have the

right to require the applicant to meet with the Committee to discuss any aspect of his application, his qualifications and his clinical privileges.

ARTICLE IX - PART E:

Section 5. Credentials Committee Report:

- (a) Not later than 120 days from its receipt of the completed application, the Credentials Committee shall make a written report and recommendation with respect to the applicant to the Board, through the Executive Committee, President of the Medical Staff, the Director, and the President of the UTHSCH.
- (b) If the recommendation of the Credentials Committee is delayed longer than 120 days, the chairman of the Credentials Committee shall send a letter to the applicant, with a copy to the Board through the Executive Committee, the Director and the President of the UTHSCH explaining the delay.
- (c) The Credentials Committee shall transmit to the Executive Committee its recommendation that the applicant be appointed to the medical staff, that his application be deferred for further consideration, or that he be rejected for medical staff appointment. The Chairman of the Credentials Committee or his designee shall be available to the Executive Committee to answer any questions that may be raised with respect to the recommendation.

ARTICLE IX - PART E:

Section 6. Subsequent Action On The Application:

- (a) When the recommendation of the Credentials Committee is favorable to the applicant, the Executive Committee through the Director and the President of the UTHSCH shall promptly forward it, together with all supporting documentation, to the Board. All recommendations to appoint must also specifically recommend the clinical privileges to be granted, which may be qualified by any probationary conditions relating to such clinical privileges.
- (b) When the recommendation of the Credentials Committee is to defer the application for further consideration it must be followed up within 30 days by a subsequent recommendation to the Board through

the President of the Medical Staff, the Director, and President of the UTHSCH for appointment to the medical staff with specified clinical privileges, or for rejection of the application for staff appointment.

- (c) When the recommendation of the Credentials Committee is adverse to the applicant in respect to either appointment to the medical staff or clinical privileges requested, it shall be forwarded to the Director who shall promptly so notify the applicant in writing, return receipt requested. The Director shall then hold the application until after the applicant has exercised or has been deemed to have waived his right to a hearing as provided in Article XI. At the time the applicant has been deemed to have waived his right to a hearing, the Director through the President of the UTHSCH shall forward the recommendation of the Credentials Committee, together with all supporting documentation, to the Board. If the applicant requests a hearing, the recommendation of the Hearing Panel shall be made to the Credentials Committee.
- (d) The Director shall promptly notify the applicant, in writing, return receipt requested, of the Hearing Panel's final recommendation.
- (e) At the time the Credentials Committee makes its recommendation to the Executive Committee it shall transmit a copy thereof to the President of the Medical Staff for information and possible comment.

ARTICLE IX - PART F: PROCEDURE FOR TEMPORARY CLINICAL PRIVILEGES

Section 1. Temporary Clinical Privileges for Applicants:

Upon receipt of a completed application for medical staff appointment from an appropriately licensed applicant, the Director may, upon the basis of information then available which may reasonably be relied upon as to the UTHSCH-MS faculty appointment status, competence, character, ethical standing and malpractice insurance coverage of the applicant, grant temporary admitting and clinical privileges to the applicant for a specific time period. In exercising such privileges, the applicant shall act under the supervision of the chief or his designee of the area in which he has requested primary privileges.

ARTICLE IX - PART F:

Section 2. Special Requirements:

Special requirements of supervision and reporting may be imposed by the Director concerned on any individual granted temporary clinical privileges. Temporary privileges shall be immediately terminated by the Director upon notice of any failure by the individual to comply with such special conditions.

ARTICLE IX - PART F:

Section 3. Termination of Temporary Clinical Privileges:

- (a) The Director or his designee, may at any time, after asking for a recommendation of the chief of the area of care responsible for the individual's supervision, terminate an individual's temporary admitting privileges. Clinical privileges shall then be terminated when the physician's inpatients are discharged from the hospital. However, where it is determined that the care or safety of such patients would be endangered by continued treatment by the individual, a summary termination of temporary clinical privileges may be imposed and such termination shall be immediately effective.
- (b) The appropriate chief or, in his absence, the Director, shall assign to a medical staff appointee responsibility for the care of such terminated individual's patients until they are discharged from the hospital, giving consideration wherever possible to the wishes of the patient in the selection of the substitute.
- (c) The granting of any temporary admitting and clinical privileges is a courtesy on the part of the hospital. Neither the granting, denial or termination of such privileges shall entitle the individual concerned to any of the procedural rights provided in these bylaws with respect to hearing appeals.
- (d) Temporary privileges shall be automatically terminated at such time as the Credentials Committee recommends unfavorably with respect to the applicant's appointment to the staff or at the Credentials Committee's discretion shall be notified to conform to the recommendation of the Credentials

Committee that the applicant be granted different permanent privileges from the temporary privileges.

ARTICLE IX - PART G: EMERGENCY CLINICAL PRIVILEGES

- (1) In an emergency involving a particular patient, a physician who is not currently appointed to the medical staff may be permitted by the Director to exercise clinical privileges to act in such emergency using all necessary facilities of the hospital, including calling for any consultation necessary or desirable.
- (2) Similarly, in an emergency involving a particular patient, a physician currently appointed to the medical staff may be permitted by the Director to act in such emergency by exercising clinical privileges not specifically assigned to him.
- (3) When the emergency situation no longer exists, such physician must request the temporary privileges necessary to continue to treat the patient. In the event such temporary privileges are denied or he does not request such privileges, the patient shall be assigned by the Director or his designee to an appropriate person currently appointed to the medical staff.
- (4) For the purpose of this section, an "emergency" is defined as a condition which could result in serious or permanent harm to a patient or in which the life of a patient is in immediate danger and any delay in administering treatment would add to that harm or danger.

ARTICLE X

ACTIONS AFFECTING MEDICAL STAFF APPOINTEES

ARTICLE X - PART A: PROCEDURE FOR REAPPOINTMENT

Section 1. Application:

Each current appointee who wishes to be reappointed to the medical staff shall be responsible for completing the reappointment application form approved by the Board. The reappointment application shall be submitted to the Director or his designee at least four months prior to the expiration of the physician's then current appointment. Failure to submit an application by that time will result in automatic expiration of the

appointee's appointment and clinical privileges at the end of the then current medical staff year.

ARTICLE X - PART A:

Section 2. Factors to be Considered:

Each recommendation concerning reappointment of a person currently appointed to the medical staff or a change in staff category, where applicable, shall be based upon such appointee's:

- (a) professional ethics, clinical competence and clinical judgment in the treatment of patients;
- (b) attendance at medical staff meetings and participation in staff duties;
- (c) compliance with the hospital bylaws and policies and with medical staff bylaws and rules and regulations, including continued faculty appointment to the UTHSCH-MS continued licensure to practice in this State, and maintenance of DEA and/or other appropriate licensure, certification or registry;
- (d) behavior in the hospital and his cooperation with medical and hospital personnel;
- (e) use of the hospital's facilities for his patients and his general attitude toward patients, the hospital and its personnel;
- (f) physical and mental health;
- (g) capacity to satisfactorily treat patients; and
- (h) satisfactory completion of such continuing education requirements as may be imposed by law, this hospital or applicable accreditation agencies.

ARTICLE X - PART A:

Section 3. Service Procedure:

- (a) No later than three months prior to the end of the current appointment period, the Medical Director shall send to the Credentials Committee the list of those appointees desiring reappointment. The Credentials Committee shall then in turn transmit to the chief of each area of care, a current list of all appointees who have clinical privileges in

that area, together with the clinical privileges each then holds, accompanied by copies of their applicants.

- (b) No later than 15 days after he receives the application, the chief of each area shall transmit to the Credentials Committee the list of individual's recommended for reappointment in the same medical staff category with the same clinical privileges they then hold. In addition, the chief shall submit individual recommendations, and the reasons therefore, for any changes recommended in staff category, in clinical privileges, or for non-reappointment both for those who applied for changes and those who did not.
- (c) Recommendations for increase or decrease of clinical privileges by the chief shall be based upon relevant recent training and upon observation of patient care provided, review of the records of patients treated in this or other hospitals and review all other records of the medical staff which evaluate the appointee's participation in the delivery of medical care.

ARTICLE X - PART A:

Section 4. Credentials Committee Procedure:

- (a) The Credentials Committee, after receiving recommendations from the chief of each area, shall review all pertinent information available including all information provided from other committees or functions of the medical staff and from hospital management for the purpose of determining its recommendations for staff appointment, for change in staff category, and for the granting of clinical privileges for the ensuing year.
- (b) The Credentials Committee may require that a person currently seeking reappointment procure a physical and/or mental examination by a physician or physicians satisfactory to the Committee either as part of the reapplication process or during the appointment year to aid it in determining whether clinical privileges should be granted or continued and make results available for the committee's consideration. Failure of the person seeking reappointment to procure such an examination within a reasonable time after being requested to do so in writing by the Credentials Committee shall constitute a

voluntary relinquishment of all medical staff and clinical privileges until such time as the Credentials Committee has received the examination results and has had a reasonable opportunity to evaluate them and make a recommendation thereon.

- (c) The Credentials Committee shall prepare a list of persons currently holding appointment recommended for reappointment without change in staff category and clinical privileges. This list shall be considered an application to the hospital by each person on the list for reappointment to the medical staff and for clinical privileges for the ensuing, medical staff year. Recommendations for non-reappointment and for changes in category or privileges, with supporting data and reasons attached, shall be handled individually.
- (d) The Credentials Committee shall transmit its report and recommendations to the Board through the Executive Committee, the President of the Medical Staff, the Director and the President of the UTHSCH in time for the Board to consider reappointments at its final scheduled meeting in the medical staff year. Where non-reappointment, non-promotion of an eligible appointee, or a further limitation in clinical privileges is recommended, the reason for such recommendation shall be stated, documented and included in the report. This report shall not be transmitted to the Board until the affected staff appointee has exercised or has been deemed to have waived his right to a hearing as provided in ARTICLE XI. The chairman of the Credentials Committee or his designee shall be available to the Executive Committee or its appointed subcommittee to answer any questions that may be raised with respect to the recommendation.

ARTICLE X - PART A:

Section 5. Meeting with Affected Individual:

If, during the processing of a particular individual's reappointment, it becomes apparent to the Credentials Committee or its chairman that the committee is considering a recommendation that would deny reappointment, deny a requested change in staff category or clinical privileges, or reduce clinical privileges, the chairman of the Credentials Committee shall notify the individual of the general tenor of the possible recommendation and ask him if he desires to meet with the committee prior

to any final recommendation by the committee. At such meeting, the affected individual shall be informed of the general nature of the evidence supporting the action contemplated and shall be invited to discuss, explain or refute it. The interview shall not constitute a hearing and none of the procedural rules provided in these bylaws with respect to hearings shall apply nor shall minutes of the discussion in the meeting be kept. However, the committee shall indicate as part of its report to the Board whether such a meeting occurred.

ARTICLE X - PART A:

Section 6. Procedure Thereafter:

Any recommendation by the Credentials Committee denying reappointment, denying a requested change in staff category or clinical privileges or recommending reduction of existing clinical privileges shall entitle the affected individual to the procedural rights provided in ARTICLE XI; provided, however, that nothing in these Bylaws shall allow or be construed to allow an individual two separate hearings (one for medical staff appointment or privileges and the second for UTHSCH faculty appointment) when the individual's faculty appointment is the subject of a hearing; provided, further, that if an individual loses his UTHSCH faculty appointment for any reason, his medical staff appointment and privileges are automatically terminated. The Director shall then promptly notify the individual of the recommendation by certified mail, return receipt requested. The recommendation shall not be forwarded to the Board until the individual has exercised or has been deemed to have waived his right to a hearing as provided in ARTICLE XI, after which the Board shall be given the committee's final recommendation and shall act on it.

ARTICLE X - PART B: PROCEDURES FOR REQUESTING INCREASE IN CLINICAL PRIVILEGES

Section 1. Application for Increased Clinical Privileges:

Whenever, during the term of his appointment to the medical staff, an individual desires to increase his clinical privileges, he shall apply in writing to the Medical Director on a form prescribed by the Board. The application shall state in detail the specific additional clinical privileges desired and the applicant's relevant recent training and experience which justify increased privileges. This application will be transmitted by the Medical Director to the Credentials

Committee and by it to the appropriate area of care chief. Thereafter, it will be processed in the same manner as an application for initial clinical privileges if the request is made during the term of appointment, or as a part of the reappointment application if the request is made at that time.

ARTICLE X - PART B:

Section 2. Factors to be Considered:

Recommendations for an increase in clinical privileges made to the Board or its authorized representative shall be based upon relevant training, observation of patient care provided, review of the records of patients treated in this or other hospitals and review of all other records and information from applicable services of the medical staff which evaluate the individual's participation in the delivery of medical care that justify increased privileges. The recommendation for such increased privileges may carry with it such requirements for supervision or consultation for such period of time as are thought necessary.

ARTICLE X - PART C: PROCEDURE FOR ACTIONS INVOLVING CLINICAL COMPETENCE

Section 1. Grounds for Action:

Whenever, on the basis for information and belief, the Director the President of the Medical Staff, the chief of an area of care, the chairman or a majority of any medical staff committee, the President of UTHSCH or the Board has cause to question, with respect to an individual holding a current medical staff appointment:

- (a) his clinical competence;
- (b) his care or treatment of a patient or patients or his management of a case; or
- (c) his known or suspected violation of the bylaws or policies of the hospital, or the bylaws, rules or regulations of the medical staff relating to professional activity, a written request for an investigation of the matter shall be addressed to the Credentials Committee making specific reference to the activity or conduct which gave rise to the request.

ARTICLE X - PART C:

Section 2. Investigative Procedure:

The Credentials Committee shall meet as soon after receiving the request as practicable and if, in the opinion of the Credentials Committee:

- (a) the request for investigation contains information sufficient to warrant a recommendation, the Credentials Committee, at its discretion, shall make one, with or without a personal interview with the appointee; or
- (b) the request for investigation does not at that point contain information sufficient to warrant a recommendation, the Credentials Committee shall immediately investigate the matter, appoint a subcommittee to do so, if it is deemed necessary, appoint an Investigating Committee. This Investigating Committee shall consist of three persons, any of whom may or may not hold appointments to the medical staff. This committee shall not include partners or associates of the affected individual or of any members of the Credentials Committee. The Credentials Committee, its subcommittee or the Investigating Committee, if used shall have available to them the full resources of the medical staff and the hospital to aid in their work, as well as the authority to use outside consultants as required. The individual with respect to whom an investigation has been requested shall have an opportunity to meet with the Investigating Committee before it makes its report. At this meeting (but not, as a matter of right, in advance of it) the individual shall be informed of the general nature of the evidence supporting the investigation requested and shall be invited to discuss, explain or refute it. This interview shall not constitute a hearing, and none of the procedural rules provided in these bylaws with respect to hearings shall apply. A summary of such interview shall be made by the Investigating Committee and included with its report to the Credentials Committee. If a subcommittee or Investigating Committee was used, the Credentials Committee may accept, modify or reject the recommendation it receives from the Committee.

ARTICLE X - PART C:

Section 3. Suspension of Privileges:

At any time during the investigation the Credentials Committee, with the approval of the Director, may suspend all or part of the clinical privileges of the person being investigated. This suspension shall be deemed to be administrative in nature, for the protection of hospital patients. It shall remain in effect during the investigation only, shall not indicate the validity of the charges and shall remain in force, without appeal, during the course of the investigation. If such a suspension is placed into effect, the investigation shall be completed within 30 days of the suspension or reasons for the delay shall be transmitted to the Board or its authorized representative so that it may consider whether the suspension should be lifted.

ARTICLE X - PART C:

Section 4. Procedure Thereafter:

- (a) In acting after the investigation, the Credentials Committee may (1) issue a written warning, (2) issue a letter of reprimand, (3) impose terms of probation, (4) impose a requirement for consultation, (5) recommend reduction of clinical privileges, (6) recommend suspension of clinical privileges for a term, or (7) recommend revocation of staff appointment.
- (b) Any recommendation by the Credentials Committee for reduction of clinical privileges, for suspension of clinical privileges for a term of a month or more after the Credentials Committee acts, or for revocation of staff appointment shall entitle the affected individual to the procedural rights provided in ARTICLE XI. Such a recommendation shall be forwarded to the Director who shall promptly notify the affected individual by certified mail, return receipt requested. The Director shall then hold the recommendation until after the individual has exercised or has been deemed to have waived his right to a hearing as provided in ARTICLE XI. At the time the individual has been deemed to have waived his right to a hearing, the Director, through the President of the UTHSCH shall forward the recommendation of the Credentials Committee, together with all supporting documentation, to the Board. The chairman of the

Credentials Committee or his designee shall be available to the Board or its appropriate committee to answer any questions that may be raised with respect to the recommendation.

- (c) If the action of the Credentials Committee is less severe than reduction of clinical privileges, or suspension of clinical privileges for a term of a month or more, or revocation of staff appointment, the action shall take effect immediately without action of the Board and without the right of appeal to the Board. A report of the action taken and reasons therefore shall be made to the President of UTHSCH through the Director and the action shall stand unless modified by the Board. In the event the Board determines to consider modification of the action of the Credentials Committee and such action would reduce clinical privileges, suspend clinical privileges for a month or more or revoke staff appointment, the Board shall so notify the individual, through the President of UTHSCH or the Director, and shall take no final action thereon until the individual has exercised or has been deemed to have waived the procedural rights provided in ARTICLE XI.
- (d) The chairman of the Credentials Committee shall promptly notify the Executive Committee in writing of all request for action regarding an individual received by the Credentials Committee and keep the President of the Medical Staff, the Director, Hospital Administration, the Executive Committee, and the President of UTHSCH fully informed of all action taken in connection therewith.

ARTICLE X - PART C:

Section 5. Report to Executive Committee:

At the time the Credentials Committee makes its recommendations to the Board or its authorized representatives it shall transmit a copy thereof to the Executive Committee of the medical staff for information and possible comment. The Executive Committee may comment directly to the Board or its authorized representatives, as the Board shall determine, for its consideration on any recommendation of the Credentials Committee, after consultation with the chairman of the Credentials Committee. In those instances in which the person affected by the recommendation is entitled to the procedural rights provided in ARTICLE XI, but has not as

yet exercised them, the Executive Committee shall not comment on the recommendations of the Credentials Committee until a hearing has been held and a final recommendation submitted to the Board or its authorized representatives or until the individual has been deemed to have waived his procedural rights.

ARTICLE X - PART D: PROCEDURE FOR ACTIONS INVOLVING BEHAVIOR OF MEDICAL STAFF APPOINTEES

Section 1. Grounds for Action:

An investigation may be requested whenever questions arise concerning any medical staff appointees who fails to comply with the ethics of his profession or the bylaws, policies, rules and regulations of the hospital or its medical staff or whose behavior or conduct is considered lower than the standards of the hospital or disruptive of the orderly operation of the hospital or its medical staff, including the inability of the appointee to work harmoniously with others. Such an investigation may be requested by the Medical Director, by the chief of any area of care, by the chairman of any committee or by a majority vote of the committee, the President of UTHSCH, or by the Board. All such requests for investigation shall be in writing, shall be made to the Executive Committee, and shall be supported by reference to the individual's specific activity or conduct which constitutes the grounds for the request.

ARTICLE X - PART D:

Section 2. Investigative Procedure:

The Executive Committee shall meet as soon as possible and if, in the opinion of the Executive Committee:

- (a) the request for investigation contains information sufficient to warrant a recommendation, the Executive Committee, at its discretion, shall make one, with or without a personal interview with the affected individual; or
- (b) the request for investigation does not contain information sufficient to warrant a recommendation, the Executive Committee shall immediately investigate the matter or appoint an investigating committee to do so. Such an investigating committee shall consist of three persons, any of whom may or may not hold appointments to the medical staff. This committee shall not include partners or

associates of the affected individual. The Executive Committee and the investigating committee, if used, shall have available to them the full resources of the medical staff and the hospital to aid in their work, as well as the authority to use any outside consultants required upon consultation with and approval of the President of UTHSCH. The individual with respect to whom an investigation has been requested shall have an opportunity to meet with the investigating committee before it makes its report. At this meeting (but not as a matter of right in advance of it) he shall be informed of the general nature of the evidence supporting the investigation requested and shall be invited to discuss, explain or refute it. This interview shall not constitute a hearing, and none of the procedural rules provided in these bylaws with respect to hearings shall apply. A summary of such interview shall be made by the Investigating Committee. The Executive Committee may accept, modify or reject the recommendation it receives from that committee.

ARTICLE X - PART D:

Section 3. Suspension of Privileges:

At any time during the investigation the Executive Committee may suspend all or any part of the clinical privileges of the individual being investigated. This suspension shall be administrative in nature, for the protection of hospital patients. It shall be in effect during the investigation only, shall not indicate the truth of the charges, and shall remain in force, without appeal, during the course of the investigation. If a suspension is placed into effect, the investigation shall be completed in 30 days or reasons for the delay shall be transmitted to the Director, the President of UTHSCH or the Board, as appropriate, so that it may consider whether the suspension should be lifted.

ARTICLE X - PART D:

Section 4. Procedure Thereafter:

- (a) In acting after the investigation, the Executive Committee may (1) issue a written warning, (2) issue a letter of reprimand, (3) impose terms of probation, (4) impose a requirement for consultation, (5) recommend reduction of clinical privileges, (6) recommend suspension of clinical

privileges for a term or (7) recommend revocation of staff appointment.

- (b) Any recommendation by the Executive Committee for reduction of clinical privileges or suspension of clinical privileges for a month or more from the time the Executive Committee acts, or for revocation of staff appointment shall entitle the affected individual to the procedural rights provided in ARTICLE XI. Such a recommendation shall be forwarded to the Director who shall promptly notify the affected individual by certified mail, return receipt requested. The Director shall then hold the recommendation until after the individual has exercised or has been deemed to have waived his right to a hearing as provided in ARTICLE XI. At the time the individual has been deemed to have waived his right to a hearing, the Director, through the President of the UTHSCH, shall forward the recommendation of the Executive Committee, together with all supporting documentation, to the Board or its authorized representative. The chairman of the Executive Committee or his designee shall be available to the Board or its appropriate committee to answer any questions that may be raised with respect to the recommendation.
- (c) If the action of the Executive Committee is less severe than reduction of clinical privileges, or suspension of clinical privileges for a term of a month or more, or revocation of staff appointment, it shall take effect immediately without action of, and without the right of appeal to, the Board. A report of the action taken and reasons therefore shall be made to the Board through the Director and the President of the UTHSCH, and the action shall stand unless modified by the Board. In the event the Board determines to consider modification of the action of the Executive Committee and such action would reduce clinical privileges, suspend clinical privileges for a month or more, or revoke staff appointment, it shall so notify the affected individual, through the Director, and shall take no final action thereon until the individual has exercised or has been deemed to have waived the procedural rights provided in ARTICLE XI.
- (d) The chairman of the Executive Committee shall promptly notify Hospital Administration in writing of all requests for action regarding a person currently appointed to the medical staff received

by the Executive Committee and keep the President of the Medical Staff informed of all action taken in connection therewith.

ARTICLE X - PART E: COMBINED PROCEDURE

In the event that questions which arise concerning a person holding a current medical staff appointment encompass the provisions of both PART C, Section 1. and PART D, Section 1. of this Article, the powers and duties of the Executive Committee and Credentials Committees set forth in PARTS C and D may be exercised by them jointly such that only one investigation shall be conducted and one recommendation made.

ARTICLE X - PART F: SUMMARY SUSPENSION OF CLINICAL PRIVILEGES

Section 1. Grounds for Summary Suspension:

- (a) The Director, or in his absence, the chief of an area of care, or the President of UTHSCH or the Board shall each have the authority to summarily suspend all or any portion of the clinical privileges of a medical staff appointee or other individual whenever such action is in the best interest of patient care or safety or the continued effective operation of the hospital or whenever such individual has violated the bylaws, rules and regulations and policies of the hospital or medical staff. Staff suspension shall not imply any final finding of responsibility for the situation that caused the suspension.
- (b) Such summary suspension shall become effective immediately upon imposition, shall immediately be reported in writing to the Director, the President of the Medical Staff, and shall remain in effect unless or until modified.

ARTICLE X - PART F:

Section 2. Credentials or Executive Committee Procedure:

The individual who exercises his authority under Section 1. of this PART to suspend summarily a person appointed to the medical staff shall immediately report his action to the Chairman of the Credentials Committee or the Chairman of the Executive Committee, whichever committee (depending on the reason for the suspension) shall be appropriate to take further action in this matter. At

that point the Committee to which the matter has been referred shall take such further action as is required in the manner specified under PART C of this Article for the Credentials Committee and PART C of this Article for the Executive Committee. The summary suspension shall remain in force after the appropriate committee takes responsibility unless and until modified by that committee or Director, or until the matter that required the suspension is finally resolved.

ARTICLE X - PART F:

Section 3. Care of Suspended Individual's Patients:

Immediately upon the imposition of a summary suspension, the appropriate chief or, in his absence, the Director shall assign to another person appointed to the medical staff responsibility for care of the suspended individual's patients still in the hospital at the time of such suspension until such time as they are discharged. The wishes of a patient shall be considered by the chief in the selection of a substitute as appropriate. It shall be the duty of the Director and the chief to cooperate with Hospital Administration in enforcing all suspensions.

ARTICLE X - PART G: OTHER ACTIONS

Section 1. Failure to Complete Medical Records:

The elective and emergency admitting and clinical privileges of a person holding a current medical staff appointment shall be voluntarily relinquished for failure to complete medical records after notification by the medical records department of such delinquency. Such relinquishment shall continue until all the records of the individual's patients are no longer delinquent. Failure to complete the medical records that caused relinquishment of clinical privileges after two months from the relinquishment of privileges shall constitute a voluntary resignation of appointment to the medical staff.

ARTICLE X - PART G:

Section 2. Action by State Licensing Agency and/or Drug Enforcement Agency:

Action by the appropriate state licensing agency revoking or suspending an individual's professional license, and/or action to suspend or terminate the

registration to dispense controlled substances by a physician, shall result in automatic relinquishment of all hospital clinical privileges and/or privileges to dispense controlled substances as of that date, until the matter is resolved and license and/or registration restored.

ARTICLE X - PART G:

Section 3. Failure to Attend Meetings or Satisfy Continuing Education Requirements:

- (a) Failure to attend meetings as required in these bylaws or failure to complete mandated continuing education requirements shall be considered a voluntary relinquishment of medical staff appointment and shall be sufficient grounds for refusing to reappoint the individual concerned. Such failures shall be documented and specifically considered by the Credentials Committee when making its recommendations for reappointment and by the Board when making its final decisions.
- (b) Any individual whose reappointment has been refused for these reasons shall be entitled to meet with a committee to be designated by the Board before final action is taken. This meeting with the Board appointed committee shall not be conducted under the procedural rules provided in these bylaws.
- (c) If reappointment is refused by the Board, the individual shall be eligible to reapply for staff appointment and the application shall be processed in the same manner as if it were an initial application.

ARTICLE X - PART H: PROCEDURE FOR LEAVE OF ABSENCE

Persons appointed to the medical staff may, for good cause, be granted leaves of absence by the Director for a definitely stated period of time not to exceed one year. Requests for leaves of absence shall be made to the chief of the area of care which the individual applying for leave has his primary clinical privileges, and shall state the beginning and ending dates of the requested leave. The chief shall transmit the request together with his recommendation to the Executive Committee which shall make a report and a recommendation and transmit it to the Director for action by the Board or its authorized representatives.

ARTICLE XI

HEARING AND APPEAL PROCEDURES

ARTICLE XI - PART A: INITIATION OF HEARING

An applicant or a person holding a medical staff appointment shall be entitled to a hearing whenever a recommendation unfavorable to him has been made by either the Executive Committee or the Credentials Committee regarding those matters enumerated in PART B, Section 2. of this Article. The affected individual shall also be entitled to a hearing, before the Board enters a final decision, in the event the Board should determine to reject a favorable recommendation by either the Executive Committee or the Credentials Committee regarding any of those matters. The purpose of the hearing shall be to recommend a course of action to those acting for the hospital, and the duties of the Hearing Panel shall be so defined and so carried out.

ARTICLE XI - PART B: THE HEARING

Section 1. Notice of Recommendation:

- (a) When a recommendation is made which, according to these bylaws, entitles an individual to a hearing prior to a final decision of the Board on that recommendation, the applicant or medical staff appointee, as the case may be, shall promptly be given notice by the Director, in writing, return receipt requested. This notice shall contain a statement of the recommendation made.
- (b) Such individual shall have 10 days following the date of the receipt of such notice within which to request a hearing by the Hearing Panel hereinafter referred to. Said request shall be made by written notice to the Director. In the event the affected individual does not request a hearing within the time and in the manner hereinabove set forth, he shall be deemed to have waived his right to such hearing and to have accepted the action involved and such action shall thereupon become effective immediately upon final Board action.

ARTICLE XI - PART B:

Section 2. Grounds for Hearing:

No recommendation or action other than those hereinafter enumerated shall constitute grounds for a hearing.

- (a) denial of initial medical staff appointment;
- (b) denial of requested advancement in medical staff category;
- (c) denial of medical staff reappointment;
- (d) revocation of medical staff appointment;
- (e) denial of requested initial clinical privileges;
- (f) denial of requested increased clinical privileges;
- (g) decrease of clinical privileges;
- (h) suspension of total clinical privileges for a term of a month or more.

ARTICLE XI - PART B:

Section 3. Unappealable Actions:

Neither voluntary nor automatic relinquishment of clinical privileges, as provided for elsewhere in these bylaws, nor the imposition of any consultation requirement, nor the imposition of a requirement for retraining, additional training or continuing education, no matter whether imposed by the Credentials Committee, the Executive Committee or the Board, shall constitute grounds for a hearing, but shall take effect without hearing or appeal. Loss of faculty appointment and resulting automatic loss of medical staff appointment shall never cause a hearing or appeal of the resulting medical staff appointment loss.

ARTICLE XI - PART B:

Section 4. Notice of Hearing and Statement of Reasons:

The Director shall schedule the hearing and shall give notice, in writing, return receipt requested, to the person who requested the hearing of its time, place and date. The hearing shall begin as soon as practicable, considering the schedules and availability of all

concerned. This notice shall contain a statement of the reasons for the recommendation as well as the patient records and information supporting the recommendation. This statement and the patient records and information it contains may be amended or added to at any time, even during the hearing so long as the additional materials is relevant to the continued appointment or clinical privileges of the person requesting the hearing, and that person and his counsel have sufficient time to study this additional information and rebut it.

ARTICLE XI - PART B:

Section 5. List of Witnesses:

If either party, by notice, requests a list of witnesses, then each party within 10 days of such request shall furnish to the other a written list of the names and addresses of the individuals so far as is then reasonably know, who will given testimony or evidence in support of that party at the hearing, and the names and addresses of additional witnesses as soon as procured. The witness list of either party may, in the discretion of the hearing officer, be supplemented at any time during the course of the hearing.

ARTICLE XI - PART B:

Section 6. Hearing Panel:

When a hearing is requested, the Director, acting for the Board, shall appoint a Hearing Panel which shall be composed of not less than three members, at least one of whom shall be a physician. The Panel shall be composed of either medical staff appointees who shall not have actively participated in the consideration of the matter involved at any previous level or of physicians or laymen not connected with the hospital or a combination of such persons. Such appointment shall include designation of the chairman. Knowledge of the matter involved shall not preclude any individual from serving as a member of the Hearing Panel.

ARTICLE XI - PART B:

Section 7. Failure to Appear:

Failure, without good cause, of the person requesting the hearing to appear and proceed at such a hearing shall be deemed to constitute voluntary acceptance of

the recommendations or actions pending, which shall then become final and effective immediately.

ARTICLE XI - PART B:

Section 8. Postponements and Extensions:

Postponements and extensions of time beyond any time limit set forth in these bylaws may be requested by anyone but shall be permitted only by the Hearing Panel or its chairman on a showing of good cause.

ARTICLE XI - PART B:

Section 9. Deliberations and Recommendation of the Hearing Panel:

Within 20 days after final adjournment of the hearing, the Hearing Panel shall conduct its deliberations outside the presence of any other person except the Presiding Officer and shall render a recommendation, accompanied by a report, which shall contain a concise statement of the reasons justifying the recommendation made and shall deliver such report to the Director.

ARTICLE XI - PART B:

Section 10. Disposition of Hearing Panel Report:

Upon its receipt, the Director shall send a copy of the report and recommendation, return receipt requested, to the person who requested the hearing. If the hearing has been conducted by reason of an adverse recommendation by the Credentials Committee or Executive Committee, the report of the Hearing Panel shall be delivered by the Director to the applicable committee for whatever modification, if any, it may wish to make to its original recommendation. If it has been conducted by reason of an action of the Board or its committee, the report of the Hearing panel shall be delivered to the Board or that committee.

ARTICLE XI - PART C: HEARING PROCEDURE

Section 1. Representation:

The person requesting the hearing shall be entitled to be represented at the hearing by an attorney to examine witnesses and present his case. He shall inform the Director in writing of the name of that person 10 days prior to the date of the hearing. The Credentials

Committee, the Executive Committee or the Director acting for the Board, whichever is appropriate, shall appoint a representative, who may be an attorney, to present its recommendations and reasons and to examine and cross-examine witnesses.

ARTICLE XI - PART C:

Section 2. Presiding Officer:

- (a) The Director may appoint an attorney at law as presiding officer from the Office of the President of UTHSCH or from the Office of General Counsel, as the Vice Chancellor and General Counsel shall determine. Such presiding officer may be legal counsel to the hospital. He must not act as a prosecuting officer, or an an advocate for the Board, the Executive Committee, or the Credentials Committee. He may participate in the private deliberations of the Hearing Panel and be a legal advisor to it, but he shall not entitled to vote on its recommendations. He may thereafter continue to advise the Board on the matter.
- (b) If no presiding officer has been appointed, the chairman of the Hearing Panel shall be the presiding officer.
- (c) The presiding officer shall act to ensure that all participants in the hearing have a reasonable opportunity to be head and to present all oral and documentary evidence, that decorum is maintained throughout the hearing and that no intimidation is permitted. He shall determine the order of procedure throughout the hearing, and shall have the authority and discretion, in accordance with these bylaws, to make rulings on all questions which pertain to matters of procedure and to the admissibility of evidence, upon which he may be advised by legal counsel to the hospital. In all instances he shall act in such a way that all information relevant to the continued appointment or clinical privileges of the person requesting the hearing is considered by the Hearing Panel in formulating its recommendations. It is understood that the presiding officer is acting at all times to see that all relevant information is made available to the Hearing Panel for its deliberations and recommendations to the Board.

ARTICLE XI - PART C:

Section 3. Record of Hearing:

The Hearing Panel shall maintain a record of the hearing by a reporter present to make a record of the hearing or a recording of the proceedings. The cost of such reporter shall be borne by the hospital. The Hearing Panel may, but shall not be required to, order that oral evidence shall be taken only on oath or affirmation administered by any person designated by such body and entitled to notarized documents in this State.

ARTICLE XI - PART C:

Section 4. Rights of Both Sides:

At a hearing both sides shall have the following rights: to call and examine witnesses to the extent available, to introduce exhibits, to cross-examine any witness on any matter relevant to the issues and to rebut any evidence. If the person requesting the hearing does not testify in his own behalf, he may be called and examined as if under cross-examination.

ARTICLE XI - PART C:

Section 5. Admissibility of Evidence:

The hearing shall not be conducted according to rules of law relating to the examination of witnesses or presentation of evidence. Any relevant evidence shall be admitted by the presiding officer if it is the sort of evidence on which responsible persons are accustomed to rely in the conduct of serious affairs, regardless of the admissibility of such evidence in a court of law. Each party shall have the right to submit a memorandum of points and authorities, and the Hearing Panel may request such a memorandum to be filed following the close of the hearing. The Hearing Panel may interrogate the witnesses, call additional witnesses or request documentary evidence if it deems it appropriate.

ARTICLE XI - PART C:

Section 6. Official Notice:

The presiding officer shall have the discretion to take official notice of any matters, either technical or scientific, relating to the issues under consideration and/or which could have been judicially noticed by the

courts of this State. Participants in the hearing shall be informed of the matters to be officially noticed and such matters shall be noted in the record of the hearing. Either party shall have the opportunity to request that a matter be officially noticed or to refute the noticed matter by evidence or by written or oral presentation of authority. Reasonable additional time shall be granted, if requested, to present written rebuttal of any evidence admitted on official notice.

ARTICLE XI - PART C:

Section 7. Basis of Decision:

The decision of the Hearing Panel shall be based on the evidence produced at the hearing. The evidence may consist of the following:

- (a) oral testimony of witnesses;
- (b) memorandum of points and authorities presented in connection with the hearing;
- (c) any material contained in the hospital's files regarding the person who requested the hearing so long as this material has been admitted into evidence at the hearing and the person who requested the hearing had the opportunity to comment on and, by other evidence, refute it;
- (d) any and all applications, references, and accompanying documents;
- (e) all officially noticed matters; and
- (f) any other evidence that has been admitted.

ARTICLE XI - PART C:

Section 8. Burden of Proof:

(a) Burden of Production of Evidence

At any hearing involving denial of initial medical staff appointment, denial of requested advancement in medical staff category, denial of medical staff reappointment, revocation of medical staff appointment, or denial of a request for initial or additional clinical privileges, it shall be incumbent on the person who requested the hearing initially to produce evidence in support of his position.

(b) In cases involving a decrease of clinical privileges or a suspension of total privileges for a term, it shall be incumbent on the Board, or its authorized representatives, the Executive Committee, or the Credentials Committee, whichever recommendation prompted the hearing initially, to produce evidence of a prima facie nature in support of its recommendation. Thereafter, the burden of production of evidence shall shift to the person who requested the hearing.

(c) Burden of Persuasion

In all cases in which a hearing is conducted under this Article, after all the evidence has been submitted by both sides, the Hearing Panel shall consider which side has better met the burden of persuasion by basing its decision on the preponderance of the credible evidence. The decision shall be in writing and contain findings of fact, reasoning about the facts found, and conclusions derived as a result.

ARTICLE XI - PART C:

Section 9. Attendance by Panel Members and Vote of Panel:

The hearing shall continue so long as the members of the Hearing Panel are present. The vote shall be by majority of those appointed to the Hearing Panel who were present at the Hearing or who have read a written transcript and reviewed the entire record.

ARTICLE XI - PART C:

Section 10. Recess and Conclusion:

The presiding officer may recess the hearing and reconvene the same at the convenience of the participants without special notice. Upon conclusion of the presentation of oral and written evidence, the hearing panel shall permit oral arguments, after which the hearing shall be closed.

ARTICLE XI - PART D: APPEAL

Section 1. Time for Appeal:

Within 10 days after the affected individual is notified of an adverse recommendation from the Hearing Panel, he may request that the President of UTHSCH permit an

appellate review. The request shall be in writing, and shall be delivered to the President of UTHSCH in person or by certified mail, and shall include a brief statement of the reasons for appeal. The President of UTHSCH shall so notify the Board within five working days of the request. If such appellate review is not requested within 10 days as provided herein, the affected individual shall be deemed to have accepted the recommendation involved and it shall thereupon become final and immediately effective.

ARTICLE XI - PART D:

Section 2. Grounds for Appeal:

The grounds for appeal from an adverse recommendation shall be that:

- (a) there was substantial failure on the part of the Credentials Committee, Executive Committee or Hearing Panel to comply with the hospital or medical staff bylaws in the conduct of the hearings and recommendations based upon hearings so as to deny due process or a fair hearing; or
- (b) the recommendation was made arbitrarily, capriciously or with prejudice; or
- (c) the recommendation of the Credentials Committee, Executive Committee or Hearing Panel was not supported by evidence of record; or
- (d) there is new evidence not previously available.

ARTICLE XI - PART D:

Section 3. Time, Place and Notice:

Whenever an appeal is requested as set forth in the preceding sections, the Board or its authorized representatives shall, within 10 days after receipt of such request, schedule and arrange for an appellate review. The Board shall cause the affected individual to be given notice of time, place and date of the appellate review. The date of appellate review shall not be less than 20 days, nor more than 40 days, from the date of receipt of the request for appellate review; provided, however, that when a request for appellate review is from an appointee who is under a suspension then in effect the appellate review shall be held as soon as the arrangements may reasonably be made and not more than 14

days from the date of receipt of the request for appellate review. The time for appellate review may be extended by the Board or its authorized representatives for good cause.

ARTICLE XI - PART D:

Section 4. Nature of Appellate Review:

The Board or its authorized representatives shall appoint an Appellate Review Panel composed of not less than three persons, either its own members, reputable persons outside the hospital, or a combination of the two, to consider the record upon which the recommendation before it was made. The Appellate Review Panel may not accept additional oral or written evidence. Each party shall have the right to present a written statement in support of his position on appeal, and in its sole discretion, the Appellate Review Panel may allow each party or its representative to appear personally and make oral argument. The Appellate Review Panel shall recommend final action to the Board.

ARTICLE XI - PART D:

Section 5. Final Decision of the Board:

- (a) After due consideration of the recommendations, the Board shall within a reasonable time render a final decision in writing and shall deliver copies thereof to the affected individual and to the Executive Committee or Credentials Committee, whichever is pertinent, to the Director, to the President of UTHSCH, and to the Dean of UTHSCH-MS in person or by certified mail.
- (b) The Board may affirm, modify, or reverse the recommendation of the Appellate Review Panel or, in its discretion, refer the matter for further appellate review and recommendation, or may order the hearing reopened before the previous hearing panel or order a new hearing.

ARTICLE XI - PART D:

Section 6. Further Review:

Except where the matter is referred for further action and recommendation in accordance with Section 4. of this PART, the final decision of the Board following the appeal shall be effective immediately and shall not be

subject to further review. Provided, however, if the matter is referred for further action and recommendation, such recommendations shall be promptly made to the Board in accordance with the instructions given by the Board.

ARTICLE XI - PART D:

Section 7. Right to One Appeal Only:

No applicant or medical staff appointee shall be entitled as a matter of right to more than one appellate review on any single matter which may be the subject of an appeal, without regard to whether such subject is the result of action by the Executive Committee, the Credentials Committee or Hearing Panel, or a combination of acts of such bodies. However, nothing in these bylaws shall restrict the right of the applicant to reapply for appointment or an increase in clinical privileges after the expiration of two years from the date of such Board decision unless the Board provides otherwise in its written decision.

ARTICLE XII

ALLIED HEALTH PROFESSIONALS

ARTICLE XII - PART A: QUALIFICATIONS

Allied Health Professionals are non-physicians holding a license, certificate or such other legal credentials, if any, as required by Texas law, which authorizes the Allied Health Professionals to provide certain professional services. Allied Health Professionals are neither physicians nor dentists and accordingly are not eligible for Medical Staff membership. Such Allied Health Professionals are eligible for practice privileges in the HCPC only if they:

- (a) Are employees of UTHSCH or under contract with UTHSCH;
- (b) Hold a license, certificate or other legal credential in a category of Allied Health Professionals which the President of UTHSCH has identified as eligible to apply for practice privileges;
- (c) Document their experience, background, training, demonstrated ability, judgement, and physical and mental health status with sufficient adequacy to demonstrate that any patient treated by them will

receive care of the generally recognized professional level of quality and efficiency established by the HCPC, and that they are qualified to exercise practice privileges within the HCPC; and

- (d) Are determined, on the basis of documented references, to adhere strictly to the lawful ethics of their respective professions; to work cooperatively with others in the HCPC setting; and to be willing to commit to and regularly assist the HCPC in fulfilling its obligations related to patient care, within the areas of their professional competence and credentials.

ARTICLE XII - PART B: CATEGORIES

- (a) The President of UTHSCH and the Director shall, at least once each Medical Staff year, review and identify the categories of Allied Health Professionals, based upon occupation or profession, which shall be eligible to apply for practice privileges in the HCPC.
- (b) For each eligible Allied Health Professional category, the President of UTHSCH and the Director shall identify the qualifications, practice privileges and prerogatives that may be granted to qualified Allied Health Professionals in that category.
- (c) The President of UTHSCH and the Director shall secure recommendations from the Executive Committee as to the categories of Allied Health Professionals which should be eligible to apply for practice privileges and corresponding qualifications, practice privileges, prerogative, terms, and conditions for each such Allied Health Professional category, when approved by the Board, shall be set forth in the Medical Staff Rules and Regulations.

ARTICLE XII - PART C: GRANTING OF PRACTICE PRIVILEGES

Allied Health Professionals who desire privileges at HCPC must apply and qualify for practice privileges and become either an employee of UTHSCH or under contract with UTHSCH. Applications for initial granting of practice privileges and renewal thereof, shall be submitted and processed in a parallel manner to that provided in ARTICLE IX for physicians, unless otherwise specified in the Medical Staff Rules and Regulations.

Each Allied Health Professional shall be individually assigned to an appropriate clinical area of care to his occupation or professional training, shall be supervised by a member of the medical staff, and shall carry out their activities subject to service policies and procedures and in conformity with applicable provisions of the medical staff bylaws, rules and regulations.

ARTICLE XII - PART D: HEARING AND APPEAL REVIEW

Allied Health Professionals are not members of the Medical Staff, and accordingly have no recourse to the Hearing and Appeal Procedures provided in the Medical Staff Bylaws. The HCPC retains the right to terminate any privileges granted.

ARTICLE XIII

RULES AND REGULATIONS OF THE MEDICAL STAFF

The medical staff, with the approval of the Director and the President of UTHSCH, shall adopt such rules and regulations as may be necessary to implement more specifically the general principals of conduct found in these bylaws. Rules and regulations shall set standards of practice that are to be required of each medical staff appointee in the hospital, and shall act as an aid to evaluating performance under, and compliance with, these standards.

Particular rules and regulations may be amended by vote of the Executive Committee at any regular or special meeting provided that copies of the proposed amendments, additions or repeals are posted on the medical staff bulletin board and made available to all members of the Executive Committee 14 days before being voted on and further provided that all written comments on the proposed changes by persons holding current appointments to the medical staff be brought to the attention of the Executive Committee before the change is voted upon. Changes in the rules and regulations shall become effective only when approved by the Director and the President of UTHSCH.

Rules and regulations may also be amended, replaced or added by the medical staff at a regular meeting or special meeting called for that purpose provided that the procedure used in amending the medical staff bylaws is followed. All such changes shall become effective only when approved by the Director and the President of UTHSCH.

ARTICLE XIV

AMENDMENTS

ARTICLE XIV - PART A: AMENDMENTS

All proposed amendments of these bylaws initiated by the medical staff shall, as a matter of procedure, be referred to the Executive Committee. The Executive Committee shall report on them either favorably or unfavorably at the next regular meeting of the medical staff, or at a special meeting called for such purpose. They shall be voted upon at that meeting provided that they shall have been posted on the medical staff bulletin board at least 14 days prior to the meeting. To be adopted, an amendment must receive a majority of the votes cast by the voting staff who are present at the time of such vote and who do vote. Amendments so adopted shall be effective if agreed to by the President of UTHSCH and approved by the Board.

The Executive Committee shall have the power to adopt such amendments to the bylaws as are technical or legal modifications or clarifications, reorganization or renumbering, or amendments made necessary because of punctuation, spelling or other errors of grammar or express. Such amendments shall be temporarily effective immediately upon their approval by the President of UTHSCH and shall be final upon approval by the medical staff, the Director, the President of UTHSCH and the Board. The action to amend may be taken by a motion action upon in the same manner as any other motion before the Executive Committee. After adoption, such amendments shall, as soon as practicable, be posted on the medical staff bulletin board for 14 days and sent to the Director, the President of UTHSCH, and the UTS Office of Health Affairs.

ARTICLE XV

ADOPTION

ARTICLE XV - PART A:

Section 1. Waivers. To the extent that these Bylaws and subsequent amendments hereto impose new tenure requirements, such new tenure requirements, unless otherwise specified to the contrary at the time of adoption, shall be waived, respectively, until the end of a period equal to such new tenure requirement. The prerequisite for consideration for appointment, applicable to various Staff Categories, concerning the requirement that a physician request admission to this hospital for a portion of his patients requiring

hospitalization shall be waived with respect to each Applicant for initial Appointment who undertake to prospectively meet such prerequisite. The prerequisite for appointment applicable to the Active Staff concerning 12 months prior service on the Provisional Staff shall be waived with respect to practitioners appointed to the Active Staff prior to January 1, 1987. The prerequisite for Appointment and privileges applicable to various Staff Categories, and areas of care concerning Specialty Board certification or examination eligibility shall be waived with respect to practitioners appointed to the Staff prior to January 1, 1987. Any other prerequisite, qualification, responsibility, or other requirement specified in these Bylaws may be waived by the Board after consideration of the recommendation of the President of UTHSCH and the Director upon determination that such waiver will serve the best interests of the Hospital. Such waiver shall also serve in the initial appointments for Medical Staff committees prior to January 1, 1987.

ARTICLE XV - PART A:

Section 2. Adoption:

The bylaws are adopted and made effective _____, superseding and replacing any and all previous medical staff bylaws, and henceforth all activities and actions of the medical staff and of each and every appointee to the medical staff shall be taken under and pursuant to the requirements of these bylaws.

The present rules and regulations of the medical staff are hereby adopted and placed into effect insofar as they are consistent with these bylaws, until such time as they are amended in accordance with the terms of these bylaws.

ADOPTION OF BYLAWS

PROPOSED by the Medical Staff of the Harris
County Psychiatric Center
on _____ (date)

Name:
President of the Medical Staff

AGREED to by the Director of
the Harris County Psychiatric Center
on _____ (date)

Name:
Director

RECOMMENDED for approval
on _____ (date)

Name:
President
The University of Texas Health
Science Center at Houston

APPROVED as to form:

Office of General Counsel
The University of Texas System

CONCURRING in recommendation of approval
on _____ (date)

Name:
Executive Vice Chancellor for
Health Affairs

APPROVED by the Board of Regents of The
University of Texas System on behalf of
The University of Texas Health Science
Center at Houston and the Harris County
Psychiatric Center

Name:
Chairman
U. T. Board of Regents

CERTIFICATE OF APPROVAL
BY U. T. BOARD OF REGENTS

I hereby certify that the foregoing Bylaws were approved by
the Board of Regents of The University of Texas System on the
____ day of _____, 1986, and that the person
whose signature appears above is authorized to execute such
agreement on behalf of the Board.

Executive Secretary, Board of Regents
The University of Texas System

APPENDIX

A

ORGANIZATION SUMMARY

POLICIES OF THE HCPC

RELATING TO MEDICAL PRACTICE

ORGANIZATION SUMMARY
POLICIES OF THE HCPC
RELATING TO MEDICAL PRACTICE

The policies of the HCPC relating to medical practices are:

- To provide care for patients, regardless of race, color, ethnicity, religion, creed, sex, sexual orientation, age, national origin, physical handicap, or other basis protected by law, or ability to pay, within the capacity of the HCPC and the capabilities of the Medical Staff.
- To develop a Medical Staff of qualified individual Practitioners without regard to race, color, ethnicity, religion, creed, sex, sexual orientation, age, national origin, physical handicap, or other basis protected by law, or competition among persons with clinical privileges.
- To ensure compliance with the specific policies of the HCPC and Medical Staff including:
 1. The HCPC Bylaws.
 2. The decisions of the Board.
 3. The Medical Staff Bylaws.
 4. The Rules and Regulations of Departments and Units of the HCPC and Medical Staff.
 5. The Rules and Regulations of the Board of Regents of The University of Texas System.
 6. The Handbook of Operating Procedures of The University of Texas Health Science Center at Houston.
 7. All governmental regulations affecting health care and health care providers.

APPENDIX B
RULES AND REGULATIONS
OF
THE ORGANIZED MEDICAL STAFF
OF
THE HARRIS COUNTY PSYCHIATRIC CENTER
HOUSTON, TEXAS

SECTION A. ADMISSION, TRANSFER, AND DISCHARGE OF PATIENTS

1. Patients may be admitted to the HCPC only by members of the Medical staff with admitting privileges.
2. A member of the Medical Staff with admitting privileges shall be responsible for the diagnosis, treatment, and medical care of each patient, for maintaining a prompt and complete record of the patient's admission and subsequent care in the HCPC, for writing orders and special instructions, and for supplying information to the patient's family and the referring physician, if any. If the attending physician transfers or delegates these responsibilities to another Medical Staff member, he must write an order to that effect in the patient's record.
3. Except in an emergency no patient shall be admitted without a provisional diagnosis or valid reason for admission, and an initial set of orders from the admitting physician. In emergency cases the provisional diagnosis or reason for admission and the initial set of orders shall be written as soon as possible and in any event no later than 24 hours following admission. The basis for such emergency admission shall be fully documented in the patient's records and shall be justified to the President upon request.
4. Patients shall be discharged only upon orders of the attending physician. Should a patient leave the HCPC without proper discharge orders, a detailed notation of the event shall be made on the patient's record by nursing personnel and the attending physician.
5. In the event of HCPC deaths, the deceased shall be pronounced dead by an appropriate physician. The release of bodies shall conform to local law.
6. It shall be the duty of all Medical Staff members to secure meaningful autopsies, when possible. An autopsy may be performed only with a written consent, signed in accordance with state law. All autopsies shall be performed by HCPC authorized pathologists. Provisional anatomical diagnoses shall be recorded on the medical record within 48

hours and the complete protocol shall be made a part of the record within 21 days.

7. Any Medical Staff member admitting Medicare patients to the HCPC shall honor the condition of the HCPC's contract with the Department of Health and Human Services.
8. The attending physician is required to document the need for hospitalization after specific periods of stay as identified by the Utilization Review Plan of the HCPC or, where applicable, by appropriate governmental authority. The documentation must contain:
 - (a) An adequate written statement of the reason for continued hospitalization. A statement of the patient's diagnosis is not sufficient;
 - (b) The estimated period of time the patient will need to remain in the HCPC; and
 - (c) Within 24 hours after request of the Quality Assurance Committee of the HCPC such documentation shall be furnished for any patient.

SECTION B. MEDICAL RECORDS

1. A complete, legible medical record on every patient admitted to the HCPC is the responsibility of the attending physician.
2. Every medical record shall include:
 - (a) An admitting diagnosis or valid reason for admission. Except for emergencies this shall be recorded at time of admission, and in any event within 24 hours.
 - (b) General consent to diagnosis and treatment by the attending physician. This consent must be obtained prior to admission.
 - (c) A complete history and physical examination to be recorded on admission and to include all pertinent findings. If a complete history and physical examination has been performed and recorded by a UTHSCH Psychiatry medical staff member prior to a hospital-to-hospital transfer of a patient, then a durable, legible copy of such history and physical may be

placed in the patient's medical record in lieu of the admission history and physical, provided that there is recorded all additions to the history or changes in physical findings.

- (d) Initial orders, to be written at time of admission.
- (e) An informed consent, to be obtained from the patient by the attending physician or his associates prior to any special procedure. Such consent shall document that the patient has been reasonably advised of the hazards of such procedure, and shall be signed by the patient or his representative. Such informed consent shall include at least the following:
 - (1) Permission to administer anesthesia. (Best obtained by the anesthesiologist.)
 - (2) Specific identification of the nature of the procedure and the identity of the physician undertaking the procedure.
 - (3) Acknowledgement of the explanation given, the hazards of the procedure, and the availability of the alternative methods of the treatment, if any.
- (f) Progress notes, to be recorded at the time of the observation sufficient to permit continuity of care and transferability. Whenever possible, each of the patient's clinical problems should be clearly identified and correlated with specific orders and the results of tests and treatment. Progress notes shall be written at least daily except Sunday's and major holidays.
- (g) When a consultation(s) is requested, consultation reports shall show evidence of a review of the patient's record by the consultant, pertinent findings on examination by the consultant, and the consultant's opinion and recommendations.
- (h) Reports of procedures, tests, and results, to include pathology and clinical laboratory reports, radiology and nuclear medicine examinations, and other diagnostic and therapeutic procedures.

- (i) Discharge summary or clinical resume to include:
 - (1) Concise statement of history and physical, mental status on admission;
 - (2) Course in the hospital, including treatment;
 - (3) All special procedures performed;
 - (4) Final diagnosis(es);
 - (5) Condition on discharge;
 - (6) Post discharge instructions to patient;
 - (7) Autopsy reports, if any.
3. When a history and physical examination or other clinical entry on a medical record is recorded by a resident, the attending physician shall review such history and physical or other entry, shall make such changes or corrections as are indicated, and shall sign to indicate his approval. The history and physical or other entry is not complete until signed by the attending physician.
4. Signature stamps or facsimile signatures shall not be allowed under any circumstances. All clinical entries shall be dated and signed.
5. Symbols and abbreviations may be used in the medical records only when approved by the Executive Committee. Each symbol or abbreviation shall have only one meaning. A list of approved symbols shall be updated annually and appropriately distributed in the HCPC. No symbol or abbreviations shall be used in the discharge summary or clinical resume.
6. Written consent of a patient, or his authorized representative, is required for release of information in his medical record to any person not otherwise authorized to receive it.
7. In the event of readmission to the HCPC all the patient's prior medical records shall be available to the admitting physician. Members of the Medical Staff who have a legitimate interest in a medical record (i.e., Medical Staff Committee audit functions, Department audit functions) may review its contents. Certain HCPC employees may have access

to patient records as a function of patient care or review. Federal and State review agencies and the Joint Commission on Accreditation of Hospitals may be authorized to review the records.

8. All medical records are the property of the HCPC and may be removed from the HCPC's safekeeping in accordance with court order, subpoena, or statute. Unauthorized removal of medical records from the HCPC is grounds for suspension of privileges of a physician for a period to be determined by the Executive Committee.
9. Medical records shall be filed only when completed by the attending physician or ordered filed by the Medical Records Committee.
10. All medical records should be completed upon discharge from the HCPC including a recorded or dictated discharge summary. Portions of the medical records must be completed at specified times. Failure to properly and timely complete the medical records or portions thereof shall result in the following:
 - (a) When the admitting diagnosis, history and physical, and informed consent are not in the medical record before any potentially hazardous diagnostic procedure, the procedure shall be cancelled unless the attending physician states in writing that such delay would be detrimental to the patient. All such incidents shall be reported to the appropriate Department and to the Executive Committee. It shall be the duty of the appropriate Nursing Supervisor to check on these requirements, to effect the cancellation, and make the appropriate reports.
 - (b) Failure to record an admitting diagnosis or valid reason for admission, a history and physical, initial orders or general consent to admission within 24 hours of admission shall be reported by the charge nurse on the floor to the Director of Medical Records, who shall notify the delinquent physician and the appropriate Departments of the HCPC of his suspension of privileges which shall continue until the delinquent record(s) are corrected. The Director of Medical Records shall likewise

notify the appropriate Departments when the physician is no longer suspended.

- (c) When a patient is dismissed and the medical record is received in the Medical Records Department without the ECT Report(s) or Post-anesthesia Report (not recorded or dictated), the chart will be declared delinquent. The responsible physician will be suspended from admitting privileges as follows:
- (1) The Director of Medical Records shall notify the physician and the appropriate Departments of the HCPC that privileges are suspended until the delinquent charts are completed. The Director of Medical Records shall likewise notify the appropriate Departments when the physician is no longer suspended.
- (d) When a patient is dismissed with any other portion of the records incomplete it shall be dated and placed in the attending physician's incomplete chart box. If such record is not complete within ten (10) days after being placed in the box, the attending physician will be notified by letter from the Director of Medical Records. Five days after such notice any physician with a delinquent chart will be automatically suspended from all privileges except attending patients already hospitalized under his care, unless within such five days he shall have completed such delinquent charts or secured a letter from the President of the Medical Staff that extenuating circumstances warrant deferring the suspension until the next regular meeting of the Executive Committee, who shall make a decision regarding suspension. Notice of automatic suspension shall be given by the Director of Medical Records to the physician and appropriate departments of the HCPC. Failure to complete records within 60 days after suspension shall be grounds for termination of the Medical Staff membership, which would require notice to the physician of his right to the Hearing and Appeal Procedures set out in the Bylaws of the Medical Staff.

11. If any physician shall be suspended more than three (3) times in any calendar year, for failure to timely and properly complete medical records, such suspension may be reviewed by the Executive Committee who may initiate appropriate disciplinary action.

SECTION C. GENERAL CONDUCT OF CARE

1. All orders for treatment shall be in writing and signed by an attending physician or his physician designee with admitting privileges. Verbal and telephone orders of an attending physician may be recorded and written by an R.N. (all orders) or by a fully licensed registered or certified therapist (may take only orders pertaining to therapy they are providing). All verbal and telephone orders shall be read back to the attending physician after transcription and before such orders are carried out. All verbal and telephone orders shall be signed immediately by the person receiving such order and by the physician within 24 hours.
2. Orders must be written clearly, legibly and understandably. Illegible or improperly written orders will not be carried out until rewritten and understood by the nurse.
3. Orders must be written when patients are transferred to or from different Units.
4. Drugs and medications given to patients must be listed in the current edition of United States Pharmacopeia, National Formulary, American Hospital Formulary Service or A.M.A. Drug evaluations. Experimental and investigational drugs may be used under the sponsorship and supervision of the UTHSCH-MS Department of Psychiatry's research guidelines which are determined by those of the UTHSCH-MS.
5. Identified medications will be administered from the HCPC Pharmacy on the physician's orders as to dosage, method of frequency of administration. No medications brought from home will be administered unless the drug cannot be obtained through the Pharmacy. Unidentified or foreign medications will not be administered by HCPC personnel unless the attending physician certifies in writing that the medication is necessary for the medical well being of the patient and writes orders as to dosage,

method and frequency of administration. Patients taking unidentified or foreign medications on order of the attending physician shall execute a release of the HCPC from any liability in administering such medications.

Patients admitted to the HCPC who are taking experimental or investigational drugs or medications under a protocol from another institution, accredited by the JCAH, may be administered such medication in the HCPC on written orders of the attending provided: the HCPC is furnished a copy of the protocol from the originating institution, a copy of the patient's original informed consent to the use of medication, and adequate written information about its pharmacology (particularly adverse affects), storage requirements, method of dose preparation and administration, precautions to be taken, authorized prescribers, patient monitoring guidelines, and any other material pertinent to the safe and proper use of the medications.

6. The Pharmacist is authorized to dispense another brand of medication identical in form and content to the medication ordered, unless otherwise instructed by the physician.
7. Consultation is required in the following situations:
 - (a) On critically ill patients when the diagnosis or appropriate treatment is obscure or cannot be obtained in the HCPC.
 - (b) Whenever, in the judgment of the attending physician, specialists are available whose expertise will render substantial benefit to the patient.

The attending physician is primarily responsible for the requesting consultations when indicated and for obtaining a qualified consultant. He will provide a written order to permit a consultant to attend or examine his patient, except in an emergency.

8. Administration of intravenous injections for X-ray or laboratory procedures shall be done by a physician or under the direction and supervision of a physician immediately available in the Department.

9. When a physician deems it necessary for a patient to have private duty nurses or sitters he will so order on the chart.
10. Medications may be administered to patients only by physicians or HCPC employees with appropriate licensures, certification, or registration, and in accordance with governmental regulations.
11. Personnel working directly for the Medical Staff Member, whose qualifications are not otherwise specified in the Bylaws or these Rules and Regulations, shall meet the qualifications for similar personnel employed by the HCPC. Such personnel shall work in the HCPC only when accompanied by or under the supervision of the employing Medical Staff Member. All such personnel must be approved by the President or his designee and by the Executive Committee before working in the HCPC, and shall comply with all applicable HCPC Rules and Regulations.
12. Orders for Class II narcotics, antibiotics and anticoagulants will be automatically cancelled at 12:00 noon following the expiration of 72 hours, or 30 days in the case of psychotropic and all other drugs, unless:
 - (a) The order specifies an exact number of doses; or
 - (b) The order is renewed before or at expiration in which case it will again terminate in 72 hours or 30 days as appropriate.

The HCPC shall initiate a system for notifying the responsible physician of the impending expiration of an order.

SECTION D. ALLIED HEALTH PROFESSIONALS

1. The following categories of Allied Health Professionals are eligible to apply for Privileges to practice their profession in the HCPC, as provided in ARTICLE XII of the Bylaws of the Medical Staff.:
 - (a) Clinical Psychologists
 - (b) Neuropsychologist
 - (c) Experimental Psychologists

- (d) Clinical Social Workers
 - (e) Occupational Therapists
 - (f) Therapeutic Recreation Specialists
2. All Allied Health Professionals function under the supervision and direction of a physician member(s) of the Medical Staff.
3. Allied Health Professionals shall have the following qualifications in addition to the qualifications set out in ARTICLE XII of the Bylaws of the Medical Staff and Section D of these Rules and Regulations:
- (a) Psychologists
 - (1) Documented verification of doctoral degree in psychology from regionally accredited university.
 - (2) Documented verification of current licenser by the Texas State Board of Examiners of Psychologists.
 - (b) Social Workers
 - (1) Documented verification of graduation from an approved graduate school of social work and currently certified by State of Texas (CSW), or be eligible for, and have submitted applications to the State of Texas for certification.
 - (c) Occupational Therapy
 - (1) Documented verification of graduation from an approved school of occupational therapy, certification by the American Occupational Therapy Association, and licensed in Occupational Therapy by the Texas Advisory Board for Occupational Therapy.
 - (d) Therapeutic Recreation Specialists
 - (1) Documented verification of graduation from an approved college or university with an undergraduate or graduate degree in therapeutic recreation or recreation

and meets educational and certifying requirements of the National Council for Therapeutic Recreation Certification.

4. TENURE

- (a) Allied Health Professionals shall be appointed and Reappointed as provided in ARTICLE IX and X of the Bylaws except that the Appointment or Renewal Appointment of an Allied Health Professional shall automatically terminate, without right of review if the employment or mode of affiliation of the Allied Health Professional to the HCPC or UTHSCH ceases; or the Allied Health Professional ceases to furnish services under contract to the HCPC or UTHSCH.
- (b) Allied Health Professionals furnishing services to the HCPC under contract shall have only such tenure as is provided in the contract.

5. PRIVILEGES

(a) Clinical Psychologists

- (1) Evaluate and remediate mental and emotional conditions of patients referred by the attending member of the medical staff in the course of work at HCPC.
- (2) Perform psychological work including, but not limited to, the conduct of psychological testing and psychotherapy.
- (3) Use the services of subdoctoral personnel in the conduct of the privileges granted and is responsible for the supervision of such personnel. Such subdoctoral personnel may include students in training, technicians, and other individuals not licensed as psychologists but who have proper training and experience to perform the work requested as judged by the psychologists.

(b) Neuropsychologists

- (1) Administer neuropsychological test and procedures upon patients referred by the

attending member of the medical staff in the course of work at HCPC.

- (2) Perform psychological work including, not limited to, the conduct of psychological testing, and evaluation and remediation of mental and emotional conditions.
- (3) Use the services of subdoctoral personnel in the conduct of the privileges granted and is responsible for the supervision of such personnel. Such subdoctoral personnel may include students in training, technicians, and other individuals not licensed as psychologists but who have proper training and experience to perform the work requested as judged by the psychologist.

(c) Experimental Psychologists

- (1) Conduct such services and procedures which are within the realm for the training and experience of the of the experimental psychologist including, but not limited to, the conduct of studies and experiments related to the mental and emotional conditions of the patients at HCPC.
- (2) Use the services of subdoctoral personnel in the conduct of the privileges granted and is responsible the supervision of such personnel. Such subdoctoral personnel may include students in training, Technicians, and other individuals not licensed as psychologists but who have proper training and experience to perform the work requested as judged by the psychologist.

(d) Clinical Social Workers

- (1) Group Psychotherapy. Leadership of therapeutic patient groups which are designed to develop insight, communication and social skills or enhance overall functional ability and coping skills. Qualifications include Certified Social Worker (CSW) with two years supervised experience in group psychotherapy or

Certified Social Worker (CSW) under supervision of Certified Social Worker-Advanced Clinical Practitioner (CSW-ACP).

(2) Family Psychotherapy. Engagement of patient, family, and/or significant others in regularly scheduled therapeutic dialogue so as to increase healthy reciprocal functioning within the family system and to eliminate ineffective behaviors that perpetuate the present illness. Qualifications include Certified Social Worker (CSW) with two years of supervised experience in family psychotherapy or Certified Social Worker (CSW) under supervisor of Certified Social Worker-Advanced Clinical Practitioner (CSW-ACP).

(3) Individual Psychotherapy. One-to-one therapeutic intervention with patients designed to develop insight, communication and social skills or enhance overall functional ability and coping skills. Qualifications include Certified Social Worker (CSW) with two years of supervised experience in individual psychotherapy or Certified Social Worker (CSW) under supervision of Certified Social Worker-Advanced Clinical Practitioner (CSW-ACP).

(e) Occupational Therapists

(1) Individual, group and family therapy utilizing Occupational Therapy as a therapeutic modality.

(f) Therapeutic Recreation Specialists

(1) Individual, group and family therapy utilizing Therapeutic Recreation as a therapeutic modality.

SECTION E. DENTAL HEALTH CARE PLAN

1. HCPC shall contract for appropriate dental services for patients. All contract services shall comply with appropriate JCAH standards and shall be included in the hospital-wide Quality Assurance Plan.

2. Reports of all dental services provided shall be made part of the patient's record.

(a) Dental records (Dentist's responsibility)

- (1) A detailed dental history justifying dental treatment.
- (2) A detailed description of the examination of the oral cavity and a preoperative diagnosis (if indicated).
- (3) An informed consent to comply with Section B-2(e) of these Rule and Regulations.
- (4) A complete operative report, describing the findings and technique. In cases of extraction, the dentist shall clearly state the number of teeth and fragments removed.
- (5) Progress notes pertinent to the oral condition.
- (6) Discharge summary.
- (7) Discharge instructions for follow-up care.

SECTION F. RESTRAINT OR SECLUSION

1. Restraint or seclusion is to be used only if necessary to protect the safety and welfare of the patient and/or staff and/or other patients. It will never be used as punishment or for aversive conditioning. In all instances:

- (a) An order for restraint or seclusion must be time limited and may be communicated to a nurse over the telephone.
- (b) An order for restraint or seclusion is permissible only after clinical assessment of the patient.
 - (1) The clinical assessment may be made by phone and the order given by phone;

- (2) A phone order for restraint or seclusion must be signed by the physician within 12 hours after initiated.
- (c) PRN and/or prospective orders for seclusion or restraint are not permitted.
- (d) The assessment and the order is to be documented in the patient record when the procedure is implemented.
- (e) There must be documentation of a physician visit with the patient at least every 24 hour period, and preferably every 12 hours.
- (f) Nursing staff will monitor and attend to the needs of the patient every 15 minutes, in accordance with unit procedures, and document care given. The physician is responsible for reviewing adequacy of care provided during seclusion and documenting that he is satisfied that the needs of the patient are being met.
- (g) Staff who implement written orders for restraint or seclusion are to be trained in the use of these procedures.

SECTION G. THERAPIES EXCLUSION LIST

- 1. The following therapies will not be done in the HCPC:
 - (a) Psychosurgery
 - (b) Other therapies of experimental nature (unless part of an approved research protocol)

SECTION H. ELECTROCONVULSIVE THERAPY (ECT)

- 1. Electroconvulsive Therapy (ECT) is employed as an adjunct to other therapeutic modalities at the discretion of the attending psychiatrist. The intention is to offer ECT in a safe manner that protects the confidentiality of the individual and is consistent with the highest quality patient care.
 - (a) ECT may be undertaken in the following circumstances:

- (1) A documented affective disorder exists, or other treatment resistant psychosis.
 - (2) The life of the patient would be jeopardized if treatment is not provided.
 - (3) Safety of the patient requires immediate ECT.
- (b) The "Special Procedures Disclosure and Consent" form is to be completed prior to ECT initiation.
- (1) The following hazards must all be included on the form:
 - (a) Transient headache and muscle soreness;
 - (b) Transient memory impairment;
 - (c) Those hazards associated with general anesthesia;
 - (d) Fracture or dislocation of a joint; and,
 - (e) Any other known hazards that are specifically related to the case.
 - (2) The adult voluntary patient is required to sign the form. The adult involuntary patient who refuses to consent to ECT will require a court-appointed guardian to sign the form. The patient or legal guardian may withdraw consent at any time.
- (c) In non-emergency situations, minimum pre-ECT workup includes CBC, Urinalysis, Chest X-ray, chemistries and if the patient is over 50 an EKG.
- (d) An anesthesiologist or CRNA must be present for all ECT, unless the psychiatrist has certification in advanced CPR, including the ability to insert an endotracheal tube, and has demonstrated his ability to perform unassisted ECT to the satisfaction of the Medical Director.

- (e) Scheduling of all ECT will be coordinated by the head nurse of the appropriate area.
 - (f) Standing orders must be approved and on file for pre-ECT and post-ECT medications and procedures.
2. ECT is not to be administered to any child or adolescent unless prior to treatment two qualified child psychiatrists who are trained or experienced in the treatment of children and adolescents, and who are not affiliated with the treating program have examined the patient, have consulted with the responsible child psychiatrist, and have written and signed reports in the patient's record that concur with the decision to administer such therapy.
 3. In cases dealing with children or adolescents, the responsible parent(s), relative, or legal guardian (and, when appropriate, the patient) is/are to sign the "Special Procedure Disclosure and Consent" form before ECT is initiated. The family and/or legal guardian (and, when appropriate, the patient) may withdraw consent at any time.
 4. If an adult psychiatric patient's illness constitutes a life threatening emergency, the attending physician may administer emergency ECT before consent or legal permission is obtained. The Chief of Adult Psychiatry must be consulted and must concur with the decision to administer ECT.
 - (a) The medical record is to reflect adequate justification for emergency ECT and that legal permission was unobtainable prior to treatment.
 - (b) Legal permission to perform ECT is to be pursued with all deliberate speed.
 5. Specify clinical privileges for ECT or documented residency training in ECT with demonstrated faculty supervision is required to administer ECT. This procedure will be performed only by a physician with a valid Texas medical license on file in the HCPC.
 6. A course of ECT is limited to fifteen (15) treatments; if additional treatments are needed, a consultation from the Medical Director or

appropriate Chief of Adult or Child and Adolescent Psychiatry must be obtained and documented that concurs with the need for extended ECT treatment.

7. Frequency of treatment and the duration of a course of therapy varies with individual patients and the severity of illness.
8. The maximum recommended number of treatments per year is thirty (30).
 - (a) The clinical necessity for maintenance of ECT in excess of thirty (30) treatments requires a concurring consult from the appropriate Service Chief.
 - (b) Written review is required annually or at the completion of thirty (30) treatments, whichever comes first.
9. The Service where the procedure is done shall have a approved protocol for anesthetizing a patient for ECT which is consistent with good practice techniques and adequate safeguards for the protection of the psychiatric patient.
10. The Nursing Policy and Procedure Manual contains a section on somatic therapy which establishes the nurse's role in ECT and lists the pre- and post-treatment nursing protocol for ECT.

SECTION I. AMYTAL, SEDATIVE, OR SEDATIVE TRANQUILIZER INTERVIEW

1. For Amytal or other sedative or sedative tranquilizer interviews:
 - (a) The psychiatrist must process current ability as certified by the Chief of the Service in CPR.
 - (b) The patient or guardian must signed informed consent.
 - (c) The interview will be scheduled by the head nurse or designee of the appropriate unit.
 - (d) Crash cart will be in the room and both psychiatrist and assisting nurse will be conversant with its use.

(e) A nurse will be in attendance throughout all procedure.

(f) Orders must be written governing post-interview procedures, medication and nursing duties.

SECTION J. RESEARCH

1. One part of the HCPC mission is to conduct research to increase knowledge of the psychiatric illnesses in an effort to assist the treatment of the psychiatric patient or even prevent these illnesses from occurring.

(a) Any research project undertaken by a Service in the HCPC that involves risk or inconvenience protects the rights of the psychiatric patient and complies with federal, state and HCPC rules and regulations.

(b) Written, informed consent of participants in a specific research project is obtained from the patient or the legal guardian and becomes part of the patient's medical record. The patient may withdraw consent at any time. Examples of human subject consent forms which have been approved for use by the Executive Committee appear at the end of this Section.

(1) In cases dealing with children or adolescents, the responsible parent(s), relative or legal guardian and, when appropriate, the patient gives written, informed consent.

(2) Consent may be withdrawn at any time.

2. The use of unusual medications or investigational or experimental drugs requires written informed consent which may be revoked at any time.

(a) The Pharmacy and Therapeutics Committee monitors drug studies as part of its drug usage and pharmacy and therapeutics functions.

(b) Adverse drug reactions must be reported as they occur per policy and procedure.

3. The HCPC shall use the institutional review board of UTHSCH.

ADOPTION OF BYLAWS

PROPOSED by the Medical Staff of the Harris
County Psychiatric Center

on _____ (date)

Name:

President of the Medical Staff

AGREED to by the Director of
the Harris County Psychiatric Center

on _____ (date)

Name:

Director

RECOMMENDED for approval

on _____ (date)

Name:

President

The University of Texas Health
Science Center at Houston

APPROVED as to form:

Office of General Counsel
The University of Texas System

CONCURRING in recommendation of approval

on _____ (date)

Name:

Executive Vice Chancellor for
Health Affairs

APPROVED by the Board of Regents of The
University of Texas System on behalf of
The University of Texas Health Science
Center at Houston and the Harris County
Psychiatric Center

Name:
Chairman
U. T. Board of Regents

CERTIFICATE OF APPROVAL
BY U. T. BOARD OF REGENTS

I hereby certify that the foregoing Bylaws were approved by
the Board of Regents of The University of Texas System on the
____ day of _____, 1986, and that the person
whose signature appears above is authorized to execute such
agreement on behalf of the Board.

Executive Secretary, Board of Regents
The University of Texas System

9. U. T. Cancer Center: Permission for Albert E. Gunn, M.D., to Serve as Regional Medical Director of the Texas Medical Foundation (TMF) for the Houston/Gulf Coast Region [Regents' Rules and Regulations, Part One, Chapter III, Section 13, Subsections 13.(10) and 13.(11)].--Permission was granted for Albert E. Gunn, M.D., Associate Professor of Geriatrics and Chief, Section of Rehabilitation Medicine at The University of Texas System Cancer Center, to serve as Regional Medical Director of the Texas Medical Foundation (TMF) for the Houston/Gulf Coast Region.

In accordance with U. T. System and U. T. Cancer Center policy, the fees Dr. Gunn will receive for his service (other than reimbursement for travel expenses) as Regional Medical Director of TMF will be turned over to the U. T. Cancer Center Physicians Referral Service.

Dr. Gunn's appointment is of benefit to the State of Texas, creates no conflict with his regular duties, and is in accordance with approval requirements for positions of honor, trust, or profit provided in Article 6252-9a of Vernon's Texas Civil Statutes and Part One, Chapter III, Section 13, Subsections 13.(10) and 13.(11) of the Regents' Rules and Regulations.

REPORT AND RECOMMENDATIONS OF THE BUILDINGS AND GROUNDS COMMITTEE (Pages 161 - 165).--Committee Chairman Rhodes reported that the Buildings and Grounds Committee had met in open session to consider those items on its agenda and to formulate recommendations for the U. T. Board of Regents. Unless otherwise indicated, all actions set forth in the Minute Orders which follow were recommended by the Buildings and Grounds Committee and approved in open session and without objection by the U. T. Board of Regents:

1. U. T. Austin - Economics Building Renovation (Project No. 102-589): Approval of Final Plans; Authorization to Advertise for Bids and for Executive Committee to Award Contracts; and Additional Appropriation Therefor.-- Upon recommendation of the Buildings and Grounds Committee, the Board:
 - a. Approved final plans and specifications for the Economics Building Renovation at The University of Texas at Austin at an estimated total project cost of \$3,675,000
 - b. Authorized the Office of Facilities Planning and Construction to advertise for bids upon completion of final review
 - c. Authorized the Executive Committee to award all contracts associated with this project within the authorized total project cost
 - d. Appropriated \$3,450,000 from balances on hand from the U. T. Austin General Fee for total project funding. Previous appropriations had been \$140,000 from the same source and \$85,000 from Interest on Proceeds of Permanent University Fund Bonds.

This project was approved by the Coordinating Board, Texas College and University System in July 1986.
2. U. T. Austin - Recreational Sports Facilities (Project No. 102-596): Approval of Project Analysis; Authorization for Project and Project Site; Appointment of F & S Partners, Incorporated, Dallas, Texas, Project Architect; and Appropriation Therefor.-- Following a brief presentation by President Cunningham and upon recommendation of the Academic Affairs and Buildings and Grounds Committees, the Board:
 - a. Accepted and approved the Project Analysis prepared by the Consulting Architect for the Recreational Sports Facilities at The University of Texas at Austin
 - b. Authorized a project for the construction of Recreational Sports Facility - Phase I at U. T. Austin at an estimated total project cost of \$12,460,000 (not including cost of Project Analysis)
 - c. Approved the building site east of San Jacinto Boulevard and south of the football stadium facilities

- d. Appointed the firm of F & S Partners, Incorporated, Dallas, Texas, Project Architect to prepare preliminary plans and a detailed cost estimate for Phase I to be presented to the U. T. Board of Regents at a future meeting
- e. Appropriated \$270,000 from Auxiliary Enterprise Balances for fees and administrative expenses through the preparation of preliminary plans.

At the August 1985 meeting of the U. T. Board of Regents, a Project Analysis was authorized to investigate the programmatic needs of Recreational Sports Facilities at U. T. Austin. The Project Analysis documents a long-range program that will be accomplished in four phases to meet the recreational sports needs of a community of 60,000 students, faculty and staff. The first phase will be most heavily used for basketball, free weight, stationary weight, aerobics and handball courts, in an area of approximately 119,000 gross square feet.

The assessment of a \$20.00 per semester recreational sports fee was authorized by the 69th Legislature and approved by referendum of the student body. The fee is not to be levied until construction has been completed and the facility is available for use by the students. Revenue bonds are to be issued against the recreational sports fee to provide funding for the building project. It is contemplated that revenue bonds will be issued after final plans have been completed and after construction bids have been taken. The appropriations for fees from Auxiliary Enterprise Balances are made with the understanding that subject appropriations will be refunded from the bond proceeds when available.

It is anticipated that future phases of this project will be constructed in whole or in part with gift funds to be raised for this purpose over the next several years.

- 3. U. T. Dallas: Multipurpose and Engineering Start-Up Facility (Project No. 302-604): Approval of Final Plans; Authorization to Advertise for Bids and for Executive Committee to Award Contracts; and Additional Appropriation Therefor.--The Board, upon recommendation of the Finance and Audit and Buildings and Grounds Committees:
 - a. Approved final plans and specifications for the Multipurpose and Engineering Start-up Facility at The University of Texas at Dallas at an estimated total project cost of \$7,300,000
 - b. Subject to approval of the project by the Coordinating Board, Texas College and University System, authorized the Office of Facilities Planning and Construction to advertise for bids upon completion of final review
 - c. Authorized the Executive Committee to award all contracts associated with this project within the authorized total project cost
 - d. Appropriated \$4,450,000 from Permanent University Fund Bond Proceeds and \$2,500,000 from the funds from the sale of the existing

Administration Building and land upon which it is located for total project funding. Previous appropriations had been \$350,000 from Permanent University Fund Bond Proceeds.

This project will be a new two-level structure providing approximately 60,000 gross square feet of classroom, laboratory and office facilities for multipurpose and engineering start-up uses and approximately 30,000 gross square feet of facilities for the U. T. Dallas administration as replacement space for the temporary administration building which is located on property scheduled to be sold.

This project will be considered for approval by the Coordinating Board, Texas College and University System, at its meeting on October 30-31, 1986.

4. U. T. Health Science Center - Dallas - Charles C. Sprague Clinical Science Building (Project No. 303-598): Approval of Increase in Total Project Cost and Additional Source of Funding; Approval of Preliminary Plans; Authorization to Prepare Final Plans and to Submit Project to Coordinating Board; and Additional Appropriation Therefor.--Committee Chairman Rhodes recognized President Wildenthal who presented a brief overview of the Charles C. Sprague Clinical Science Building at The University of Texas Health Science Center at Dallas. President Wildenthal then introduced Mr. Bruce A. Lipshy, Vice Chairman of the Board of University Medical Center, Inc. and Mr. Paul Bass, Chairman of the Board of Managers of the Dallas County Hospital District, and noted their participation in this cooperative venture.

Following President Wildenthal's presentation, Mr. James Clutts and Mr. Ted Schwink, representing the Project Architect Harper, Kemp, Clutts and Parker, Dallas, Texas, presented the preliminary plans for this project to the Buildings and Grounds Committee.

Based upon this presentation and the recommendation of the Health Affairs and Buildings and Grounds Committees, the Board:

- a. Approved the increase in total project cost for the Charles C. Sprague Clinical Science Building at the U. T. Health Science Center - Dallas from \$8,000,000 to \$12,900,000
- b. Approved sources of funding as being \$8,000,000 from Permanent University Fund Bond Proceeds, \$3,000,000 from Medical Service Research and Development Plan (MSRDP), and \$1,900,000 from the Institutional Interest Income Account
- c. Approved the preliminary plans and specifications and authorized the Project Architect to prepare final plans and specifications to be presented to the U. T. Board of Regents for consideration at a future meeting
- d. Authorized submission of the project to the Coordinating Board, Texas College and University System

- e. Appropriated an additional sum of \$400,000 from Permanent University Fund Bond Proceeds for fees and administrative expenses through completion of final plans, \$200,000 having been previously appropriated from the same source.

In addition to the five floors that have been approved, three additional floors will be shelled-in. The building will be the same height as the University Medical Center Hospital to which it will be connected floor-by-floor. The shelled-in floors will also permit passage from the University Medical Center Hospital to Parkland Hospital. It is anticipated that additional space in the Clinical Science Building will be needed in the not-too-distant future, and it would be cost effective to shell-in space now. The building is designed to expand to a total of thirteen floors.

The building will contain approximately 86,000 square feet of finished space in the basement and first five floors. The three shelled-in floors will contain 40,000 square feet of additional space bringing the total building area to approximately 126,000 square feet.

This project has been designated as the highest priority of the U. T. Health Science Center - Dallas and is within the scope of the Capital Improvement Program approved by the U. T. Board of Regents in October 1985. The Medical Service, Research and Development Plan (MSRDP) sources will pay the proportionate share of the building costs attributed to patient care.

On behalf of the Board, Chairman Hay expressed appreciation to Mr. Lipshy and Mr. Bass for their efforts in the development of this project and for the cooperative relationship among the U. T. Health Science Center - Dallas, Dallas County Hospital District and the University Medical Center, Inc.

5. U. T. Medical Branch - Galveston - Keiller Building - Development of Laboratory Space for Division of Nutrition (Project No. 601-642): Approval to Relocate Project to Maurice Ewing Hall.--At the August 1986 meeting, the U. T. Board of Regents authorized a project for the renovation of approximately 5,160 square feet in the Keiller Building at The University of Texas Medical Branch at Galveston to provide research laboratories for the Division of Nutrition within the Department of Preventive Medicine and Community Health. Since that approval, a more desirable space for renovation (previously occupied by the U. T. Marine Science Institute) became available in the Maurice Ewing Hall.

Upon recommendation of the Health Affairs and Buildings and Grounds Committees, approval was given to relocate the laboratory space for the Division of Nutrition at the U. T. Medical Branch - Galveston in Maurice Ewing Hall instead of the Keiller Building.

This project is within the scope of the Capital Improvement Program approved by the U. T. Board of Regents in October 1985.

6. U. T. Cancer Center - Additional Outpatient Clinic Facilities (Project No. 703-459): Approval to Waive the Regents' Rules and Regulations, Part One, Chapter VIII, Section 1, Subsection 1.1 and to Extend the Name R. Lee Clark Clinic Building to Include New Addition with Exception of Architecturally Distinct East Wing.--Upon recommendation of the Health Affairs and Buildings and Grounds Committees, Subsection 1.1 of Section 1, Chapter VIII, Part One of the Regents' Rules and Regulations, which requires that persons in whose honor a building is named "shall have been deceased at least five years," was waived and the name of the existing R. Lee Clark Clinic Building was extended to include the Additional Outpatient Clinic Facilities currently under construction at The University of Texas System Cancer Center with the exception of the architecturally distinct east wing which is being reserved for possible future designation.

In June 1983, the clinic addition dedicated in 1976 was named the R. Lee Clark Clinic Building in recognition of Dr. Clark's many years of distinguished service to the U. T. Cancer Center. The U. T. Cancer Center has under construction a significant expansion of the clinic facilities which is designed to wrap around a large portion of the existing R. Lee Clark Clinic Building. It is appropriate that this expansion bear the same designation as the original clinic building.

REPORT AND RECOMMENDATIONS OF THE LAND AND INVESTMENT COMMITTEE (Pages 166 - 177).--In the absence of Committee Chairman Milburn, Committee Vice-Chairman Blanton reported that the Land and Investment Committee had met in open session to consider those matters on its agenda and to formulate recommendations for the U. T. Board of Regents. Unless otherwise indicated, all actions set forth in the Minute Orders which follow were recommended by the Land and Investment Committee and approved in open session and without objection by the U. T. Board of Regents.

The execution of documents authorized in this report will be in accordance with the Regents' Rules and Regulations, Part Two, Chapter IX, Section 1.3 as set forth below:

- 1.3 Authority to Execute Instruments Relating to Land and Mineral Interests.--The Chairman of the Board, the Vice-Chairmen, the Chancellor, or his delegate, and the Executive Vice Chancellor for Asset Management are each authorized to execute conveyances, deeds, surface and/or mineral leases, easements, rights-of-way, oil and gas division orders, and transfer orders, geophysical and material source permits, water contracts, pooling and unitization agreements, and any other instruments as may be necessary or appropriate from time to time, relating to the handling, management, control, and disposition of any real estate or mineral interest held or controlled by the Board as a part of the PUF or as a part of any trust or special fund.

I. PERMANENT UNIVERSITY FUND

INVESTMENT MATTERS

Report on Clearance of Monies to Permanent University Fund for July and August 1986, and Report on Oil and Gas Development as of August 31, 1986.--The following reports with respect to (a) certain monies cleared to the Permanent University Fund for July and August 1986, and (b) Oil and Gas Development as of August 31, 1986, were submitted by the Executive Vice Chancellor for Asset Management:

<u>Permanent University Fund</u>	<u>July 1986</u>	<u>August 1986</u>	<u>Cumulative Through August of this Fiscal Year (1985-1986)</u>	<u>Cumulative Through August of Preceding Fiscal Year (1984-1985)</u>	<u>Per Cent Change</u>
Royalty					
Oil	\$ 4,334,504.03	\$ 4,169,828.35	\$ 80,121,809.05	\$102,717,988.37	-22.00%
Gas	2,141,323.48	1,747,206.86	29,173,789.80	32,133,497.48	-9.21%
Sulphur	10,000.00	10,000.00	214,561.84	570,311.25	
Water	36,513.73	80,963.62	700,574.69	487,738.77	
Brine	2,731.68	1,688.69	77,595.61	104,448.32	
Rental					
Oil and Gas Leases	2,282.45	11,901.86	820,924.28	1,728,710.11	
Other	2,629.00	2,201.36	15,496.36	28,390.67	
Sale of Sand, Gravel, Etc.	0.00	1,551.60	38,870.30	23,794.75	
Gain or (Loss) on Sale of Securities	15,412,636.94	15,323,111.79	171,311,803.81	96,312,304.64	
Subtotal	<u>21,942,621.31</u>	<u>21,348,454.13</u>	<u>282,475,425.74</u>	<u>234,107,184.36</u>	<u>20.66%</u>
Bonuses					
Oil and Gas Lease Sales	0.00	0.00	5,942,458.05	16,500.00	
Amendments and Extensions to Mineral Leases	32,355.35	0.00	229,272.01	227,593.06	
Total Bonuses	<u>32,355.35</u>	<u>0.00</u>	<u>6,171,730.06</u>	<u>244,093.06</u>	
TOTAL CLEARANCES	<u>\$21,974,976.66</u>	<u>\$21,348,454.13</u>	<u>\$288,647,155.80</u>	<u>\$234,351,277.42</u>	<u>23.17%</u>

Oil and Gas Development - August 31, 1986

Acreage Under Lease - 764,089 Number of Producing Acres - 570,033 Number of Producing Leases - 2,282

II. TRUST AND SPECIAL FUNDS

A. GIFTS, BEQUESTS AND ESTATES

1. U. T. System: Acceptance of Transfer of Funds and Establishment of the Lowell H. Lebermann Endowment.--The Board, upon recommendation of the Land and Investment Committee, accepted a transfer of \$100,000 from current restricted funds and established the Lowell H. Lebermann Endowment at The University of Texas System.

Income from the endowment will be used at the discretion of the Chancellor.

2. U. T. Arlington: Acceptance of Gifts and Establishment of the John R. Lewie Undergraduate Scholarship Fund.--The Board accepted gifts totaling \$14,441 from the family members of Mr. John R. Lewie and established the John R. Lewie Undergraduate Scholarship Fund at The University of Texas at Arlington.

Income earned from the endowment will be used to provide an annual scholarship, renewable for up to three consecutive years, for incoming freshmen or continuing students at U. T. Arlington.

3. U. T. Arlington: Acceptance of Gift from Petroleum Accountants Society of Fort Worth, Fort Worth, Texas, and Establishment of the Petroleum Accountants Society of Fort Worth Endowed Scholarship.--Upon recommendation of the Land and Investment Committee, the Board accepted a \$10,000 gift from the Petroleum Accountants Society of Fort Worth, Fort Worth, Texas, and established the Petroleum Accountants Society of Fort Worth Endowed Scholarship at The University of Texas at Arlington.

Income earned from the endowment will be used to award an annual scholarship of \$500 or more to a qualified student who is majoring in accounting and has completed at least fifteen semester hours at U. T. Arlington.

4. U. T. Austin: Acceptance of a Bequest from the Estate of Mrs. Elsie M. Clawson, Irving, Texas, and Establishment of the Earnest E. and Elsie M. Clawson Endowed Scholarship in Engineering in the College of Engineering.--Approval was granted to accept a \$25,000 bequest from the Estate of Mrs. Elsie M. Clawson, Irving, Texas, and to establish the Earnest E. and Elsie M. Clawson Endowed Scholarship in Engineering in the College of Engineering at The University of Texas at Austin.

Income earned from the endowment will be used to award scholarships to graduate or undergraduate students in the College of Engineering.

5. U. T. Austin: Acceptance of Transfer of Funds and Establishment of the Geology Foundation Advisory Council Special Maintenance Fund and the Geology Foundation Advisory Council Special Operations Fund in the College of Natural Sciences.--The Land and Investment Committee recommended and the Board accepted a \$50,640 transfer of previously reported gifts from current restricted funds and established the Geology Foundation Advisory Council Special Maintenance Fund with \$32,140 and the Geology Foundation Advisory Council Special Operations Fund with \$18,500 in the Department of Geological Sciences of the College of Natural Sciences at The University of Texas at Austin.

Income earned from the endowments will be used for the maintenance of existing equipment and the purchase of new equipment as needed by the Department of Geological Sciences.

6. U. T. Austin: Acceptance of Transfer of Funds and Establishment of The Ray Hall Advertising Fellowship in the College of Communication.--The Board accepted a \$12,000 transfer of previously reported gifts from current restricted funds and established The Ray Hall Advertising Fellowship in the Department of Advertising, College of Communication, at The University of Texas at Austin.

Income earned from the endowment will be used to award one fellowship annually to a graduate student in the Department of Advertising who intends to work for an advertising agency.

7. U. T. Austin: Establishment of The Ray and Kay Bailey Hutchison Scholarship in the School of Law.--At the request of the Law School Foundation (an external foundation), The Ray and Kay Bailey Hutchison Scholarship was established in the School of Law at The University of Texas at Austin in accordance with the Regents' Rules and Regulations. The funding for this scholarship (\$10,000) will be retained by the Law School Foundation and will be administered per the agreement between the Foundation and the U. T. Board of Regents.

Income earned on the endowment will be used to assist female students with dependent children or students studying abroad.

8. U. T. Austin: Acceptance of Gift from Mr. Myron G. Kuhlman, Beaumont, Texas, and Establishment of the Robert P. Kuhlman Endowment in the College of Engineering.--The Board accepted a \$10,000 gift from Mr. Myron G. Kuhlman, Beaumont, Texas, and established the Robert P. Kuhlman Endowment in the College of Engineering at The University of Texas at Austin.

Income earned from the endowment will be used to furnish and maintain facilities for functions of the designated room to be named in honor of the donor's son.

See related item on Page 37.

9. U. T. Austin: Acceptance of Gift from Mobil Corporation, New York, New York, and Pledge from Mobil Foundation, Inc., New York, New York, and Establishment of the Alex H. Massad Endowed Presidential Scholarship Fund in the College of Engineering.--Approval was given to accept a \$9,147 gift from the Mobil Corporation and a \$16,744 pledge from the Mobil Foundation, Inc., both of New York, New York, for a total of \$25,891 and to establish the Alex H. Massad Endowed Presidential Scholarship Fund in the Department of Petroleum Engineering, College of Engineering, at The University of Texas at Austin.

Income from the endowment will be used to award scholarships to graduate and undergraduate students in the Department of Petroleum Engineering in good academic standing and displaying financial need.

10. U. T. Austin: Acceptance of Gifts and Pledges from Various Donors and Establishment of the C. E. Rowe Memorial Fund Endowment in the College of Engineering.--Upon recommendation of the Land and Investment Committee, the Board accepted \$8,610 in gifts and \$1,440 in pledges for a total of \$10,050 from various donors and established the C. E. Rowe Memorial Fund Endowment in the College of Engineering at The University of Texas at Austin.

Income earned from the endowment will be used to maintain the facilities of the room and to house memorabilia of the late Professor Charles E. Rowe and his associates.

See related item on Page 37 .

11. U. T. Austin: Acceptance of Gifts from Various Donors and Pledge from Radian Corporation, Austin, Texas, and Establishment of the A. E. Skinner Chemistry Library Endowment Fund in the General Libraries.--Authorization was granted to accept gifts of \$4,065 from various donors and a \$2,500 gift and \$7,500 pledge, payable over the next three years, from Radian Corporation, Austin, Texas, for a total of \$14,065 and to establish the A. E. Skinner Chemistry Library Endowment Fund in the General Libraries at The University of Texas at Austin.

Income earned from the endowment will be used to enhance the mission, collections and services of the Chemistry Library.

12. U. T. Austin: Acceptance of Gift from Dr. Archie W. Straiton, Austin, Texas, and Establishment of the Esther M. Straiton Endowed Presidential Scholarship in Electrical and Computer Engineering in the College of Engineering.--The Land and Investment Committee recommended and the Board accepted a \$25,000 gift from Dr. Archie W. Straiton, Austin, Texas, and established the Esther M. Straiton Endowed Presidential Scholarship in Electrical and Computer Engineering in the Department of Electrical and Computer Engineering, College of Engineering, at The University of Texas at Austin.

Income earned from the endowment will be used to attract and recognize outstanding and worthy students in electrical and computer engineering.

13. U. T. Austin: Acceptance of Gift of Securities from Mrs. Laura Tod, Granite Shoals, Texas, and Establishment of the Joe L. Tod Chemical Engineering Scholarship in the College of Engineering.--The Board accepted a gift of 1,000 shares of Dow Chemical common stock valued at \$58,187.50 from Mrs. Laura Tod, Granite Shoals, Texas, and her children and established the Joe L. Tod Chemical Engineering Scholarship in the Department of Chemical Engineering, College of Engineering, at The University of Texas at Austin.

Income earned from the endowment will be used to award scholarships to two or more students in chemical engineering with the amounts of the awards dependent on the student's academic performance and financial need.

14. U. T. Austin: Susman, Godfrey & McGowan Centennial Litigation Lectureship in the School of Law - Approval to Allocate Matching Funds from the Sheffield Challenge Fund Endowment Program and to Redesignate as the Susman, Godfrey & McGowan Endowed Moot Court Competition.--At the request of the Law School Foundation (an external foundation), the Susman, Godfrey & McGowan Centennial Litigation Lectureship in the School of Law was redesignated as the Susman, Godfrey & McGowan Endowed Moot Court Competition at The University of Texas at Austin.

Further, approval was given to allocate \$20,000 in matching funds from the Sheffield Challenge Fund Endowment Program for addition to the endowment. Funds in the amount of \$60,000 will be held and administered by The University of Texas Law School Foundation.

Matching funds in the amount of \$20,000 from The Regents' Endowed Teachers and Scholars Program that were allocated to increase the endowment will be returned to the unallocated pool since the redesignated endowment is no longer a teaching endowment.

15. U. T. Austin: G. Rollie White Centennial Faculty Fellowship in Law and the Emily Marshall Wulff Centennial Faculty Fellowship Both in the School of Law - Redesignation as the G. Rollie White Centennial Research Professorship in Law and Allocation of Matching Funds from the Sheffield Challenge Fund Endowment Program and Redesignation as the Fred and Emily Marshall Wulff Centennial Faculty Fellowship in Law.--At the request of the Law School Foundation (an external foundation), the G. Rollie White Centennial Faculty Fellowship in Law in the School of Law at The University of Texas at Austin was redesignated as the G. Rollie White Centennial Research Professorship in Law.

Further, approval was given to allocate \$50,000 in matching funds from the Sheffield Challenge Fund Endowment Program for addition to the Emily Marshall Wulff Centennial Faculty Fellowship in the School of Law and to redesignate as the Fred and Emily Marshall Wulff Centennial Faculty Fellowship in Law.

Funds in the amount of \$50,000 will be held and administered by The University of Texas Law School Foundation to support the G. Rollie White Centennial Research Professorship.

16. U. T. Dallas: Jonelle and Bryce Jordan Music Scholarship Fund - Redesignation as the Jonelle and Bryce Jordan Scholarship in the Arts.--Approval was given to redesignate the Jonelle and Bryce Jordan Music Scholarship Fund at The University of Texas at Dallas as the Jonelle and Bryce Jordan Scholarship in the Arts.

This redesignation was made in accordance with a change in the curriculum in the School of Arts and Humanities at U. T. Dallas which was approved at the December 1985 meeting of the U. T. Board of Regents and the July 1986 meeting of the Coordinating Board whereby ten authorized degree programs, including the Bachelor of Arts in Music, were replaced with four interdisciplinary degree programs.

17. U. T. El Paso: Acceptance of Gift from Dickshire Coors Distributing Company, El Paso, Texas, and Establishment of the Coors Veterans Memorial Scholarship Fund.--Upon recommendation of the Land and Investment Committee, the Board accepted an \$11,027.08 gift from the Dickshire Coors Distributing Company, El Paso, Texas, and established the Coors Veterans Memorial Scholarship Fund at The University of Texas at El Paso.

Income earned from the endowment will be used to award two or more annual scholarships per academic year to qualified students in accordance with the Coors Veterans Memorial Scholarship Program. Recipients must be dependents of American service personnel with at least 180 days of active duty who were honorably discharged, killed in action or in the line of duty, or missing in action.

18. U. T. El Paso: Acceptance of Gift from The University of Texas Foundation, Inc., Austin, Texas, and Establishment of the El Paso Community Professorship in Accounting and Eligibility for Matching Funds Under the Texas Eminent Scholars Program.--The Board, upon recommendation of the Land and Investment Committee, accepted a \$100,000 gift from The University of Texas Foundation, Inc., Austin, Texas, and established the El Paso Community Professorship in Accounting at The University of Texas at El Paso.

Further, the actual income earned on the \$100,000 gift will be certified for matching under the Texas Eminent Scholars Program as set out in Chapter 51, Subchapter I of the Texas Education Code.

This professorship will be used to attract and/or retain the highest quality academicians possible for the Department of Accounting. The holder of the professorship will be a member of the faculty of the College of Business and a scholar and teacher of national reputation.

19. U. T. San Antonio: Kenneth D. and Ada Muller Scholarship Fund - Acceptance of an Undivided 2-1/2% Interest in Seven Lots of Townsend Crossing Located in Kendall County, Texas, from M.S.F. Construction Company, Boerne, Texas; Authorization for the Office of Asset Management to Negotiate Sale of Property; and Authorization for the Executive Vice Chancellor for Asset Management to Execute Documents Pertaining to the Sale.--The Board accepted an undivided 2-1/2% interest in seven lots within an area of 17.222 acres described as Lots One, Two, Four, Five, Six, Seven and Eight of Townsend Crossing, Kendall County, Texas, from M.S.F. Construction Company, Boerne, Texas, for the benefit of The University of Texas at San Antonio. Based on appraisals provided by the donors, the value of the entire tract of land is \$1,463,000. U. T. San Antonio's share of that amount is, therefore, estimated to be \$36,575.

Further, the Office of Asset Management was authorized to negotiate the sale of this interest at fair market value and the Executive Vice Chancellor for Asset Management was authorized to execute all documents pertaining to the sale.

The proceeds of the sale will be used to fund the Kenneth D. and Ada Muller Scholarship Fund at U. T. San Antonio.

20. U. T. Health Science Center - Dallas: Approval to Accept Gift from the Board of Trustees of The Lanham Croley Foundation, Dallas, Texas, and to Establish The Lanham and Edythe Croley Cancer Research Fund.--Approval was given to accept a \$28,820.68 gift from the Board of Trustees of The Lanham Croley Foundation, Dallas, Texas, and to establish The Lanham and Edythe Croley Cancer Research Fund at The University of Texas Health Science Center at Dallas.

This gift resulted from an action by the Board of Trustees to dissolve the Foundation and distribute all of its assets and accumulated income for "cancer research, treatment of cancer, or any other activity relating to the discovery of a cure for or treatment of every form of cancer, or, if a cure for cancer is discovered, then for such other medical research projects as the President of the U. T. Health Science Center - Dallas, or his successor, may determine."

21. U. T. Medical Branch - Galveston: Acceptance of Gifts from Various Donors and Establishment of the Robert C. Overton, Jr., M.D. Scholarship Fund.--The Land and Investment Committee recommended and the Board accepted gifts totaling \$10,000 from family members, friends, and colleagues and established the Robert C. Overton, Jr., M.D. Scholarship Fund at The University of Texas Medical Branch at Galveston.

Income earned from this endowment will be used to support medical scholarships with specific selection criteria to be established at a later date.

22. U. T. Health Science Center - Houston: Acceptance of Grant from the John S. Dunn Research Foundation, Houston, Texas, and Matching Pledge from the U. T. Medical School - Houston Department of Surgery MSRDP Funds and Establishment of the Dr. Thomas D. Cronin Chair in Plastic Surgery and Eligibility for Matching Funds Under the Texas Eminent Scholars Program.--The Board, upon recommendation of the Land and Investment Committee, accepted a grant of \$250,000, payable over the next five years, from the John S. Dunn Research Foundation, Houston, Texas, and a matching pledge from the U. T. Medical School - Houston Department of Surgery MSRDP funds, for a total endowment of \$500,000 and established the Dr. Thomas D. Cronin Chair in Plastic Surgery at The University of Texas Health Science Center at Houston.

Further, the actual income earned on the \$250,000 gift will be certified for matching under the Texas Eminent Scholars Program as set out in Chapter 51, Subchapter I of the Texas Education Code.

Income earned from the endowment will be used to provide funding for a faculty position for an active, effective scientist of good standing, thus further increasing the level of patient care in plastic surgery in the State of Texas. If, at any time, the accumulated and unspent income exceeds \$200,000, one-half of that amount must be added to the principal sum of the endowment.

23. U. T. Health Science Center - Houston: Acceptance of Pledge from the President's Development Fund and Establishment of the Robert Greer Professorship in the Biomedical Sciences.--The Board accepted a \$100,000 pledge, payable over the next two years, from the President's Development Fund and established the Robert Greer Professorship in the Biomedical Sciences at The University of Texas Health Science Center at Houston.

See Page 53 for appointment of initial holder to this Professorship.

24. U. T. Health Science Center - Houston: Acceptance of Gifts and Pledges from Members of the Alumni Association and Establishment of the UTDB Alumni Association Endowment Fund.--The Board, upon recommendation of the Land and Investment Committee, accepted gifts of \$158,790 and pledges of \$341,210, payable over five years, for a total endowment of \$500,000 from members of the Alumni Association of the U. T. Dental Branch - Houston and established the UTDB Alumni Association Endowment Fund at The University of Texas Health Science Center at Houston.

Income earned from the endowment will be used to support the further development of education, scientific research, community interests, and other worthy projects as determined by the Board of Directors of the Endowment Fund.

25. U. T. Cancer Center: Approval to Accept Bequest from the Estate of Lewis Newton Thomas, Charleston, West Virginia, and to Establish the L. Newton Thomas Research Fund.-- Approval was given to accept a \$300,000 bequest from the Estate of Lewis Newton Thomas, Charleston, West Virginia, and to establish the L. Newton Thomas Research Fund at The University of Texas System Cancer Center.

Income earned from the endowment will be used for research into the causes and cures for cancer. A specific departmental assignment for the fund will be made at a later date.

B. REAL ESTATE MATTERS

1. U. T. Arlington: Estate of Mary Elizabeth Earle Aucutt (C. J. and Clara Earle Student Scholarship and/or Loan Fund) - Report of Sale of Real Property Located at 6528 Banbury Drive, Lot 7, Block 5, Sherwood Forest Addition, Forest Hill, Tarrant County, Texas, to Mr. and Mrs. John E. Castleman, Fort Worth, Texas.--

It was reported that the gift of real property located at 6528 Banbury Drive, Lot 7, Block 5, Sherwood Forest Addition, Forest Hill, Tarrant County, Texas (Estate of Mary Elizabeth Earle Aucutt - The University of Texas at Arlington), had been sold to Mr. and Mrs. John E. Castleman, Fort Worth, Texas, for \$50,500 less expenses and commission for a net amount of \$46,219.21. A 6% sales commission was paid to Century 21/Herman Boswell Inc. for this transaction. The appraised market value was \$49,000.

The net proceeds from the sale will be added to the C. J. and Clara Earle Student Scholarship and/or Loan Fund at U. T. Arlington.

2. U. T. Arlington: Dan Gould, Sr., Center for Real Estate and Urban Development - Report of Sale of Real Property Located at 7602 Cranford Court, a 2.2 Acre Tract of Land Out of the Temple O. Harris Survey, Abstract No. 645, Tarrant County, Texas, to Mr. and Mrs. Joe S. Anderson, Arlington, Texas.--The Office of the Chancellor reported that the gift of real property located at 7602 Cranford Court, a 2.2 acre tract of land out of the Temple O. Harris Survey, Abstract No. 645, Tarrant County, Texas (Dan Gould, Sr., Center for Real Estate and Urban Development - The University of Texas at Arlington), had been sold to Mr. and Mrs. Joe S. Anderson, Arlington, Texas, for \$54,000 less settlement costs of \$538 for a net amount of \$53,462. The appraised market value was \$52,500.

The net proceeds from the sale will be used to support the Dan Gould, Sr., Center for Real Estate and Urban Development at U. T. Arlington.

3. U. T. Austin: Estate of Mrs. Susan Taylor McDaniel - Report of Sale of Real Property Being Lots One Through Five of Block One, and Lots One Through Six of Block Two, Broadmoor Park No. 3, Corpus Christi, Nueces County, Texas, to Mr. and Mrs. Eligio Martinez, Corpus Christi, Texas.--The Board received a report from the Office of the Chancellor that the gift of real property described as Lots One, Two, Three, Four and Five, Block One, and Lots One, Two, Three, Four, Five and Six, Block Two, Broadmoor Park No. 3, a Subdivision of the City of

Corpus Christi, Nueces County, Texas (Estate of Mrs. Susan Taylor McDaniel - The University of Texas at Austin), had been sold to Mr. and Mrs. Eligio Martinez, Corpus Christi, Texas, for \$358,000 less settlement costs of \$930 for a net amount of \$357,070. No commission was paid for this transaction. At the time the gift was accepted, the appraised market value was between \$356,000 and \$365,000.

The net proceeds from the sale will be used to fund the Susan Taylor McDaniel Regents Professorship in Creative Writing in the College of Liberal Arts at U. T. Austin.

Further, matching funds in the amount of \$7,930 from The Regents' Endowed Teachers and Scholars Program that were allocated to establish a second Susan Taylor McDaniel Regents Professorship in Creative Writing in the College of Liberal Arts will be returned to the unallocated pool since the sale proceeds are less than the allocated amount.

4. U. T. El Paso: Lucille T. Stevens Estate - Approval to Lease Property Located at 200 North Mesa, El Paso, Texas, to Walgreens, Deerfield, Illinois.--Upon recommendation of the Land and Investment Committee, the Board approved a lease covering the land and improvements at 200 North Mesa, El Paso, Texas, to Walgreens, Deerfield, Illinois. This property is held in trust as part of the Lucille T. Stevens Estate for The University of Texas at El Paso.

Walgreens has agreed to extend its existing lease through the year 2011 with a rental of \$36,000 per year plus 2-1/2% of sales in excess of \$1,200,000 per year effective January 1, 1987, or upon completion of remodeling, whichever comes earlier. The base rent will be adjusted at the end of 1996, 2001, and 2006 based on sales. Walgreens will pay all insurance, ad valorem taxes and the cost of remodeling. U. T. El Paso will pay a 5% real estate commission for the first 15 years. The contract contains provisions for cancellation at the end of the fifteenth and twentieth years.

The building at 200 North Mesa Street was leased by the U. T. Board of Regents to Walgreens for 30 years ending May 31, 1995, by lease dated May 12, 1965. Under the terms of the current lease, Walgreens pays \$26,000 per year plus percentage rentals equal to 2-1/2% of annual sales over \$866,667 and all insurance on the premises. U. T. El Paso pays all ad valorem taxes and a 5% real estate commission. An attempt to extend the term and add additional space to the lease was authorized by the U. T. Board of Regents in June 1984, but a final agreement with Walgreens never materialized.

III. INTELLECTUAL PROPERTY

U. T. Health Science Center - Houston: Approval to Designate Mr. Michael E. Patrick, Executive Vice Chancellor for Asset Management, as the U. T. Board of Regents' Representative on the LifeCell Corporation Board of Directors, The Woodlands, Texas.--At its June 1986 meeting, the U. T. Board of Regents authorized a License Agreement granting to LifeCell Corporation ("LifeCell"), The Woodlands, Texas, exclusive rights to commercially develop The Linner Process, a cryopreparation technique developed by Drs. John Linner and Stephen A. Livesey of The University of Texas Health Science Center at Houston. In consideration of the right to use the name "Board of Regents, The University of Texas" and "The University of Texas Health Science Center - Houston" to enforce and protect its license rights, LifeCell agreed to:

- a. Issue to the U. T. Board of Regents 650,000 shares of its common stock, \$.001 par value
- b. Reserve a seat on its board of directors for a designee selected by the U. T. Board of Regents, until the closing of the first public offering of equity securities by LifeCell.

In accordance therewith and upon recommendation of the Land and Investment Committee, the Board designated Mr. Michael E. Patrick, Executive Vice Chancellor for Asset Management, as the Regental representative on the LifeCell Corporation Board of Directors, The Woodlands, Texas.

Exercise of its option to designate a representative will enable the Board to protect its interests through participation in the overall management of LifeCell.

ITEMS FOR THE RECORD

1. U. T. System: Report of Degree Programs and Academic Requests Approved by the U. T. Board of Regents and Submitted to the Coordinating Board from September 1, 1985 to August 31, 1986.--In order that the permanent records will accurately reflect the current status of those degree programs and academic requests of the component institutions of The University of Texas System which have been submitted to the Coordinating Board, Texas College and University System, the following report for the period September 1, 1985 to August 31, 1986, is herewith submitted for the record by the Office of the Chancellor:
 - a. Degree Programs and Organizational Changes Approved by the Coordinating Board for Implementation
 - U. T. Dallas

Reorganization of the School of Arts and Humanities
 - U. T. Permian Basin

Restructure of the Academic Administrative Organization
 - U. T. San Antonio

M.S. in Geology
 - U. T. Medical Branch - Galveston

M.S. in Allied Health (Changed from M.A. to M.S. per instructions from Coordinating Board)
 - U. T. Health Science Center - San Antonio

Certificate Programs for Basic and Advanced Emergency Medical Technicians
 - b. Requests Approved by the U. T. Board of Regents and Sent to the Coordinating Board but Later Withdrawn by System Institutions
 - U. T. Arlington

Master of Fine Arts in Studio Art
Master of Music
Ph.D. in Urban Studies
 - U. T. Austin

Master of Arts in Comparative Literature
Ph.D. in Slavic Language and Literature
 - U. T. Dallas

M.A. in American Studies

- c. Requests Approved by the U. T. Board of Regents and Sent to the Coordinating Board but Deferred at the Request of System Institutions

U. T. Tyler

M.S. in Nursing

- d. Requests Approved by the U. T. Board of Regents and Pending with the Coordinating Board

U. T. Arlington

M.S. in Information Systems
M.S. in Marketing Research
Master of Education in Teaching

U. T. Austin

Master of Arts in Asian Studies
Ph.D. in Child Development and Family Relationships

U. T. El Paso

Master of Arts in Art

U. T. Permian Basin

Master of Arts in Psychology

U. T. Health Science Center - San Antonio

Reinstitute M.S. and Ph.D. Degrees in Radiological Sciences

2. U. T. SYSTEM - REPORT OF MEMBERSHIP OR STATUS OF ORGANIZATION FOR ALL COMPONENT DEVELOPMENT BOARDS AND ADVISORY COUNCILS EFFECTIVE SEPTEMBER 1, 1986:
- (1) U. T. Arlington: Development Board, Graduate School of Social Work, School of Architecture and Environmental Design, College of Business Administration, College of Engineering and School of Nursing Advisory Councils;
 - (2) U. T. Austin: Development Board, School of Architecture Foundation, College of Business Administration Foundation, College of Communication Foundation, College of Education Foundation, College of Engineering Foundation, College of Fine Arts Foundation, Geology Foundation, Graduate School Foundation, Graduate School of Library and Information Science Foundation, College of Liberal Arts Foundation, College of Natural Sciences Foundation, Pharmaceutical Foundation, School of Social Work Foundation, Marine Science Institute, McDonald Observatory and Department of Astronomy Board of Visitors, School of Nursing and Texas Union Advisory Councils;
 - (3) U. T. Dallas: Development Board, School of Management, Callier Center for Communication Disorders, School of General Studies, School of Arts and Humanities and School of Social Sciences Advisory Councils;
 - (4) U. T. El Paso: Development Board;
 - (5) U. T. Permian Basin: Development Board;
 - (6) U. T. San Antonio: Development Board and College of Business Advisory Council;
 - (7) U. T. Tyler: Development Board;
 - (8) U. T. Institute of Texan Cultures - San Antonio: Development Board;
 - (9) U. T. Health Science Center - Dallas: Development Board;
 - (10) U. T. Medical Branch - Galveston: Development Board, School of Allied Health Sciences and School of Nursing Advisory Councils;
 - (11) U. T. Health Science Center - Houston: Development Board and Speech and Hearing Institute Advisory Council;
 - (12) U. T. Health Science Center - San Antonio: Development Board, Medical School and Nursing School Advisory Councils;
 - (13) U. T. Cancer Center: University Cancer Foundation Board of Visitors; and
 - (14) U. T. Health Center - Tyler: Development Board.--
- Unless otherwise indicated, membership was authorized and nominees approved by the U. T. Board of Regents on June 5, 1986, to the following development boards and advisory councils. The Administration notified the individuals nominated and reported that the following had accepted appointments. The full membership of each organization is set out below with the new appointments indicated by an asterisk and reappointments by double asterisks.

1. The University of Texas at Arlington

Development Board.--Authorized Membership 25:

	<u>Term Expires</u>
** Mr. E. T. Allen, Arlington	1989
Mr. Robert Alpert, Dallas	1987
** Mr. Bill Bowerman, Arlington	1989
Dr. Malcolm K. Brachman (Ph.D.), Dallas	1987
Mr. James T. Brown, Grand Prairie	1988
Mr. Gary Cox, Arlington	1987
Mr. Tom Cravens, Arlington	1988
Mr. Jenkins Garrett, Fort Worth	1987
Mr. Preston M. Geren, Jr., Fort Worth	1987
** Mr. Richard Greene, Arlington	1989
Mr. Robert L. Kirk, Dallas	1988
Mr. Joe Martin, Jr., Arlington	1987

** Mr. C. W. Mayfield, Arlington	1989
Mr. Nathan Robinett, Arlington	1987
Mr. Joe Russell, Dallas	1987
T. L. Shields, M.D., Fort Worth	1987
** Mr. Danny Smith, Arlington	1989
Mr. Lee Smith, Dallas	1987
** Mr. John T. Stuart III, Dallas	1989
Mr. Wesley M. Taylor III, Fort Worth	1987

Unfilled Term	(To be determined as filled)
Unfilled Term	(To be determined as filled)
Unfilled Term	(To be determined as filled)
Unfilled Term	(To be determined as filled)
Unfilled Term	(To be determined as filled)

Graduate School of Social Work Advisory Council.--
Authorized Membership 26:

	<u>Term Expires</u>
Mr. Kenneth S. Baum, Fort Worth	1988
Mrs. Josephine Beckwith, Fort Worth	1988
Mrs. Geraldine Beer, Dallas	1988
Mr. Gerson B. Bernstein, Fort Worth	1987
Dr. Malcolm Brachman (Ph.D.), Dallas	1988
Mr. James Chambers III, Dallas	1988
Mr. Jack D. Downey, Dallas/Fort Worth	1987
Mr. Roy Dulak, Dallas	1988
Mrs. Billie Farrar, Arlington	1988
Mrs. Betty Jo Hay, Dallas	1988
Mrs. Eugene Jericho, Dallas	1988
Rabbi Ralph Mecklenberger, Fort Worth	1988
Mrs. Tommy G. Mercer, Fort Worth	1988
Ms. Alann Sampson, Fort Worth	1988
Mr. Ralph Shannon, Roanoke	1987
* Mr. Earl Shields, Fort Worth	1989
Mr. Harry Tanner, Dallas	1987
* Mr. John Widner, Fort Worth	1989
Mr. Glenn Wilkins, Fort Worth	1988
Unfilled Term	1987
Unfilled Term	1988
Unfilled Term	1989

School of Architecture and Environmental Design Advisory
Council.--Authorized Membership 27:

	<u>Term Expires</u>
** Mr. Bill Booziotis, FAIA, Dallas	1989
** Mr. David Braden, FAIA, Dallas	1989
Mr. David Browning, AIA, Dallas	1988
Mr. Hugh Cunningham, Dallas	1988
* Mr. Stuart Dawson, Dallas	1989
Mr. David Dillon, Dallas	1987
* Mr. Mark Dilworth, AIA, Dallas	1989
Mr. Tonny Foy, Fort Worth	1988
Mr. Ralph Hawkins, AIA, Dallas	1987
* Ms. Carol Hermanovski, Dallas	1989
* Mr. Richard Keating, FAIA, Houston	1989
Ms. Janet Kutner, Dallas	1987
Mr. Dirk Lohan, FAIA, Chicago	1988
Mr. Brooks Martin, FAIA, San Antonio	1987
* Mr. Lawrence Murphy, West Palm Beach, Florida	1989

Mr. Raymond Nasher, Dallas	1988
** Ms. Julia Ousley, Arlington	1989
Ms. Beverly Russell, New York, New York	1988
Mr. Stephen Sachs, AIA, Washington, D.C.	1988
* Mr. Gene Schrickel, Arlington	1987
Mr. Max Sullivan, Fort Worth	1988
* Mr. John Torti, Silver Spring, Maryland	1988
Mr. James Wiley, FAIA, Dallas	1988
Ms. Beverly Willis, FAIA, San Francisco, California	1988
Mr. Thomas Woodward, FAIA, Dallas	1987
** Mr. Emery O. Young, Jr., AIA, Fort Worth	1989
Unfilled Term	1988

College of Business Administration Advisory Council.--
Authorized Membership 30:

	<u>Term Expires</u>
Mr. Robert F. Anderson, Fort Worth	1987
* Dr. William S. Banowsky (Ph.D.), Dallas	1987
Mr. Richard L. Buerkle, Arlington	1987
** Ms. Dianne Bynum, Dallas	1989
** Mrs. Virginia E. Cook, Dallas	1989
Mr. Gary D. Cox, Arlington	1988
** Mr. Raymond G. Dickerson, Fort Worth	1989
* Mr. Steve Dunn, Dallas	1989
** Mr. Joseph R. Ewen, Jr., Arlington	1989
* Mr. Richard Fogel, Dallas	1989
Mr. Robert W. Gerrard, Bedford	1987
* Mr. Harold H. Ginsburg, Dallas	1989
Mr. Burvin Hines, Arlington	1988
Mr. James E. Jack, Dallas	1987
** Mr. Thomas G. Lynch, Dallas	1989
* Mr. Glen Mason, Dallas	1987
* Mr. Frank C. McDowell, Dallas	1989
Mr. James B. Miller, Arlington	1988
Mr. J. Kent Millington, Fort Worth	1987
Mr. William C. Nelson, Dallas	1987
** Mr. David Newell, Fort Worth	1989
* Mr. James J. O'Brien, Fort Worth	1989
** Mr. Ronald L. Parrish, Fort Worth	1989
Mr. George B. Phillips, Arlington	1987
Mr. Michael A. Reilly, Arlington	1988
** Mr. Don C. Reynolds, Fort Worth	1989
Mr. E. H. Schollmaier, Fort Worth	1987
* Mr. Stephen P. Tacke, Fort Worth	1989
** Mr. Cary N. Vollintine, Fort Worth	1989
Mr. Mark J. Walsh, Dallas	1988

College of Engineering Advisory Council.--
Authorized Membership 26:

	<u>Term Expires</u>
** Mr. Charles A. Anderson, Fort Worth	1989
Mr. Luther E. Bartlett, Dallas	1987
Mr. Gerson Berman, Dallas	1988
Mr. W. H. Bowen, Jr., Dallas	1987
* Mr. Bruce Cole, San Angelo	1988
* Mr. Jan Collmer, Dallas	1988
** Mr. Joe C. Culp, Dallas	1989
* Mr. C. R. Farmer, Jr., Dallas	1988
** Dr. Felix Fenter (Ph.D.), Dallas	1989
Mr. Marvin Gearhart, Fort Worth	1988
Mr. Warren Green, Arlington	1987
Mr. Jack D. Greenwade, Houston	1987

Mr. Bill J. Harris, Dallas	1987
* Mr. William F. Hayes, Dallas	1988
** Mr. Charles Lynk, Fort Worth	1989
** Mr. Robert R. Lynn, Fort Worth	1989
* Mr. William G. Moore, Jr., Dallas	1989
Mr. James R. Nichols, Fort Worth	1987
Dr. John Patterson (Ph.D.), Fort Worth	1988
* Mr. Eric Ross, Richardson	1988
Mr. Joe Russell, Dallas	1987
Mr. Danny R. Smith, Arlington	1987
* Mr. Luke Smith, Arlington	1989
Mr. Paul V. Townley, Arlington	1987
* Mr. Roger Yandell, Fort Worth	1989
Unfilled Term	1987

School of Nursing Advisory Council.--
Authorized Membership 16:

	<u>Term Expires</u>
Mrs. Gordon Appleman, Fort Worth	1988
** Mr. Dave Bloxom, Sr., Fort Worth	1989
Mr. R. E. Cox III, Fort Worth	1988
Mrs. Frederick R. Daulton, Arlington	1987
** Mr. Dan Dipert, Arlington	1989
Mrs. Kirk W. Francis, San Antonio	1987
Mrs. Vera Harrington, Sulphur Springs	1987
Mr. Stan Hupfeld, Fort Worth	1988
Mr. Rex C. McRae, Arlington	1988
Preston Nash, M.D., Sweetwater	1988
Mrs. J. Clark Nowlin, Fort Worth	1987
** Mrs. Beverly Phillips, Marlin	1987
** Mrs. Byron Searcy, Fort Worth	1989
** Mr. Ron Smith, Fort Worth	1989
Mr. Bill Wagner, Bedford	1987
Unfilled Term	1989

2. The University of Texas at Austin

Development Board.--Authorized Membership 35:

	<u>Term Expires</u>
* Mr. Sam Barshop, San Antonio	1989
* Mrs. Joan Ragsdale Baskin, Midland	1989
Mrs. Perry R. Bass, Fort Worth	1988
** Senator Lloyd M. Bentsen, Jr., Washington, D.C.	1989
Mr. Glenn Biggs, San Antonio	1987
** Mr. C. Fred Chambers, Houston	1989
Mr. Marvin K. Collie, Houston	1988
* Mrs. Barbara Smith Conrad, New York, New York	1989
** Mr. B. W. Crain, Longview	1989
Mr. Jack Rust Crosby, Austin	1987
Mr. Franklin W. Denius, Austin	1988
Mr. Bob R. Dorsey, Austin	1988
* Mr. John W. Fainter, Jr., Austin	1989
** Dr. Peter T. Flawn (Ph.D.), Austin	1989
** Mr. Wales H. Madden, Jr., Amarillo	1989
Mrs. Eugene McDermott, Dallas	1987
Mrs. Beryl Buckley Milburn, Austin	Regent Representative
** Mr. James R. Moffett, New Orleans, Louisiana	1989
* Mr. James M. Moroney, Jr., Dallas	1989
Mr. Michael A. Myers, Dallas	1988
** Mr. Jon P. Newton, Austin	1989

* Mr. Wade Nowlin, Fort Worth	1989
Mr. B. D. Orgain, Beaumont	1987
Mr. Robert L. Parker, Sr., Tulsa, Oklahoma	1988
* Mr. James L. Powell, Fort McKavett	1989
* Mario Ramirez, M.D., Rio Grande City	1989
Mrs. John H. Rauscher, Jr., Dallas	1987
Mr. Benno C. Schmidt, New York, New York	1987
Mr. William H. Seay, Dallas	1987
Mr. Ralph Spence, Tyler	1988
** Mrs. Theodore H. Strauss, Dallas	1989
Mr. Jere W. Thompson, Dallas	1987
Mr. Joe C. Walter, Jr., Houston	1988
* Mrs. Betty Winn, McAllen	1989
Unfilled Term	1989

School of Architecture Foundation Advisory Council.--
Authorized Membership 39:

	<u>Term Expires</u>
Mr. Ray Bedford Bailey, Houston	1988
Mr. David Brown Barrow, Jr., Austin	1987
* Mr. Joseph W. Baxter, Houston	1987
Mr. William N. Bonham, Greenwich, Connecticut	1987
* Ms. Carolyn Brooks, Washington, D.C.	1988
* Mr. Douglas J. Cardinal, Ottawa, Ontario, Canada	1989
Mr. Ben Carpenter, Dallas	1987
* Mr. John Carpenter III, Dallas	1989
** Mrs. George Ann Carter, Fort Worth	1989
Mr. H. C. Carter, Austin	1987
Mr. Fred Webster Clarke III, New Haven, Connecticut	1987
Mr. Jack Rust Crosby, Austin	1988
* Mr. Bob J. Crow, Fort Worth	1989
Mr. Trammell S. Crow, Dallas	1988
** Mr. David Graeber, Austin	1989
* Mr. Stan Hass, Dallas	1989
Ms. Grace Jones, Salado	1988
* Mr. Richard Keating, Los Angeles, California	1989
** Mrs. Alfred Ashbrook King, Austin	1989
Mr. Richard S. Lillie, Austin	1987
* Mr. J. Scott Mann III, Austin	1987
* Mrs. Stanley Marcus, Dallas	1988
Mr. Donald B. McCrory, Houston	1988
Mr. Charles M. Morton, Austin	1987
Mr. J. Clark Nowlin, Fort Worth	1988
Mr. George M. Page, Austin	1988
* Mr. Boone Powell, San Antonio	1989
* Mr. James A. Reichert, Houston	1988
Mr. W. Overton Shelmire, Dallas	1987
Mr. John F. Skelton III, Dallas	1987
** Mr. Pat Y. Spillman, Dallas	1989
Mr. John C. Tatum, Jr., Dallas	1987
** Mr. Gifford Touchstone, Dallas	1989
Ms. Judith H. Urrutia, San Antonio	1987
Mr. Walter Vackar, Austin	1988
* Mr. Frank Welch, Dallas	1988
Unfilled Term	1988
Unfilled Term	1989
Unfilled Term	1989

College of Business Administration Foundation Advisory Council.--Authorized Membership 44:

	<u>Term Expires</u>
** Mr. Robert Alpert, Dallas	1989
** Mr. Stephen P. Ballantyne, San Antonio	1989
** Mr. Sam Barshop, San Antonio	1989
Mr. James L. Bayless, Jr., Washington, D.C.	1987
Dr. William Howard Beasley III (Ph.D.), Dallas	1988
** Mrs. Lucy Billingsley, Dallas	1989
Mr. Lewis E. Brazelton III, Houston	1987
Mr. Karl T. Butz, Jr., San Antonio	1988
Mr. Shelby H. Carter, Jr., Austin	1988
Mr. Comer J. Cottrell, Dallas	1987
Mr. Robert C. Drummond, New York, New York	1988
** Mr. Robert M. Duffey, Jr., Brownsville	1989
Mr. John Eulich, Dallas	1988
** Mr. John W. Fainter, Jr., Austin	1989
* Mr. James J. Forese, Armonk, New York	1989
** Mr. Edwin M. Gale, Beaumont	1989
Dr. Joseph M. Grant (Ph.D.), Fort Worth	1988
Mr. Robert G. Greer, Houston	1988
* Mr. Clifford J. Grum, Diboll	1989
** Mr. H. B. (Hank) Harkins, Alice	1989
Mr. Herbert D. Kelleher, Dallas	1988
* Mr. John B. Lahourcade, San Antonio	1989
Mr. Robert B. Lane, Austin	1988
** Mr. W. Baker McAdams, Houston	1989
** Mr. Michael A. Myers, Dallas	1989
Mr. Sheldon I. Oster, Houston	1987
** Mr. Robert F. Parker, Houston	1989
Mr. Joe N. Prothro, Wichita Falls	1987
Mr. B. M. (Mack) Rankin, Jr., Dallas	1987
* Mr. Glen E. Roney, McAllen	1989
Mr. Stanley D. Rosenberg, San Antonio	1987
Mr. Richard C. Seaver, Los Angeles, California	1987
Mr. Rex A. Sebastian, Dallas	1987
Mr. Ed A. Smith, Houston	1987
Mr. Ralph Spence, Tyler	1987
Mr. Donald J. Stone, Cincinnati, Ohio	1987
** Mr. Daniel B. Stuart, Dallas	1989
Mr. John T. Stuart III, Dallas	1987
** Mr. Jack G. Taylor, Austin	1989
Mr. Charles S. Teeple IV, Austin	1987
Mr. Ralph Thomas, Houston	1987
** Mr. Joe C. Thompson, Jr., Dallas	1989
Mr. Ralph E. Velasco, Jr., San Antonio	1987
Mr. George S. Watson, Dallas	1987

College of Communication Foundation Advisory Council.--Authorized Membership 35:

	<u>Term Expires</u>
Sr. Horacio Aguirre, Miami, Florida	1987
Mr. Fred V. Barbee, Jr., El Campo	1987
** Mr. James K. Batten, Miami, Florida	1989
** Mr. Frank A. Bennack, Jr., New York, New York	1989
Mr. Oscar Price Bobbitt, Austin	1987
Mr. George E. Christian, Austin	1987
Mr. Jack Rust Crosby, Austin	1988
** Mr. H. J. (Jerry) Dalton, Jr., Dallas	1989
* Mr. Richard Fizdale, Chicago, Illinois	1989
Mr. Jerry Friedheim, Washington, D.C.	1988
Mr. Wendell Harris, Dallas	1988
* Mr. William J. Hindman, Dallas	1989
Mrs. Karen Elliott House, New York, New York	1988

Mr. Joseph T. Jerkins, Austin	1987
Mr. Robert L. Johnson, Washington, D.C.	1987
* Mr. Ronald Johnson, Houston	1989
Lic. Alejandro Junco, Monterrey, N.L., Mexico	1987
Mr. Gerald M. Levin, New York, New York	1988
Mr. Julian R. Levine, Redondo Beach, California	1988
Mr. Michael R. Levy, Austin	1988
Mr. Robert G. Marbut, San Antonio	1987
Mrs. Sue Brandt McBee, Austin	1987
Mr. Jack E. Nettles, Pittsburgh, Pennsylvania	1988
Sr. Emilio Nicolas, San Antonio	1987
* Mr. Burl Osborne, Dallas	1989
Ms. Laurey Peat, Dallas	1988
** Mr. Arthur Denny Scott, Pittsburgh, Pennsylvania	1989
Mr. Jay Smith, Austin	1988
Mr. Neal Spelce, Austin	1988
** Mr. Vincent E. Spezzano, Rochester, New York	1989
Mr. Pickard E. Wagner, Osprey, Florida	1987
** Mr. George Watson, Washington, D.C.	1989
Ms. Elizabeth L. Young, Washington, D.C.	1988
** Mr. Michael A. Zinberg, Beverly Hills, California	1989
Unfilled Term	1989

College of Education Foundation Advisory Council.--
Authorized Membership 31:

	<u>Term Expires</u>
** Mrs. Ada C. Anderson, Austin	1989
Mr. Ralph A. Anderson, Jr., Houston	1987
Mrs. Dorothy C. Ashby, Houston	1988
Mr. Jay Barnes, Austin	1988
** Mr. Raul A. Besteiro, Brownsville	1989
Mr. William H. Bingham, Austin	1988
Dr. C. C. Colvert (Ph.D.), Austin	1988
** Dr. Eli Douglas (Ph.D.), Garland	1989
Mrs. Anita L. Flynn, Houston	1988
** Mrs. Louise G. Spence Griffeth, Dallas	1989
** Mr. M. K. Hage, Jr., Austin	1989
** Mrs. John L. Hill, Austin	1989
Mr. Ruben E. Hinojosa, Mercedes	1987
** Mrs. Patricia E. Bell Hunter, Austin	1989
Ms. Carol Ikard, El Paso	1987
Mr. Raymond A. Lee, Austin	1988
Mrs. Mollie B. Maresh, Houston	1987
** Mrs. Anne Rogers Mauzy, Dallas	1989
** Mrs. Ann C. Meier, Hurst	1989
Mrs. Hazel Jane Clements Monday, Huntsville	1988
Mrs. Catherine Parker, Tulsa, Oklahoma	1987
Mrs. Melinda Perrin, Houston	1988
Mrs. William H. Seay, Dallas	1988
** Mrs. Sybil Seidel, Dallas	1989
* Mr. Peter Suarez, Austin	1988
Dr. Gordon K. Teal (Ph.D.), Dallas	1987
Mrs. Jo Alice Tomforde, Houston	1987
** Mrs. Robert Wilkes, Austin	1989
Mrs. Carolyn Josey Young, Houston	1987
Unfilled Term	1988
Unfilled Term	1989

College of Engineering Foundation Advisory Council.--
Authorized Membership 45:

	<u>Term Expires</u>
Mr. James R. Adams, Dallas	1988
Dr. Nasser I. Al-Rashid (Ph.D.), Houston	1987
* Mr. Charles A. Anderson, Fort Worth	1989
* Mr. J. E. Barnes, Tulsa, Oklahoma	1989
Mr. V. G. Beghini, Houston	1988
Mr. Kent M. Black, Dallas	1988
Mr. H. O. Boswell, Chicago, Illinois	1987
Mr. W. Jack Bowen, Houston	1988
* Mr. Earl N. Brasfield, St. Louis, Missouri	1989
* Dr. E. Oran Brigham, Jr. (Ph.D.), Santa Clara, California	1989
Mr. Ralph F. Cox, Fort Worth	1988
* Mr. Raymond V. Cruce, Houston	1989
* Mr. Malcolm R. Currie, Los Angeles, California	1989
* Dr. Maxime A. Faget (Ph.D.), Webster	1989
* Mr. Jerry Farrington, Dallas	1989
** Mr. Bennie L. Franks, Dallas	1989
Mr. John H. Garner, Corpus Christi	1988
Mr. Marvin Gearhart, Fort Worth	1987
Mr. William R. Goff, Dallas	1988
* Mr. E. J. Grivetti, Houston	1989
** Mr. Henry Groppe, Houston	1989
** Mr. Arthur H. Hausman, Redwood City, California	1989
* Mr. Dennis R. Hendrix, Houston	1989
Mr. David A. Hentschel, Tulsa, Oklahoma	1988
** Mr. Jack H. Herring, Austin	1989
Mr. Edwin J. Hess, Florham Park, New Jersey	1987
Mr. Richard J. Howe, Houston	1988
** Admiral Bobby R. Inman, Austin	1989
Mr. J. L. Jackson, Jr., Dallas	1988
Mr. James R. Lightner, Richardson	1988
Mr. David D. Lybarger, Houston	1987
** Mr. Robert L. Marwill, Irving	1989
Mr. Robert R. McCall, Houston	1987
* Mr. James A. Middleton, Dallas	1989
Mr. Robert N. Miller, Los Angeles, California	1988
Mr. William G. Moore, Jr., Dallas	1988
Mr. John J. Murphy, Dallas	1987
Mr. C. Wayne Nance, Houston	1987
Mr. Peter O'Donnell, Jr., Dallas	1988
Mr. Bob G. Perry, Ridgefield, Connecticut	1987
Mr. James J. Renier, Minneapolis, Minnesota	1987
** Mr. Liston M. Rice, Jr., Dallas	1989
Mr. George Scalise, Sunnyvale, California	1988
Mr. Charles M. Simmons, Fort Worth	1987
* Mr. Bill M. Thompson, Bartlesville, Oklahoma	1989

College of Fine Arts Foundation Advisory Council.--
Authorized Membership 35:

	<u>Term Expires</u>
Mrs. A. L. Ballard, Jr., Houston	1988
** Mrs. Joan Ragsdale Baskin, Midland	1989
** Mrs. Al Biedenharn, San Antonio	1989
Mrs. Elizabeth B. Blake, Dallas	1987
** Mrs. James R. Blake, Fort Worth	1989
* Mrs. Phil Bolin, Wichita Falls	1989
Mr. W. Jack Bowen, Houston	1988
** Mrs. James Brennand, El Paso	1989
Mrs. Marietta Moody Brooks, Austin	1987
Mrs. Roy Butler, Austin	1987
Ms. Laura Carpenter, Dallas	1987

Mr. Charles D. Clark, McAllen	1987
* Ms. Barbara Smith Conrad, New York, New York	1989
** Mrs. Jack Rust Crosby, Austin	1989
Mr. Bob R. Dorsey, Austin	1987
Mrs. Walter L. Foxworth II, Dallas	1988
* Mrs. Harvey Herd, Midland	1988
Miss Ann Holmes, Houston	1987
Mrs. Benjamin Dean Holt, Corpus Christi	1987
Mr. J. Willis Johnson, San Angelo	1987
Mr. Alfred A. King, Austin	1988
Mrs. Amy Freeman Lee, San Antonio	1987
Mrs. Michael R. Levy, Austin	1987
Mr. Meredith J. Long, Houston	1987
** Mrs. Maline Gilbert McCalla, Austin	1989
* Mr. Kerry O'Quinn, New York, New York	1989
* Mrs. D. J. Sibley, Jr., Austin	1989
Mrs. Lon Slaughter, San Angelo	1987
Mr. J. I. Staley, Wichita Falls	1987
Mrs. Jan Wendell, Rockport	1987
Mr. Dan C. Williams, Dallas	1988
* Mrs. C. Dickie Williamson, Fort Worth	1989
Mrs. Mitchell Wommack, Corpus Christi	1988
Unfilled Term	1987
Unfilled Term	1988

Geology Foundation Advisory Council.--
Authorized Membership 38:

	<u>Term Expires</u>
Mr. Charles W. Alcorn, Jr., Victoria	1988
** Mr. Eugene L. Ames, Jr., San Antonio	1989
* Dr. David S. Birsa (Ph.D.), La Habra, California	1989
Dr. Richard R. Bloomer (Ph.D.), Abilene	1988
Mr. Thomas M. Burke, Houston	1987
Mr. Weyman W. Crawford, Houston	1988
** Mr. L. Decker Dawson, Midland	1989
Dr. Rodger E. Denison (Ph.D.), Dallas	1988
Mr. George A. Donnelly, Jr., Midland	1988
Mr. James H. Frasher, Houston	1987
Mr. William E. Gipson, Houston	1987
Dr. Joseph N. Gittelman (Ph.D.), Houston	1987
Mr. George M. Harwell, Jr., Houston	1988
Mr. Larry R. Hensarling, Lafayette, Louisiana	1987
* Mr. David S. Holland, Houston	1989
** Mr. Charles J. Hooper, Houston	1989
** Mr. John A. Jackson, Dallas	1989
Mr. J. Donald Langston, Kailua-Kona, Hawaii	1988
Mr. Jack K. Larsen, Amarillo	1987
** Mr. Howard R. Lowe, Coupeville, Washington	1989
** Mr. Ken G. Martin, Mandeville, Louisiana	1989
Mr. Harry A. Miller, Jr., Midland	1988
Mr. Michael B. Morris, Houston	1987
** Mr. Judd H. Oualline, Houston	1989
Mr. Scott Petty, Jr., San Antonio	1987
Mr. George B. Pichel, Los Angeles, California	1987
Mr. W. F. Reynolds, Wichita Falls	1988
Mr. George W. Schneider, Jr., Austin	1988
Mr. F. A. Seamans, Houston	1988
** Mr. D. B. Sheffield, Houston	1989
Mr. Robert K. Steer, Houston	1987
Mr. William T. Stokes, Dallas	1987
Mr. Arthur J. Wessely, Dallas	1988
Mr. Phillip E. Wyche, Austin	1988
Unfilled Term	1987
Unfilled Term	1987
Unfilled Term	1988
Unfilled Term	1989

Graduate School Foundation Advisory Council.--

This advisory council was approved by the Board of Regents on March 26, 1976, and nominees to membership have not yet been submitted for Regental approval.

Graduate School of Library and Information Science
Foundation Advisory Council.--

Authorized Membership 11:

	<u>Term Expires</u>
** Mrs. Betty Anderson, Lubbock	1989
** Dr. Mary R. Boyvey (Ph.D.), Austin	1989
* Governor Bill Daniel, Liberty	1988
Ms. Jacqueline Harmon, Austin	1987
Mrs. Judith Helburn, Austin	1988
** Ms. Connie Moore, Austin	1989
Mrs. Carolina Jolliff Pace, Dallas	1988
Dr. Scott C. Reeve (Ph.D.), New Orleans, Louisiana	1988
John P. Schneider, M.D., Austin	1987
Mrs. Ellen Temple, Austin	1987
 Unfilled Term	 1987

College of Liberal Arts Foundation Advisory Council.--
Authorized Membership 36:

	<u>Term Expires</u>
** Mr. R. Gordon Appleman, Fort Worth	1989
Mr. Rex G. Baker III, Houston	1988
* Mrs. Peggy Pattillo Beckham, Abilene	1989
* Mrs. M. Robert Blakeney, Dallas	1989
Mrs. Robert B. Brinkerhoff, Houston	1987
* Ms. Michelle Kay Brock, Midland	1989
Mrs. Ira Jon Brumley, Fort Worth	1987
** Mrs. William P. Clements, Jr., Dallas	1989
Mrs. Jack Collins, Austin	1987
Mrs. Seaborn Eastland, Jr., Houston	1988
* Mr. Creekmore Fath, Austin	1989
** Mrs. Joanne M. Glass, Tyler	1989
Frank Hadlock, M.D., Houston	1987
Mrs. Nancy Strauss Halbreich, Dallas	1987
Mr. Hall S. Hammond, San Antonio	1987
* Mr. R. Brian Haymon, Baton Rouge, Louisiana	1989
** Mr. Harvey Tevis Herd, Midland	1989
Mrs. Linda C. Hunsaker, Houston	1987
Mr. Lenoir Moody Josey, Houston	1988
Mr. Barron Ulmer Kidd, Dallas	1988
Mr. M. Thomas Lardner, Dallas	1987
Mr. Lowell H. Lebermann, Austin	1988
Mr. Michael R. Levy, Austin	1988
* Mr. John Mark Metts, Houston	1989
Mr. Richard L. Nelson, Jr., Houston	1987
Mrs. John Pope, Abilene	1988
** Mr. Luther Daniel Prescott, Fort Worth	1989
Mrs. Harry H. Ransom, Austin	1987
** David George Shulman, M.D., San Antonio	1989
Mrs. William H. Snyder III, Dallas	1988
Mr. Walter J. Taylor, Lubbock	1987
Mr. Joe Bill Watkins, Austin	1988
Darrell Willerson, Jr., M.D., San Antonio	1988
 Unfilled Term	 1987
Unfilled Term	1988
Unfilled Term	1988

College of Natural Sciences Foundation Advisory Council.--Authorized Membership 35:

	<u>Term Expires</u>
Dr. Roland K. Blumberg (Ph.D.), Seguin	1988
Dr. Malcolm K. Brachman (Ph.D.), Dallas	1987
Mr. Robert L. Brueck, Round Rock	1987
* Mr. Robert Daniel Burck, Austin	1989
Dr. Donald M. Carlton (Ph.D.), Austin	1987
** Mr. James D. Dannenbaum, Houston	1989
Mr. R. Gary Dillard, Houston	1987
Mr. Walter B. Dossett, Jr., Waco	1987
* Mr. Tom E. Fairey, Austin	1989
* Mr. Martin Goland, San Antonio	1989
F. Parker Gregg, M.D., Houston	1988
* Dr. Norman Hackerman (Ph.D.), Austin	1989
Mr. Ben T. Head, Austin	1987
Mr. Ralph T. Hull, Houston	1987
Mr. George H. Jewell, Jr., Houston	1988
Mrs. Jean W. Kaspar, Shiner	1988
Mr. Baine P. Kerr, Houston	1988
Mr. Alfred A. King, Austin	1988
Donald R. Lewis, M.D., Paris	1988
* Mrs. Amy Johnson McLaughlin, San Angelo	1989
Dr. H. D. Medley (Ph.D.), Dallas	1987
** Mr. Rom Rhome, Houston	1989
Dr. James A. Rickard (Ph.D.), Houston	1987
David T. Roark, M.D., Houston	1988
D. J. Sibley, Jr., M.D., Austin	1988
Dr. Edward J. Skiko (Ph.D.), Fairfield, Connecticut	1988
Dr. Jean Andrews Smith (Ph.D.), Austin	1988
Mrs. Jere W. Thompson, Dallas	1987
** Mr. James M. Vaughn, Jr., Houston	1989
Mr. J. Virgil Waggoner, Houston	1987
Dr. Edward N. Wheeler (Ph.D.), Dallas	1988
* Mrs. Sam A. Wilson, Austin	1989
Edward H. Withers, M.D., Houston	1988
Unfilled Term	1989
Unfilled Term	1989

Pharmaceutical Foundation Advisory Council.--Authorized Membership 29:

	<u>Term Expires</u>
Romeo T. Bachand, Jr., M.D. (Ph.D.), Austin	1987
Mr. John R. Carson, San Antonio	1988
* Mr. Robert Coopman, San Antonio	1989
Mr. Jose Adrian Del Castillo, Brownsville	1987
Mr. William I. Dismukes, Austin	1987
Mr. Neal R. Ellis, Leveliand	1988
Mr. Donald K. Fletcher, Philadelphia, Pennsylvania	1988
Mr. Alfredo T. Garcia, Jr., Alice	1987
Dr. Thomas Gerding (Ph.D.), New Brunswick, New Jersey	1988
Mr. Alan W. Hamm, Fort Worth	1988
** Mr. J. Keith Hanchey, Dallas	1989
Ms. Bonita Herr, Arlington	1987
** Mr. Lonnie F. Hollingsworth, Lubbock	1989
Mr. Jan Michael Klinck, McAllen	1987
Mr. Mark Knowles, Washington, D.C.	1987
Dr. Howard B. Lassman (Ph.D.), Somerville, New Jersey	1987
Mr. Robert L. Myers, Clearwater, Florida	1988
* Mr. Joseph A. Oddis, Bethesda, Maryland	1989

Mr. Jay J. Pisik, North Chicago, Illinois	1988
Mr. Albert Sebok, Twinsburg, Ohio	1987
** Dr. William J. Sheffield (Ph.D.), Round Rock	1989
Mr. James E. Smeeding, Austin	1987
Mr. R. Glenn Smith, Waco	1988
** General Coulter R. Sublett, Dallas	1989
Mr. Eugene L. Vykukal, Dallas	1988
Dr. M. Keith Weikel (Ph.D.), Silver Spring, Maryland	1987
Mr. R. F. Wojcik, Indianapolis, Indiana	1988
Unfilled Term	1988
Unfilled Term	1989

School of Social Work Foundation Advisory Council.--
Authorized Membership 28:

	<u>Term Expires</u>
** Mr. Tom Backus, Austin	1989
* Ms. Patricia Bailey, Dallas	1989
Mrs. Charles F. Bedford, Fort Worth	1987
Mr. Jerome Chapman, Austin	1987
Dr. H. Rad Eanes III (Ph.D.), San Antonio	1988
* Mrs. Robert Theodore Enloe III, Dallas	1989
Mr. Royal Furgeson, El Paso	1988
* Mrs. Bettie Girling, Austin	1988
* Mrs. Beverly Griffith, Austin	1987
Mr. James F. Hurley, Houston	1987
** Mr. David R. Lambert, Dallas	1989
** Mr. William G. Marquardt, Fort Worth	1989
** Mrs. Sally Freeman McKenzie, Dallas	1989
** Dr. M. Marjorie Menefee (Ph.D.), Austin	1989
Mr. Dean Milkes, Corsicana	1987
Mrs. Billye Muecke, Huntsville	1988
Ms. Sallie B. Nowlin, Fort Worth	1988
Mr. Eddie Phillips, Dallas	1987
Ms. Mary Polk, Austin	1987
** Ms. Ann Quinn, Fort Worth	1989
** Mr. Victor W. Ravel, Austin	1989
* Mrs. Eleanor Selig, Seguin	1989
* Mr. Russell Smith, Austin	1988
Mrs. Barbara Higley Staley, Houston	1988
Mr. August N. Swain, Austin	1988
Ms. Jo Ann Swinney, Houston	1988
** Ms. Marilla B. Wood, Austin	1989
Mr. Everett E. Woods, Abilene	1988

Marine Science Institute Advisory Council.--
Authorized Membership 35:

	<u>Term Expires</u>
Mr. James H. Atwill, Port Aransas	1987
Charles W. Bailey, Jr., M.D., Houston	1988
** Mr. Perry R. Bass, Fort Worth	1989
Mr. William H. Bauer, La Ward	1987
The Honorable Charles J. Brown, Port Aransas	1987
Mr. Cecil E. Burney, Corpus Christi	1988
Mr. Charles C. Butt, San Antonio	1987
** Mr. Louis Castelli, Dallas	1989
Mr. James H. Clement, Kingsville	1987
** Mr. Leroy G. Denman, San Antonio	1989
Mr. John Dorn, Corpus Christi	1987
Dr. Peter T. Flawn (Ph.D.), Austin	1988
Mr. Christopher Gill, San Antonio	1988
Mr. Hugh Halff, Jr., San Antonio	1988
Mr. Hayden W. Head, Corpus Christi	1988

** Mr. John C. Holmgreen, San Antonio	1989
* Mr. Edward R. Hudson, Jr., Fort Worth	1989
Mr. D. Michael Hughes, Houston	1988
** Mr. Richard King III, Corpus Christi	1989
** Mrs. Edith McAllister, San Antonio	1989
Mr. George P. Morrill II, Beeville	1988
** Dr. William C. Moyer (Ph.D.), California, Maryland	1989
Mr. William Negley, San Antonio	1987
Mr. Howard N. Richards, Austin	1987
** Mr. Arthur A. Seeligson, Jr., San Antonio	1989
* Mr. Frederick M. Smith, Dallas	1989
Mr. James C. Storm, Corpus Christi	1987
** Mr. Don E. Weber, San Antonio	1989
Mr. M. Harvey Weil, Corpus Christi	1988
Unfilled Term	1987
Unfilled Term	1987
Unfilled Term	1988
Unfilled Term	1988
Unfilled Term	1988
Unfilled Term	1989

McDonald Observatory and Department of Astronomy
Board of Visitors.--Authorized Membership 35:

	<u>Term Expires</u>
Mr. Clyde H. Alexander II, Trinidad	1988
Mrs. Raye Virginia Allen, Washington, D.C.	1988
Mr. Rex G. Baker, Jr., Houston	1988
Mrs. Joan Ragsdale Baskin, Midland	1987
Mr. Mark E. Bivins, Amarillo	1987
** Mr. William B. Blakemore II, Midland	1989
* Mr. Z. D. Bonner, San Antonio	1989
Mr. Harry E. Bovay, Jr., Houston	1988
** Mr. George E. Christian, Austin	1989
Mr. John B. Connally III, Houston	1987
Mrs. Ann P. Dickson, Dallas	1987
* Mr. Sam Dunnam, Austin	1989
Mr. James E. Egan, Austin	1987
Mr. Jenkins Garrett, Fort Worth	1988
* Mr. Fred Goetting, San Antonio	1989
Mr. Houston H. Harte, San Antonio	1987
* Mr. Robert Jorrie, San Antonio	1989
Mr. Herbert D. Kelleher, Dallas	1987
Mr. Allan C. King, Houston	1988
Mr. Thos. H. Law, Fort Worth	1988
Mr. Frederick Z. Mills, Jr., Dallas	1988
Mr. Walter M. Mischer, Jr., Houston	1987
Mr. Wade Nowlin, Fort Worth	1987
Mr. Pike Powers, Austin	1987
* Mr. Billy Shurley, Marfa	1989
** Mr. John T. Stuart III, Dallas	1989
Mr. Curtis T. Vaughan, Jr., San Antonio	1988
Mr. Robert C. Vaughn, Dallas	1987
Mr. Cyril Wagner, Midland	1987
* Mr. C. Lee Walton, Jr., Dallas	1989
Mr. Otto K. Wetzell, Jr., Dallas	1987
** The Honorable John Wildenthal, Houston	1989
Mr. Samuel T. Yanagisawa, Garland	1987
Unfilled Term	1988
Unfilled Term	1989

School of Nursing Advisory Council.--
Authorized Membership 27:

	<u>Term Expires</u>
* Joseph M. Abell, Jr., M.D., Austin	1989
* Mrs. Dolores M. Alford, Dallas	1989
* Mrs. Morris Atlas, McAllen	1989
Mr. Cleve Bachman, Beaumont	1988
** Mrs. Bob G. (Ruth) Bailey, Abilene	1989
Ms. Catherine A. Bane, Houston	1987
Mrs. Jack S. Blanton, Sr., Houston	1988
Mrs. Bob Casey, Jr., Houston	1987
Mrs. Joe Christie, Austin	1988
Mrs. J. E. Connally, Abilene	1988
** Mrs. Martha Miller Coons, Austin	1989
Armando Cuellar, M.D., Weslaco	1987
Mrs. Ralph H. Daugherty, Jr., Austin	1987
** Mr. David T. Davenport, Austin	1989
* Mr. Hector de Leon, Austin	1989
Ms. Beverly Drawe, Austin	1987
Mrs. Carlos Godinez, McAllen	1987
Ms. Jane Hickie, Austin	1987
** Mr. Paul C. Jackson, Austin	1989
Ms. Lou Hedrick Jones, Dallas	1988
** Mrs. Janie Julian, Austin	1989
* Mr. David McWilliams, Austin	1989
Mrs. Mandy Dealy Pearsall, Austin	1987
Mrs. John R. Rainey, Jr., Austin	1988
* Henry Renfert, Jr., M.D., Austin	1989
* Mr. Dell M. Sheftall, Jr., Austin	1989
** Dr. Mabel Wandelt (Ph.D.), Austin	1989

Texas Union Advisory Council.--
Authorized Membership 15:

	<u>Term Expires</u>
** Ms. Linda Leuchter Addison, Houston	1989
Mr. John W. Anderson, Houston	1988
Mr. Jerry A. Bell, Jr., Austin	1988
** Mr. L. Dean Cobb, Austin	1989
Mr. James Hudson Dudley, Comanche	1988
Ms. Molly Moffett Gray, Alvin	1987
Mr. Joseph R. Krier, San Antonio	1988
Mr. Jerry J. Nathan, Beaumont	1988
Mr. Larry Newman, Austin	1988
Mrs. Joan Franklin Phipps, Houston	1988
** Mr. Gary M. Polland, Houston	1989
Mr. Benjamin Rodriguez, San Antonio	1988
Ms. Jan Scurlock Sanders, Dallas	1987
Mr. Brian Shivers, Dallas	1987
* Mrs. Marolyn W. Stubblefield, San Antonio	1989

3. The University of Texas at Dallas

Development Board.--Authorized Membership 34:

	<u>Term Expires</u>
Mr. Kent M. Black, Dallas	1988
* Mr. Bruce Calder, Dallas	1989
** Mrs. Bruce Calder, Dallas	1989
* Dr. Andrew R. Cecil (Ph.D.), Richardson	1987
* Mr. W. E. Cooper, Dallas	1989
Mrs. Caroline Hite Edens, Dallas	1987
* Mr. Hill Feinberg, Dallas	1988
Mr. James L. Fischer, Dallas	1988
Mr. Sol Goodell, Dallas	1988
* Mrs. Joe Griffin, Richardson	1987

Mr. C. Barton Groves, Dallas	1987
* Mr. Robert Hauptfuhrer, Dallas	1988
** Mrs. J. E. Henry, Richardson	1989
** Mr. Jack B. Jackson, Richardson	1989
** Mr. George W. Jalonick IV, Dallas	1989
Mr. Gifford K. Johnson, Dallas	1988
Mr. Philip R. Jonsson, Dallas	1987
** Mr. Michael Kinsey, Dallas	1989
Mr. William A. Kramer, Plano	1988
Mr. James R. Lightner, Richardson	1988
Mr. Richard K. Marks, Plano	1988
* Mr. Harvey Mitchell, Dallas	1988
* Dr. James E. Mitchell (Ph.D.), Plano	1987
** Mr. Mike A. Myers, Dallas	1989
** Mr. Hugh G. Robinson, Dallas	1989
** Mr. James P. Sheehan, Dallas	1989
* Mr. William T. Solomon, Dallas	1988
** Mrs. Theodore H. Strauss, Dallas	1989
* The Honorable A. Starke Taylor, Dallas	1987
Mr. C. J. Thomsen, Dallas	1988
Mr. James R. Voisinet, Dallas	1987
Mr. C. Lee Walton, Jr., Dallas	1987
Unfilled Term	1987
Unfilled Term	1987

Advisory Council for the School of Management.--
Authorized Membership 42:

	<u>Term Expires</u>
* Mr. Charles S. Anderson, Dallas	1989
* Mr. Gilbert H. Andres, Dallas	1988
* Mr. Harry B. Bartley, Dallas	1988
* Mr. John D. Beletic, Dallas	1989
* Mr. Charles M. Best, Dallas	1988
* Mr. Robert H. Boykin, Dallas	1988
Mr. Robert K. Campbell, Dallas	1987
* Mr. Berry Cash, Dallas	1988
** Mr. Richard W. Fisher, Dallas	1989
** Mr. Richard I. Galland, Dallas	1987
** Mr. James B. Gardner, Dallas	1989
* Mr. James F. Gero, Garland	1989
* Mr. Arthur L. Gonzales, Dallas	1989
* Mr. William A. Grant, Dallas	1989
Mr. Thomas B. Howard, Jr., Dallas	1987
* Mr. Ray Johnson, Irving	1988
Mr. Dale V. Kesler, Dallas	1987
* Mr. Alan B. Lerner, Dallas	1988
* Mr. L. G. Lesniak, Dallas	1988
* Mr. Thomas F. Lysaught, D/FW Airport	1989
* Mr. Thomas R. McCartin, Dallas	1989
* Mr. Richard F. Mitchell, Irving	1988
** Mr. John W. Norris, Jr., Dallas	1987
** Mr. Thomas G. Plaskett, D/FW Airport	1987
Mr. Rex A. Sebastian, Dallas	1987
* Mr. Robert W. Slater, Dallas	1988
* Ms. Nancy Harvey Steorts, Dallas	1989
** Mr. John T. Stuart III, Dallas	1989
Mr. David R. Tacke, Dallas	1987
Mr. James R. Voisinet, Dallas	1987
* Mr. C. Anthony Wainwright, Dallas	1987
Mr. C. Lee Walton, Jr., Dallas	1987
Ms. Linda A. Wertheimer, Dallas	1987
Unfilled Term	1987
Unfilled Term	1987
Unfilled Term	1988

Unfilled Term	1988
Unfilled Term	1988
Unfilled Term	1988
Unfilled Term	1989
Unfilled Term	1989
Unfilled Term	1989

Advisory Council for the Callier Center for
Communication Disorders.--Authorized Membership 30:

	<u>Term Expires</u>
Mr. W. H. Bowen, Jr., Dallas	1988
Mr. Stuart Bumpas, Dallas	1987
Mrs. George V. Charlton, Dallas	1988
Mrs. A. Earl Cullum, Jr., Dallas	1987
** Mr. Bennett Cullum, Dallas	1989
* Mrs. Doreen Cunningham, Wills Point	1989
Mr. Joe Dealey, Dallas	1987
Mrs. Robert E. Dennard, Dallas	1987
Mr. Gerald Fronterhouse, Dallas	1987
Mr. Jay Goltz, Dallas	1988
** Mr. Sol Goodell, Dallas	1989
Mr. Thomas D. Hogan, Dallas	1987
Miss Nelle C. Johnston, Dallas	1988
** Mr. J. E. Jonsson, Dallas	1989
Mr. David M. Laney, Dallas	1987
Mr. Michael Lockerd, Dallas	1987
* Ludwig A. Michael, M.D., Dallas	1989
** Mr. Robert Neely, Dallas	1989
Mr. Sydney K. Peatross, Dallas	1987
** Mr. Pat Y. Spillman, Dallas	1989
Mr. John M. Stemmons, Jr., Dallas	1988
Mr. Carl J. Thomsen, Dallas	1988
Unfilled Term	1987
Unfilled Term	1988
Unfilled Term	1988
Unfilled Term	1988
Unfilled Term	1989

Advisory Council for the School of General Studies.--
Authorized Membership 25:

	<u>Term Expires</u>
Ms. Beverly Laughlin Brooks, Dallas	1988
Ms. Carol Carter, Dallas	1988
** Mr. Roy E. Dulak, Dallas	1989
Ms. Carol Duncan, Dallas	1987
Mr. Hardy H. England, Richardson	1987
Mr. Edward M. Fjordbak, Dallas	1988
Mr. Robert E. Goodfriend, Dallas	1987
* Ms. Lorraine Kaas, Dallas	1989
** Mr. David Kaplan, Richardson	1989
Mrs. Gene K. Koonce, Richardson	1987
Mrs. R. F. Leftwich, Richardson	1988
Mr. Henry Lewczyk, Dallas	1987
Mr. Raymond D. Noah, Richardson	1987
Ms. Cynthia Pharr, Dallas	1988
* Mr. Gene Ramsey, Plano	1989
** Mr. Ernest H. Randall, Jr., Richardson	1989
** Mr. J. H. Rawles, Richardson	1989
* Mr. Mark Rigg, Dallas	1989
Mrs. Ronald Ritter, Richardson	1988

Mr. Tracy Rowlett, Dallas	1987
* Mr. Frederick H. Stern, Dallas	1989
Mr. C. E. Teague, Richardson	1988
Mrs. Edwin Tobolowsky, Dallas	1987
** Mrs. Julius Wolfram, Dallas	1989

Unfilled Term	1988
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Advisory Council for the School of Arts and Humanities.--
Authorized Membership 25:

	<u>Term Expires</u>
* Dr. Donald Cowan (Ph.D.), Dallas	1988
* Dr. Louise Cowan (Ph.D.), Dallas	1988
* Mr. Brinton Coxe, Dallas	1987
* Mrs. Brinton Coxe, Dallas	1987
* Mr. George W. Jalonick IV, Dallas	1989
* Mr. Philip R. Jonsson, Dallas	1989
* Mr. Earl O. Latimer II, Dallas	1989
* Mr. James McCormick, Dallas	1989
* Mrs. Joyce Meier, Dallas	1989
* Mrs. Henry S. Miller, Jr., Dallas	1989
* Robert D. Page, M.D., Dallas	1988
* Mrs. Robert D. Page, Dallas	1988
* Mr. Harry Parker, Dallas	1989
* Professor Donna Rhein, Dallas	1989
Unfilled Term	1987
Unfilled Term	1988
Unfilled Term	1988
Unfilled Term	1988
Unfilled Term	1989

Advisory Council for the School of Social Sciences.--
Authorized Membership 25:

	<u>Term Expires</u>
Mr. Richard J. Agnich, Dallas	1987
Mr. Art Busch, Dallas	1987
Mr. David J. Chase, Dallas	1988
Ms. Betty Jo Christian, Washington, D.C.	1987
Mr. William Crier, Plano	1988
Mr. Alan R. Erwin, Austin	1987
The Honorable David G. Fox, Dallas	1987
* Ms. Carolyn M. Gilbert, Dallas	1989
** Mr. Jeremy Halbriech, Dallas	1989
Ms. Kay Bailey Hutchison, Dallas	1987
Ms. Eddie Bernice Johnson, Dallas	1988
Mr. Rodger Mitchell, Dallas	1988
** Mr. Ray Nasher, Dallas	1989
Mr. George Schrader, Dallas	1987
** Mr. Lee Simpson, Dallas	1989
** Mr. Forrest Smith, Dallas	1989
Mr. Richard F. Smith, Dallas	1988
Mr. Garry A. Weber, Dallas	1988
Unfilled Term	1987
Unfilled Term	1988
Unfilled Term	1988
Unfilled Term	1988
Unfilled Term	1989
Unfilled Term	1989
Unfilled Term	1989

4. The University of Texas at El Paso

Development Board.--Authorized Membership 30:

	<u>Term Expires</u>
** Eugenio A. Aguilar, Jr., D.D.S., El Paso	1989
Mr. Federico Barrio T., Juarez, Mexico	1988
Mr. Julian Bernat, El Paso	1987
Gordon L. Black, M.D., El Paso	1988
** Mr. Hughes Butterworth, Jr., El Paso	1989
Mr. H. M. Daugherty, Jr., El Paso	1987
Mr. Federico De La Vega, Juarez, Mexico	1988
** Mr. Charles H. Foster, El Paso	1989
Mr. Hugh K. Frederick, Jr., El Paso	1987
Mr. Joseph P. Hammond, El Paso	1988
Mrs. Robert F. Haynsworth, El Paso	1988
Mr. Robert C. Heasley, El Paso	1988
Mr. Donald S. Henderson, El Paso	1988
Mr. Fred Hervey, El Paso	1988
Mrs. George (Bette) Hervey, El Paso	1988
* Mr. Richard Hickson, El Paso	1989
Mr. Hector Holguin, El Paso	1988
Mr. Lindsay B. Holt, El Paso	1988
Mr. Maury P. Kemp, El Paso	1988
** Mr. Dennis H. Lane, El Paso	1989
* Mr. Guillermo Licon, El Paso	1989
Mr. Louis B. McKee, El Paso	1988
Laurance N. Nickey, M.D., El Paso	1988
Mr. Terry O'Donnell, El Paso	1987
** Mr. Arnold Peinado, Jr., El Paso	1989
Mr. Jim Phillips, El Paso	1988
** Mr. Edward F. Schwartz, El Paso	1989
Mr. Orval W. Story, El Paso	1987
Dr. Judson F. Williams (Ph.D.), El Paso	1988
Mr. Sam D. Young, Jr., El Paso	1987

5. The University of Texas of the Permian Basin

Development Board.--Authorized Membership 30:

	<u>Term Expires</u>
Mr. H. Eugene Abbott, Midland	1987
Mrs. Jerry L. Avery, Big Spring	1987
** Mr. William B. Blakemore II, Midland	1989
* Mr. Frank Cahoon, Midland	1988
Mr. J. C. Chancellor, Odessa	1988
** J. D. Cone, M.D., Odessa	1989
* Mr. James K. Cox, Midland	1989
Mr. John A. Currie, Big Spring	1987
** Mr. J. Conrad Dunagan, Monahans	1989
Mr. Mel Z. Gilbert, Snyder	1987
Mr. James R. "Buzz" Hurt, Odessa	1988
Mr. William Monroe Kerr, Sr., Midland	1988
Mr. John Landgraf, Odessa	1988
** Dr. Al G. Langford (Ph.D.), Midland	1989
Mr. W. D. Noel, Odessa	1987
Mr. Herschel O'Kelley, Midland	1987
* Mr. Joseph I. O'Neill III, Midland	1989
Mr. Charles R. Perry, Odessa	1988
* Mr. Paul C. Rea, Midland	1989
Mr. James Roberts, Andrews	1987
** Mr. Louis Rochester, Odessa	1989
Mr. Tom Roden, Odessa	1988
** Mr. W. O. Shafer, Odessa	1989
** Mrs. Richard C. Slack, Pecos	1989
Mr. Thomas J. Wageman, Midland	1988
Mr. Cyril Wagner, Jr., Midland	1988
Mrs. Phillip R. Zeeck, Odessa	1987

Unfilled Term	1988
Unfilled Term	1989
Unfilled Term	1989

6. The University of Texas at San Antonio

Development Board.--Authorized Membership 25:

	<u>Term Expires</u>
Mr. Glenn Biggs, San Antonio	1988
Dr. Roland K. Blumberg (Ph.D.), Seguin	1988
Mr. Richard W. Calvert, San Antonio	1988
* Mr. T. C. Frost, San Antonio	1989
** Mr. Alex H. Halff, San Antonio	1989
** Mr. Houston H. Harte, San Antonio	1989
* Mr. Roger Hemminghaus, San Antonio	1989
* Mr. Marvin G. Kelfer, San Antonio	1988
Mr. Cappy Lawton, San Antonio	1988
** Mr. Bernard L. Lifshutz, San Antonio	1989
Mrs. Walter W. McAllister, Jr., San Antonio	1987
** Mr. B. J. "Red" McCombs, San Antonio	1989
** Gen. Robert F. McDermott (Ret.), San Antonio	1989
Mr. Lewis J. Moorman, Jr., San Antonio	1988
Mr. Harold E. O'Kelley, San Antonio	1987
Mr. Scott Petty, Jr., San Antonio	1988
Mr. John T. Steen, Sr., San Antonio	1987
Mr. Marvin M. Stetler, San Antonio	1987
** Mr. Louis H. Stumberg, San Antonio	1989
Mr. Curtis Vaughan, Jr., San Antonio	1987
Mr. Charles Martin Wender, San Antonio	1988
Dr. Robert V. West, Jr. (Ph.D.), San Antonio	1987
Mrs. Irene Wischer, San Antonio	1987
Unfilled Term	1987
Unfilled Term	1987

College of Business Advisory Council.--
Authorized Membership 25:

	<u>Term Expires</u>
** Mr. Clark Aylsworth, Sr., San Antonio	1989
Mr. Jesse A. Baker, San Antonio	1988
* Mrs. Barbara Banker, San Antonio	1989
Mr. Kenneth L. Batchelor, San Antonio	1988
** Mr. Samuel P. Bell, San Antonio	1989
Mr. Taylor S. Boone, San Antonio	1988
* Mr. George Brown, San Antonio	1989
** Mrs. Betty Burke, San Antonio	1989
* Dr. Patricia LeMay Burr (Ph.D.), San Antonio	1989
Mr. Fred W. Burtner, San Antonio	1987
* Mr. Robert Cuyler, San Antonio	1989
Mrs. Alice S. Dawson, San Antonio	1987
Col. Victor J. Ferrari, San Antonio	1988
Mrs. Cathy Obriotti Green, San Antonio	1988
Mr. James L. Hayne, San Antonio	1987
Mr. John C. Kerr, San Antonio	1987
Mr. Robert R. Moore, San Antonio	1987
Mr. Clark C. Munroe, San Antonio	1987
Mr. Juan J. Patlan, San Antonio	1987
Mr. James C. Phelps, San Antonio	1988
Mr. Thomas J. Pierce, San Antonio	1988
* Mr. Paul Reddy, San Antonio	1987
Mr. Beuford T. Shirley, San Antonio	1988
Mrs. Nelda Weatherly, San Antonio	1987
* Mr. Robert Worth, San Antonio	1989

7. The University of Texas at Tyler

Development Board.--Authorized Membership 26:

	<u>Term Expires</u>
** Mr. James W. Arnold, Tyler	1989
* Mr. J. M. Bandy, Tyler	1989
** Mr. Henry M. Bell, Jr., Tyler	1989
Mr. Frank M. Burke, Jr., Dallas	1988
** Mr. Allen M. Burt, Tyler	1989
Mr. Charles L. Childers, Tyler	1988
* Mr. Vernon E. Faulconer, Tyler	1987
Mr. Bill G. Hartley, Tyler	1987
Miss Nancy E. Lake, Tyler	1988
Mr. Peyton McKnight, Tyler	1988
* Mr. George W. Oge, Tyler	1989
Mr. Wade C. Ridley, Tyler	1987
Mr. A. W. Riter, Jr., Tyler	1988
* Mr. Robert M. Rogers, Tyler	1988
Mr. Isadore Roosth, Tyler	1988
Mr. Norman M. Shtofman, Tyler	1987
Mr. Ralph Spence, Tyler	1988
Mr. Earl L. Story, Jr., Tyler	1988
* Mr. Eugene Talbert, Tyler	1989
Jim M. Vaughn, M.D., Tyler	1987
* Mr. John E. White, Jr., Tyler	1989
Mr. Royce E. Wisenbaker, Tyler	1987
Mr. James C. Wynne, Jr., Tyler	1987
Unfilled Term	1987
Unfilled Term	1989
Unfilled Term	1989

8. The University of Texas
Institute of Texan Cultures at San Antonio

Development Board.--Authorized Membership 29:

	<u>Term Expires</u>
** Mr. Tom Billings, Corpus Christi	1989
Mr. Robert L. Bowers, San Antonio	1987
Mr. Bob Brinkerhoff, Houston	1988
** Mr. J. P. Bryan, Jr., Houston	1989
Mr. Robert A. Buschman, San Antonio	1988
Mr. Charles C. Butt, San Antonio	1988
Mr. Bob R. Dorsey, Austin	1988
(Ret.) Lt. Col. George Ensley, San Antonio	1987
Sterling H. Fly, Jr., M.D., Uvalde	1988
Mr. Alex H. Halff, San Antonio	1987
Mr. John Henderson, Lufkin	1988
Mr. Hal Hillman, Houston	1987
Mr. Reagan Houston III, San Antonio	1987
** Mrs. Everett (Elizabeth) Hutchinson, Bethesda, Maryland and Palestine, Texas	1989
** Mr. Earl Jones, Brownfield	1989
Mrs. Don (Jean) Kaspar, Shiner	1987
** Mr. Ballinger Mills, Galveston	1989
Mr. Louis M. Pearce, Houston	1987
** Dan C. Peavy, Jr., D.D.S., San Antonio	1989
Mr. O. Scott Petty, Sr., San Antonio	1987
Mr. Herman P. Pressler, Jr., Houston	1987
Miss Josephine Sparks, Corpus Christi	1988
** Mrs. Walter (Ruth) Sterling, Houston	1989
Mr. Sam Waldrop, Abilene	1988
Mr. Patrick Hughes Welder, Victoria	1987
** Mr. David A. Witts, Dallas	1989

Unfilled Term	1987
Unfilled Term	1989
Unfilled Term	1989

9. The University of Texas
Health Science Center at Dallas

Development Board.--The Southwestern Medical Foundation serves in this capacity. The nominees are not subject to Regental approval.

10. The University of Texas
Medical Branch at Galveston

Development Board.--Authorized Membership 45:

	<u>Term Expires</u>
** W. Tom Arnold, M.D., Houston	1987
* A. Nelson Avery, M.D., Austin	1988
** George P. Bachman, M.D., Seguin	1988
** Mrs. William H. Bauer, La Ward	1989
G. Valter Brindley, Jr., M.D., Temple	1988
Mrs. Ann Barber Brinkerhoff, Houston	1987
* C. B. Bruner, M.D., Fort Worth	1988
The Honorable Edward Clark, Austin	1988
** Kleberg Eckhardt, M.D., Corpus Christi	1989
** Edward Egbert, Jr., M.D., El Paso	1988
** Mr. Lawrence E. Ethridge, Jr., Corpus Christi	1989
Tracy D. Gage, M.D., Lubbock	1987
** Mr. Edwin Gale, Beaumont	1988
* Mr. Richard C. Gibson, Midland	1989
** Carlos D. Godinez, M.D., McAllen	1989
Miss F. Marie Hall, Big Spring	1987
** Walter F. Hasskarl, M.D., Brenham	1989
Jesse B. Heath, M.D., Madisonville	1988
** Mr. Harris L. Kempner, Sr., Galveston	1989
Mr. Harris L. Kempner, Jr., Galveston	1988
Donald R. Lewis, M.D., Paris	1988
* David T. McMahon, Jr., M.D., San Antonio	1987
** Mr. A. G. McNeese, Jr., Houston	1988
** David C. Miesch, M.D., Paris	1989
** Mr. Ballinger Mills, Galveston	1989
** Mr. George P. Mitchell, The Woodlands	1989
** Mr. Robert L. Moody, Galveston	1989
** Mr. W. L. Moody IV, Galveston	1988
C. M. Phillips, M.D., Austin	1988
Mario E. Ramirez, M.D., Roma	1987
Wayne V. Ramsey, Jr., M.D., Abilene	1987
Mrs. Edward Randall, Jr., Galveston	1987
* Mr. Risher Randall, Houston	1987
** Raleigh R. Ross, M.D., Austin	1989
Ray E. Santos, M.D., Lubbock	1987
Mr. A. R. Schwartz, Galveston	1987
Mr. Preston Shirley, Galveston	1988
Mr. Ralph Spence, Tyler	1987
** Mr. James C. Storm, Corpus Christi	1989
** Clyde E. Thomas, Jr., M.D., Big Spring	1989
Courtney M. Townsend, Sr., M.D., Paris	1988
Jim M. Vaughn, M.D., Tyler	1987
* Miss Lissa W. Walls, Houston	1989
Unfilled Term	1987
Unfilled Term	1987

School of Allied Health Sciences Advisory Council.--
Authorized Membership 18:

	<u>Term Expires</u>
Mr. Gregory Blackley, Houston	1987
Mrs. Richard (Jan) Coggeshall, Galveston	1987
Mr. Anthony English, Refugio	1988
** Mrs. Charles E. Gamble, Pittsburg	1989
** Mr. Carlos Garza, Galveston	1989
Mr. Jose L. Gonzalez, Laredo	1987
** Fernando A. Guerra, M.D., San Antonio	1989
Miss F. Marie Hall, Big Spring	1988
* Dr. Wayne H. Holtzman (Ph.D.), Austin	1989
* Dr. Roger A. Lanier (Ph.D.), Baltimore	1989
** Ms. Maria Teresa Lopez, Laredo	1989
Dr. Fernando M. Trevino (Ph.D.), Galveston	1988
Mrs. James L. Ware, Houston	1987
** Mr. John W. Young, Jr., Caldwell	1989
Unfilled Term	1989

School of Nursing Advisory Council.--
Authorized Membership 12:

	<u>Term Expires</u>
** Mrs. Richard (Jan) Coggeshall, Galveston	1989
Mr. Kyle Gillespie, Galveston	1987
Mrs. Judy Godinez, McAllen	1988
** Mr. Joseph A. Hafner, Jr., Houston	1989
** Miss F. Marie Hall, Big Spring	1989
Mrs. Beth Jewett, Friendswood	1987
* Ms. Kay McHughes, Houston	1989
Mrs. Marilyn Schwartz, Galveston	1987
Mrs. Walter (Ruth) Sterling, Houston	1988
** Mrs. Suzanne Sullivan, Galveston	1989
* Mr. Clyde J. Verheyden, Houston	1988
Unfilled Term	1989

11. The University of Texas
Health Science Center at Houston

Development Board.--Authorized Membership 53:

	<u>Term Expires</u>
Mr. J. Evans Attwell, Houston	1987
Mr. Harry G. Austin, Houston	1987
** Dr. Thomas D. Barrow (Ph.D.), Houston	1989
** Mr. Murphy H. Baxter, Houston	1989
Mr. William K. Bruce, Houston	1988
** Mr. John T. Cater, Houston	1989
Mrs. John S. Chase, Houston	1988
R. Lee Clark, M.D., Houston	1987
Mr. Robert R. Combs, Houston	1988
** Mr. Jack T. Currie, Houston	1989
Mr. C. Brien Dillon, Houston	1988
Mr. John H. Duncan, Houston	1987
Mr. Kraft W. Eidman, Houston	1987
Mr. William N. Finnegan III, Houston	1987
Mr. Joe F. Flack, Houston	1987
** Mr. A. J. Gallerano, Houston	1989

Mr. Edwin Philip Gemmer, Jr., Houston	1988
Mr. Robert G. Greer, Houston	1987
Mr. William C. Harvin, Houston	1988
Mr. H. Wayne Hightower, Houston	1987
** Mrs. Collins Hill, Jr., Houston	1989
Mr. John B. Holmes, Jr., Houston	1987
** Mr. Roy M. Huffington, Houston	1989
Mr. Kenneth M. Johnson, Pebble Beach, California	1988
Mr. Jack S. Josey, Houston	1987
Mrs. Mavis Kelsey, Houston	1987
** Mr. Allan C. King, Houston	1989
** Mrs. Robert A. Lawhon, Houston	1989
Mr. Earl B. Loggins, Houston	1987
** Mr. Ben F. Love, Houston	1989
Mrs. Kemp Maer, Jr., Houston	1988
Mr. John L. McConn, Jr., Houston	1987
** Mrs. A. G. McNeese, Jr., Houston	1989
** Mr. Walter M. Mischer, Jr., Houston	1989
Mr. Robert F. Parker, Houston	1988
Mr. Matt Provenzano, Houston	1988
Mr. Edward Randall III, Houston	1987
Mr. Theodore C. Rogers, New York, New York	1988
Mr. Pat R. Rutherford, Jr., Houston	1987
** Mr. Prentis B. Tomlinson, Jr., Houston	1989
** Mrs. Bernice Weingarten, Houston	1989
** Mr. William M. Wheless III, Houston	1989
Mr. Gail Whitcomb, Houston	1987

Unfilled Term	1987
Unfilled Term	1988
Unfilled Term	1989
Unfilled Term	1989
Unfilled Term	1989

Speech and Hearing Institute Advisory Council.--
Authorized Membership 9:

	<u>Term Expires</u>
Mr. J. Tim Arnoult, Houston	1987
Mrs. H. Wayne Hightower, Houston	1988
** Mrs. H. Graham Hill, Houston	1989
* Mrs. William L. Hixon, Houston	1988
Mrs. Earl B. Loggins, Houston	1987
** Mr. Richard A. Schey, Houston	1989
Unfilled Term	1987
Unfilled Term	1988
Unfilled Term	1989

12. The University of Texas
Health Science Center at San Antonio

Development Board.--Authorized Membership 65:

	<u>Term Expires</u>
* Mr. Edward H. Austin, Jr., San Antonio	1988
Mr. Roy R. Barrera, Sr., San Antonio	1988
** Mr. Sam Barshop, San Antonio	1989
* Mr. J. Michael Bell, San Antonio	1989
* Mr. Thomas Benson, San Antonio	1988

** Mr. Glenn Biggs, San Antonio	1989
* Mr. L. D. Brinkman, Kerrville	1988
* Mrs. Walter F. (Lenore) Brown, San Antonio	1989
* Mr. Charles C. Butt, Jr., San Antonio	1989
Mr. Dudley Campbell, Refugio	1987
* Dr. Donald M. Carlton (Ph.D.), Austin	1989
* Mr. A. Baker Duncan, San Antonio	1988
* Mr. Ruben Escobedo, San Antonio	1988
* Dr. Peter T. Flawn (Ph.D.), Austin	1988
Mr. Thomas C. Frost, Jr., San Antonio	1987
* Mr. Christopher Gill, San Antonio	1989
* Mr. William E. Greehey, San Antonio	1989
Mr. C. C. Gunn, Sr., San Antonio	1988
* Mr. Earl C. Hill, San Antonio	1988
John J. Hinchey, M.D., San Antonio	1987
** Mr. James E. Ingram, San Antonio	1989
* Mr. B. K. Johnson, San Antonio	1989
* Mr. Patrick J. Kennedy, San Antonio	1989
* Mr. Radcliffe Killam, Laredo	1988
* Mr. Charles Kilpatrick, San Antonio	1988
* Mr. Steven Q. Lee, San Antonio	1989
* Mr. Pat Legan, San Antonio	1988
Mr. L. Lowry Mays, San Antonio	1987
* Mr. Robert G. Marbut, San Antonio	1989
* Mr. W. W. McAllister III, San Antonio	1989
* Mr. B. J. "Red" McCombs, San Antonio	1989
** General Robert F. McDermott, San Antonio	1989
* Mr. Lewis J. Moorman, Jr., San Antonio	1988
Mr. Jesse H. Oppenheimer, San Antonio	1987
Mr. Charles G. Orsinger, San Antonio	1988
Mr. Dan F. Parman, San Antonio	1988
* Mr. Tom E. Pawel, San Antonio	1988
* Mr. Robert T. Rork, San Antonio	1988
Mr. Stanley D. Rosenberg, San Antonio	1987
* Mr. Pete C. Selig, San Antonio	1988
John M. Smith, Jr., M.D., San Antonio	1988
Reeves L. Smith, D.D.S., San Antonio	1988
Mr. Marvin M. Stetler, San Antonio	1987
Mrs. Joe R. (Joci) Straus, Jr., San Antonio	1987
Mr. Edgar Von Scheele, Sr., San Antonio	1987
* Mr. Arnold "Pic" Swartz, San Antonio	1988
* Mr. William C. Thomas, San Antonio	1988
* Mr. Abelardo L. Valdez, San Antonio	1989
Mr. Martin Weiss, San Antonio	1988
** Mr. C. Martin Wender, San Antonio	1989
* Dr. Robert V. West, Jr. (Ph.D.), San Antonio	1989
* Mr. Jack Willome, San Antonio	1989
Mrs. Earl H. (Irene) Wischer, San Antonio	1988
* Mrs. Bill (Darolyn) Worth, San Antonio	1989
* Mr. H. Bartell Zachry, Jr., San Antonio	1989
Unfilled Term	1987
Unfilled Term	1987
Unfilled Term	1988
Unfilled Term	1988
Unfilled Term	1988
Unfilled Term	1989

Medical School Advisory Council.--Authorized Membership 7:

	<u>Term Expires</u>
Mr. Pat S. Chumney, San Antonio	1987
Mr. Tucker Dorn, San Antonio	1987
Scott C. Duncan, M.D., San Antonio	1988
Mr. Richard E. Goldsmith, San Antonio	1988
** Mr. William Reddel, San Antonio	1989
** Mr. Thomas E. Turner, Jr., San Antonio	1989
Unfilled Term	1987

Nursing School Advisory Council.--Authorized Membership 15:

	<u>Term Expires</u>
* Mrs. Ernesto (Robin) Ancira, San Antonio	1989
* Mrs. M. McLean (Erin) Bowman, San Antonio	1989
Alfonso Chiscano, M.D., San Antonio	1987
Sterling H. Fly, Jr., M.D., Uvalde	1988
* Mrs. F. Daniel (Carol) Foley, San Antonio	1988
Mrs. J. Howard (Ruth) Frederick, San Antonio	1987
Mrs. Richard E. (Toni) Goldsmith, San Antonio	1988
** Brigadier General Kenneth R. Milam (Ret.), San Antonio	1989
** Mr. Dan F. Parman, San Antonio	1989
** Mrs. Marvin M. (Lorie) Stetler, San Antonio	1989
* Mrs. Robert Dixon (Kelly) Tips, San Antonio	1989
Unfilled Term	1987
Unfilled Term	1989
Unfilled Term	1989
Unfilled Term	1989

13. The University of Texas System Cancer Center

The University Cancer Foundation Board of Visitors.--
Authorized Membership 50:

	<u>Term Expires</u>
* Mr. John D. Alexander, Jr., San Antonio	1989
** The Honorable Ben F. Barnes, Austin	1989
* Mrs. Jack Blanton, Houston	1989
** Mr. Charles C. Butt, San Antonio	1989
Mr. Ernest H. Cockrell, Houston	1988
Mrs. John B. Connally, Austin	1987
Mr. Edwin L. Cox, Dallas	1988
** Mr. James D. Dannenbaum, Houston	1989
** Mr. John H. Duncan, Houston	1989
Mr. E. A. Durham II, Corpus Christi	1988
Dr. Burton E. Grossman (Ph.D.), San Antonio	1987
** Mrs. William C. Harvin, Houston	1989
Mrs. Jesse B. Heath, Jr., Houston	1987
** Mr. Roy M. Huffington, Houston	1989
Mr. Charles Hurwitz, Houston	1987
Mr. Thad T. Hutcheson, Jr., Houston	1987
** Mrs. J. Hugh Liedtke, Houston	1989
Mr. Ben Love, Houston	1988
Mr. Walter M. Mischer, Jr., Houston	1987
Mr. Robert Mosbacher, Houston	1988
Mr. Robert Nichols, Dallas	1988
Mr. T. Boone Pickens, Jr., Amarillo	1988
Mr. Jack Rains, Houston	1988
Mr. B. M. Rankin, Jr., Dallas	1987
Mr. Ben J. Rogers, Beaumont	1988

Tom Smith, M.D., Dallas	1987
** Mr. Ralph Spence, Tyler	1989
John C. Turner, M.D., Tyler	1987
James M. Vaughn, M.D., Tyler	1988
Mr. Dayton Walkup, Kilgore	1988
Mr. John Warner, Tyler	1988
Mr. Watson Wise, Tyler	1988
Mr. Royce E. Wisenbaker, Tyler	1987
Mr. Sam Wolf, Tyler	1988
** Mr. James C. Wynne, Jr., Tyler	1989
Unfilled Term	1988

3. U. T. Medical Branch - Galveston: Appointment of Advisory Committee for the Selection of a Chief Administrative Officer (President).--The membership of the Advisory Committee for the Selection of a Chief Administrative Officer (President) at The University of Texas Medical Branch at Galveston is herewith reported for the record. This committee had been constituted pursuant to the Regents' Rules and Regulations, Part One, Chapter II, Section 17:

Advisory Committee for the
Selection of a Chief Administrative Officer
for
The University of Texas Medical Branch at Galveston

System Administration Representatives

Executive Vice Chancellor for Health Affairs
Charles B. Mullins, M.D. (Chairman)
Chancellor Hans Mark

Board of Regents

Regent Janey Slaughter Briscoe
Regent Shannon H. Ratliff
Regent Mario Yzaguirre

Chief Administrative Officers

Charles C. Sprague, M.D., President-Emeritus,
The University of Texas Health Science
Center at Dallas
Charles A. LeMaistre, M.D., President, The Uni-
versity of Texas System Cancer Center
Dr. William H. Cunningham, President, The Uni-
versity of Texas at Austin

Alumni Association Representative - U.T.M.B.

Dr. Jack D. Ramsey, Abilene

Galveston Community and Development Board

Mr. Ballinger Mills, Galveston
Mr. Harris L. Kempner, Jr., Galveston
Courtney M. Townsend, Sr., M.D., Paris

Dean's Representative

Dr. John Bruhn, Dean, U. T. Allied Health
Sciences School - Galveston

Faculty Representatives

Samuel Baron, M.D.
Dr. Billy U. Phillips
Virginia Rahr, R.N.
James C. Thompson, M.D.
W. D. Willis, Jr., M.D.

Student Representatives

Miss Marie Varga
Mr. John Bakos

REPORT OF BOARD FOR LEASE OF UNIVERSITY LANDS

Regent Rhodes, Vice-Chairman of the Board for Lease of University Lands, submitted the following report on behalf of that Board:

Report

The Board for Lease of University Lands has not met since the Regents' meeting on August 14, 1986, but has scheduled a meeting for November 10, 1986, to consider several items.

The State had an oil and gas lease sale on October 7, 1986, and offered 79,000 acres for lease. There were only 9,800 acres leased from that sale. Although the State leased only a small fraction of the acreage offered, it did receive an average of \$250 an acre for a total income of approximately \$2,500,000. This is an excellent bonus consideration for leases during this depressed period.

The Board for Lease, at its November meeting, will discuss the possibility of an oil and gas lease sale for 1987.

SCHEDULED MEETING.--Chairman Hay announced that the next meeting of the U. T. Board of Regents would be held at The University of Texas Health Science Center at San Antonio on December 4-5, 1986.

RECESS.--At 2:35 p.m., Chairman Hay announced that the Board would recess to convene in executive session to discuss matters pursuant to Vernon's Texas Civil Statutes, Article 6252-17, Sections 2(e), (f) and (g) and that the Board would reconvene in open session this afternoon (October 9) to consider formally actions on those items.

RECONVENE.--At 5:40 p.m., the Board reconvened in open session for the purpose of acting on items discussed in Executive Session.

EXECUTIVE SESSION OF THE BOARD OF REGENTS

Chairman Hay reported that the Board had met in Executive Session in Room E1.403 of the Fred F. Florence Bioinformation Center to discuss matters in accordance with Article 6252-17, Sections 2(e), (f) and (g) of Vernon's Texas Civil Statutes. In response to Chairman Hay's inquiry regarding the wishes of the Board, the following actions were taken:

1. U. T. Health Science Center - Houston: Settlement of Medical Malpractice Litigation - Raj Kumari Dhingra, et al.--Regent Briscoe moved that the Office of the Chancellor and the Office of General Counsel be authorized to settle on behalf of The University of Texas Health Science Center at Houston the medical malpractice lawsuit filed by Raj Kumari Dhingra, et al, in accordance with the proposal presented in Executive Session.

Vice-Chairman Ratliff seconded the motion which carried by unanimous vote.

2. U. T. Health Science Center - San Antonio - Addition to Administration Services Building: Authorization to Select Hearing Officer for All Disputed Claims Regarding Construction Contract with Prassel Construction Company, San Antonio, Texas, and Authorization for Hearing Officer to Employ Personnel to Conclude Such Hearings and to Present Findings to the Board.--Upon motion of Regent Rhodes, seconded by Regent Briscoe, the Board:
 - a. Authorized the Office of General Counsel to select, subject to the approval of the Chairman of the Buildings and Grounds Committee, a Hearing Officer designated to hear all disputed claims concerning a question of fact pending before the U. T. Board of Regents regarding the construction contract with Prassel Construction Company, San Antonio, Texas, for the Addition to the Administration Services Building at The University of Texas Health Science Center at San Antonio
 - b. Empowered the Hearing Officer to adopt such rules of procedure for the hearing as he deems necessary and with the approval of the Chancellor, authorized the Hearing Officer to employ any consultants and office personnel necessary to conclude such hearings in an expeditious manner
 - c. Instructed the Hearing Officer, upon the conclusion of testimony and presentation of all pertinent data, to present his findings to the U. T. Board of Regents for its decision regarding the validity of the pending claims.

3. U. T. Cancer Center - Veterinary Resources Division: Authorization to Purchase at Auction 78.153 Acres of Surplus Property in Bastrop County, Texas, and to Seek Coordinating Board Approval for This Acquisition; and Authorization for Appropriate Officials to Execute Documents Related Thereto.-- Regent Blanton moved that the Office of Asset Management be authorized, through the Manager of Endowment Real Estate, to purchase at auction 78.153 acres of surplus property in Bastrop County, Texas, for use and benefit of The University of Texas System Cancer Center Veterinary Resources Division within the parameters discussed in Executive Session and that Coordinating Board, Texas College and University System approval for this acquisition be requested.

Regent Blanton further moved that appropriate officials of the Office of Asset Management and the Executive Secretary to the Board of Regents be authorized to execute such documents as may be required to complete this transaction after their review and approval by the Office of General Counsel.

Regent Yzaguirre seconded the motion which prevailed without objection.

4. U. T. Board of Regents: Mr. Louis M. Pearce, Jr., Houston, Texas, Appointed Regental Representative to U. T. Austin Intercollegiate Athletics Council for Men Effective September 1, 1986.--Upon motion of Vice-Chairman Baldwin, seconded by Regent Yzaguirre, Mr. Louis M. Pearce, Jr., Houston, Texas, was appointed to succeed Mr. Jack Gray as Regental representative to The University of Texas at Austin Intercollegiate Athletics Council for Men for a four (4) year term beginning September 1, 1986.

ADJOURNMENT.--There being no further business, the meeting was adjourned at 5:45 p.m.



Arthur H. Dilly
Executive Secretary

October 16, 1986