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B

Divider Title: _____

FOSTER TASK FORCE MEMBERS

Name	Office	Phone	Fax	Home Phone
Helen Howell	Murray	4-0216	4-0238	(202) 363-1912
Rick Ilgenfritz	Murray	4-2431	4-0238	(202)667-5226
Kindra Norton	Murray	4-1217	4-0238	(202)544-6750
Rima Cohen	Daschle	4-5717	8-4136	(202)667-9268
Stephanie Foster	Mikulski	4-8868	8-1199	(202)667-3129
Patti Mitchell	Mikulski	4-7053	8-4136	(202)332-3388
Rebecca Rozen	Boxer	4-8130	8-0026	(202)364-9482
Drew Littman	Boxer	4-8116	8-0026	(301)530-8978
Gerron Levi	Feinstein	4-6443	8-3954	(703)683-4350
Dayna Bender	Moseley-Braun	4-3473	4-2626	(202)234-4472
Sander Laurie	Lautenberg	4-6822	4-9707	(202)686-5715
Mark Childress	Kennedy	4-5307	4-3533	(202)342-6123
Theresa Bourgeois	Labor/Kennedy	4-4781	4-3533	(202)387-5947

Mary Parke	Simon	4-8183	4-0868	(202)544-8234
Vicki Otten	Simon	4-7028	4-0868	(202)244-0453
Lauren Gross	Pell	4-4642	4-4680	(301)718-0424
Stephanie Goodman	Kennedy	4-1322	4-5128	(202)363-8919
Jane Loewenson	Dodd	4-5630	4-7475	(202)234-0640
Caroline Chambers	Dorgan	4-1450	4-1193	(202)364-0864
Sara Thom	Kennedy	4-7675		

John Podesta	WH Staff Counsel	6-2702	6-2215	(202)244-5673
Meeghan E.V. Pronty	WH Communications	6-5716	6-2239	
Tracey Thornton	WH Leg Affairs	6-6493;(p)757-5000	456-2604	(202)619-7116
Jerry Klepner	HHS	690-7627		
Avis LaVelle	HHS	690-7850	690-5673	
Alan Hoffman	HHS	690-6609		

MARCH 15, 1995

MEMORANDUM FOR WHITE HOUSE STAFF

FROM: MARILYN YAGER

RE: SUPPORTERS FOR THE FOSTER NOMINATION

The attached list of national groups supporting the Foster nomination now exceeds 100.

**Dr. Foster Supporters
As of March 15, 1995**

ADVOCATES FOR YOUTH
AFRICAN METHODIST EPISCOPAL CHURCH
ALPHA KAPPA ALPHA SORORITY
ALPHA PHI ALPHA FRATERNITY
AMERICAN ACADEMY OF DERMATOLOGY
AMERICAN ACADEMY OF PEDIATRICS
AMERICAN CATARACT SOCIETY
AMERICAN FEDERATION OF STATE, COUNTY,
AND MUNICIPAL EMPLOYEES, AFL-CIO
AMERICAN ASSOCIATION OF UNIVERSITY
WOMEN
AMERICAN ASSOCIATION OF DENTAL
SCHOOLS
AMERICAN COLLEGE OF PHYSICIANS
AMERICAN COLLEGE OF OBSTETRICIANS AND
GYNECOLOGISTS
AMERICAN COLLEGE OF PREVENTIVE
MEDICINE
AMERICAN JEWISH CONGRESS
AMERICAN MEDICAL ASSOCIATION
AMERICAN MEDICAL WOMEN'S ASSOCIATION
AMERICAN NURSES ASSOCIATION
AMERICAN PEDIATRIC SOCIETY
AMERICAN PSYCHIATRIC ASSOCIATION
AMERICAN PSYCHOLOGICAL ASSOCIATION
AMERICAN PUBLIC HEALTH ASSOCIATION
AMERICAN SOCIETY FOR REPRODUCTIVE
MEDICINE
AMERICAN SOCIETY OF ANESTHESIOLOGISTS
AMERICANS FOR DEMOCRATIC ACTION
AMERICANS UNITED FOR SEPARATION OF
CHURCH AND STATE
ASSOCIATION OF ACADEMIC HEALTH
CENTERS
ASSOCIATION OF AMERICAN MEDICAL
COLLEGES
ASSOCIATION OF BLACK CARDIOLOGISTS
ASSOCIATION OF MEDICAL SCHOOL
PEDIATRIC CHAIRMAN
ASSOCIATION OF MINORITY HEALTH
PROFESSIONS SCHOOLS
ASSOCIATION OF PROFESSORS OF
OBSTETRICS AND GYNECOLOGY
ASSOCIATION OF SCHOOLS OF PUBLIC
HEALTH
ASSOCIATION OF STATE AND TERRITORIAL
HEALTH OFFICIALS
ASSOCIATION OF TEACHERS OF PREVENTIVE
MEDICINE
BAPTIST MINISTERS ASSOCIATION
B'NAI B'RITH WOMEN
CAMPAIGN FOR WOMEN'S HEALTH
CATHOLICS FOR A FREE CHOICE
CENTER FOR WOMEN POLICY STUDIES
CENTER FOR REPRODUCTIVE LAW & POLICY
CHILDREN'S HEALTH FUND
CLARA BELL DUVAL EDUCATION FUND
COALITION OF BLACK TRADE UNIONS
COALITION OF LABOR UNION WOMEN
COUNCIL OF UNIVERSITY CHAIRS OF
OBSTETRICS AND GYNECOLOGY
COUNCIL ON RESIDENT EDUCATION IN
OBSTETRICS AND GYNECOLOGY

DELTA SIGMA THETA SORORITY
ENDOCRINE SOCIETY
ECUMENICAL MINISTERIAL ASSOCIATION
HUMAN RIGHTS CAMPAIGN FUND
INTERNATIONAL WOMEN'S HEALTH
COALITION
KAPPA ALPHA PSI FRATERNITY
MEDICAL STUDENTS FOR CHOICE
NATIONAL ABORTION AND REPRODUCTIVE
RIGHTS ACTION LEAGUE
NATIONAL ABORTION FEDERATION
NATIONAL ALLIANCE OF BLACK SCHOOL
EDUCATORS
NATIONAL ASIAN WOMEN'S HEALTH
ORGANIZATION
NATIONAL ASSOCIATION FOR THE
ADVANCEMENT OF COLORED PEOPLE
NATIONAL ASSOCIATION FOR EQUAL
OPPORTUNITY IN HIGHER EDUCATION
NATIONAL ASSOCIATION FOR PUBLIC
HEALTH POLICY
NATIONAL ASSOCIATION OF PEOPLE WITH
AIDS
NATIONAL ASSOCIATION OF PUBLIC
HOSPITALS
NATIONAL ASSOCIATION OF SOCIAL
WORKERS
NATIONAL BAPTIST CONVENTION, INC.
NATIONAL BAR ASSOCIATION
NATIONAL BLACK CAUCUS OF STATE
LEGISLATORS
NATIONAL BLACK CHAMBER OF COMMERCE
NATIONAL BLACK CHILD DEVELOPMENT
INSTITUTE
NATIONAL BLACK NURSES' ASSOCIATION
NATIONAL BLACK WOMEN'S HEALTH PROJECT
NATIONAL COUNCIL OF JEWISH WOMEN
NATIONAL COUNCIL OF NEGRO WOMEN
NATIONAL COUNCIL OF SENIOR CITIZENS
NATIONAL EDUCATION ASSOCIATION
NATIONAL FAMILY PLANNING &
REPRODUCTIVE HEALTH ASSOCIATION
NATIONAL HISPANIC MEDICAL ASSOCIATION
NATIONAL MEDICAL ASSOCIATION
NATIONAL ORGANIZATION FOR WOMEN
NATIONAL WOMEN'S LAW CENTER
NOW LEGAL DEFENSE AND EDUCATION FUND
OLDER WOMEN'S LEAGUE
100 BLACK WOMEN INC.
OPERATION PUSH, INC.
PEOPLE FOR THE AMERICAN WAY
PHYSICIANS FOR SOCIAL RESPONSIBILITY
PLANNED PARENTHOOD FEDERATION OF
AMERICA
PHI BETA SIGMA FRATERNITY
PRIMARY CARE DEVELOPMENT CORPORATION
PROGRESSIVE BAPTIST CONVENTION
RELIGIOUS COALITION FOR REPRODUCTIVE
CHOICE
SEXUALITY, INFORMATION AND EDUCATION
COUNCIL OF THE UNITED STATES
SOCIETY FOR ADOLESCENT MEDICINE
SOCIETY FOR PEDIATRIC RESEARCH

SUMMIT '93 HEALTH COALITION
BNUNITED CHURCH OF CHRIST, OFFICE FOR
CHURCH AND SOCIETY
UNITED HOUSE OF PRAYER FOR ALL PEOPLE
UNITED METHODIST CHURCH, GENERAL
COMMISSION ON RELIGION AND RACE
UNITY FELLOWSHIP CHURCH MOVEMENT
VOTERS FOR CHOICE
WIDER OPPORTUNITIES FOR WOMEN
WOMEN'S LLEGAL DEFENSE FUND
ZERO POPULATION GROWTH
ZETA PHI BETA SORORITY

LOCAL, STATE, AND NATIONAL ORGANIZATIONS
SUPPORT FOR DR. HENRY FOSTER FOR SURGEON GENERAL
APRIL 28, 1995 11:30 AM

COMPANY

Academic Health Centers

Advocates for Youth

African Methodist Episcopal Church

AFSCME

Am. College of OB/GYN, Illinois Section

Am. College of OB/GYN, New York State

Am. Society of Cataract and Refractive Surgery

Ambulatory Pediatric Association

American Academy of Dermatology

American Academy of Pain Medicine

American Academy of Pediatrics

American Association of Public Health Physicians

American Association of University Women

American Association of University Women, Indiana

American College of Chest Physicians

American College of Ob/Gyn

American College of Obstetricians and Gynecologists, Illinois Section

American College of Obstetricians and Gynecologists, New York State

American College of Physicians

American College of Preventive Medicine

American Counseling Association

American Federation of State, County, and Municipal Employees

American Gastroenterological Association

American Group Practice Association

American Jewish Congress

American Medical Association

American Medical Women's Association

American Medical Women's Association, Inc.

LOCAL, STATE, AND NATIONAL ORGANIZATIONS
SUPPORT FOR DR. HENRY FOSTER FOR SURGEON GENERAL
APRIL 28, 1995 11:30 AM

COMPANY

American Nurses Association

American Occupational Therapy Assn.

American Osteopathic Association

American Psychiatric Assistant

American Psychiatric Association

American Psychological Association

American Public Health Association

American Society for Gastrointestinal Endoscopy

American Society for Reproductive Medicine

American Society of Anesthesiologists

American Society of Cataract and Refractive Surgery

Americans for Democratic Action, Inc.

Americans United for Separation of Church and State

Assn. of Maternal and Child Health Programs

Assn. of Minority Health Professional Schools

Assn. of Professors of Ob/Gyn

Assn. of State and Territorial Health Officials

Assn. of Teachers of Preventive Medicine

Assn. of Women's Health, Ob. and Neonatal Nurses

Association of American Medical Colleges

Association of Black Cardiologists, Inc.

Association of Maternal and Child Health Programs

Association of Professors of Gynecology and Obstetrics

Association of Schools of Public Health

Association of State and Territorial Health Officials

Association of Women's Health, Obstetric and Neonatal Nurses

Association of Teachers of Preventive Medicine

Auxiliary to the R.F. Boyd Medical Society

LOCAL, STATE, AND NATIONAL ORGANIZATIONS
SUPPORT FOR DR. HENRY FOSTER FOR SURGEON GENERAL
APRIL 28, 1995 11:30 AM

COMPANY

B'nai B'rith Women

Baptist Ministers Association

Baptist Mission & Education State Convention of LA

Baptist Missiona & Education State Convention of LA

Brooklyn Heights Clergy Association

California Public Health Association, North

Campaign for Women's Health

Catholics for a Free Choice

Center for Women Policy Studies

Chi Boule - Sigma Pi Phi Fraternity

Coalition of Black Trade Unionists

Coalition of Labor Union Women

Council on Resident Education in OB/GYN

Council on Resident Education in Obstetrics and Gynecology

Delta Sigma Theta Sorority, Inc.

Delta Sigma Theta Sorority, Inc., New Jersey

Ecumenical Ministerial Association

First English Lutheran Church

First United Methodist Church

General Commission of Religion and Race

Hollywood Women's Political Committee

Human Rights Campaign Fund

Indiana Cares Program

Indiana Community AIDS Action Network

Indiana Planned Parenthood Affiliates Association

Interdenominational Ministerial Alliance

International Women's Health Coalition

Leander Health Technologies Corporation

LOCAL, STATE, AND NATIONAL ORGANIZATIONS
SUPPORT FOR DR. HENRY FOSTER FOR SURGEON GENERAL
APRIL 28, 1995 11:30 AM

COMPANY

MARC Associates, Inc.

Medical Students for Choice

Meharry Medical College Los Angeles Alumni Chapter

Meharry Medical College, Los Angeles Alumni

Michigan Abortion and Reproductive Rights Action League

Missouri NARAL

Morehouse College

Mother African Zoar United Methodist Church

NAACP

NAACP - Washington Bureau

NAACP, Indiana

NAACP, Nashville Branch

NARAL

NARAL, Indiana

NARAL, New Hampshire

NARAL, New York

Nashville Academy of Medicine

Nat. Assn. for Equal Opportunity in Higher Education

Nat. Assn. of Equal Opportunity in Higher Education

Nat. Coalition of 100 Black Women, Inc.

Nat. Family Planning & Reproductive Health Assn.

National Abortion and Reproductive Rights Action League

National Abortion and Reproductive Rights Action League, New Hampshire

National Abortion Federation

National Alliance of Black School Educators

National Asian Women's Health Organization

National Assn. of School Nurses, Inc.

National Association for Equal Opportunity in Higher Education

LOCAL, STATE, AND NATIONAL ORGANIZATIONS
SUPPORT FOR DR. HENRY FOSTER FOR SURGEON GENERAL
APRIL 28, 1995 11:30 AM

COMPANY

National Association for Public Health Policy
National Association for the Advancement of Colored People
National Association of County and City Health Officials
National Association of Equal Opportunity in Higher Education
National Association of People with AIDS
National Association of Public Hospitals
National Association of School Nurses, Inc.
National Association of Social Workers
National Association of Social Workers, Indiana Chapter
National Association of the Advancement of Colored People
National Baptist Convention, Inc.
National Black Chamber of Commerce
National Black Child Development Institute, Inc.
National Black Nurses' Association, Inc.
National Black Women's Health Project
National Coalition of 100 Black Women, Inc.
National Council of Jewish Women
National Council of Negro Women, Inc.
National Education Association
National Family Planning and Reproductive Health Association
National Hispanic Medical Association
National League of Cities
National League of Cities/National Black Caucus of Local Elected Officials
National Medical Association
National Organization for Women
National Organization for Women, Inc.
National Organization for Women, Indiana
National Osteoporosis Foundation

LOCAL, STATE, AND NATIONAL ORGANIZATIONS
SUPPORT FOR DR. HENRY FOSTER FOR SURGEON GENERAL
APRIL 28, 1995 11:30 AM

COMPANY

National Women's Law Center

NOW Legal Defense and Education Fund

Office for Church in Society

Office of Congressman Earl F. Hilliard

Operation Push, Inc.

Pathfinder International

People for the American Way

Phi Beta Sigma Fraternity, Inc.

Planned Parenthood Federation of America

Planned Parenthood of East Tennessee, Inc.

Planned Parenthood of Little Falls, Minnesota

Planned Parenthood of North Central Indiana

Planned Parenthood Staff of Little Falls Minnesota

Pleasant Grove Baptist Church

Progressive Baptist Convention

Progressive National Baptist Convention

Religious Action Center of Reform Judaism

Religious Coalition for Reproductive Choice

Republican Coalition for Choice

S. Carolina State Univ. Alumni Assn.

Sexuality Information and Education Council of the United States

Shiloh Baptist Church of Washington

SIECUS

Society for Investigative Dermatology

Society for Pediatric Research

Society of Critical Care Medicine

South Carolina State University Alumni Association

State of Florida

LOCAL, STATE, AND NATIONAL ORGANIZATIONS
SUPPORT FOR DR. HENRY FOSTER FOR SURGEON GENERAL
APRIL 28, 1995 11:30 AM

COMPANY

Summit '93 Health Coalition

Tennessee Medical Association

The African Methodist Episcopal Church

The American College of Ob/Gyn

The American College of Obstetricians and Gynecologists

The American Occupational Therapy Association, Inc.

The Association of Minority Health Professional Schools

The Center for Reproductive Law & Policy

The Chicago Gynecological Society

The Clara Bell Duvall Education Fund

The Endocrine Society

The National Black Caucus of State Legislators

The Society for Adolescent Medicine

The United Methodist Church - Nashville Area

United House of Prayer for All People

Unity Fellowship Church Movement

Voters for Choice

WA St. Assn. of Black Prof. in Health Care

Washington Bureau

Washington State Association of Black Professionals in Health Care

WAY Scholarship Multi-Site Replication

Wider Opportunities for Women

Women's Campaign Fund

Women's Legal Defense Fund

Women's Studies Program, Syracuse University

Yale University, School of Medicine

YWCA of Nashville and Middle Tennessee

Zero Population Growth

LOCAL, STATE, AND NATIONAL ORGANIZATIONS
SUPPORT FOR DR. HENRY FOSTER FOR SURGEON GENERAL
APRIL 28, 1995 11:30 AM

COMPANY

Zeta Phi Beta Sorority, Inc.

INDIVIDUAL SUPPORT FOR DR. HENRY FOSTER FOR SURGEON GENREAL
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STATE	LAST NAME	FIRST NAME	COMPANY	TITLE
	Russell	Keith		
	Blechner	Jack	The School of Medicine	Professor and Chairman
	Gilbertson	Michael		
	Heagarty	Dr. Margaret	Harlem Hospital Center	Director of Pediatrics
	Lynch	Pat	Georgia State University, Beebe Institute	
AK	Johnson	Fred		
	Rogers	Pam		
	Coppock	Stefanie		
AL	Walker-Brown	Thelma	IALAC, Inc.	Executive Director
	Wallace	Bill		
	Vance	Harold		
	Alford, Jr.	James		
	Braye	James		
	Gilpin	Pearline		
	Younger	J. Benjamin	University of Alabama at Birmingham	Professor and Residency Program Director
	Flowers, Jr.	Charles		
	Hagler	Robert	The American College of OB/GYN	
	Harvey	Richard		
	Hudson-Neely	Brenda		
	Johns, Jr.	Calvin	Pryor-Winston Center	
	Dees	Constance		
	Kitchens	Lynne		
	Callahan	Ina		
	LeFlore	Walker		
	Peters	Stephanie		
	Norris	Amy		
	Goldenberg, MD	Robert	University of Alabama at Birmingham	Professor and Chairman, Dept. of OB/GYN
	LeFlore, MD	Walker		
AR	Davis, Jr.	Lawrence	Office of the Chancellor	Chancellor
	Pierre	Katie		
	Read	Tysonia		
	Banister	Janis		
	Jensen, MD	Joseph		
	Kutait, MD	Kemal	Holt-Krock Clinic	
	Cobb	Kellie		
	Laws	Peter		
AZ	Crisp	William	Associated Gynecologists, LTD	
	Prather	William		
	Clousner	Mitchell		
	Lawson	Susan		
	Tully	Kris		
	McBride	Michael		
	Marrow	Timothy		
	Conner	Florence		
	Brinkerhoff	Sidney		
	Petruk	Jerome		
	Chengalath	HARI		
	Bryan-Barberll	Barb		
CA	Blank	William		

INDIVIDUAL SUPPORT FOR DR. HENRY FOSTER FOR SURGEON GENREAL
 APRIL 28, 1995 11:30AM

STATE	LAST NAME	FIRST NAME	COMPANY	TITLE
CA	Collins	Harry		
	Clark	John	Jail Health Consultations	
	Lawson	Semiola		
	Cooper	Elizabeth		
	Cruz	Jaime	Chicano/Latino Medical Assn. of California	President
	Charm	Robert		
	Horn	Dianne		
	Males	Mike	School of Ecology, Doctoral Program	
	Allen	Richard	Saint Joseph Hospital	Program Director
	Stevens	William		
	Hoag	Roger	OB/GYN & Fertility Specialists Medical Group, Inc.	
	Nicholson	Wanda	School of Medicine	University of California, San Francisco
	Judd	Scott	Standford University	
	Woods, Sr.	James	Automotive Products, Inc.	President
	Brown	Amos	Third Baptist Chruch	Pastor
	Pete	Geoggrey		
	Geddes	Rose		
	Rudinskas	Peter		
	Pneuman	Linda		
	Bernard	Cindy		
	Green	Scott		
	Hanson	Stephen		
	Carlson	Mary Lou		
	Rudow, MD	Marl		
	Payton	James		
	Ralph	Leon	Interdemoninational Ministerial Alliance	President
	Franzen	Juliet		
	March	Robert		
	Goldberg	Kenneth		
	Denchasy	Ian		
	Douglas	Jeanne		
	Cooper	Steve		
	Perry	Verne		
	Gavin	Michael		
	March	Alice		
	Bridgman	Geraldine		
	Fierson	David		
	Cooper	Lynn	California State University, Sacramento	Professor of Social Work
	Rysdorp	Michael		
	Hyatt	Bonnie		
	Graham	Russell		
	Nelson	Bonnie		
	Stefanik	Leslie		
	Kravitz	Jody		
	Villaseca	Eduardo		
	Anderson	Erica		
	Moore	Robin		
	Selph	Tom		
	Waller	Paul		
	Ciabattoni	Louis	Perkin-Elmer Corportation	Manager, Product Planning
	Spiro	John		
	Kohler	John		
	Halpern	Gerry		
	Kuehn, MD	Richard	Kaiser-Permanente	Assistant Chief OB/GYN

INDIVIDUAL SUPPORT FOR DR. HENRY FOSTER FOR SURGEON GENREAL
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STATE	LAST NAME	FIRST NAME	COMPANY	TITLE
CA	Applewhite	Anthony		
	Olsen	Keith		
	Waller	Joan		
	Haaksma	Carol		
	Luttrell	Martha	Hollywood Political Committee	Member
	Wilmot	Gary		
	Lambert	Alan		
	Morris	Kerry		
	Anderson	Arne		
	Rutherford, PhD	Millicent		
	Fass-Holmes	Brenda		
	Frederick	Carole		
	Biddick	Debora		
	Garelis	Edward		
	Tischler	Jim		
	Gordon	Susanna		
	Johnson	A.		
	Tanenbaum	STephan		
	Scanagatta	Leslie		
	Roy	Susie		
	Budroe	John		
	Belshe	Robert		
	Schaff, PhD	James		
	Haskin	Thomas		
	Wilkman	Robert		
	Anderson	Miles		
	Cantrell	Katrina	Feminist Women's Health Center	Director
		Michael		
	Paine	Adelaide		
	Paine	Robertde		
	Weiss	Carlee	Cal-Pak Packing Services	President
	Krebs	Brad		
	Richanback, MD	Henry		
	Nishikawa	Thomas		
	Fox	Joy		
	Boatright	Carolyn		
	Riddoch	Lee Ann		
	Calvert	Carol	Feminist Women's Health Center	Assistant
	Silber	M.		
	Kent	Robert		
	Milman	Barbara		
	Fader	Scott		
	Montgomery	Linda		CPA
	Hanks	Dr. Julie Ann		
	White, Jr.	R.W.		
	Sublett, Esq.	Roger	Law Offices of Roger M. Sublett	
	Crair	R.B.		
	Giagni	Daniel		
	Anderson, MD	E. A.		
	Rodriguez-Trias	Helen		Pediatrician
	, MD			
	Bunnell	Lee		
	Endres	Robin		
	Fang	Sabrina		
	Einbinder	Harold		
	Johnson	Phyllis		
	Hale	David		

INDIVIDUAL SUPPORT FOR DR. HENRY FOSTER FOR SURGEON GENREAL
 APRIL 28, 1995 11:30AM

STATE	LAST NAME	FIRST NAME	COMPANY	TITLE
CA	Ayasse	Robert		
	Allen	Arghur		
	Chessin	Steve		
	Spear-Barrett	Sarah		
	Harrison	Lois		
	Zink	Hary		
	Booher	Alexis		
	Amundson	Bruce		
	Reed	Mariyn		
	Houston	Jenny		
	Quaintance	Chris		
	Firestein	Kenneth		
	Sieber	Robert		
	Reece	Russell		
	Seese	Gordon		
	Canter	James		
	Fairgrove	Rowan		
	Zingler	Kurt		
	Christian	Chas		
	Hardesty	Karen		
	Berner	Bill		
	Bloom	Stewart		
	Rietman	Kearney		
	Berner	Ellie		
	Schiff	Steven		
	Chisnell	Dana		
	Carranza	A.C.		
	O'Rourke, PhD	Linden		
	Kellogg	Orson		
	Bristow, MD	Lonnie		
	Gros	Michael		
	Lyndon	Kelly		
	Kinz	Richard		
	Dion	Marcia		
	Valentine	Joseph		
	Knollmiller	Jeffrey		
	Schaffer	Jason		
CO	Paris	Doris		
	Gibbs	Ronald	University of Colorado Health Sciences Center	Professor and Chairman
	Cohen	Edward	Vail Mountain Medical, P.C.	
	Jackson	Regina		
	Forsmark	Megan		
	Wilson	Ken		
	Romine	Kimberly		
	Staller	Josh		
CT	Jones, III	Richard	The American College of OB/GYN	President 1992-1993
	McPhedran	Peter	Yale New HAVEN Hospital	
	Sandler	Ann		
	Dyson	William	House of Representatives	State Representative of Connecticut
	Rawlings	Sedrick		
	Toland	Marilyn		
	Robinson	Robyn		
	Fish	Christopher		

INDIVIDUAL SUPPORT FOR DR. HENRY FOSTER FOR SURGEON GENREAL
APRIL 28, 1995 11:30AM

STATE	LAST NAME	FIRST NAME	COMPANY	TITLE
CT	Hepworth	Jeri		
	Perron	Robert		
	Perron	Diana		
	D'Alessandro	Mardi		
	Stanley	Todd		
	Aiello	Helen		
	Hardt	Martha		
	Snook	Donald		
	Amore	Adelaide	Southern Connecticut State University	Professor of English
	Gaines	Carolyn		
	Snook	Katherine		
	Feinberg	Gerald		
	Vaglivelio	Alan		
D.C	Billignsley, MD	Frank	Sibley Memorial Hospital	Chairman, Department of OB/GYN
D.C.	Coleman	Don	School of Engineering	Howard University
	Fox	Harold	George Washington University	Professor and Chairman
	Epstein	Sarah		
	Galbis	Argel		
	Hutchins	Vince	C/O Peter Hutchins	
	Lear	Julia	The George Washington University	
	McReynolds	Elaine	Federal Emergency Management Agency	Federal Insurance Administrator
	Preston	John		
	Crockett	Mia	SallieMae	
	Walters	Ronald	Howard University	Professor and Chair
	Zinberg	Stanley	American College of OB/GYN	Director, Practice Activities
	Evans, Jr.	Caswell	American Public Heath Association	President
	Cain	Joanna	CREOG & APGO	Program Chair
	Bush	Dwight	SallieMae	
	Preston	Carol		
	Crockett	Kimberly	SallieMae	
	Tucker	Norma	B'nai B'rith Women	Executive Director
	LeBreton	Gay	Planned Parenthood, Washington, D.C.	
DC	Landou	Jeffrey		
	Nieman	Ronald		
	Shore	Deborah	Sasha Bruce Youthwork, Inc.	Executive Director
	Below	Catherine		
	MacKinnon	Emily		
	Wook	Mark		
DE	Ekblad	Lamar	Christiana Hospital, Medical Center of Delaware	Chairman, Department of Ob/Gyn
	Stapelton	Michael		
FL	Hoover	Robert	The American College of Ob/Gyn	
	Hill	Washington	Perinatal Center of Sarasota Memeorial Hospital	Director
	Mahan	Charles	College of Public Health	Dean
	Norris	Henry	Arnold Palmer Hospital	
	Nowosielski	Peter		
	Thompson	Robert	University of Florida	Professor and Associate Chairman
	Rankins	Jenice	The Florida State University	Associate Professor
	Schulman	Harold	Certified Maternal Fetal Medicine	Diplomate ABOG 1964 and 1991

INDIVIDUAL SUPPORT FOR DR. HENRY FOSTER FOR SURGEON GENREAL
 APRIL 28, 1995 11:30AM

STATE	LAST NAME	FIRST NAME	COMPANY	TITLE
FL	Cook	Gloria		
	Goodman	Robert		
	Goodman	Mary		
	Dawkins, Sr.	Wilbert		
	Hitchcock	Meacham		
	Smith	Marvin		
	McCarthy	Faith		
	Tegeder	David		
	Alderson-Hill,	Mary		
	MD			
	Forsythe	June		
	Kun	Stephen		
	Moore	Hope		
	Proffit	Brian		
	Norris	Myrna		
	Wagy	Ruth		
	Shermyen	Anne		
	Dalzell	Julie		
	Tschnikel	Walter		
	Beste	Stevem		
	Batchelder	Judy		
	Blanchard	Dallas		
	Rudkin	Casey		
	Edwards	Rene		
	Fernander	Dorothy		
	Johnson	Charles		
	Fakess	Dale		
GA	Sullivan	Louis	Morehouse School of Medicine	President
	Long	W.		
	Jackson	Rudy		
	Poe	Booker		
	Williams	Edward	Citizen Trust Bank Building	Oral and Maxillofacial Surgery
	Butts	June		
	Berry	Willam	R.E.M./Athens, Ltd.	
	Wilen	Charlotte	Maternal and Child Health Institute	President and Project Director
	Downs, IV, Esq.	Bertis	R.E.M./Athens, Ltd.	
	Harris, Sr.	Thomas		
	Mills	Michael	R.E.M./Athens, Ltd.	
	Buck	Peter	R.E.M./Athens, Ltd.	
	Gatewood	Schley	Doctors Gatewood and Taylor, P.C.	
	Stipe	Michael	R.E.M./Athens, Ltd.	
	Holt	Jefferson	R.E.M./Athens, Ltd.	
	Shortt	Janet	Morehouse College	Office of the President
	Goodrich	Samuel	Milledgeville OBGYN Associates, P.C.	
	Caplan	Benson		
	Johnson	Mo	Kennesaw State College	
	Bonin	Jacqueline		
	Bugg, Jr., MD	George		
	SToddard	George		
	Harris	Gail		
	Sartor, Jr.	Louis		
	Ward	T. Craig		
	Johnston, MD	George		
	Hagin	Chris		
Guam	Hadley	Alice		

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STATE	LAST NAME	FIRST NAME	COMPANY	TITLE
HI	Green	Howard		
IA	Haas	Ted	Ottumwa Obstetrics & Gynecology, P.C.	
	Edgerton	W.	Maternal Health Center	Medical Director
	Girardeau	Suzanne		
	Austin	Rusty		
	Hericksen	Jim		
	Forsyth	Priscilla		
ID	Ames	Leo		
IL	Padawer	Philip		
	Sciarra	John	Department of Ob/Gyn	Thomas J. Watkins Professor and Chairman
	Mason	Myrtle	Veteran's Administration Hospital- Westside	Patient Care
	Stonis	Nancy	Professional Services	Director
	Gross	Thomas	University of Illinois, College of Medicine	Associate Director and Chairman
	Rice	Marilyn	Emergency Nurses Association	Past President
	Berkley	Roger		Periodontist
	Freese	Uwe	Finch University of Health Sciences	Professor and Chairman, Department of OB/GYN
	Moore, Jr.	Donald		
	Robinson	Mark	Drs. Dudley, Robinson and James	
	Cramer	Barbara		
	James	Hubert	Drs. Dudley, Robinson and James	
	Fabri	Anthony		
	Rosenthal	Richard		
	Rivers	Marea		
	Allen	Carmen		
	Wolfon	Cynthia		
	Kluger	Ruth		
	Anthony	Claretha		
	Marsh	Dr. Kenneth	Woodstock Institute for Science and Humanities	
	O'Donnell	Dominic		
	Kinyon	John		
	Donhowe	Peter		
	Frisbie	Margaret		
	Picker	Christy		
	Kluger	Susan		
	Severns	Greg		
	Allibalogun	Ola		
	House	Janet		
	Conrad	Jeanette		
	Perry	Yvonne		
	Rosenthal	Mona		
	Howard	Audrey		
	Lindsay	Joy		
	Carbiener	June		
	Morache	Erin		
	Levine	Pearl		
	Petersen	Mark		
	Glover	Gwen		
	Lykke	Miriam		
	Greenberg	Sanford		

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STATE	LAST NAME	FIRST NAME	COMPANY	TITLE
IL	Gerbie, MD	Melvin	Central Association of OB/GYN	President
	Alpert	Daniel		
	Weiss	Gertrude		
	Weiss	Mitchell		
	Feinstein	Thelma		
	Levine	Morris		
	Goodall, PhD	Bebe		
	Gibbons	Kim		
	Dawson, MD	G.		
	Penick, Esq.	Aurie		
	Geller	Janice		
	Stockwell	Amy		
	Perkins	Kristin		
	Kasak	Arthur		
	Newman	Arnold		
	Nichols	V.R.		
	Summers-Kasak	Margaret	YWCA Metro. Chicago	Director of Women's Services
	Rich	Madeline		
	Anglin	Doris		
	Haywood	Bill		
	Burgess	Kay		
	Quandt	Kenneth		
	Walters	Judy		
	Smith	Rita		
IL 602	Eccher	Elizabeth		
IL 606	Cowles	Nancy		
IN	Holliday, II	Alfonso	Holliday Health Care, P.C.	Librarian
	Shideler	Lawrence		
	Wedum	Ellen		
	Martin	Reverend Robert		
	McSpadden	Kaye		
	LeGuern	Charles		
	LeGuern	Charles		
	Goodnight	Dr. Lisa		
KS	Freeman	Ina		
	Delmore	James	Department of Obstetrics-Gynecology Center City Medical Plaza	Assitant Director Obstetrics & Gynecology
	Miller	Dennis		
	Taliaferro	A.P.		
	Adams	Samantha		
	Rhodes	Jan		
	Applebaum	Elizabeth		
	Stowe	Barbara		
	Rhodes	Larry		
	Weeks	Robyn		
KY	Taylor, II	William	Southern Babtist Convention	Past President
	Dehoney	Wayne		
	Gabbard	Terry		
	Plotnik	Ken		
	Patterson	Anna Belle		
	Sexton	Amanda		

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STATE	LAST NAME	FIRST NAME	COMPANY	TITLE	
LA	Bey	Mohammend	School of Medicine in New Orleans	Assistant Professor	
	LeCount	Kevin			
	Arthur	Chris			
	Redmond	Jason			
MA	Pellegrum	Daniel	Pathfinder International	President	
	Stith	Charles			
	Hauser	Joshua			
	Green	Sylvia			
	Watson	Denise			
	Grant	Patrick			
	Fanger	Phyllis			
	Bowman, Jr.	Arthur	Massachsetts General Hospital	Chief of Vincent Memorial Obstetrics Division	
	Frigoletto, Jr.	Fredric			
	Rudnick	ERIC			
	Ryan	Ginny			
	Richie	Robert			
	Sexton	Peter			
	Katz	Jacquelyn			
	Meyers	Rita			
	Orden	Dr. Adam			
	Katz	Ralph			
	Babcock	Mary			
	Adams	Melissa			
	Stern	T. Noel			
	McCormack	Kathleen			
	Ehrlich	C			
	Stern	Katherine			
	Umaluf	Scott			
	Wessel	Mark			
	LeVine	Paul			
	Ottaviani	Angela			
	Mandell	Richard			
	Norman	Ken	Harvard University		
	Cardullo	Eldna			
	Tobey	Suzanne			
	Ballard	Madeline			
	Richardson	Mark			
	Gunther, MD	Andree-Ellen			
	Gottlieb, MD	Daniel			
	Gerace	Thomas			
	Pokito	Benjamin			
	Griffin	Paul			
	Hill	Chris			
	Walsh	Courtney			
	Friedman, M.D.	Franklin			
	Appel	Louis			
	Adams	M.			
	Wells	Bill			
	Sullivan, PhD	Gary			
	Concannon	Tom			
	Lewis	Kathryn			
	Ottaviani	Angela			
	Shoucair	William			
	Savage	Victoria			
	Erickson	Christine			

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STATE	LAST NAME	FIRST NAME	COMPANY	TITLE
MA	Maguire	Patricia		
	Kirby	Michael		
	Stone	Lu		
MD	Walton	Eugene		
	Scott	Carol	Medical Educaiton Group, Inc.	Principal and Consultant
	Quivers, Sr.	William		
	Chappelle	Edward	Meharry Alumni Association	President
	Brown-Holt	Nancy	Drs. Hall, Randall, Chambers, P.A.	
	Chambers	Donald	Drs. Hall, Randall, Chambers, P.A.	
	Foureroy	Jean		
	Braye	Linda		
	Boddie, Jr.	J.		Brigadier General USAF, Retired
	Billingsley	Frank	Gynecology, Obstetrics and Infertility	
	Armbruster	Timothy	Morris Goldseker Foundation of Maryland, Inc.	President
	Jackson	Guy	Drs. Hall, Randall, Chambers, P.A.	
	Canady, Jr	Charles	Drs. Hall, Randall, Chambers, P.A.	
	Franklin	Herman	University of Maryland Eastern Shore	Vice President for Student Affairs
	Haffner	William		
	Burness	Andrew	Burness Communications	
	Cothran	Mary	Division of Academic Affairs	Director, Office of Multi-Ethnic Student Assn.
	Cooper	Izetta		
	Desai	Pfagna	Drs. Hall, Randall, Chambers, P.A.	
	Hytche	William	Unvirsity of Maryland Eastern Shore	President
	White	Gerry		
	Rosenbach	Hans		
	Mutchler	Max		
	Marx	Eric		
	Woolf, PhD	Leonard		
	Heriot	Jessica		
	Scanlan	M.Kay		
	Stocker	L.		
	Little	Janet		
	McKenna	Gregory		
	Picoult	Sam		
	Berman	Michael		
	Carmody	Paula		
ME	Sabine	Mike		
	Ryan	Michael		
	Betcher, MSW	Lawrence		
MI	Mallett	Veronica	Hutzel Hospital	Assistant Professor
	Ransom	Scott	Hutzel Hospital	Assistant Professor
	Butler	James	Ophthalmolgy	
	McNeeley	S.	Hutzel Hospital	Associate Professor
	Stryker	Joan	Hutzel Hospital	Professor Emeritus
	Gunter	Kelly	Hattiesburg Radiology Group	
	Mayberry	Melanie		
	Bragg	Winifred		
	Hollings	Celestine		
	Hendrix	Susan	Hutzel Hospital	Assistant Professor
	Cheek	Ronald		

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STATE	LAST NAME	FIRST NAME	COMPANY	TITLE
MI	Gell	James	The American College of Obstetricians and Gynecologists	Chairman, District V
	Visscher	Harrison	ACOG	
	Todd, Jr.	Paul		
	Gray	Robert	The University of Michigan	Professor and Associate Dean
	Chavis	William	Wayne State University	Assistant Professor
	Ferguson	Matthew		
	Sartone	M.T.		
	Griggs	Joanne		
	Galler	Enid		
	Cunnigham, PhD	David		
	Von Korff	R.W.		
	Chapman	Louis		
	Galler	Bernard		
	Anneberg	Lisa		
	Hier	Cahroltte		
	Deacon	William		
	Avery	Michelle		
	Rashes	Haran		
	Baird	Debra		
	Freeland	Sara		
	Rhodes	Steve		
	Ferguson	Eric		
	Szysko	Linda		
	Stack, MD	Michael		
	Maki	DAvid		
	Kerman, PhD	Judith		
	Kem	Laura		
	Johnson,MD	Timothy	University of Michigan Medical Center	Bates Professor of Diseases of Women and Children
MN	Ling	Louis	Hennepin County Medical Center	Associates Medical Director
	Cruthcfield	Charles		
	Crabb	Kenneth		Diplomate of American Board of OB/GYN
	Schwartz	Burton	Minnesota Oncologic Hematology, P.A.	President and Medical Director
	Field	Charles	Mayo Clinic	Obstetrics and Gynecology
	Good	Andrew	Mayo Clinic	Obstetrics and Gynecology
	Robinson	Nancy		
	Pollard	Christopher		
	Welker	Judy		
	Grinnell	Jon		
	Sievert	Ralph		
	Connelly	Jonna		
	Mazzitello	Lawrence		
	Wallem	Mark		
	Christiansen	Pam	Planned Parenthood, Minnesota	Board Member
MO	Perkoff	Gerald	Department of Family and Community Medicine	Curators Professor Emeritus
	Peterson	Carl		
	Rayburn, Sr.	Wendell	Lincoln University	President
	Fulton	Robert		
	Beckman	Charles	The Universtiy of Missouri-Kansas City, School of Medicine	Professor and Associate Chairman- Dept. of OB/GYN
	Youngblood	James	Truman Medical Center	Chairman, CREOG Council
	West	Karen		

STATE	LAST NAME	FIRST NAME	COMPANY	TITLE
MO	Cibulka	Nancy		
	McDonald, MD	Mary		
	Henderson	Keith		
	Comfort-Mason	Stephen		
	Schirn	Jackie		
	Barnum	Barbara		
	Fortunato, Jr.	Joe		
MS	Gillespie	Lamar	Hattiesburg Clinic	
	Preston, Jr.	William		
	Sutton	William	Mississippi Valley State University	President
	Cook	Kimberly		
	Miller	Karen		
	Oshrin	Steve		
MT	dixon	Pat	Democratic Central Committee	Party Office Coordinator
NC		Roy		
	Moore	Barbara		
	Ransohoff	David	The University of North Carolina at Chapel Hill	Professor of Medicine and Epidemiology
	James	Everett		Office of the Governor
	Herbert	William	Division of Maternal-Fetal Medicine	Professor and Director
	Hammond	Charles	Duke University Medical Center	Professor and Chair
	Easley, III	Alexander	Obstetrics and Gynecology	Clinical Faculty
	Dell	Diana	Duke University Medical Center	Assistant Professor
	Linton	Eugene	Lyndhurst Gynecological Associates, P.A.	
	Cefalo	Robert	Univ. of North Carolina at Chapel Hill	Professor of OB/GYN
	Moore	Robin		
	Avent	John		Obstetrics and Gynecology
	Woodruff, Jr.	Leon	Mid-Carolina Obstetrics & Gynecology, P.A.	
	Adducci	Joseph	American Board of Obstetrics - Gynecology	Diplomate
	Hess	Mike	North Carolina State University	
	Ramirez	Monika		
	Gale	Judith		
	Jones	Adrie	Duke University	
	Wilson	Alyson		
	Tillman	Judith		
	Stasheff	Jim		
	Rubin	Robert		
	Yellin	Mark		
ND	Kerr	Phyllis		
NE	Fischer	Rod		
	Senseney, M.D.	Steven		
	Silliman	Anna		
	Senseney, MD	Steven		
	Ruffo	Joseph		
NH	Strong	Diane		
	Sanders	Daniel		
NJ	Holmes	Linda		
	O'Driscoll	Robert		Obstetetrics and Gynecology

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STATE	LAST NAME	FIRST NAME	COMPANY	TITLE
NJ	Burke	Kenyon		
	Rosen	Joel		
	Sweetman	Eric		
	Stoll	Christine		
	Wallenburg	James		
	Ruppert	M.		
	Stine	Sharon		
	Nelson	Cynthia		
	Gaines-Smith	Lisa		
	Markman	Andrew		
	Taksler	Stephen		
	Hover	Leila		
	Wallerstein	Chris		
	BeDell	Suzanne		
	Fleishman	Dorothy		
	Lee	Elaine		
	Laibson	Holly		
	Petrie	Lorraine		
	Austin	David		
	Abramowitz	Arthur		
	Kavett	Dr. Phyllis		
NM	George	Janice		
	Curet	Luis	The University Of New Mexico	Professor and Director of Maternal Fetal Medicine
	Keller	Natalie		
NV	Hinkley	Daniel		
NY	Veerhausen	Pamela		
	Smith	Paul	First Presbyterian Church	Senior Minister
	Styles-McClintock	Marian		
	Henriques	Edgar	OB/GYN Albany Medical Center	Clinical Professor
	Wooden	Weldon	The First Unitarian Church in Brooklyn	Senior Minister
	Ferro	Philip	State University of New York Health Science Center	Associate Professor
	Prager	Kenneth	Columbia College of Physicians and Surgeons	Associate Clinical Professor of Medicine
	Gellhorn	Alfred		
	Holmes	Everlena	Hunter College	Dean, School of Health Sciences
	Hill	Delores		
	Hayes	Barbara		
	Howard, Jr.	William	New York Theological Seminary	President
	Bendnoff	Stuart	American College of Ob/Gyn	Chairman: Section 4, District 2
	Carrera	Michael	Nat. Adolescent Sexuality Training Center	Director, The Children's Aid Society
	Berkowitz	Richard	The Mount Sinai Medical Center	Professor and Chairman
	Seltzer	Vickie	Long Island Jewish Hospital	
	Mitchell	Fay		
	Johnson	Tony	Challange Foundation	President
	Raphael	Ronald		
	Singh	Varinder	Columbia- Presbyterian Medical Center	
	Priore	Giuseppe	University of Rochester Medical Center	Gynecology Oncology
	Miller	Russell	State University of New York	President

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STATE	LAST NAME	FIRST NAME	COMPANY	TITLE
NY	Garza	Cutberto	Cornell University	Professor and Director
	Lewis	Vivian	National Medical Association	OB/GYN Section Chair
	Rochelson	Burton	Coventry Commons	
	Yee, MD	Willie	Psychiatric Applications Developer	
	Wolfenson	Carol		
	Hess	Thomas		
	Mizrahi	Terry		
	Careaga	Ellen		
	Bailin	John		
	Adamson	Eadie		
	Goldfarb	Carolyn		
	Kitchens	Mark		
	Darcy	Pat	SUNY-Syracuse Health Science Center	
	Halpert	Felicia		
	White	Martin		
	Luppert	Eve		
	Corkin	Nell		
	Kelsey	Jason		
	Gordon	J. Aaron		
	Barger	David		
	Magolis	D.		
	Lanzy	Garrett		
	Boersma	Karel		
	Schreiber	Eileen		
	Grossman, MD	Howard		
	Goldberg	Jonathan		
	Breschard	Peter		
	Arfer	Irene		
	Williams	Vera		
	Posner	Julia		
	Kaufman	Laura		
	Fishman	Ellen		
	Brennan	Kate		
	Monje	Michelle		
	Rosenberg	Leora		
	English	Margaret		
	Ingbel	Adam		
	Volkes	Ann		
	Bernard, CML	Michael		
	Flanagan	Mary		
	Schlossberg	Sara		
	O'Brian	Maureen		
	Bliss	Russell		
	Strand	Marion		
	Martin	Michael	SUNY at Stony Brook	
	Auslander	M. Arthur		
	Perta	Litia		
	Whitaker	Gindy		
	Koplowitz	Stephan		
	Siegel	Michele		
	Horvath	Peter		
	Schoenfeld	Norman		
	Wands	Susan		
	Guttman	Julia		
	Chatfield	Karen		
	Riano-Anderson	Luisa		
	Propp, MD	Richard		

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STATE	LAST NAME	FIRST NAME	COMPANY	TITLE
OF	Mead	Jennifer		
OH	Ward, Jr.	Eugene	Greater Love Missionary Baptist Church	Pastor
	Walden	Robert	Medical College of Ohio	Professor Psychiatry - Emeritus
	Martin	Julius		
	Smith	Wilton		
	Armstrong	Carl	Toledo Medical Services, Inc.	
	Goler	George		
	Casey	Edmund		
	Butler	Benjamin	Collingwood Medical	Surgeon
	Gabbe	Steven	The Ohio State University	Professor and Chairman
	Bowers, II	Walter		
	Flarsheim	David		
	Nash	Keith		
	Belfer, D.O.	Mark		
	Heller	David		
	Killik	Sandra		
	Kaufman	Bob	Congregation Beth Israel of Steubenville	President
	Kirtz	Mary		
	Binkovitz	Jean		
	Wohl	David		
	Higgs-Horwell	Melissa		
	Bennett	Charles		
	Ottolenghi	Abramo		
	Stephenson	Amy		
	Warnock	Roger		
	Roy, MD	Richard	Urology Services of Colubus	Fellow American College of Surgeons
	Denny	Jim		
	Ware	Phyllis		
	Reece	Sara		
OK	Fishburne, Jr.	John	Univ. of Oklahoma, College of Medicine	Chair and Professor, Dept. of OB/GYN
	DePersio	Sara		
	Lucy	Pat		
OR	Carver	Ronald	Mountian View Women's Clinic, P.C.	
	Alsever	John	Salem Clinic, P.C.	
	Barhydt	Adrienne		
	Kelly	David		
	Barhydt	Rick		
	Gotlib	Ken		
	Cruscial	Bill		
	Becker	Charlotte		
	Glauber	Harry		
	Glauber	Carole		
	Fitzsimmons	Ann		
	Johnson	Nina		
	Ottey	Michael		
	Arnold	Kent		
	Arnold	Lynne		
	Zimmerman	David		
	Galvan	Ramon		
	Bell	Diana		

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STATE	LAST NAME	FIRST NAME	COMPANY	TITLE
PA	Mattison	Donald	University of Pittsburgh	Dean
	Clifford	Maurice		
	Kelley	William	University of Pennsylvania School of Medicine	Dean
	Freidfeld	Martin		
	Dunton	Charles	Thomas Jefferson University	Associate Professor
	Ford	Robert	North Hills OB/GYN Association	
	Hall	Virginia	Obstetrics and Gynecology	
	Bloss	Karl		
	Rabberman	Kristine		
	Keller	Daniel		
	Bauer	Matthew		
	Zeiler	Jean		
	Prevost	Scott		
	Cowder, PE	Thomas		
	Hill	Scott		
	Simonds	Kurt		
	Pearce	Barbara		
	Stengle	Sylvia		
	Pearce	Barbara		
	Miller	Joshua		
	Golden	Alvia		
RI	Alpert	Rebecca		
	Josephson	Lovernne		
	Dunn	Philip		
	Kline	Norman		
	Dembo	Morris		
SC	Horn	Daniel		
	Fleming	Bennie	Providence Schools	Science Administrator
	White	C. Dale	The United Methodist Church	
	Coustan	Donald	Brown University	Professor and Chairman
	Carpenter	Rev. Frank		
SD	Sterling	Anne		
	Smoak	Leah		
TN	Anderson	K.		
	Caldwell	Steve		
TN	Rogers	Paul	Dean Witter Rynolds, Inc.	Account Executive
	Rosen	Barrett	Tennessee Medical Association	Vice Chairman
	Scales	Williams	Meharry Medical College	Assistant Professor
	Randall	Alice		
	McGowan	Jerri		
	Moore	H.B.		
	Ms. Ahia	Mr. Warren		
	Shaboaz	Moore		
	Morehead	V. Tupper	American Board of Ob/Gyn	Diplomate
	Moynihan	William		
	Nevels	Harold		
	Bass, Sr.	R.I. Kwame	Matthew Walker Comprehensive Health Center	Executive Director
	Parris	Winston	Vanderbilt University Medical Center	Director
	Fri	Tim		
	Perry	Beth		

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STATE	LAST NAME	FIRST NAME	COMPANY	TITLE
TN	Perry	Frank	Family Wellness Center	Internal Medicine - Hypertension
	Quinn	Robert		
	Nobles	Jean		
	Caldwell	Gertrude	YWCA - Nashville & Middle Tennessee	
	Weaver, III	William		
	Vassall, Sr.	Alford	Meharry Medical College	
	Penrod	Nancy		
	Carter	Annie		
	Winston	Robert	Eastside Medical Center, P.C.	
	Williams	Lois	Knoxville College	President
	Williams	Jerry	Leadership Nashville	Executive Director
	Wilhamy	Brandon		
	Searcy, III	Walter	Waller Group, Inc.	President and CEO
	Smith	Robert	Bluff City Medical Society	President
	Thomas-Suggs	Jackie		
	Thomas	D. Johniene	Meharry Medical College	
	Thibodeau	David		
	Stone	John	Metropolitan Nashville General Hospital	Director
	Stewart	J.O.		
	Westbrook	Jesse		
	Tosh	Robert	St. Thomas Hospital	Chief, Division of Gynecology
	Elam	Lloyd	Meharry Medical College	School of Medicine
	Kyles	Aurelia		
	Lamb	John	Mid-State Medical Center	
	Lee	Michele		
	Loney	Gwendolyn		
	Lowe	Ruth		
	Krizelman	Sheldon		
	Alsup	Peggy Ann		
	Fleming	Ross		
	Bender	Iris		
	Adkins	William	Greater Imani Church and Christian Center	
	Alexander	Konnetta		
	Maupin, Jr.	John	Meharry Medical College	President
	Baker	Hal		
	Hale, III	R. Walter	Third National Bank	Executive Vice President
	Kirk-Scott	Paula	Meharry Medical College	Department of Endodontics
	Gilbert	Harris	Wyatt, Tarrant, & Combs	
	Gilmer	O'Dail		
	Goldner	Fred		
	Gordon	Joel	Surgical Care Affiliates, Inc.	Chairman
	Fletcher	Lilli		
	Jessee	Elizabeth	Ft. Sanders Perinatal Center	
	Hastings	Dorian		
	Hill	Melvin		
	Holcomb, Jr.	George	Medical Alumni Association	Executive Director
	Marrano	Angie	National Admiral's Club	
	Hansen	Axel		
	Costello	Edward	University School of Nashville	Director
	Cato	Amy	Meharry Medical College	
	Doherty	S. Adele	Meharry Medical School	School of Dentistry
	Deweese	W. Thomas	Metropolitan Nashville General Hospital	Administrator
	Falk	Randall	Temple Congregation Ohabai Shalom	Rabbi Emeritus
	DeGraff	Rusty		
	Davies	Debbie	University School of Nashville	

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STATE	LAST NAME	FIRST NAME	COMPANY	TITLE
TN	Dougherty	Robert		
	Daugherty	Chauncy		
	Cazort	Ralph		
	Chapman	John	Vanderbilt University	Dean of Medicine
	Chihombori	Arikana	Bell Family Medical Center	
	Collier	Ingrid		
	Baker-Sanders	Johnnie		
	Crook	William	International Health Foundation, Inc.	President
	Brooks	Russell		
	Banerjee	Mukul	Meharry Medical College	Professor
	Billings	Josh		
	Boehm	Frank	Vanderbilt University	
	Bradely	Leon		
	Mason	A. C.		
	Brewster	Jasper		
	Cary	Helen	ResCare Home Health, Inc.	Director of Professional Training
	Bruce	Donald		Obstetrics and Gynecology
	Brown	Kermit	Meharry Medical College	
	McElroy	Carol	Girls, Inc. of Chattanooga	
	Carter, Sr.	Ernest		
	Tellinghuisen	Joel	Vanderbilt University	Professor of Chemistry
	Apple	Mark		
	Odom, II, MD	Harrell		
	Rubin	Claudia		
	Apple	Mark		
	Crook, MD	William	International Foundation, Inc.	
	Cook	Wayne		
	Rhodes	Owen		
	Johnson	Cathy		
	Mead, PhD	Barbara		
	Goldzweig, MS	Irwin	Meharry Medical College	Assistant Director for Community Outreach
	Capton-Snell, CNM	Terry	Metropolitan Nashville General Hospital	Director, Nurse-Midwifery Services
	Jones	Roland	100 Black Men of Middle Tennessee, Inc.	President
	Jones, MD	Howard	Vanderbilt University Medical Center	Director of OB/GYN
	Scott	Richard		
	Martin	Carolyn		
	Lutz	Clay	Vanderbilt University	
TX	Ramsey	Joe		
	Radford	Rhonda	Garry Radford D.D.S. and Associates, Inc.	
	Natalicio Silverberg	Diana Cathy	University of Texas at El Paso	President
	Messer	Robert	Texas Tech University	Professor and Chairman
	Haley	Debbie		
	Wulf	Marian	University of Texas - Houston	Assistant Professor
	Turrentine	Mark	University of Texas - Houston	
	Anderson	Garland	Univ. of Texas Medical Brance at Galveston	Chairman
	Swaim	Laurie	University of Texas - Houston	Assistant Professor
	Gibbs	C.E.		
	Greer	Edward		
	Harris	Robert		

INDIVIDUAL SUPPORT FOR DR. HENRY FOSTER FOR SURGEON GENREAL
 APRIL 28, 1995 11:30AM

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	Herrington	Cate		
	Meyers	Mel		
	Dalton	Ralph		
	Weaver	Bill		
	Cvekovich	Ann	University of Texas	Associate Professor of English
	Dall-Bauman, PhD	Liese		
	Fletcher	Katherine		
	Victor	Gregory		
	Peele	Evelyn		
	Wendel	George		
	Wendel	Diane		
	Pasternak	Allen		
	Ricciardi	Aleta	University of Texas - Austin	Professor
	Peterson	Douglas		
	Jerauld	Gary		
	Cameron	Karyn		
	Wilmoth	Carole		
	Ellett	W.P.		
	Rose	Diane		
	Patterson	James		
	Miller	Larisa		
	Anderson, MD	Garland	University of Texas Medical Branch at Galveston	Professor and Chairman
	Roebuck	Lisa		
	Wooten	Hargrove	Sigma Pi Phi Fraternity	Grand Sire Atchon
	Rosenthal	Caryl		
	Akin	Kenneth		
UT	Cumming	Annette	National Board of Planned Parenthood	Regional Representative
	Thompson	Betty		
VA	Andrews	William	The American College of Ob/Gyn	President
	Stowers	Robert	College of William and Mary	Lecturer
	Gardner	Dale		
	Lord	Bob		
	Harvey	William	Hampton University	President
	Laurie	Gordon		
	Manto	Michael		
	Scheckler	Rebecca	Virginia Tech	
	Littlefield	Rober		
	Andrews	William	American College of Ob/Gyn	President
	Lester	Richard		
	Bjork	Sandra	American College of Radiology	Assistant Director of Standards
	Taylor	Charles		
	Pierce	Sommers		
	Wilkins	Mary		
	Archer, MD	David	Howard and Grogeanna Jones Institute for Reproductive Medicine	
	Nowak	Mark		
VT	Falk	Leslie		
	Jacobs	Ron		
	Yacos	Karen		

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 APRIL 28, 1995 11:30AM

STATE	LAST NAME	FIRST NAME	COMPANY	TITLE
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	Narkewicz	Richard	American Academy of Pediatrics	Former President
	Tucker	Mark		
	Emery	Ann		
	Brown	Carolyn		
	Emery, III, MD	Edward		
	Blake	Theresa		
	Axelrod	Rachel		
	Falk	Les	Meharry Medical College	Emeritus Professor, Family and Community Health
	Brown, MD	Carolyn		
WA	Narkewicz, MD	Richard	American Academy of Pediatrics	Former President
	Hancock	Lloyd	Medical Corps, USA	Captain
	BeMiller	David		
	Gould	Curtis		
	Kau	J.R.		
	Bottomly	Forbes		
	Moses	DrMaurice	Infants, Children and Adolescents	Pediatrics
	Omenn	Gilbert	School of Public Health and Community Medicine	Dean
	Willott	Judy		
	Thompson	Alvin	WA St. Assn. of Black Prof. in Health Care	
	Stenchever	Morton	University of Washington School of Medicine	Professor and Chairman
	Carlson	Clara		
	Waalkes	Karen		
	Wilson	Kasia		
	Stoll	Henry		
	Popoff	Grace		
	McCaffrey	Kevin		
	Theobald	Lisa		
	Wright	Jan		
	Holdaway	Don		
	Carpenter	Tom		
	Albertson	Charles		
	Helm	Nancy		
	LaPadula	Karin	Virtual Worlds Designer	
	Wilson	Ivon		
	Stenchever, MD	Morton	University of Washington School of Medicine	Professor and Chairman
	Quigley	Eileen		
	Capenter	Barbara		
	Wilson	Archie		
	Mills	Karen		
	Eaton	Marie		
	Birkelnad	Paul		
	Godfrey	James		
	Pulfer	Phyllis		
	Hathaway	James		
	Michielsen	Hans		
	Locke	Louise		
WI	Nuber	Dixon		
	Love	LaDon		
	Mattson	Wayne		

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STATE	LAST NAME	FIRST NAME	COMPANY	TITLE
WI	Loar	David		
	Burke	Jean		233 North Hartwell Avenue
	Stauffacher	Bonnie		
	Roberts	Jessica		
	Ramsey	Jeannine		
	Withers	Richard		
	Cruikshank	Dwight	Medical College of Wisconsin	McMahon Professor and Chairman
	Withers	Richard		
	Erfourth	Ken		
	Huntley-Cooper	Frances		Former Mayor of Fitchburg
	Enriquez-Leder	Rosario		
	Mikkelsen	Brian		
	Perrone,MD	Theresa	Marshfield Clinic	Pathologist
	Schaible-Sampic	Elma		
	a			
	Tasson	Mary	Personnel Services Office	
WV	Cleckley	Betty		
	Martin, PhD	William	West Virginia School of Osteopathic Medicine	Professor of Anatomy
	Nussear	Valerie		
	King	Edward		
	Wright, MD	Kenneth		

Count: 1037

301 SIGNATURES OF SUPPORT FOR DR. HENRY FOSTER
FROM
MEHARRY MEDICAL COLLEGE STUDENTS AND PHYSICIANS
MAY 1, 1995

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Support For
Dr. Henry Foster, Jr.
For
U.S. Surgeon General

NAME	ADDRESS
<i>[Signature]</i>	Meharry PO Box 253 Nash, TN 37208
<i>[Signature]</i>	2819 Menard St. Nash, TN 37217
Diana D. Bennett	1220 W. H. Davis Dr. 37208
Michelle Fisher	944 21st Ave N 109 Nashville, TN 37208
Calvin Ayers	2407 Meharry Blvd Nashville, TN 37208
Moses Benardos	111 Acklen Park Dr. Nash. TN 37208
Tish Williams	3816 Trimble Rd Nash 37215
Robert J. McCarter	745 Harpeth Pkwy. 37221
Alton Caple	151 Plus Park Blvd, Nash. TN 37217
John McIndoo	500 Piccadilly Row, Nash. TN
Paul Pauling	3827 HYDES FERRY RD. NASH. TN 37218
Eric M. Chatman	1042 1st Ave N. Nash. TN 37201
<i>[Signature]</i>	944 21st Ave. N. Nash. TN 37208

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NAME	ADDRESS
SONJA Y. JOHNSON	2010 Meharry Blvd #2A 37208
Jillia H. Gaudry	744 21st Ave. N. #615 Nash. TN 37209
Shirley E. Jones	944 21st Ave N. Apt 300 Nash. TN. 37209
LOUIE A. Hall	944 21st Ave N #814, Nash. TN 37209
Keith G. Ramsey	2214 Grantland Ave Nashville, TN 37209
CARMEN M. WOODS	944 21st Ave N #615, NASH, TN 37209
Larry Hobson	206 Croley Court, Nash, TN 37209
Lucy Sloan	541 Woodland Hills Dr. Laverne, TN 37086
James P. Miller	944 21st Ave N. #911 Nashville, TN 37209
Charles Bremer	3054 Canada River Nashville, TN. 37214
Nga Pham	308 Plus Park Blvd #L19 Nashville, TN 37217
Donald Maynard	711 Waltham Circle Nashville 37209
Geoffrey E. Jones	2838 Vista Lane Nashville 37207
AO Johnson	1809 Hillman Dr, Nashville, TN 37217
Roscoe C. Young Jr	1005 23 Toddler Blvd Nashville
Myrtle Funder	" " "
Robert Funder	8191 Highland Crest Dr Nashville TN
Kilar Alimoga	1319 Benton Valley Rd, Nashville
Prapaporn Kopsombut	111 Glenview Court, Nash, TN
Thom W. Jones - Sr, U.S.	4214 Hyde Park, Nash, TN 37217
Tracy W. Jones	167 Millwood Dr., Nashville, TN 37217
Nelson J. Funder	1005 - D-B - Todd.
Ellen McPherson	2407 Meharry Blvd Nashville TN 37209
David Jones	414 Waltham Cr Nashville, TN 37209

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NAME	ADDRESS
Kyle R. Robertson	840 Woodcraft Drive Nash, TN 37214
Doug Pahl	1918 19 th Ave S. " " 37212
Samuel C. Ingram	944 21 st Ave N ^{APT 814} Nashville 37208
Angela B. Reese	944 21 st Ave N. Apt. 201 Nashville, TN 37208
Stacy Leatherwood	6002 Watts Circle Nash, TN 37209
Pamela Duggins	1215 Masoman Dr Nash TN 3721
Rosalyn Beatty	125 Southwood PK Place TN 372
Volach Thel	242 E. Linton Pl 37115
Donald Andrews	180 Burke Ave Mck, TN 37209
Samuel L. Caldwell	1005 D. B. Todd Blvd 37209
Michelle H. Loria	944 21 st Ave North Nash, TN 37208
David Blanton	2309 Elliott Ave. H-8 NASH, TN 37204
Amarita S. Rene	944 21 st Ave N. Nash, TN 37208
Kenneth L. Utter	
Harold Jones	944 21 st Ave N. Apt. 571
Howard Le	141 N. Main Dr Y488 37211
FLORA Bullock	1808 Sketo St. #2B 37213
Stacy O. Murray	944 21 st Ave N. apt 913 Nashville TN 372
Rob Burt	944 21st Ave N. Apt 501 " "
Robert Linton, III	1204 W.H. Davis Dr. Nash, TN 37208
Joseph P. French, MD	3317 Long Blvd, 07; Nash, TN 372
Abi Johnson MD	1809 Hill Lane Jr CA, Nashville, TN 372
Maing. Budzinski	7049 STILL SPRING HALL. Nashville TN 372
King-Jin Lim M.D.	5506 Cottaport Dr. Brentwood TN 370
Jannie Walker	1005 D. B. Todd Blvd. Nashville TN 37208

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NAME	ADDRESS
Kimberly O. O'Neale	6700 Cabot Dr # H-3 Nash. 37209
Jade R. Moore	944 21st Ave N. Nashville, TN 37208
Dee J. Walker	306 Watts Circle Nash TN 37203
Donna Farrell	214 Cumberland Hill Madison, TN 37115
Stacy O'Karo	1005 D. B. TODD BOX 491 NASH TN 37208
Sam D. Wells	300 Millwood Dr, NASHVILLE TN 37217
Wilfred P. Ingram	1246 W. H. Davis Dr Nashville TN 37200
Samuel Collins	182 Plus Park Nashville TN 37217
Sabrina Farmer	944 21st Ave N. #808 Nashville TN
Jill Martin	944 21st Ave N #204 Nashville, TN 37208
John J. Z. Z.	311 Leangarney Dr. #4 Nashville, TN 37208
Michael K. K.	944 21st Ave N. #312, NASH. TN 37208
Mark Spencer	2108 Harper St #217 Nashville TN 37209
Maurice S. S.	1805 Wilcox Ln. 37216
Samuel A.	787 Airways Circle 37214
Samuel A.	1140 DAWSON DR OLD HICKORY TN 37138
Samuel A.	944 21st Ave. N. Apt. 413 Nashville, TN 37208
Samuel A.	600 Hentage Dr. Apt. 250 Madison, TN 37135
Samuel A.	944 21st Ave. N. Apt. 600 Nashville TN 37208
Samuel A.	99 Plus Park Blvd Nash TN 37217
Samuel A.	944 21st Ave. Apt. 513 37208
Samuel A.	944 21st Ave N #406 37208
Samuel A.	944 21st Ave N #904 37208
Samuel A.	944 21st Ave N. #502 37217
Samuel A.	2312 Erin Ln. Nashville, TN 37221

Meharry Medical College
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NAME	ADDRESS
Celestine Stiles	1005 Dr. D. B. Todd Blvd MMC, P.O. Box 818 Nashville, TN 37208
Bartholomew Collins MD	Saul
Ralph Doolin MD	1005 Dr. D. B. Todd Blvd PO Box A-42 Nashville, TN 37208
Tracey R. Lennon	P.O. Box 388 (same otherwise)
Cheryl Zimmerman	1808 State St #213 Nashville, TN 37203
Johnny Lykes	141 Neese Dr Apt. 827 Nashville TN 37211
Paul J. / MD	
Harold R. / MD	
Myron E. / MD	448 Milwood Dr, Nash, TN 37217
Edrian O. Elumbe, MD, PhD	1005 Dr. D. B. Todd Blvd, Nashville TN 37208
Steve Thomas PhD	1710 Linden Ave Nashville TN 37212
John / MD	Box 908 MEHARRY MEDICAL COLLEGE - NASHVILLE, TN 37208

Please return to
Heavenly William

Meharry Medical College
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NAME	ADDRESS
<i>Heavenly B. Williams</i>	944 21 st Ave N #512 37208
<i>James H. Stewart</i>	948 1 st Ave N.
<i>Eric M. Williams</i>	37 Plunkett Blvd.
<i>Cecily M. Mercader</i>	37 PLUS PARK BLVD.
<i>James A. Dreen III</i>	944 21 st Ave. Apt # 704
<i>Thomas H. Williams</i>	P.O. Box 692
<i>William K. Denny</i>	806 Watta Circle
<i>Stephanie Russell</i>	MHC P.O. Box 445
<i>James H. Dreen</i>	151 PLUS PARK BLVD.
<i>Robert E. Dreen</i>	1734 B 23 rd Ave N
<i>Chanda T. Elzie</i>	1728 Autumn Ridge Dr. Nashville, TN 37207
<i>Kenneth R. Collins II</i>	1401 Harmon St. Apt. C11
<i>Henry Cook</i>	8100 Chateau Valley Dr. Nashville
<i>James A. Dreen</i>	3101
<i>Shayesteh Shahi</i>	1218 6th Ave N Nashville, TN 37208
<i>Shelia Jeffall</i>	600 Berkeley Dr. Madison, TN 3717
<i>Manica Lamb</i>	602 Whispering Hills Dr. #410 Nashville 37211
<i>Milly Bernad Kelley Trissett</i>	Meharry Med College, Box 701 Nashville 37208
<i>Anissa Burgess</i>	944 21 st AVE North #102 Nashville, TN 37208
<i>Jaqueline P. Dreen</i>	P.O. Box 431 Meharry Medical College Nashville, TN 37208
<i>Lawrence D. May</i>	2313 Elliott Ave. Apt. M-14 Nash, TN 37204
<i>Contany Barr</i>	1808 State Ave #20 Nash, TN 37203
<i>Melinda Reed</i>	2131 Elm Hill Pike "R310", Nash. 37210
	409 McKoy Lake Dr., Nash. TN 37205

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Pharmacy Williams

Meharry Medical College
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NAME	ADDRESS
Shonna Curry	Hickory Hollow - Antioch
Valera E. Lopez	Bellemeun - Nashville
Clifford Wilson	Bell Rd - Antioch
Maurice R. Brown	Premier Dr. Nashville
Paula Turner	Nashville
David M. Pitt, III	704 Watts circle, Nashville
CHI HUYNH	DOROTHY BROWN
Sang Kwak	Nashville, 570 McMurray Dr N-15
Vincent E. Small	486 Millwood Dr. Nashville, TN
Scheherazade Dove	P.O. Box 605 Nashville 37208
JOSEPH F. DOVE	570 McMurray Dr ⁵⁰⁸ Nashville, TN
Reginald Guilford	Murphreesboro Rd - Nashville
Qadriyyah Debraam	402 1/2 Hume St. Nashville TN 37208
Tracey Phillips	944 21st Ave N. Nashville TN 37208
Michael Seng	4600 Muftreesboro Rd. Nashville TN 37207
Doreen Shari	6319 Charlotte Ave Apt G-7 37209
Richelle White	150 2nd Ave. S Nashville TN 37201
Faye Wilson	1005 D.B. Todd Blvd Nashville TN 37208
Barbara Pickett	1005 D.B. Todd Blvd Nashville TN 37208
Peaston L. Cobbins	765 McMurray Drive Apt B-12 Nashville TN 37208
Edney Oash	139 Wallace Rd Apt E138 Nashville TN 37208
R. Stafford Cooper	944 21st Ave N. #607, Nashville TN 37208
Tawanda Caven	6535 Premier Dr. A-16 Nashville, TN

Meharry Medical College
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NAME	ADDRESS
Rex A. Blocker	1601 Herman St. Apt C-2
Tommy Wright	816 Hillview Heights Apt 420; Nashville TN 37204
Wilbert O. Chavis	1807 FABION NASHVILLE, TN 37208
Adrian Schuler	1601 Herman St. Apt A7
Latanya Simpson	3941 Hydesdale Ln., Nash. TN 37218
NIJIDEKA ANYASTICE	944 21st AVE N #901 Nash
MARGARET TANDON	1005 D.B. Todd Blvd. Box 633 Nashville, TN 37208
Mia L. Ligon	Box 514, 1005 D.B. Todd Blvd, Nashville TN 37208
Priscilla Goldie	814 Charlie Pl Nashville TN 37207
Jane Mennefeld	944 1st. Ave. N #1012 Nash, TN 37208
BJ	1005 D.B. Todd Blvd. Nash TN 37208
Naelle Gates	6565 Premier Nashville TN 37209
Reggie W. Woot	910 Jackson St Nash. TN 37208
Monique Purpus	816 Hillview Hgts #T-11 Nashville, TN 37204
Nathaniel L. Elmore	6700 Cabot Dr. #H-3 Nashville, TN 37209
Adam W. Harris	1426 Fulton St. Nash. TN. 37206
James E. Huff	448 Millwood, Dr. Nash. TN. 37217
Kellie Knight	430 British Woods Dr. Nash. TN 37217
Lester Brown	430 British Woods Dr. Nash. TN 37217
Kahara Mally	141 Neese Dr. J-2, Nashville, TN. 37211
Walter L. Huffer Jr.	2612 Herman St. D-35 Nash., TN 37208
John W. S. IV	267 TANGLEWOOD CT. NASHVILLE, TN 37211
Geri A. Byers	1601 Herman St. D5 Nashville, TN. 37208
Paula Danks	414 WATTS CR., Nashville, TN 37209
Nikita Ferguson	1601 Herman St. B-7 Nashville, TN 37208

Meharry Medical College
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NAME	ADDRESS
Marjorie Lantum	Campus Box 373
Alicia A. Hall	Campus Box 256
Tawanna Street	Box 624
Donita C. Anderson	Box 17
Jade Dominique James	180 Wallace Rd Nashville TN
Montgomery McNeil	47 Doss Park Blvd Nashville, TN
Mike A. Lyons	213 Elm Hill Pike C-56 Nashville, TN
Delores P. Gibson	1601 Herman St. #C9, Nashville, TN 37208
James C.	1503 Meharry Blvd #3; 37208
Ashley M. Stutz	502 Acadilly Row Antioch, TN 37015
Wesley Coleman	3406 Lower Kyde Nashville TN 37211
Tham Nguyen	141 Nune Dr #Y488 Nashville TN.
Marni Eubank	5637 B/Alcumb Nashville, TN 37212
Joann D. Bennett	1220 W.H. Davis Dr Nashville 37208
Kim P. Eubank	231 Wildberry Lane Nashville, TN 37209
Sumon Bhattacharya	1808 State Street . Apt. 214. Nashville, TN 37203
Whitney Sweet	1601 Herman St A2 Nash. TN
Cynthia Myers	380 Harding Place D-30 Nash. TN 37211
Helen McHanna	2407 Meharry Blvd. Nash TN 37208
Dawn A. Hawonick	Box 248, MMC Nashville TN 37208
Stephanie Katcher	206 Laurel Hill Drive Oak Hickory TN
Michelle Alexander	Box 12, MMC Nashville, 37208
Chasler L. Leslie	306 Watts Circle, Nashville, TN 37209
Roy Bennett	1808 State St #214, Nash, TN 37203
Lisa F. King	97 White Bridge Rd #H-7. Nashville,

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NAME	ADDRESS
Donald E. Lynn, Jr.	4057 Mendonham Dr
James M. Martin (Leonard Norton)	4120 W. Hamilton Rd.
3103 3rd St	933 34th Ave N
William T. Jackson	705 Short Ave
Harry F. Brown	523 E Buena Vista Pike
Richard A. Siler	747 Roycroft Pl., Nashville 37203
George A. Lunsford	1248 Ann. Ann. Patton Pl., Nash. TN 37221
James H. Hinkle	514 19TH AVEN. NASH. TN 37203
Charles W. McGinnis	3407 Duncannon, Nashville, TN
Charles H. Clark	3203 Moorwood Dr. 37207
Joe E. Seibert	5109 Woodland Hills N. 37207
Andrew H. Ruck, Sr.	5500 Tangle Springs Dr - 37211
Charles H. Taylor, Jr.	600 Mark Cato Dr 37203
Edward J. Brown	4111 Natemore Ct 37207
Orlando Turner	1934 Berkshire Dr 37216
Leonard Martin, Jr.	3512 Stevens Ln. 37218
Levy Wright, Jr.	4346 ENCHANTED CIR 37218
John W. H.	4776 ENCHANTED CR 37218
James D. Frankl.	1615 Riverside Dr 37216
Charles Pope	3833 Kings Lane 37218
George H. H.	4412 ENCHANTED CR 37218
James G. H.	912 Blue Mtn Lane Nashville, TN 37013

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NAME

ADDRESS

Fred Pillow

O'Connor, Howard

1615 Riverside Dr. - Nashville, TN 37216

3239 Apache Trail Apt H-15
Antioch TN 37013

Meharry Medical College

NAME

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Dr. Henry Foster, Jr

ADDRESS

For
U.S. Surgeon General

John Golding

Campus Box 239

Calif A

Campus Box 30

Lisa McCain

Campus Box 433

Myker C. E. Harrison

Campus Box 184

MILROY SAMUEL

BOX 572 DB TDD

Charles P. Alston

campus
Box 15

NASA, TN

Paul J. Simon

Meharry Med Coll PO 253 NASH, TN

J.E. [Signature]

1150 Vulture Blvd Apt J103
Nashville, TN 37217

Don Math

1199 Memphis Rd. Hgt. 10-1 Nash. TN 37207

Jaunta Gillis (JH) Memory P.O. 231 Nash, TN 37208

James Gannon 238 Tanglewood Ct Nash TN 37211

JASON L SHERRILL 3503 Albion St Nash TN 37209

Janzania Dooley 615 A Moore Ave Nashville, TN 37203

Meharry Medical College
Support For
Dr. Henry Foster, Jr.
For
U.S. Surgeon General

NAME	ADDRESS
1. Mechell Taylor	1623 Sugar Creek Circle
2. Curtis J. Sullivan	5101 Linbar DR. J-309
3. North R. Pluy	
4. Song H. Mathers	
5. Kondek Hreaves	2308 21 ST AVE S #24 37212
6. Patrick Moore	944 21 ST AVE. N., Nashville, TN 37208
7. Harlan C. Taliaferro	510 Heritage Dr. #18 Madison, TN 37115
8. MARSHALL SMITH	14 Plus Park Blvd., Nash. TN 37217
9. Jimmy L. Brown	1015 MULBERRY WAY NASH. TN 37207
10. Sherman W. Hix	932-15 24 TH AVE. N. Nash 37208
11. Andre Scott	7121 One West 37115
12. Janelle Cooper	944 21 ST AVE North Nash TN 37208
13. Rene Hawkins	944 21 ST AVE N. #509 Nash, TN 37208
14. Kevin J. Johnston	944 21 ST AVE N. #404 Nash, TN 37208
15. Shirley R. Brown	501 Watts Circle Nashville TN 37209
16. Liffanny Pulherton	507 Watts Circle, Nashville
17. Jeff S. Schuch	2400 ERIEN ST. Nashville, TN 37208
18. C. Selby	944 21 ST AVE. NASH APT 203 Nashville, TN 37208
19. Dretchen Horton Campbell	101 Ellington Pl. Madison, TN 37115
20. Armin Williams	807 Watts circle, Nashville, TN 37209
21. KENNETH M. JACKSON	411 ANNEX AVE APT J-6 NASH, TN 37209
22. Keena Walker	1114A 38 TH AVE North; Nashville, TN 37209
23. Angelica Dunbar	944 21 ST AVE N Apt 402, Nashville, TN 37208
24. Kacia Brown	944 21 ST AVE N Apt 1001, Nashville, TN 37201
25. Cynthia D. L. L. L.	1601 Herman St. Apt A-13 Nashville, TN 37201

Meharry Medical College
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Dr. Henry Foster, Jr.
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U.S. Surgeon General

	NAME	ADDRESS
27)	Michael Q. Fite	6565 Premier Dr H-14 Nashville, TN 37209
28)	Letha Woods	2010 Meharry Medical College
29)	Michael Wilson	6565 Premier Dr J-4 Nashville, TN 37209
30)	Lisa Davis	1100 Vulture Blvd. Nashville TN 37217
31)	Frank Sanfiel	1624 Hunters Branch Rd Antioch, TN 37013
32)	Melinda L. Sutter	1005 D.B. Todd Jr. Blvd Nashville TN 37208
33)	Pharonda Cunningham	944 21 Ave N Nashville TN 37208
34)	Mwanaga Vazir	944 21 Ave N Nashville TN 37208
35)	Dana Dilcote	2969 Hwy 13 Cumberland Furnace TN 37051
36)	Napoleon B. Higgins, Jr.	944 21st Ave N Apt 410 Nashville TN 37208
37)	Junteron Williams	713 Haystack Ln Antioch, TN 37013
38)	AJAIPAL KANG	944 21st Ave N. APT 1004, Nashville, TN 37208
39)	T. Keith Wilson	1005 D.B. Todd Blvd. Nashville, TN 37208
40)	Mama Mbe Wright	1005 D.B. Todd Blvd Nashville TN 37208
41)	Veronica M. Bethea	816 Hillview Hts Apt F-30 Nashville TN 37204
42)	Richard Sorensen	905 Rosevelt Ave. Madison TN 37115
43)	Gregory E Baker	1656 Nesbitt Ln Madison TN 37115
44)	R. Demetrius Steele	3912 Tigerbelle Dr. Apt. B, Nashville, TN 37208
45)	Lonnie Jackson	335 S 3rd Ave W Nashville, TN 37203
46)	Repa Bliziani	6700 Cabot Dr Apt MH Nashville, TN 37209

CELINDA
LADEK
2. J. Foster
Podina

To Fax #1-202-456-6797

From Fax #1-502-583-2351

MR. PRESIDENT

1699 Pennsylvania Ave.

Washington, DC 20500-2000

Louisville, KY 40207

95 FEB 27 P. 1: 35

From: Dr. Wayne Dehoney,

Past President,

Southern Baptist Convention.

Re: Southern Baptist reaction to Foster nomination.

Dear Mr. President,

The statement issued by the Executive Committee of the Southern Baptist Convention opposing the nomination of Dr. Foster is
NOT THE POSITION OF ALL SOUTHERN BAPTISTS.

Southern Baptists have no Pope or council or committee with authority to deliver an official position of "the Southern Baptist Church" on any issue.

As a past President of the Southern Baptist Convention, I must strongly condemn the Executive Committee for presuming to speak for me on this issue. It is a tragic apostasy on a fundamental doctrine and a breach of Baptist polity.

I must also protest the implication that the great majority of Southern Baptists hold the same views expressed by these self-called leaders.

The group that met in Nashville represents a politicized religious right group that captured the leadership of the Convention in 1979. This group has held that leadership for 15 years with never more than a majority of 55% to 45%.

I am one of that 45%-49%. As a Past President of the Southern Baptist Convention, may I express...

My support for you, Mr. Clinton, as our President,

My support for your nominee, Dr. Foster, for Surgeon General,

My support for your position on abortion and pro-choice.

P. 2 of 3

My support for your position on the legal, civil, and human rights of homosexuals.

My confidence in your honesty, integrity and your mature personal Christian faith and Biblical understandings.

You are a GREAT PRESIDENT.

I am proud that you are a BAPTIST.

Southern Baptists are honored by your presidency. This fact has immeasurably strengthened our Gospel Witness around the world.

We are praying for you and believe in you. Stay the course!

On a personal note, we have fond memories of you, Mr. President, and First Lady, Mrs. Clinton, when you were fellow Christian Pilgrims, Bill and Hillary, in the Holy Land with us and Dr. Vaught and the Wayne Wards. Mr. President, the attached news letter released at the time of the signing of the peace accord between Israel and Jordan recalls some of your personal experiences on that Pilgrimage that you may remember..

WAYNE DEHONEY

Dr. Wayne Dehoney
Past President of the Southern Baptist Convention.
Pastor/retired, Walnut Street Baptist Church, Louisville, KY
Senior Professor of Preaching/Evangelism
Southern Baptist Theological Seminary, Louisville, KY

Home:
2103 High Ridge Road
Louisville, KY 40207
Phone: 502/896-0985

Or:
Bibleland Travel
1024 South Third
Louisville, KY 40203

P. 3 of 3

"BLESSED ARE THE PEACEMAKERS"

A few days ago the world watched by satellite TV as the leaders of Israel and Jordan signed a Peace Accord at a desert site near the Gulf of Aqaba and President Bill Clinton climaxed the dramatic event with the words of Jesus, "Blessed are the Peacemakers."

We saw the crowd of distinguished world leaders gathered there (which included Mr. Clinton's personal guest, Dr. Jim Henry, President of the Southern Baptist Convention), as they chanted "PEACE". I think that they were also "surrounded by another great cloud of witnesses in heaven" and in that crowd was another Baptist leader, Dr. W. O. Vaught, former pastor of Immanuel Baptist Church in Little Rock, Arkansas.

Every January, for 18 years before he died, Dr. Vaught took a group from his church with us on our Holy Land Travel/Seminar. He loved this Land of the Bible and its people and prayed for "the peace of Jerusalem." "Preacher," as his folks affectionally called him, raised thousands of dollars for building the Arab-speaking Baptist Church in Nazareth, and for the rebuilding of the Hebrew-speaking Baptist Church in Jerusalem that had been burned by Jewish extremists.

Many of us remember an incident in January of 1982 in the Holy Land. Dr. Wayne Ward, Senior professor from Southern Baptist Seminary, was one of the lecturers that week. It was then we came to know a special young couple from Immanuel Church that "Preacher" Vaught had with him.

It was after dinner at the hotel in Caesarea, and our folks were bringing down the gifts they had for the Baptist Village, the Gaza Hospital, and the Nazareth School.

Dr. Ward's wife, Mary Ann, was in the lobby gathering up the materials for the Mission when she asked a man standing by the stairs to help load the mission van. He readily volunteered, picked up two sacks, and started out the front door. Turning back, he said: "I told my wife I'd wait here while she went up to get our gifts. Please tell her where I've gone."

Mary Ann promised to relay the message and then whispered to one of the Immanuel church members nearby, "Help me, because I don't know his wife. In fact, who is that young man?" The lady replied "Oh, that is Bill Clinton, the Governor of Arkansas and his wife's name is Hillary!"

Later that week, during the Garden Tomb service celebrating the Resurrection of our Lord, I remember a deeply moved young couple, Bill and Hillary Clinton, holding hands, weeping and praying with us.

When Dr. Vaught died, Dr. Ward was selected to be the interim minister for Immanuel Baptist Church. Thus he became Bill Clinton's pastor for a time and came to know the Governor well. They talked often about the Holy Land and its history and problems.

Dr. Ward reflects on the Peace Accord of Israel and Jordan and President Clinton's interest and involvement. "Dr. Dehoney, I have traveled with you in the Bible Lands for more than forty years and I never expected to witness such a scene until Jesus comes, Arab and Jew joining hands in peace! But it has happened!

"I think it is significant that for the first time in history, an American President first came to know the people of the Holy Land as an ordinary Christian pilgrim. High officials are often insulated from the rank and file ordinary people by security personnel and the protocol of their office. But in 1982 Bill Clinton talked with Christians, Muslims and Jews as a genuine human being and a fellow-believer in God. He learned what was in their hearts. He also knew that, as Jesus taught us, the way to bring enemies together in a true peace is to reach their hearts."

Only God in heaven knows the joy and sense of eternal purpose that must have been in the heart of Pilgrim Bill Clinton when, as President Clinton, he returned to the Holy Land 15 years later to take the Arab world in one hand and the Jewish people in the other, reconciling them with the words of Jesus, "Blessed are the Peacemakers."

WAYNE DEHONEY
Past President
Southern Baptist Convention
October, 1994

ROUTE SLIP

White House Correspondence
Room 94 - OEOB
Phone 456-7610

TO:

John P.

FROM:

J-D

ext. _____

- ☒ For your information only
- ☐ For appropriate action
- ☐ Please draft a reply and return within 5 days
- ☐ For your approval or suggestions
- ☒ ASAP please! This material is time sensitive

CC. COMMENTS:

Perhaps useful?
Janice Williams called it.

[Signature]

Fax Cover Sheet

=====

95 FEB 13 A10:40

Please Deliver to:

Erskine Bowles

Fax #: 94566703
Company: White House*John Podesta
for
Garcia*

From:

Robert L. Shiffer

Fax #: (202)205-9918
Phone: (202)619-5326

Pages:

=====

Message:

This fax was sent using Castelle's FaxPress network fax server.

February 10, 1995

TO: Erskine Bowles

FROM: Bob Schiffer

SUBJECT: Catholic Grassroots Support

The following are persons you may wish to contact among lay Catholic pro-choice groups who could be helpful in the confirmation of Dr. Foster.

Fran Kissling or Denise Shannon
Catholics for Free Choice
202 986-6093

Mary DelRio
Planned Parenthood of New York City
212 274-7200

Clinton Presidential Records Digital Records Marker

This is not a presidential record. This is used as an administrative marker by the William J. Clinton Presidential Library Staff.

This marker identifies the place of a tabbed divider. Given our digitization capabilities, we are sometimes unable to adequately scan such dividers. The title from the original document is indicated below.

C

Divider Title: _____

THE NOMINATION OF DR. HENRY FOSTER

Questions and Answers

March 8, 1995

Sticking By Dr. Foster

Q: *Dr. Foster is just so controversial. You don't need this. Is the Administration going to stand by him?*

A: You bet we are. Here's why. I think he has the experience and the background to be an outstanding Surgeon General. He has practiced medicine for 38 years. As an obstetrician/gynecologist, he has dedicated his life to improving the health of the women and children in his care. He has delivered thousands of babies and trained hundreds of young doctors. His innovative teen pregnancy program is nationally recognized and was chosen to be one of America's 1000 Points of Light by my predecessor. The program stresses abstinence and self esteem -- and it works. Fewer women are getting pregnant; more young people are going to college. He is just the kind of person this nation needs as Surgeon General and I'm proud he's my nominee.

Tuskegee Syphilis Study

Q: *How do you feel about the recent revelations that the man you nominated to be Surgeon General of the United States appears to have sanctioned the notorious Tuskegee syphilis study in which poor black men were experimented on?*

A: Dr. Foster has said that he first learned of Tuskegee Syphilis study in 1972 and was outraged. As President of the local Medical Society, he called the members together immediately to try to identify the infected men and get them treatment. He said -- and I believe -- that if he had heard of the study earlier, he would have demanded then that it be stopped. I will remind you that he was a young black doctor who had gone to Alabama to serve the very people he is being accused of neglecting.

Abortion

Q: *Is the White House trying to make this a debate about abortion to expose cracks in the Republican Party?*

A: Let me tell you what I think this debate should be about. I would like this debate to be about the qualifications of a highly trained, well-respected physician and educator to be Surgeon General. I would like to have a debate about "*I Have A Future*" and what we can do together as a nation to prevent teen pregnancy. I want a debate about how important it is to train doctors to practice in inner city and rural communities which have too few doctors today. There are groups who want to use this nomination as part of their campaign to criminalize the right of a woman to choose. We are going to fight that.

THE NOMINATION OF DR. HENRY FOSTER

Questions and Answers

March 3, 1995

Sticking By Dr. Foster

Q: *Dr. Foster is just so controversial. You don't need this. Are you going to stand by him?*

A: You bet I'm standing by him. Here's why. I think he has the experience and the background to be an outstanding Surgeon General. He has practiced medicine for 38 years. As an obstetrician/gynecologist, he has dedicated his life to improving the health of the women and children in his care. He has delivered thousands of babies and trained hundreds of young doctors. His innovative teen pregnancy program is nationally recognized and was chosen to be one of America's 1000 Points of Light by my predecessor. The program stresses abstinence and self esteem -- and it works. Fewer women are getting pregnant; more young people are going to college. He is just the kind of person this nation needs as Surgeon General and I'm proud he's my nominee.

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STERILIZATION

Charge:

Dr. Foster advocates hysterectomies as a means of sterilization. He has performed hysterectomies to sterilize severely retarded individuals.

"Recently, I have begun to use hysterectomy in patients with severe mental retardation. Hysterectomy can be done either for sterilization or to eliminate the menses, which is of significant hygienic benefit to those severely handicapped individuals." (Removal of the Normal Uterus, Southern Medical Journal, 1976).

Response:

- Dr. Foster stressed in this article that "obstetricians and gynecologists must guard vigilantly against the injudicious and indiscriminate removal of the normal uterus."
- Nonetheless, he recognized that hysterectomy might be appropriate for some severely retarded women in rare circumstances. Medical theory and practice have changed in the intervening decades, and Dr. Foster, along with the mainstream of the American medical community, no longer accepts the sterilization of a mentally retarded woman by hysterectomy as appropriate, although other medical reasons might justify such a procedure.
- Dr. Foster has always insisted on informed consent by the woman or her legal guardian prior to performing any such procedures.

Charge:

Dr. Foster has routinely encouraged sterilization of patients with sickle cell disease after they have been able to deliver a child. (Clinical Management: Sickle Cell State and Pregnancy, Urban Health, 1977).

Response:

- Dr. Foster actively opposed routine sterilization of sickle-cell-disease patients. He has encouraged counseling, screening, and patient management to enable women with sickle cell disease to have healthy children. Since the beginning of his professional career, Dr. Foster has conducted pathbreaking scientific research on the diagnosis and treatment of sickle cell disease and has improved maternal and child survival rates.

Charge:

Dr. Foster's work and writings show a cavalier attitude toward sterilization. For example, he stated in 1972 that the number of tubal sterilizations -- 193 -- performed in one calendar year in a rural county with a small population was "low and in need of improving." (A Rural Hospital and Family Planning, 1972).

Response:

- Dr. Foster is not at all cavalier about sterilization. In a textbook on Ambulatory Gynecologic Surgery, he wrote: "As with abortion, the psychosocial dynamics associated with sterilization are profound and require special counseling. Sterilization should be offered only to mature women with no further desire of pregnancy."

- In the 1972 article, Dr. Foster was describing the need to provide family planning to those people in the region already seeking such services after informed consent. His statement simply reflects a physician's appreciation of patient concerns and needs.

- Dr. Foster has consistently advocated only voluntary, informed family planning. Moreover, he recognizes family planning as only part of an overall strategy to improve health care, including reduction in infant mortality. He has stressed his opposition to "coercive sterilization," (same 1972 source) both in his statements and writings.

- Dr. Foster has eloquently stated on numerous occasions that he, the father of two children, he knows that the creation of a human being is one of the greatest joys anybody can have.

ABORTION FOR CONTRACEPTIVE PURPOSES

Charge:

Dr. Foster advocates the use of abortion as a means of contraception. He has specifically referred to abortion as "a contraceptive measure." (Contraceptives in Sickle Cell Disease, Southern Medical Journal, 1981)

Response:

- Dr. Foster does not equate abortion and contraception. In his writings and speeches, Dr. Foster has used the words abortion and contraception to denote two very different concepts. Dr. Foster has never advocated that abortion be used in place of contraceptives.
- Although Dr. Foster acknowledged in his 1981 article that abortion is viewed as a type of contraceptive in some parts of Europe, he did not advocate the use of abortion as a contraceptive measure in the United States.
- Dr. Foster has not promoted the use of abortion for contraceptive purposes. In discussing its use as a contraceptive measure for women with sickle cell anemia, he stated that "clearly this would not be ideal."
- Instead, Dr. Foster has stated his preference that, even when the health of the woman is at issue, abortion is used only when other methods of contraception fail.
- Dr. Foster has not advocated the use of abortion. His ultimate recommendation in the article was that barrier methods of contraception combined with timing should be used by women with sickle cell disease because abortion, a surgical procedure, carries greater risks to the patient.

Charge:

Dr. Foster is cavalier and indifferent to the use of abortion.

Response:

- Dr. Foster has dedicated his 38 years of medical practice to improving the maternal and child health care of his patients. He has delivered thousands of babies and instructed hundreds of young physicians.
- Dr. Foster has focused much of his energy on promoting family planning in order to prevent unwanted pregnancies and abortions.
- Dr. Foster has expressed his concern about reliance on abortions rather than on birth control measures. (Family Planning and the Black Community, 1975).

- Dr. Foster believes that, particularly for adolescents, abstinence is the best way to prevent unwanted pregnancy. For those who do not abstain from sexual activity, Dr. Foster believes that safe and reliable contraception is the next best available alternative. If these measures fail, Dr. Foster believes that, it is the responsibility of a good physician and staff are obligated to provide counseling on pregnancy options, including both adoption and pregnancy termination.

- If a pregnancy termination is selected by the patient, it should be done as early as possible in the pregnancy. He believes that abortion should be safe, legal, and rare.

Charge:

Dr. Foster has promoted in-home abortions to make them more available as contraceptives. (Articles characterizing Upjohn Study).

Response:

- Dr. Foster has never promoted the use of in-home abortions.

- Dr. Foster believes abortions should be performed only as a last resort, but he also believes that when they are done they should be done in the safest manner possible. Therefore, he supports research into safer methods.

- As Chairman of the Department of Obstetrics and Gynecology at Meharry Medical College, Dr. Foster was the principal investigator for an FDA-approved multi-center clinical trial to test the efficacy and safety of an abortifacient suppository administered during early pregnancy. The trial was a research project conducted in an academic health science center and was approved by the internal human investigations review board. All medical procedures were conducted in the hospital. All patients were volunteers who were legally approved for pregnancy termination in the state of Tennessee.

Charge:

Dr. Foster's treatment of abortion as a contraceptive measure is evidence of the liberal mind set that promotes sexual promiscuity among young people and does not require them to take responsibility for their actions.

Response:

- Dr. Foster has devoted a significant portion of his professional life and career to battling sexual promiscuity among young persons. He has established such programs as "I Have A Future," which provides positive alternatives to teenage

pregnancy. Through "I Have A Future," Dr. Foster and his team have helped build the self-esteem of high-risk young men and women by providing education and job opportunities.

- Dr. Foster anchored the "I Have a Future" program directly in the neighborhoods where the young participants live. By doing so, in addition to ensuring better access to social and medical support services, parents also can be more involved with their children's choices.

NOMINATION OF DR. HENRY FOSTER FOR SURGEON GENERAL

Questions & Answers

MESSAGE

Extreme right-wing opponents of a woman's right to choose will use any diversionary tactic in their power to derail the nomination of Dr. Henry Foster. They want to take away a woman's right to choose and will try to make this a debate about abortion. Americans deserve a debate about the qualifications of one of the nation's leading physicians, whose nomination has earned strong support from the medical community around the country.

A LENGTHY, DISTINGUISHED ACADEMIC CAREER

As a respected scholar, an accomplished researcher, a practicing physician, and a medical school dean, Dr. Foster has published widely on a variety of subjects. A person of Dr. Foster's experience should be judged by the objectives he has pursued throughout the course of a 38-year career -- not by distortions of his writings taken out of context.

- Dr. Foster has delivered thousands of babies.
- Dr. Foster has helped train hundreds of doctors, many of whom went on to serve the nation's poor urban and rural communities.
- Dr. Foster started "*I Have A Future*," a family-based program to fight teen pregnancy -- chosen by President Bush as one of America's 1,000 Points of Light.

Following, please find a compilation of common questions and sample responses on the following subjects:

- The "Credibility" Issue
- Abortion
- Sterilization
- Accreditation of Meharry Medical College

February 19, 1995

CREDIBILITY

CHARGE: *I'm concerned about the credibility of Dr. Foster and the White House. Different numbers have been tossed around, incorrect information was sent up to the Senate, there seems to have been an intent to deceive. Credibility is the real issue to me.*

RESPONSE: There was absolutely no intent to deceive. Dr. Foster answered an initial question about the number of abortions he had performed by relying on his memory, without reviewing his entire record, and this was certainly a mistake. But to suggest that he deliberately lied about that record is outrageous and unfair. Dr. Foster is an honest physician and academic with a distinguished 38 year record of service. He was appointed to the Ethics Advisory Board for President Carter's Secretary of Health and is currently serving his second term on the Ethics Committee of the Nashville Academy of Medicine.

The issue here is not "credibility" and the debate is not about numbers. The issue is the qualification of one of the nation's leading physicians to be Surgeon General and his support of a woman's right to choose. "Credibility" is a smoke screen -- thrown up by those who want to avoid taking a public stand on the abortion issue, but nonetheless want to destroy this nomination. And they make no bones about their strategy of diversion. The Republican Speaker of the House has openly advised his party to "never touch" the issues at hand -- specifically, abortion -- and keep trying to make this important debate about "dishonesty."

The real issues here are the outstanding qualifications of this nominee to serve as Surgeon General and the right of all American women to choose. Let those who would oppose Dr. Foster take on these issues honestly and publicly state their positions, rather than hiding behind the credibility smokescreen. If they refuse, their credibility becomes the issue.

ABORTION

CHARGE: *Dr. Foster advocates the use of abortion as a means of contraception.*

RESPONSE: Dr. Foster has never advocated that abortion be used in place of contraception. In fact, Dr. Foster has repeatedly expressed his concern about the increased reliance on abortion over birth control measures. He believes abortion should be safe, legal, and rare.
[continued]

Throughout his medical practice and distinguished career, Dr. Foster has promoted abstinence as the best way to prevent unwanted pregnancy. His life's work, as he has said repeatedly, has been dedicated to making sure young people don't have to face the choice of having abortions.

BACKGROUND: Dr. Foster published an article, "*Contraceptives in Sickle Cell Disease*," which examined the different reproductive options for women with sickle cell anemia. He acknowledged that abortion is viewed as a contraceptive in parts of Europe, but did not advocate the use of abortion as a contraceptive in the U.S.

CHARGE: *Dr. Foster is an abortionist.*

RESPONSE: Dr. Foster is one of the nation's leading physicians -- a highly respected obstetrician/gynecologist and one of the leading medical educators in the country. In his distinguished 38-year career, Dr. Foster has delivered thousands of babies and instructed hundreds of young physicians.

Dr. Foster's life has been dedicated to preventing unwanted pregnancies and making sure young people don't have to face the choice of having abortions. Dr. Foster does believe strongly in the right of a woman to choose and echoes the President's belief that abortions should be safe, legal, and rare.

CHARGE: *Dr. Foster has promoted in-home abortions to make them more available as contraceptives.*

RESPONSE: Dr. Foster does not equate any form of abortion with contraception. He has never promoted the use of in-home abortions, nor has he indicated such support in his writings.

Dr. Foster believes that abortions should be safe, legal and rare. He believes they should be performed only as a last resort, but that when they are done they should be performed in the safest manner possible. Therefore, as an expert in the field of maternal health, he supports research into safer methods. [continued]

BACKGROUND: As Chairman of the Department of Obstetrics and Gynecology, Dr. Foster was the principal investigator at Meharry Medical College for an FDA-approved clinical trial -- conducted in many medical centers throughout the country -- to test the efficacy and safety of an abortifacient suppository administered during early pregnancy. The trial was a research project conducted in an academic medical center, all medical procedures were performed in the hospital, and all patients were volunteers.

CHARGE: *Dr. Foster's promotion of abortion is evidence of the liberal mindset that encourages sexual promiscuity among young people and does not require them to take responsibility for their actions.*

RESPONSE: This is a total distortion. Dr. Foster has never promoted abortion. In fact, he has devoted much of his professional life and career to making sure none of his patients ever has to face that decision. To battle sexual promiscuity among young persons, Dr. Foster established a program in the housing projects of Nashville called "*I Have a Future*," which stresses abstinence as the best way to prevent unwanted pregnancy.

Through "*I Have A Future*," Dr. Foster and his team help build the self-esteem of young men and women by providing education and job opportunities. In fact, Dr. Foster established this program because he found that most teen pregnancy programs were limited to advocating contraception, rather than empowering teenagers to take charge of their lives and consciously make other choices.

"*I Have A Future*" is a nationally recognized program that has received support from the Carnegie Corporation, the Tennessee Department of Health, and Bill and Camille Cosby. In 1991, President Bush named "*I Have A Future*" as one of America's 1,000 Points of Light.

STERILIZATION

CHARGE: *Dr. Foster has performed hysterectomies to sterilize severely retarded women.*

RESPONSE: In 1976, when Dr. Foster wrote that he had performed hysterectomies on severely retarded women, the sterilization of severely mentally retarded women for hygienic purposes was within the medical mainstream. Medical theory and practice have changed in the intervening decades and Dr. Foster no longer accepts the sterilization of a mentally retarded woman as appropriate. Dr. Foster believes strongly in the individual rights of the disabled.

In the article, Dr. Foster stressed that *"obstetricians and gynecologists must guard vigilantly against injudicious and indiscriminate removal of the normal uterus."*

BACKGROUND: Nineteen years ago, in 1976, Dr. Foster wrote an article saying he had recently *"begun to use hysterectomy in patients with severe mental retardation."* This was done to *"eliminate the menses, which can be of significant hygienic benefit to those severely handicapped individuals."*

Dr. Arthur Caplan, Director of the Center for Bioethics at the University of Pennsylvania, said that Dr. Foster's article seemed keenly aware of the long history of abuse of surgical sterilizations. For its time, the article *"represents an enlightened and cutting-edge opinion about the need of caution and care with respect to that form of surgical sterilization."* [New York Times, 2/13/95]

CHARGE: *Dr. Foster has routinely encouraged sterilization of patients with sickle cell disease after they have been able to deliver a child.*

RESPONSE: Dr. Foster actively opposed routine sterilization of sickle-cell disease patients. He has encouraged counseling, screening, and patient management to enable women with this disease to have healthy babies. From the start of his medical career, Dr. Foster has conducted path-breaking scientific research on the diagnosis and treatment of sickle cell disease, improving both maternal and child survival rates.

ACCREDITATION OF MEHARRY MEDICAL COLLEGE

CHARGE: *Meharry Medical College lost its accreditation during Dr. Foster's tenure.*

RESPONSE: Meharry Medical College never lost its accreditation. However, three of its ten medical residency training programs -- including the ob/gyn residency program in June 1991 -- did lose their accreditation. At the time, they had insufficient patient volume and case diversity to provide adequate medical experience for their residents. As is true for many historically black hospitals, Meharry did not receive adequate public funding for the care it provided to uninsured patients and, without these funds, its patient volume declined.

Dr. Foster committed himself to doing everything in his power to preserve the vital role of one of the nation's foremost black hospitals. In 1992, he played a key role in a merger between Meharry and Nashville Metropolitan Hospital that is expected to increase patient volume and result in the reinstatement of these three residency programs. The merger was conditional upon the development of a top-flight medical faculty, which Dr. Foster successfully recruited.

It was clear in the 1991 decision that the quality of Meharry's residency programs was not the problem. David Denton of the Southern Regional Education Board said, *"People shouldn't confuse the residency problems with the quality of teaching at Meharry. It has been very effective at getting its graduates licensed."* In fact, Meharry has trained more black doctors than any other school in America, providing over 40% of the nation's black doctors and dentists. It plays a key role in attracting minorities to medicine and providing doctors to poor urban areas and under-served rural towns.

TALKING POINTS ON ALCOHOL

GENERAL STATEMENT: RESEARCH SHOWS THAT ADOLESCENTS ARE DRINKING MORE AT AN EARLIER AGE, AS YOUNG AS 13. THIS TREND HAS ALARMING SOCIAL IMPLICATIONS FOR OUR YOUNG PEOPLE.

THE DANGERS OF ADOLESCENT DRINKING:

-- DRINKING AMONG TEENS LEADS TO A LONG LIST OF IRRESPONSIBLE BEHAVIORS INCLUDING-- PROMISCUITY, VIOLENCE, AUTOMOBILE ACCIDENTS AND POOR SCHOOL PERFORMANCE, AS SHOWN BY RESEARCH STUDIES ON TEENS AND THE ALCOHOL PROBLEM.

-- THERE IS A GREAT NEED TO BREAK THE CYCLE OF BINGE DRINKING AMONG YOUNG ADULTS, ESPECIALLY COLLEGE AGE STUDENTS. WE NEED TO REDOUBLE OUR MESSAGE TO YOUNG PEOPLE THAT BINGE DRINKING IS DANGEROUS TO THEMSELVES AND TO OTHERS.

-- WE MUST FIND MORE AND BETTER WAYS TO SUPPORT THE PARENTS, COMMUNITY LEADERS, AND EVERYONE IN OUR COMMUNITY, IN THEIR EFFORTS TO CURB ADOLESCENT ALCOHOL CONSUMPTION.

THE NOMINATION OF DR. HENRY FOSTER, JR.

June 20, 1995

Dr. Foster "clearly demonstrated his qualifications. If he is not qualified to be America's doctor, it's hard to imagine who would be. There has been a lot of politics and a lot of talk back and forth on this nomination, but now the time has come to do the right thing. If the majority of the United States Senate is for him, he should certainly be confirmed." President Clinton, 5/25/95

TIME TO VOTE.

The United States Senate has questioned Dr. Foster, met with Dr. Foster, considered Dr. Foster, and debated Dr. Foster for almost 5 months. Enough is enough. Now it's time to vote on Dr. Foster.

WHAT'S FAIR IS FAIR.

Henry Foster deserves the simple respect of an up or down vote on his nomination. The American people deserve to know where their Senators stand on Dr. Foster's nomination. A vote to end debate isn't a vote on Dr. Foster, and it's not fair. Come on -- nobody voting for more debate really thinks we need to debate this anymore. So what are they afraid of?

NO IF'S, NO ANDS, NO BUTS -- JUST AYES AND NAYS.

It's time to stop hiding behind procedural tricks. Let the Senate vote on Dr. Foster, and let the Senate decide. If a majority of the U.S. Senate wants Dr. Foster to be Surgeon General, he should be Surgeon General. If a majority is opposed to Dr. Foster, he shouldn't be. That's it. Stop talking, start voting.

DR. FOSTER IS WELL QUALIFIED TO BE AMERICA'S DOCTOR

Dr. Foster has spent 38 years in medicine. He has the leadership, knowledge, and compassion to be the doctor for all Americans. He has dedicated his life to improving the health of the women and children in his care. He has delivered thousands of babies and trained hundreds of young doctors. He has worked hand-in-hand with people in underserved communities to solve their health problems.

In Tuskegee, Alabama, Dr. Foster established a program, now a national model, to bring pre-natal care to poor rural women. He led a multi-million dollar national campaign to expand health care services for high-risk youth. "I Have A Future," his program to address America's teen-pregnancy problem, was named one of America's *Thousand Points of Light* by President George Bush. In 1992, Dr. Foster led the successful effort to save one of America's foremost black medical schools.

PROMINENT REPUBLICANS CALL FOR FOSTER FLOOR VOTE

"It'll be a sad day if he's defeated, but a very, very sad day if we don't give Henry Foster a vote on the floor of the United States Senate."

Sen. Arlen Specter [PR Newswire, 5/9/95]

Dr. Foster testified for two full days before the Senate Labor and Human Resources Committee. He thoughtfully and thoroughly addressed each of the questions that have been raised about his nomination -- defining and defending himself well. After the hearing, Dr. Foster answered additional written questions submitted by Senators.

Dr. Foster now deserves a vote by the entire Senate. Republicans and Democrats alike agree. He's earned it. It's fair. And it's the tradition of the United States Congress. As Majority Leader Dole said in February, *"The general rule is that the President is entitled to his nominees, and that's been the general rule around here forever."*

SENATOR BOB DOLE

- In February, Senate Majority Leader Bob Dole refused to play politics: *"Let's see what the testimony is... We shouldn't shoot down somebody before they've even had a hearing. ... The general rule is that the President is entitled to his nominees, and that's been the general rule around here forever."* [Meet the Press, 2/5/95]
- After announcing his intention to allow a floor vote on Dr. Foster's nomination, Sen. Dole stated that *"...my view is that he is entitled to that courtesy."* [New York Times, 6/20/95]

SENATOR JUDD GREGG

- "Even many of Foster's opponents say he deserves a vote on the floor. Sen. Judd Gregg said he recently spoke with Dole, and *'I just said I thought we should have a vote on him, that we might as well put it out and have a vote on it.'*" [Associated Press, 5/9/95]

SENATOR JOHN CHAFEE

- *"I say, let's get on with it,"* said Sen. John Chafee (R-RI), one of the Senate's leading experts on health care, said Tuesday. *'I think that he's a person with suitable experience. He's made efforts in areas that I believe are important -- doing something about teen-age pregnancy. The fact that he's performed an abortion doesn't bother me. I guess the amazing thing is he's done so few abortions over such a long period.'*" [Associated Press, 5/9/95]

SENATOR BOB PACKWOOD

- *"I think he's a qualified man. His background I think is excellent from a standpoint of what we'd be looking for, and I'm going to support him. . . My hunch is on this one the filibuster won't last."* [Meet The Press, 5/14/95]

SENATOR BILL FRIST

- *"The American people want Doctor Foster to be given a fair shot, even if they disagree with him vehemently. And secondly, I think they do want it to come to a vote in the United States Senate. I'm not sure if that was the case three weeks ago, but as the way things have evolved, the American people would like to see a vote."* [CNBC, "Equal Time," 5/4/95]

MANY REPUBLICANS CALL FOR FOSTER FLOOR VOTE

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SENATOR JAMES JEFFORDS

- *"I am confident in my own mind that you ought to be approved by this committee, and I hope you are approved by this committee and I hope that you do go before the full Senate and let them examine the facts that we all have here."* [Closing Statement at Dr. Foster's Hearings, 5/3/95]

SENATOR ARLEN SPECTER

- *"It'll be a sad day if he's defeated, but a very, very sad day if we don't give Henry Foster a vote on the floor of the United States Senate."* [PR Newswire, 5/9/95]

SENATOR FRED THOMPSON

- When asked whether a strong performance by Dr. Foster at the hearing would make a difference, "Tennessee senator, Fred Thompson, says, with regret, . . . *I'd like to say yes, but I really don't know. At this stage of the game it might not. . . Frankly, I think that presidential politics is part of the picture.*" [The Commercial Appeal, 5/1/95]

SENATOR JAMES INHOFE

- "...freshman Inhofe of Oklahoma calls it '*shallow on courage*' to deny him his chance." [Wall Street Journal, 5/9/95]

SENATOR RICHARD LUGAR

- "Even Foster opponent. . . Lugar. . . say(s) he deserves a floor vote." [Wall Street Journal, 5/9/95]

SENATOR NANCY KASSEBAUM

- "...Mrs. Kassebaum, who remains uncommitted on the Foster nomination, said she wants it to go to the Senate floor and believes there are enough votes to override a filibuster." [Washington Times, 5/4/95]
- "Sen. Kassebaum has stated that the nomination should not be defeated on a procedural vote. "She is not one who believes the nomination should kind of wither and die out of inaction," stated a spokesman for the Senator." [Washington Post, 6/20/95]

SENATOR JOHN MCCAIN

- "Even Foster opponent...McCain say(s) he deserves a floor vote." [Wall Street Journal, 5/9/95]

SENATOR BEN NIGHTHORSE-CAMPBELL

- "As for Nighthorse-Campbell, press secretary Alton Dillard said, '*He will support the nomination, and he doesn't favor any filibuster, any blockage of action, anything like that.*'" [Associated Press, 5/9/95]

MANY REPUBLICANS CALL FOR FOSTER FLOOR VOTE

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SENATOR SLADE GORTON

- "Senator Slade Gorton (R-WA), who voted against Foster in committee, called for a floor vote." (Chicago Tribune, 5/27)

SENATOR ALAN SIMPSON

- *"It's about a person's reputation. It's like Bob Bork. You may not have liked Judge Bork, but at least he got to come to the floor for a vote."* [Washington Post, 5/4/95]

SENATOR OLYMPIA SNOWE

- *"Overall, I found him to be an impressive individual. A very dedicated professional, and very thoughtful." After meeting with Foster at her office, Snowe said the White House nominee deserves "a full and fair confirmation hearing."* [Bangor Daily News, 3/2/95]

JACK KEMP

- *"(Republicans) shouldn't demonize him. He is a decent, honorable person. I'm pro-life. I think the Republican Party should remain pro-life....(But) I think it would be unseemly to filibuster this. As far as I'm concerned, it ought to go to a vote."* [Washington Times, 5/4/95]

Dr. Foster Deserves to be Confirmed
Wednesday, June 21, 1995

"There have been a lot of politics and a lot of talk back and forth on this nomination, but now the time has come to do the right thing. And I trust that the committee and, ultimately, the Senate will do the right thing and confirm Dr. Foster as Surgeon General."

President Clinton
Thursday, May 25, 1995

After months of delay, the Senate will vote today on the nomination of Dr. Henry Foster to be Surgeon General. President Clinton firmly believes that Dr. Foster deserves to be confirmed and that the Senate should confirm his nomination.

In the Confirmation Hearing, America Saw the Real Doctor Henry Foster: As Senator Kassebaum noted, "Dr. Foster did very well" in his two full days of testimony. He took advantage of the opportunity to finally define himself -- describing for the American people his distinguished 38-year career and the choices he had made to serve those who too often get too little care. Washington Times, May 4, 1995.

Dr. Foster also thoughtfully and thoroughly addressed each of the questions that have been raised about his nomination. In announcing his support for Dr. Foster, Republican Senator James Jeffords said that Dr. Foster had done a "superb job in taking care of the lingering, critical issues" during his testimony. Washington Times, May 8, 1995.

Dr. Foster Proved He Is Well Qualified To be "America's Doctor": Dr. Foster's 38-year medical career has given him the leadership abilities to be the doctor for all the American people. As President Clinton said, "He has spent a lifetime addressing the problems that are now engulfing our country." Dr. Foster has been a leader in the battles against infant mortality, drug and alcohol abuse, and teen pregnancy. He has led the struggles for pre-natal care, women's health, and full and successful futures for America's children.

In Tuskegee Alabama, Dr. Foster established a program to bring pre-natal care to poor rural women which became a national model. He was asked by the Robert Wood Johnson Foundation to head a national multi-million dollar program to expand health services for

high-risk youth. "I Have A Future" -- founded by Dr. Foster in the Nashville housing projects to fight teen pregnancy -- has won national recognition, including one of President Bush's Thousand Points of Light. In 1992, Dr. Foster directed a successful process that helped save one of the nation's foremost black hospitals.

Clinton Presidential Records Digital Records Marker

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This marker identifies the place of a tabbed divider. Given our digitization capabilities, we are sometimes unable to adequately scan such dividers. The title from the original document is indicated below.

D

Divider Title: _____

PROPOSED LAWYER "TO DO" LIST
FOSTER NOMINATION

Date: 2/14/95

Writings and Speeches

HHS Completed Medline search on "Henry Foster."
WH Obtain remainder of articles, speeches.

Prostaglandin Follow-Up

HHS Legal research re necessary consents.
Consent to abortion under Tennessee law.
Consent to experimental procedure under federal regulations.
WH Verification of facts relating to individual patients.
Should include all 60 participants.
Must determine date of individual procedures, as Tennessee abortion law changed in 1979.
Will require coordination with Dr. Foster, records staff at Meharry.

Abortions

HHS Secure statement of former hospital administrator from Andrew Hospital.
WH Deal with other hospitals where Dr. Foster had admitting privileges.

Draft Charges and Responses

WH Follow up with Dr. Foster re outstanding issue on first set of draft charges/responses.
WH Draft additional charges/responses.
Family planning/black genocide.
Sex education and condoms.
Biomedical research/informed consent.

Malpractice

WH Completed court docket search.
Ask Dr. Foster for name of any lawyer he may have
consulted and follow up.

Ethics Advisory Board Transcript

HHS Read entire Ethics Advisory Board transcript for
November 10, 1978.

Sterilization

HHS Research Tennessee, Alabama law re consents needed to
sterilize mentally retarded.

WH Explore facts with Dr. Foster.

"I Have a Future"

WH General vet of program.

HHS Review any HHS data on IHAF or other programs with
which Dr. Foster was associated.

Meharry Accreditation

HHS Complete follow-up.
Obtain Reagan team report.
Prepare precis of speeches on the Meharry merger.

Health Care Reform

HHS Prepare precis of Dr. Foster's work (writing, speeches)
on health care reform.

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Divider Title: _____

Statement of Dr. Henry W. Foster, Jr.

I have spent my life devoted to providing health care to those who might otherwise be denied such care. I was outraged in 1972 when, as President of the Macon County Medical Society, I first learned the facts of the Tuskegee Syphilis Study. Had I learned the facts of the Study any earlier, I would have been equally outraged then, and I would have insisted on appropriate treatment, as I did in 1972.

Statement of John D. Podesta, White House Official

Dr. Foster has stated unequivocally that he was not informed until 1972 that the federal government was conducting its study of untreated syphilis.

While we have no doubt that those opposed to this nomination will try to distort the facts and use the actions of the government against Dr. Foster, we are confident that fair-minded people will reject those distortions.

Statement of Sheridan Howard Settler, Jr., M.D.

I recall a meeting of the Macon County Medical Society in 1969 at which the Society received a brief report from federal officials about the ongoing Tuskegee Syphilis Study.

It is my recollection that the subject of treating the participants was not raised at this meeting. Further, I do not recall that the Society was asked to provide its consent to continue a study of untreated syphilis. Finally, I have no recollection, and do not know, that Dr. Henry Foster was present at this meeting. (2/24/95)

Statement of Broadus M. Butler, former president of Dillard University

I headed the Ad-Hoc Commission appointed by HEW in 1972 to review the Macon County Study, commonly referred to as the Tuskegee Study, on the effects of untreated syphilis on black men.

What was clear from our review is that this was a federal government study from start to finish, with no input or participation from local Tuskegee doctors. Any effort to assign blame to the local doctors -- most of whom weren't even aware of the study until the very end and then were not aware of critical details -- is terribly misplaced.

There were really only two issues concerning this study: first, whether it should ever have taken place; second, whether it should have been stopped in the late 1940s when penicillin became widely available. These decisions were made solely by the federal government. By 1968, one of the study researchers advised the team and the federal government that treatment was no longer a viable option. (2/24/95)

Statement of Mr. Fred D. Grey, the Tuskegee Study plaintiff's lawyer

I don't believe they were aware of the details of the study. I think they probably were as much victims as were the participants themselves. (CBS Evening News, 2/24/95)

Our research showed that the only ones who really made decisions were persons connected with the federal government and the (state) health department. Our research showed that none of the local doctors were responsible for the study. (The Washington Post, 2/25/95)

Dr. Foster — Fact Statement

- In 1932, the federal government's Public Health Service commenced its "Study of Untreated Syphilis in the Male Negro in Macon County, Alabama." The subjects were not aware of the purpose of the study or even that they had syphilis. The study's purpose was to observe the effects of untreated syphilis, not to treat it.
- In February 1969, at least partially in response to concerns about the racial, social, and moral implications of the study, the CDC convened an Ad Hoc blue-ribbon panel to consider whether to continue the study. At that meeting, the panel discussed whether to commence treatment of the untreated subjects, and devoted considerable discussion to the fact that treatment at that point was unlikely to do much good and might be dangerous.

They agreed to continue the study, but also to try to bring local physicians on board. Communications prior to the meeting as well as the minutes reflect that the CDC was concerned that it had a potentially explosive story on its hands, and several passages suggest that CDC doctors thought obtaining the concurrence of the Macon County doctors would provide protection from criticisms of the study. One comment referred to bringing the doctors on board as "good public relations."

- On May 19, 1969, a meeting was held in Tuskegee, Alabama between the CDC and some members of the Macon County Medical Society. The CDC was represented by Dr. William J. Brown and Dr. Alphonso Holguin. Exactly what occurred at the May meeting is unclear, but what does seem clear is that the briefing was relatively short - the Macon County doctors who recall it estimate that it lasted between ten and twenty minutes -- *and that crucial details of the study were not disclosed.*

Indeed, the Macon County doctors who recall the meeting, never understood the single most important fact about the study — namely that the study was designed to observe untreated syphilis and that participants were not supposed to be treated. Moreover, none of the doctors recalls that the members of the Medical Society were asked, or agreed, to withhold treatment from the subjects.

- Dr. Settler, the Secretary-Treasurer of the Medical Society in 1969, states that he remembers no discussion of treatment and no consent by the Medical Society to continuation of a study of untreated syphilis. In 1972, the *Montgomery Advertiser* reported that Dr. Settler had informed the *Advertiser* that Medical Society "members agreed to continue the program, but consented under the assumption that the patients were receiving treatment for the disease. 'We were never really informed of a project in which people were not being treated,' he said."

- The *Advertiser* also reported in 1972 that Dr. Brown, the former chief of the venereal disease branch of the Center for Disease Control, "conceded that there might have been a misunderstanding over certain details of the program discussed with Macon County physicians in 1969, but there was no intention on his or Dr. Holguin's part to mislead the society."
- Whatever the intentions of the CDC doctors, it seems clear that Dr. Brown's concession was accurate: there was a significant misunderstanding between federal officials and Macon County Medical Society members regarding the nature of the Tuskegee Syphilis Study. Any "consent" by the Medical Society to continuation of the study was based on incomplete and inadequate information.
- Who attended the May 19 meeting is also unclear. Ten doctors have been identified by at least one person as being present at a meeting of the Macon County Medical Society at which a briefing on the Tuskegee Syphilis Study was presented, but half do not remember being present at such a meeting. Most who remember the meeting could not place the meeting in 1969.

Of those who recall being present at the meeting, each has memories of the meeting that differ significantly from the memories of the others. Only one -- Dr. McRae, President of the Medical Society in 1969 -- says that he recalls that Dr. Foster was present. Another recalls that Dr. Foster was *not* present. Moreover, Dr. McRae recalls the presence of other doctors who do not recall the meeting.

Dr. McRae's recollections on a number of points ranging from how the May meeting was set up, to the nature of the Study, to Dr. Foster's role following the public disclosure of the Study in 1972 are all inconsistent with the facts as established by the documentary evidence. The confusion and mixing of memories after 26 years is not surprising.

- The CDC doctors have also indicated that they believe the local Macon County physicians must have known about the Tuskegee Study in 1969, even without the briefing from the CDC. But on March 13, 1969, Dr. Ira Myers, the Alabama State Health Officer, wrote to CDC's Dr. Brown that Dr. Myers had discussed the proposed meeting with Dr. Ruth Berrey, the County Health Officer, "and she knows of no opposition to the project at this time. *She feels that it is not generally known or publicized. She doubts if the Medical Society is aware of its existence* but hopes they will be sympathetic with the desires of the Public Health Service" (emphasis added). This contemporaneous evidence from a doctor who knew the local Macon County physicians clearly refutes the assumption of the federal officials that all the Medical Society doctors knew about, much less understood the details of, the Tuskegee Syphilis Study.

- This is what Fred Grey, the lawyer who sued the federal government on behalf of the Study participants, says about the local Tuskegee doctors:
 - ▶ "I don't believe they were aware of the details of the study. I think they probably were as much victims as were the participants themselves." (CBS Evening News, 2/24/95)
 - "Our research showed that the only ones who really made decisions were persons connected with the federal government and the (state) health department. Our research showed that none of the local doctors were responsible for the study." (The Washington Post, 2/25/95)
- Broadus Butler, former President of Dillard University and head of the Ad-Hoc Commission appointed by HEW to review the Tuskegee Study, is equally clear that the local doctors had nothing to do with the Study:
 - ▶ "What was clear from our review is that this was a federal government study from start to finish, with no input or participation from local Tuskegee doctors. Any effort to assign blame to the local doctors -- most of whom weren't even aware of the study until the very end and then were not aware of critical details -- is terribly misplaced.
 - "There were really only two issues concerning this study: first, whether it should ever have taken place; second, whether it should have been stopped in the late 1940s when penicillin became widely available. These decisions were made solely by the federal government. By 1968, one of the study researchers advised the team and the federal government that treatment was no longer a viable option." (2/24/95)

What Dr. Foster Really Did In Tuskegee

- Once again, the nomination of Dr. Henry Foster, a good, decent, dedicated physician, to be the Surgeon-General of the United States has entered the land of political distortion.
- The attack on Dr. Foster by right-wing critics like Gary Bauer for alleged insensitivity to poor, rural blacks in Tuskegee, Alabama is nothing short of grotesque.
- These critics would have us believe that Dr. Foster knowingly cooperated with the most notorious, racially insensitive experiment ever undertaken by the federal government. What the federal government's medical establishment did in 1932 was design a study to deliberately withhold treatment of syphilis from poor black men in Tuskegee without their knowledge so the doctors could observe the long-term effects of the disease. And even after penicillin became widely available in the late 1940s, these federal doctors continued to withhold treatment.
- To accuse Dr. Foster of complicity in this affair is not only slanderous, it is nonsensical in light of who Dr. Foster was and what he was doing in Tuskegee.
- Unlike the medical establishment working in the offices of Washington and Atlanta far from the people upon whom they were experimenting, Dr. Foster dedicated the first nine years of his career to serving the people of Tuskegee hands on, teaching them about preventive medicine, caring for them.
- After graduating as the only African-American in his medical school class at the University of Arkansas and serving as a medical officer in the Air Force, he came to Tuskegee in 1964 as the lone obstetrician-gynecologist at the John A. Andrew Memorial Hospital. His caseload ran into the hundreds.
- The population was 87% black. The median income was \$2,500. Many families went without electricity, or phones, or even running water. And the local hospital served only white people -- because this was still the Jim Crow South.
- As a story in the Los Angeles Times said, "He was just out of school when he came to Tuskegee. Young, ambitious, trained in modern medicine. Among the poor, the uneducated and the sick living on the red clay soil of east-central Alabama, among the women who didn't know or couldn't afford to call a doctor, Foster was the best they had."
- He is recalled by the people of Tuskegee as the town's "baby doctor" who delivered countless babies for the poor. A man who saved the life of the mayor's infant son. A man who talked a scared, 20-year old student out of an abortion, to see that student's daughter grow up to be the valedictorian of her high school. A man who devoted his young life to helping his own people.
- That's what Henry Foster did in Tuskegee. Latter-day critics who dare, for cheap political gain, to try to paint him as complicit in a federal government study that turned the people he tried to help into guinea pigs should be ashamed.

Dr. Foster Talking Points

- Dr. Foster never approved of or in any way cooperated with the federal government's 40-year study of untreated syphilis in African-American men in Tuskegee, Alabama.
- Indeed, Dr. Foster was never even informed of the facts of such a study until 1972, at which point he called for it to be stopped immediately and for the surviving men in the study to receive appropriate treatment. Dr. Foster was outraged when he first learned about the Tuskegee Syphilis Study.
- This was a federal government study premised on the **non-treatment** of poor, rural, black men who were never told what was being done to them. It is highly ironic that the finger of blame for this dubious study should now be pointed at a black doctor who was himself not informed about it, devoted his own practice to the care of mothers and babies, and objected to the study once he learned about it in 1972.
- Doctors from the federal government's Center for Disease Control in Atlanta, which had been conducting the Tuskegee Study, realized in February 1969 that they were facing a serious public relations problem if the facts of the Study became widely known. They decided to try to protect themselves by telling some of the local doctors part of the story, in order to get them "on board." But the evidence indicates that the local doctors in Tuskegee were **not** briefed about the crucial points -- that the men in the study were **untreated and uninformed**.
 - ▶ A meeting was held in May 1969 between CDC doctors and a few local doctors from Macon County Tuskegee, but, according to the Secretary of the Macon County Medical Society, Dr. S.H. Settler, "[w]e were never really informed of a project in which people were not being treated." Indeed, the senior CDC official at the meeting, Dr. William J. Brown, chief of the CDC's venereal disease branch, conceded that the local doctors may not have understood the details of the study.
- Contrary to the claims of some that the local doctors in Tuskegee must have known about the study well before 1969, Dr. Ruth Berrey, Macon County Health Officer, told federal government doctors in 1969 she doubted that local doctors were aware of the study.

Draft 3

DISCUSSION DRAFT -- NOT FOR DISTRIBUTION
February 21, 1995

The Tuskegee Untreated Syphilis Study

I. Summary

A. Background

The "Public Health Service Study of Untreated Syphilis in the Male Negro in Macon County, Alabama" was started in 1932 by the U.S. Public Health Service (also CDC), following a pilot project to treat syphilis in rural Macon County. Most (if not all) of the subjects did not understand the purpose of the study, including that they had syphilis. It had no written protocol. No informed consent was obtained. Its purpose was to observe the effects of untreated syphilis, not to treat it. Nonetheless, nearly all the remaining subjects had received treatment by 1968-1970, although not necessarily in curative doses. (Final Report of the Tuskegee Syphilis Study Ad Hoc Panel, April 30, 1973)

In July 1972, the New York Times reported the existence of the study. It had not been a "secret" study before 1972: it was reported from time to time in the medical literature and it was known to some people at the Tuskegee Institute and the VA Hospital in Tuskegee. Nonetheless, the study was also not widely known or understood. When the Times reported about the study in 1972, The Montgomery Advertiser followed with a report that a decision to continue the study had been referred to Macon County physicians in 1969 and the Public Health Service had obtained their consent to continue with the study.

What follows is what we have been able to piece together about whether the Macon County Medical Society endorsed continuation of the study in 1969, whether Dr. Henry Foster participated in any decision to do so, and what was known or understood by the society at the time of any such endorsement. In putting together this information, we have depended on records available from the National Archives (NA), the Final Report of the Tuskegee Syphilis Study Ad Hoc Panel, April 30, 1973 (1973 Report), the book *Bad Blood* by James H. Jones (Jones), several contemporary news accounts, and recent interviews with persons associated with the matter in 1969-1972. We have thus far been unable to locate records of the Macon County Medical Society from 1969.

B. An Overview

In February 1969, at least partially in response to concerns about the racial, social, and moral implications of the study, the CDC convened an Ad Hoc blue-ribbon panel to consider whether to continue the study. At that meeting, the panel discussed whether to commence treatment of the untreated subjects, and

devoted considerable discussion to the likely inefficacy of treatment and the possible dangers of treatment. They voted to continue the study, but also to seek to bring local physicians on board. Communications prior to the meeting as well as the minutes reflect that the CDC was concerned that it had a potentially explosive story on its hands, and several passages suggest a view that obtaining the concurrence of the Macon County doctors would provide protection from criticisms of the study. One comment referred to it as "good public relations."

After that meeting, the Alabama State Health Officer, Dr. Ira Myers, made contact with the County Health Officer, Dr. Ruth Berrey, who expressed her view that local doctors did not know about the study, and her hope that they would be supportive. Dr. Myers then forwarded the names of the Macon County Medical Society officers to the CDC official in charge of the project, Dr. William J. Brown. The officers were: Dr. Luther Curtis McRae, President; Dr. Henry W. Foster, Vice President; and Dr. Sheridan Howard Settler, Secretary Treasurer. Dr. Myers apparently followed up with a communication to Dr. McRae, and Dr. Brown wrote to Dr. McRae offering to attend the May 19 meeting of the society.

It appears that the CDC officials attended a meeting with members of the society on May 19, 1969. We therefore refer to this as the May 19 meeting, although none of the relevant actors could remember of confirm the date. It appears that Dr. Brown and Dr. Alphonso Holguin, also from the CDC, were the federal officials in attendance. Dr. McRae, Dr. Settler, and Dr. John Hume remember a meeting. Dr. Thomas Calhoun did not at first remember any such meeting, but several days later says he "vaguely remembers" a meeting, but cannot recall any details. Dr. Foster, Dr. Calvin Dowe, and Dr. William Henson recall no such meeting. Only Dr. McRae remembers Dr. Foster being present at the May 19 meeting; he cannot specify anything Dr. Foster said at the meeting. He also remembers Dr. Dowe being present, who has no recollection of attendance, and Dr. Calhoun, who may have a vague memory of such a meeting, as well as Dr. Settler and Dr. Hume, who do recall the meeting. Dr. McRae's memory on other aspects of the meeting and events surrounding the meeting is sometimes unclear and sometimes inconsistent with other evidence.

What happened at the May 19th meeting is unclear. Those who remember the meeting agree that the CDC officials provided a briefing on the study. CDC officials believe that this briefing fully informed the members of the Macon County Medical Society about the details of the study, including the pros and cons of ending the study and/or commencing treatment of the subjects. They also have reported that the local doctors agreed not to treat the subjects themselves.

None of the members of the Macon County Medical Society remembers the meeting the way the CDC officials report it. The most specific recollections are from Dr. McRae and Dr. Settler, who remember a cursory briefing lasting from 5-10 minutes (Settler) to 20 minutes (McRae). They say there was no discussion of ending the study, or of commencing treatment. They say they were not asked to withhold treatment from the subjects. Dr. McRae does recall that the society endorsed continuation of the study at the conclusion of the briefing, but his report of the contents of the briefing suggests a nearly pro forma endorsement in deference to the federal officials.

Dr. McRae reports that the information provided--as sketchy as it appears even to him to have been--took him "aback." It is possible that he had additional information from discussions that appear to have occurred with him and Dr. Myers or Dr. Berrey (he does not recall such discussions now). Such additional information might have provided a context for the briefing that the other members did not have. It is also possible that his recollection of the briefing has blended with his recollection of information he received separately from the other local physicians. Dr. McRae recalls no further discussions with members of the society regarding the study during the year he remained in Tuskegee before moving his practice to Georgia. This is surprising if the members of the society understood the briefing to contain shocking news.

One explanation for the doctors not remembering a treatment discussion is that, given what appears to be general medical opinion at the time (that treatment with penicillin of 40-year-old syphilis was likely ineffective and potentially dangerous), discussion of the treatment option in 1969 might not have raised the alarms that one would expect in hindsight. It seems clear, however, that there is a disparity that goes far beyond such a theory. At a minimum, it appears that federal officials overestimated what the local physicians knew about the study,¹

¹ While the people from the CDC consistently say that it was well known in Macon County, even before the 1969 meeting, that this was a study of untreated syphilis, the recollections of the physicians we interviewed are to the contrary. The local doctors' recollections are supported by contemporary evidence: in March 1969, Dr. Myers wrote to Dr. Brown: "[Dr. Ruth Berrey, the County medical officer,] feels that it [the study] is not generally known or publicized. She doubts if the Medical Society is aware of its existence but hopes they will be sympathetic with the desires of the Public Health Service." (emphasis added) Similarly, Dr. Stollerman, one of the blue-ribbon panel members, did not know about the study before he was invited to the February 1969 meeting. (NA, record of 1/15/69 telephone call)

(continued...)

and it appears that federal officials believe they had conveyed more information than they did. If the members of the Macon County Medical Society formally endorsed continuation of the study, it is nearly certain that they did so on less than full information.

The July 30, 1972 *Montgomery Advertiser* lends support to the view that what the CDC thought it reported, and what was actually reported, were quite different:

Dr. Holguin . . . said Saturday he remembers informing Macon County physicians in 1969 of the most recent developments in the Tuskegee Study including recommendations made by a special ad hoc study committee assigned earlier that year to review the project.

Dr. Holguin said there must have been some indication during the meeting that some of the syphilitics in the project had not received treatment because one of the recommendations discussed was that therapy as late as 1969 would not benefit the patient. . . .

Dr. Brown conceded that there might have been a misunderstanding over certain details of the program discussed with Macon County physicians in 1969, but there was no intention on his or Dr. Holguin's part to mislead the society.

"This has been an open study going on for years," he said. . . .

Dr. Settler . . . said members agreed to continue the program, but consented under the assumption that the patients were receiving treatment for the disease.

"We were never really informed of a project in which people were not being treated," he said. (emphasis added)

Similarly, the CDC officials apparently believed that they circulated a list of the subjects and obtained the consent of the members of the society not to treat the remaining subjects for syphilis. Although several members of the society report to us that a list was provided, they understand that it was either for the purpose of informing them who was in the study, or informing them that these individuals were entitled to free medical care. They do not remember a request or agreement not to treat.

Of course, Dr. Foster is an obstetrician/gynecologist. All of the subjects in the study were men, so none of his patients would have been directly involved in the study. Had a list been circulated to him, for whatever purpose, he might have paid

¹(...continued)

He was not a local physician, but this must be some evidence that the literature was not as widely read as the CDC people believe.

little attention to it since it excluded his entire patient population. He remembers no such list.

Details of our interviews and documentary evidence follow.

II. 1966-1968: Prelude to the February 6, 1969 Ad Hoc Meeting

In November, 1968, Peter J. Buxtun² writes to Dr. William J. Brown,³ Chief, Venereal Disease Branch, National Communicable Disease Center, Atlanta, Georgia regarding the study. Buxtun was a U.S. Public Health Service venereal disease investigator. He had first written to Dr. Brown in 1966 asking about the purpose of the experiment and whether the untreated men were being medically followed.

Buxtun's 11/68 letter expresses his "grave moral doubts" about the Study. He concedes the justifications and propriety of the Study at its inception and up to the time of widespread availability of penicillin; he questions its continuation. Granting the dangers of treating aged syphilitics, he raises three points: (1) "The group is 100% negro."; (2) The group is "not composed of 'volunteers with social motives,'" but is "largely uneducated, unsophisticated, and quite ignorant of the effects of untreated syphilis."; and (3) it would be morally unethical in 1968 to begin such a study with such a group. (NA)

III. January - February 1969

A. The Ad Hoc Committee Meeting of February 6, 1969

Dr. David J. Sencer,⁴ Director, CDC, requests that Dr. Brown convene an Ad Hoc Committee to Consider the Tuskegee Study. In 1/23/69 correspondence with Dr. Alphonso H. Holguin,⁵ Director, State and Community Services Division, NCDC, Dr. Brown states that "[a]nother reason for the critical look is because of questions one individual, a former VD Rep [Buxtun], has asked regarding the propriety of the study since it is made up entirely of negro males." (NA) In a telephone call with Dr. Brown on 1/15/69, Dr. Stollerman identified the study as "a 'hot potato' from many standpoints -- racial, public relations, etc. Wondered if we could be sued for withholding treatment. He thinks we should 'go all out to get this worked out as soon as possible.'" (NA)

² No attempt to contact

³ Dr. Brown is deceased.

⁴ Telephone interviews 2/17 and 2/18/95

⁵ Telephone interview 2/17/95

The Committee meets for the first and only time on February 6, 1969.

There are 5 members of the Committee:

Dr. Gene Stollerman, University of Tennessee, Memphis;
[Jones, 195 -- return for more info.]⁶

Dr. Johannes Ipsen, University of Pennsylvania⁷;

Dr. Ira Myers, Alabama State Health Officer⁸

Dr. J. Lawton Smith, University of Miami⁹

Dr. Clyde Kiser, Milbank Fund¹⁰ (which provided some funds for the study, including a burial stipend for the subjects)

Others attending the meeting were:

Resource Persons: Dr. Bobby C. Brown, Mrs. Eleanor V. Price, Dr. Joseph Caldwell, and Dr. Paul Cohen, all from NCDC, and Dr. Sidney Olansky, Emory University¹¹

Recorders: Dr. Leslie C. Norins, Chief, VDRL, NCDC¹² and his secretary, Mrs. Doris J. Smith

and the following others from the CDC:

Dr. Sencer, Dr. Brown, Dr. U.S.G. Kuhn, III, Miss Genevieve W. Stout, and Dr. H. Bruce Dull.¹³

The minutes of the February 6, 1969 meeting identified the purpose of the meeting to be whether to continue or terminate the study:

Significant points from minutes:

6 No attempt to contact

7 No attempt to contact

8 Telephone interview 2/18/95

9 No attempt to contact

10 No attempt to contact

11 No attempt to contact any of these individuals

12 Telephone interview 2/20/95.

13 No attempt to contact the three last people

- "Dr. Stollerman thought there was a moral obligation here to treat patients for neurosyphilis." A discussion of dangers of treatment followed. (p. 6)
- "Dr. Myers said regardless of what your decision [presumably on treatment] will be, if you raise a question at this time, the whole program will fold. Dr. Sencer then asked Dr. Myers what were the limitations of the County Medical Society. He said they had been very reasonable to work with; some of the fears of real troublemaking have not come to pass." (p. 8)
- "Dr. Smith said he had a good rapport with the younger Negro physician at Tuskegee. Dr. Myers thought it a good idea to keep the local medical society informed as to what we were doing and what we wished to achieve; 'work very closely with them and keep them informed of everything we do.'" (p. 8)
- "Dr. Dull then asked how you could answer criticisms for not treating these patients. Dr. Sencer said if we established good liaison with the local medical society there would be no need to answer criticisms."
- "Dr. Kaiser asked what Tuskegee Institute thought of this Study. Dr. Olansky explained they knew of the Study, the patients has been taken to the Institute's hospital. Dr. Myers replied that the Institute is now coming into a new era. Dr. Dibble, former medical director of the Institute, who died last year, was depended upon to keep the State Health Department informed. . . . But physicians at the Institute knew of the Study." (p. 9)
- "If this Study is to be continued, CDC has to establish a relationship with the medical men in the area; find a way to increase the resources of the Health Department. We are going to have to establish better rapport; better follow-up on patients. . . .
 "Dr. Smith suggested a doctor go to the County Medical Society meetings, bring up these points, pro and con. 'They might think the same way.' -- 'If the local physicians agree there is no need for treating these patients, this would be good public relations.'" (p. 11)
- Dr. Myers: "I think we should establish rapport with the County Medical Society; talk to one physician in the Society before you talk to them as a group." (p. 11)
- Dr. Sencer summarized three points of consensus from the meeting. (1) There was merit in continuing the Study; (2) treatment is not indicated, but if patients have indications of active syphilitic disease, they should be

treated; (3) "better rapport should be established as soon as possible with the local Medical Society, as well as with the Health Department, to enlist their cooperation in furthering the Study." (p. 13) (All from NA)

B. Alabama State Board of Censors Meeting of February 19, 1969

- On February 19, 1969, the Alabama State Board of Censors met. An extract of the Minutes states:

The Public Health Service is concerned about whether to continue this project since the numbers are small, adequate treatment is now available, and there have been many social changes in Macon County. The Macon County Medical Society has completely changed. The old Society was disbanded several years ago and a new one has been organized. The State Health Officer [Dr. Myers] has suggested to the Public Health Service that continuity of the program and patient care should be discussed with local physicians before a decision is made.

A motion to refer to the matter to the Macon County Medical Society was carried unanimously. (NA)

An extract of the Minutes of the Alabama State Board of Censors, August 16, 1972, reviewed the events of 1969:

An evaluation [at a Board meeting of February 19,] 1969, referred this matter to the Macon County Medical Society which had been reinstituted after the former County Medical Society had become extinct. The concern of the Board at that time was an individual evaluation of the needs of these patients by physicians who were familiar with their complaints and personal findings and needs. The present Medical Society is predominantly black so a racial discrimination problem would not be present. Federal officials advised the State Health Officer and Dr. W.H.Y. Smith, the Director of the Bureau of Preventable Diseases at that time, that treatment benefits were not expected for individuals at that time. Also, some hazard of treatment might be encountered. The Federal investigators went immediately to Macon County following that action by the State Board of Health and advice from the State Health Officer in 1969. (NA)

C. Dr. Brown Responds to Buxtun

On February 27, 1969, Dr. Brown responded to Peter Buxtun's November 1968 letter. He wrote:

We will be working with the State Health Department, the Macon County Health Department and the local Medical Society of Tuskegee to assure that all possible individual attention be given to people who participated in the study. To this end we will continue to augment the staff available in Macon County. (NA)

Buxtun wrote back a month later that he agreed that medical treatment was no longer an option.

Thus I must now ask: what is the ethical thing to do? Compensate the survivors? Compensate the families of all the subjects? Or should NCDC await the quiet demise of the survivors and hope that will end the matter? (NA)

IV. March - April 1969

A. Myers Sends the Name of Medical Society Officers to Brown

• Dr. Myers wrote to Dr. Brown on 3/13/69, saying that he had discussed the meeting with Dr. Ruth H. Berrey¹⁴, Macon County Health Officer, "and she knows of no opposition to the project at this time. She feels that it is not generally known or publicized. She doubts if the Medical Society is aware of its existence but hopes they will be sympathetic with the desires of the Public Health Service."

He forwards the names of the officers of the Macon County Medical Society:

Luther Curtis McRae, Jr.,¹⁵ M.D., President
Henry Wendell Foster, M.D., Vice-President
Sheridan Howard Settler, Jr.,¹⁶ M.D., Secretary Treasurer

Dr. Myers writes:

I shall attempt to discuss this matter and this action with Dr. McRae later today. You may proceed to make your contacts directly with local officers. Please keep us informed and if a visit is made we will provide someone to go along or meet you there, if possible.

Dr. Brown handwrote: "White" above Dr. McRae's name. He also wrote at the bottom of the letter:

¹⁴ Dr. Berrey is deceased.

¹⁵ Telephone interviews 2/20 and 2/21/95

¹⁶ Telephone interviews 2/17, 2/18, and 2/21/95

4/16 -- Dr. Sencer was advised that Dr. Myers had talked to Dr. McRae and that Dr. McRae was receptive to the idea of bringing the Med. Society 'on board' and suggested Mon. May 19th for appearance before the Society. WJB (NA)

B. Sencer Contacts McRae to Set Up May 19 Meeting

- On April 15, 1969, Dr. Sencer wrote to Dr. McRae. The full text of the letter is:

Dr. Ira Myers has discussed with you the study that has been conducted in Macon County for the past 30 years. He has indicated that the County Medical Society would be interested in hearing a review of the details. I would be happy to do so at your May 19 meeting if you wish. (NA)

V. May 1969 -- The Meeting with the Macon County Medical Society

There is evidence that the May 19 meeting occurred, but we do not know what was said or who was present.

In his 1981 book *Bad Blood*, James H. Jones describes the meeting as follows:

The 1969 meeting with the Macon County Medical Society ended in total victory for the PHS. Dr. Sencer dispatched Dr. Brown and two other federal officers, Drs. Leslie Norins and Alfonso H. Holguin, to Tuskegee, and Dr. Holguin, who was spokesman for the PHS delegation, explained the experiment in detail to the society's members. According to Dr. Brown, the directors listened attentively and immediately "volunteered cooperation and approval and support." Indeed, just as their white predecessors had done nearly four decades earlier, Macon County's black physicians promised to assist the PHS. "They actually agreed," Dr. Brown continued, "if they had a list of the individuals that they would not knowingly give them antibiotics . . . but would refer them locally to the health department and to Nurse Rivers." Needless to add, each of the local doctors was given a list. (198-199)

What we have learned differs significantly from this account:

A. What CDC People Say

- Dr. Holguin travelled to Tuskegee on May 19, 1969, arriving in the late afternoon, and departed first thing in the morning of May 20. (NA Travel voucher) Dr. Holguin does not remember a meeting of the Macon County Medical Society, however, but rather a meeting in a restaurant with one representative from the

society, and probably closer to February than to May. We know from the travel voucher that Dr. Holguin was in Tuskegee on May 19.

According to Holguin, he and Dr. Brown met in a restaurant with (1) a representative of the VA Hospital, (2) the State Health Officer (presumably Dr. Myers), (3) a representative from the County Medical Society, (4) the Alabama Commissioner of Health, and (5) possibly two of the men who were in the study. His recollection is that the representative of the VA Hospital, the representative from the County Medical Society, and the two subjects (if present) were African-Americans, and all others were white. Dr. Holguin emphasizes that his memory is not strong on some of these points.

Dr. Holguin states that the purpose of the meeting was to go over everything that had been discussed at the February 6 meeting, including the treatment options. "Everything that was presented at the scientific meeting was presented to this group." He said there was unanimous agreement to continue. He also says that he and Dr. Brown had decided in advance that if there was any disagreement at all, they would go back to Atlanta and recommend that the study be discontinued.

Dr. Holguin does not recollect Dr. Foster being present, but does not know who the County Medical Society representative was. He has seen Dr. Foster on TV recently, and did not recognize him. (All from telephone interview 2/17/95, unless cited to other source)

The July 30, 1972 *Montgomery Advertiser* reports:

Dr. Holguin . . . said Saturday he remembers informing Macon County physicians in 1969 of the most recent developments in the Tuskegee Study including recommendations made by a special ad hoc study committee assigned earlier that year to review the project.

Dr. Holguin said there must have been some indication during the meeting that some of the syphilitics in the project had not received treatment because one of the recommendations discussed was that therapy as late as 1969 would not benefit the patient.

- Dr. Leslie Morins does not recall a May 1969 meeting. He remembers going to Tuskegee only once, probably in 1964-1966, as part of his orientation to the CDC. He remembers a meeting then in a local diner at which several local people were present, including a black physician who may have been from the local medical society. He was struck by this because he had thought it was highly unusual for blacks and whites to eat or meet together in Alabama at the time. He thought the visit was part of a regular annual or bi-annual visit from the CDC to Macon County to

visit with local people running the study. His recollection is that the meeting was nonsubstantive.

Dr. Norins remembers being told at some point that the local medical society was aware of the study, which he points out was not secret, and about which there had been numerous publications. He remembers no special briefing of the medical society. He has no recollection of Dr. Foster; nor is he familiar with Dr. McRae, Dr. Settler, Dr. Hume, Dr. Dowe, Dr. Henson, Dr. Story, or Dr. Calhoun. He said: "I can't imagine in a little town like that, as open as the study was, that any black physician did not know. But remember, there was nothing tawdry about it." His understanding was that these were people who had escaped treatment anyway, and who could not have been treated. (All from telephone interview 2/20/95)

- Dr. David Sencer recalls that Dr. Brown, Dr. Holguin, and Dr. Norins from the CDC visited the State Health Department and the County Medical Society. They reported back that it was probably best if the study was left as it was. He believes they explained the study and the recommendation of the Ad Hoc group. He is quite sure that the question of treating the subjects would have arisen. (All from telephone interviews 2/17 and 2/18/95)

- James H. Jones, author of *Bad Blood*, recalls that he interviewed Dr. William J. Brown in 1972 (Dr. Brown is no longer alive). Dr. Brown reported a meeting with about 8 people, probably 4-6 from the Macon County Medical Society. He recalled that they provided all the information from the study, sought the consent of those attending the meeting, and discussed the treatment issue in some detail. (All from telephone interview 2/20/95)

The July 30, 1972 *Montgomery Advertiser* reports:

Dr. Brown conceded that there might have been a misunderstanding over certain details of the program discussed with Macon County physicians in 1969, but there was no intention on his or Dr. Holguin's part to mislead the society.

"This has been an open study going on for years," he said.

B. What Local Macon County Doctors Say

- Dr. Luther Curtis McRae, currently a general practitioner in Georgia who was President of the society in 1969, recalls that PHS officials attended one of the regular monthly meetings of the society in 1969. He does not recall the month. He remembers that Dr. Brown had written to him requesting a meeting to obtain the society's consent for continuation of the syphilis study (this must be a reference to the April 15, 1969 letter, although

it does not refer to consent). This was the first he had learned of the study. (Dr. Myers apparently had spoken with Dr. McRae in March or April; Dr. McRae remembers a letter from Dr. Myers endorsing the study, but does not recall a discussion with Dr. Myers.)

Dr. McRae remembers that Dr. Brown attended the meeting of the society, along with one other federal official, possibly Dr. Holguin. The meeting was held in the back room of the Torch Cafe. He describes the "striking characteristic" of the meeting being that "it was the first time we learned of the study."

According to Dr. McRae, the briefing took no more than 20 minutes. He says it was not an in-depth briefing, but rather cursory. It was his understanding that the society was being asked to approve continuation of a double-blind study of treated and untreated syphilis so that it could be concluded in 2-3 years. Dr. McRae says that the issue of starting treatment was not discussed, specifically treatment options or the risks or benefits of treatment. The federal officials did not discuss stopping the study and treating the men for syphilis. No request was made of the society that they not treat the subjects in the study. The issue of consent was not raised. He says a "round table discussion" ensued, but cannot recall any specific comments made by anyone at the meeting. At another point he said that he remembers no discussion.

Dr. McRae said that this briefing resulted in the society's unanimous endorsement of continuation of the study. "We, not knowing anything about it and its going into its 40th year, we went ahead and approved, because it was supposed to be stopped in the next 2-3 years." He also said "by the time we had our meeting, our saying 'no more' would not have made a difference." He believes they felt they should defer to the federal government. He believes that the intention to wind up the study within 2-3 years and the number of years the study had already gone on were the factors relevant to the decision to endorse continuation. Dr. McRae recalls being "taken aback" by the report of the study.

Dr. McRae remembers Dr. Foster being present at the meeting. He says "you always remember people who are gentlemen" and Dr. Foster was a "striking individual." He has a mental image of Dr. Foster at the meeting "leaning back in his chair and not saying much." (Dr. McRae does not remember any members of the society saying anything at the meeting.) He says Dr. Foster never missed a meeting. On 2/20, Dr. McRae did not identify others who were at the meeting, but he listed 7 members of the society at the time. On 2/21, he provided the following names as persons who were present at the meeting, along with Drs. Brown and Holguin: Dr. McRae, Dr. Foster, Dr. Hume, Dr. Settler, Dr. Dowe, Dr. Campbell.

Dr. McRae recalls that a list of subjects in the study was distributed at the meeting, and he recognized several of his patients (4-5) on the list. He had treated one or two of them for syphilis. He says the list included names but did not indicate which patients were in the treated or untreated group. He believes the purpose of providing a list was to show how many people (25) remained in the study. He is certain that the members of the society were not asked not to treat the patients for syphilis. (All from telephone interview 2/20 and 2/21/95)

• Dr. Sheridan Howard Settler, a Macon County ophthalmologist who was Secretary-Treasurer of the society in 1969, recalls that there was a general meeting of the Macon County Medical Society at which representatives of the State Health Department and CDC gave a 5-10 minute briefing on the Tuskegee Study. He believes this was 1969 but cannot place the date exactly. Dr. Settler emphasizes that the discussion was cursory. He says they were "not really asking us for our consent," but rather briefing the group. He does not remember the treatment discussion arising; he does remember discussion that the subjects had already been given broad-spectrum antibiotics by local physicians for other ailments, such as upper respiratory infections. (This point was also made by Dr. Holguin and Dr. Sencer in their telephone interviews.)

Dr. Settler says that at some point (he is not sure if it was the same meeting), the Society was provided with a list of subjects in the study. He believes the purpose of providing a list was to inform the doctors that these men were eligible for free medical care. (If this was the case, Dr. Settler may be remembering a list provided in 1972 or 1973, not 1969. In a 2/18/95 telephone interview, Dr. Sencer said he believed the lists were not provided until at least 1972.) Dr. Settler remembers that the doctors present recognized many of the subjects as their patients.

Dr. Settler does not remember if Dr. Foster was present at the meeting or meetings he recalls. He makes three points in summary: (1) he does not know that Dr. Foster was present; (2) actual treatment was not an issue at the meeting; and (3) the society was not really asked for its permission. (All from telephone interviews 2/17, 2/18, and 2/21/95)

The July 30, 1972 *Montgomery Advertiser* reported that Dr. Settler recalled a May 1969 meeting at which Dr. Sencer was present and requested that the Society endorse the continuation of the study:

Dr. Settler . . . said members agreed to continue the program, but consented under the assumption that the patients were receiving treatment for the disease.

"We were never really informed of a project in which people were not being treated," he said.

- Dr. Calvin Dowe, Macon County Internist/GP, does not recall any meeting at which this matter was discussed until the study became widely known in 1972. He learned of it in 1972. He is sure he was never briefed. Like Dr. Foster, he was on the staff of the Institute, and believes the local practitioners must have been the ones who were briefed if anyone was.

Dr. Dowe has no knowledge of Dr. Foster's involvement, and points out that because they were in similar situations (at the Institute), Dr. Foster likely would not have been briefed either. (All from telephone interviews 2/18 and 2/21/95)

- Dr. John Hume, retired Macon County physician, remembers the briefing. He is "sure" Hank Foster wasn't there, but does not recall who was there. Dr. Foster was an obstetrician, not part of the local practicing physicians, and he is sure he would not have been there. (Dr. Hume seemed to think Dr. Foster was at Meharry at the time, however.) (All from telephone interview 2/18/95)

- Dr. Thomas Calhoun, Macon County surgeon, did not recall a meeting when called on 2/19/95. He became aware of the study in 1949, as a resident at the VA Hospital. He believes he was aware of the fact that the subjects were not being treated, but is not sure when he became aware. His knowledge did not come from the Medical Society. When called back on 2/21/95, Dr. Calhoun said that he vaguely recalls that there may have been a meeting, but he does not know whether he was there and does not know how he vaguely recalls. He has no knowledge or memory of Dr. Foster's presence at any meeting on this topic.

Dr. Calhoun did not at first remember any list of subjects being circulated, but does recall that after the story broke in 1972, someone from the CDC visited his office to inform him that if he treated any of the former subjects he should send their bills to the CDC (or somewhere) for the government to pay. He believes a list of subjects would have been provided then. (All from telephone interviews 2/19 and 2/21/95)

- Dr. William Henson, who practiced Internal Medicine at the VA Hospital from 1960-1990, does not recall any briefing of the Macon County Medical Society. He was aware of the study, but did not realize the subjects were receiving no treatment until it became a story in 1972. He recalls no discussions with Dr. Foster about the study. (All from telephone interview 2/20/95)

- Dr. Robert Story, current President of the Macon County Medical Society, was in the army in 1969, and returned to Tuskegee in 1970. He does not recall knowing about the study

until the story broke in 1972. He recalls treating a patient with penicillin and being told not to do so by a nurse, and not knowing why he was not supposed to treat the patient (he did anyway) (this anecdote is also on the British documentary, which we are tracking down). He does not have any information about the May 19 meeting. (All from telephone interview 2/20/95)

C. What Others Say

- Dr. Ira Myers does not recall any specific meeting. He does say, however, that the CDC advised local physicians about the study. He says "it's difficult to figure out what happened." He said he was not supposed to talk about this because of the terms of the civil rights law suit. He remembers Dr. Foster as an active, good physician who provided maternal and child health care. He does not have any recollection of Dr. Foster's involvement in this matter (but he has none of others, either). He pointed out that PHS had an operating project once a year to offer care and evaluations of the subjects in the study. He defended the non-treatment decision (as did the other doctors with whom we spoke, at least from a medical standpoint in 1969) (All from telephone interview 2/18/95)

- Mr. Fred Gray, Macon County attorney who brought a law suit on behalf of the subjects in the study (and who had also represented Rosa Parks in the Montgomery bus case, and Dr. Martin Luther King, Jr., in the Montgomery boycott case), conducted an investigation of the study after it became public in 1972. Mr. Gray was not aware of any meeting occurring in 1969. His review persuaded him that only federal officials and the State Health Officer, Dr. Myers, should be named as defendants in the suit, because he found no evidence of involvement by local doctors. He has no knowledge of a May 1969 meeting. After the suit was filed, he found evidence that local physicians were provided a list of subjects and told not to treat for syphilis. He is "not aware of [the Macon County Medical Society being involved in any way in the Tuskegee Syphilis Study." (All from telephone interview 2/18/95)

- Dr. Monty Duval, Assistant Secretary, HEW, when the story broke in 1972, learned of the Tuskegee study from the July 1972 NY Times story. He was then briefed by Dr. Sencer (and probably staff of Dr. Sencer's). At first, Dr. Duval had no recollection of the involvement of the Macon County Medical Society. Later in the phone conversation, he said that the discussion had jogged his memory, and Dr. Sencer "may have mentioned that it was discussed with local members of the medical community and they understood CDC's role." He has no recollection of Dr. Foster having a role; he first met Dr. Foster 10-15 years ago. Dr. Duval does not know what was generally known in Tuskegee at the time.

Dr. Duval appointed a commission to report on the study. He said that there were only two real issues: (1) whether the study should have been commenced in 1932, and (2) whether it should have stopped in the late 1940's when penicillin became widely available. By 1969, treatment with penicillin was not a real option. (All from telephone interview 2/18/95)

D. Records

• The records of the Macon County Medical Society from 1969 cannot be located. Pursuant to request by Dr. Robert Story, current President of the Macon County Medical Society, a search of the County Health Department was made on 2/19/95 by Patricia Clay, Macon County Health Department. No records were located. Ms. Clay has asked the Home Health Department if they have the records, and looked at records in storage. Dr. Story has no other idea where the records might be. We continue to pursue other avenues. (All from telephone interviews 2/18, 2/19, and 2/20 and 2/21/95)

VI. The List of Subjects

Several local doctors recall being given a list of subjects in the study, but recall that its purpose was to let them know that their medical care would be fully paid for by the federal government (Settler, Calhoun). Another doctor recalls that the purpose was to advise the doctors how many subjects remained in the study (McRae).

Jones reports in Bad Blood that Dr. Brown said the doctors agreed in 1969 that they would not treat the patients if they were provided a list. (199) None of the local doctors remembers the purpose being to obtain their agreement not to treat.

Mr. Gray found evidence that a list was provided.

Dr. Brown wrote to the Executive Director of the Milbank Memorial Fund in November 19, 1969:

Since the Advisory Committee meeting last February, we have met with the Medical Society of Macon County, Alabama, and have furnished each of its members with a list of surviving participants in the Tuskegee Study. Although assured of their cooperation, we feel that analysis of the data assembled to date should await a more favorable national climate. . . . (NA)

Dr. Sencer told us that he believed a list would not have been provided until 1972 or after (telephone interview of 2/18/95). This would be consistent with those who believe that the purpose of providing local doctors with a list was to let them know that the men were entitled to compensated medical care.

As an obstetrician/gynecologist with no male patients, the list of patients -- whether for treatment issues or compensation issues -- would not have been relevant to Dr. Foster and his practice.

February 21, 1995

MEMORANDUM

TO: Foster File

FROM: Anna L. Durand
Deputy General Counsel

SUBJECT: Notes re Upjohn Telephone Conference

This afternoon, Dr. Felicia Stewart, PHS, Andrew Hyman, OGC, and I spoke by telephone with Jeffrey Jonas and Bob Meisenhelder of Upjohn.

Neither Mr. Jonas nor Mr. Meisenhelder has any personal recollection of the prostaglandin studies; their knowledge is based on their review of Upjohn files.

The records indicate that Dr. Foster was the principal investigator for 8 Upjohn-sponsored studies of the prostaglandin product at Meharry. One of the studies focused on the product's ability to soften the cervix in women who were not pregnant. It appears that the remaining 7 studies, which differed as to the timing and amount of prostaglandin dosages and may have involved other drugs and procedures in addition to the prostaglandin, involved efforts to induce abortion. The 7 studies took place from 1978 through 1983. A total of 334 patients were enrolled in the 7 studies at Meharry.

Dr. Foster was the principal investigator only at Meharry, not at any other site. Mr. Jonas and Mr. Meisenhelder did not feel that it would be appropriate for them to disclose the other test sites to us, but they did tell us the total number of sites and patients for each study:

1)	14 sites	358 patients
2)	12	258
3)	21	831
4)	9	460
5)	19	66
6)	16	744

(The list includes only 6 studies. Mr. Jonas believes that two of the studies were combined in one of the reports he was reviewing, although it was not clear how he came to that conclusion.) Although not identifying the sites, Mr. Jonas said that they were the leading obstetrics/gynecology centers and suggested that we could probably come up with a pretty

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comprehensive list by naming the leading centers and then calling each to confirm its participation. (For example, he mentioned Harvard, Yale, Baylor and the University of Connecticut, but specifically stated that he was not implying that any of these institutions had participated.)

It appears as though some of the studies contained ethnic breakdowns of the patients, while others did not. As an example, Mr. Jonas told us that the study with 258 patients had the following racial mix:

55% white
28% black
12% Hispanic

14 of the 258 patients in this study were enrolled at Meharry.

A case report was filled out for each patient and had to be signed by the principal investigator. Mr. Jonas and Mr. Meisenhelder said that there is no way to determine from the case reports which patients Dr. Foster actually saw or treated. They suggested that the hospital records might be more helpful in this regard.

Mr. Jonas said that he did not have precise success rate information for all of the studies, but said that he noted that one study report showed success rates for individual principal investigators from 50% to 100% and that Dr. Foster's success rate on that particular study had been 92%.

Mr. Jonas and Mr. Meisenhelder did not know the answers to the following questions:

- 1) Why didn't Upjohn pursue FDA approval of the product?
They said the records didn't state the reason and there are too many potential reasons to speculate, e.g., cost-effectiveness, other products with a better potential payoff were ready for market, political pressures.
- 2) Did Upjohn have a marketing strategy for the product?
- 3) Was the principal investigator responsible for performing surgical abortions when necessary because of product failure?
- 4) Did any litigation arise out of tests of the product?
- 5) Did FDA send investigators to any of the sites after the trials to determine compliance with regulations?

Page 3 -

- 6) How did Dr. Foster become involved in the study; i.e., did he or Meharry approach Upjohn or vice versa?
- 7) Did Dr. Foster ever test any other drugs for Upjohn?
- 8) Were any other papers relating to the study ever published?

With respect to all of our questions about how the study was conducted and the role of the principal investigator (e.g., what were the responsibilities of the principal investigator, what were the requirements for informed consent, were there special safeguards for minors), Mr. Jonas and Mr. Meisenholder said they did not have the information to answer the questions and suggested that the Meharry hospital's IRB would be in the best position to answer the questions. Mr. Jonas said that his quick review of a file (while we were talking) revealed some informed consent forms, but that he did not think the files contained, or should be expected to contain, informed consent forms for each patient; those documents were more likely to be in the IRB files.

Mr. Jonas is going to speak with his superiors about sending us copies of the technical reports for the 7 studies, with all identifying information about the other principal investigators redacted. The technical reports would give a summary of the results and, in some instances, an ethnic breakdown of the patients. He will let Felicia Stewart know if this can be done.

Attached is a list of the questions we had hoped to have answered through our discussion with Upjohn officials.

QUESTIONS RE UPJOHN STUDY

1. How many sites were involved? Where were the others? How many patients were involved in the overall study? Was there any breakdown of the patients by ethnic or economic classification?
2. What was the time frame for the Meharry study, i.e., when did it start and when did it end?
3. Was Dr. Foster was listed as principal investigator at Meharry or nationally? Who else at Meharry was listed as participating in the study?
4. What were the duties or responsibilities of the principal investigator? Were these specified by Upjohn, FDA or Dr. Foster? Would the principal investigator have had any special responsibility toward the patients who required surgical procedures?
5. Why did Upjohn not pursue FDA approval of the product?
6. Did Upjohn pursue (and receive) approval of similar products?
7. Were there any patient lawsuits arising out of the multi-center study? Were there any patient lawsuits arising out of the Meharry study?
8. Were the Meharry results consistent with the results at other study sites, i.e., in terms of percentage of complete abortions with the product, etc.
9. Does Upjohn still retain all of its records on the multi-center study? Who has access to the records? What would the records show, specifically at Meharry (e.g., would the records show who administered the suppositories to each woman; would they contain the consent forms?)
10. Did the FDA do post-study compliance reviews at any of the sites? Was Meharry reviewed? If yes, what were the results?
11. Did Upjohn specify requirements for informed consent? For abortion? For the experimental product?
12. Did Upjohn prescribe any special safeguards for procedures on minors?
13. How did Dr. Foster become involved in the study? Did he approach Upjohn or did Upjohn approach him? Did Meharry approach Upjohn or vice versa? Who at Meharry had the initial contact with Upjohn?
14. Did Dr. Foster ever test any other drugs for Upjohn?

15. Dr. Foster published a paper on his study results. Did the other investigators do the same? Was there ever a publication regarding the multi-center study?

16. Was there a contractual relationship between Upjohn and Meharry regarding this study?

17. Who established the criteria by which it was determined that a complete abortion had taken place?

18. What would Upjohn have considered a success? With respect to any particular patient? With respect to the overall study?

19. What marketing plans (if any) did Upjohn have for the product at the time it was being tested?



DEPARTMENT OF HEALTH & HUMAN SERVICES

Chief of Staff

Washington, D.C. 20201

95 MAR 7 P7:30 *RS*

FACSIMILE

*Beth
W*DATE 3-7-95

TO: (NAME, ORGANIZATION, CITY/STATE AND PHONE NUMBER):

John Podesta
Assistant to the President and
Staff Secretary
The White House

PHONE: 456-2702

FROM: (NAME, ORGANIZATION, CITY/STATE AND PHONE NUMBER):

Kevin Thurm
Chief of Staff
DHHS

PHONE: 690-6133

RECIPIENT'S FAX NUMBER: () 456-2215NUMBER OF PAGES TO SEND (INCLUDING COVER SHEET): 12

COMMENTS:

March 7, 1995

NOTE TO JERRY KLEPNER

Jerry:

Per conversation--Attached is the information that was provided to Jim Wade regarding funding for the Tuskegee Institute. The package went to him on February 28.

Call if you need additional information.



Diane Shartsis Wax

Attachment

cc: Dr. Varmus



PAGE 1

02-28-65
HHS SUPPORT TO TUSKEGEE UNIVERSITY FOR FISCAL YEARS 1960-73

GRANT NUMBER	FY	PRINCIPAL INVESTIGATOR	TITLE*	\$ AWARDED
101 AI03131-00	60	BLOSS	LIESELOTTE	10,364
101 CA03972-02		BROWN	RUSSELL W	22,453
101 AM03810-00		WATTS	JOHNIE H	17,338
FISCAL YEAR TOTAL				50,155
101 AI03131-01	61	BLOSS	LIESELOTTE	10,364
101 CA03972-03	SI	BROWN	RUSSELL	2,573
101 CA03972-03		BROWN	RUSSELL W	22,453
101 GM06710-00		GRAHAM	HORACE D	5,227
101 AI04025-00		NUKJOBI	A H	22,706
101 AM03810-01		WATTS	JOHNIE H	15,038
FISCAL YEAR TOTAL				78,361
101 AI03131-02	62	BLOSS	LIESELOTTE K	15,077
101 CA03972-04		BROWN	RUSSELL W	25,026
101 EFC0173-01		GRAHAM	HORACE D	5,227
101 NUC010C-00		HARVEY	L H	70,254
101 AM03810-03		WATTS	JOHNIE H	15,038
FISCAL YEAR TOTAL				131,622
101 AI04025-02	63	ADAMS	E W	20,549
101 AI03131-04		BLOSS	LIESELOTTE K	13,748
101 CA03972-06		BROWN	RUSSELL W	25,171
101 GM0824-01		RICHARDSON	ELIZABETH H	37,301
FISCAL YEAR TOTAL				96,769
101 AI04025-03	64	ADAMS	EUGENE W	19,690
101 HL08258-01		BOWIE	WALTER C	168,651
101 CA03972-07		BROWN	RUSSELL W	24,705
101 NU00093-02		RICHARDSON	ELIZABETH H	34,916
FISCAL YEAR TOTAL				247,962
101 AI04025-03S1	65	ADAMS	EUGENE W	5,213
101 AI04025-04		ADAMS	EUGENE W	29,287
101 CA03187-01		ADAMS	EUGENE W	27,001
101 EFC0753-01		BISWAS	PROSANTO K	16,191
101 HL08258-02		BOWIE	WALTER C	91,470
101 HL08258-02S1		BOWIE	WALTER C	10,000
101 AM08364-01		CHUNG	RONALD A	11,155
101 NU00093-03		RICHARDSON	ELIZABETH H	33,186
101 RH00403-01		SHAW	DON H	7,760
FISCAL YEAR TOTAL				230,271
101 CA03187-02	66	ADAMS	EUGENE W	25,765
101 UI00162-02		BISWAS	PROSANTO K	8,742
101 HL08258-03		BOWIE	WALTER C	64,388
101 ES00095-01		BROWN	RUSSELL W	28,071
101 AM08364-02		CHUNG	RONALD A	9,807

SOURCE: MICROFICHE HISTORY TAPES; IRS PROGRAM CBF.N787
TITLES ARE NOT AVAILABLE PRIOR TO 1962

02-29-95

FVS SUPPORT TO BUSKILL UNIVERSITY FOR FISCAL YEARS 1960-77

PAGE 2

GRANT NUMBER	TY	PRINCIPAL INVESTIGATOR	TITLE*	\$ AWARDED
110110010	RO1	AM07374-01	66 DUNN E WAYNE M STUDIES ON VITAMIN A METABOLISM	18,960
	TO2	NH10552-01	HARVEY LILLIAN H UNDERGRADUATE PSYCHIATRIC NURSING	22,318
	TO2	NH10552-01	HARVEY LILLIAN H NURSING	24,960
	RO1	NH00100-04	K K ENERGY METABOLISM OF BRAIN	29,166
	RO1	NS05480-01	RICHARDSON ELIZABETH H CARE OF PREMATURE INFANTS IN THE HOME	43,420
	RO2	ND00093-04	SHAW DON H IMMUNOGENETIC STUDY OF RADIATION BONE MARROW THERAPY	5,560
	RO1	RH00403-02	TORRENCE ANDREW P COLLEGIATE SCHOOL OF NURSING	402,155
	TO2	NH00094-01	WATSON BERNARD B MECHANISMS OF INFECTION AND IMMUNITY IN LISTERIOSIS	30,929
	RO1	AT04025-95		714,141
			FISCAL YEAR TOTAL	13
0101000001100110000	RO1	CA08187-02S1	47 ADAMS EUGENE W STUDIES ON THE CANINE VENEREAL TUMOR	543
	RO1	CA08197-03	ADAMS EUGENE W STUDIES ON THE CANINE VENEREAL TUMOR	28,906
	RO1	HL08253-04	BOWIE WALTER C MOVEMENT OF THE MITRAL VALVE	51,728
	RO1	AT71320-004	BROWN R W PREPARE ANTISERA FOR RHINOVIRUSES	5,494
	RO1	CC00263-02	BROWN RUSSELL W PESTICIDES IN MAMMALIAN CELL SYSTEMS	21,549
	RO1	AM08364-03	CHUNG RONALD A CHOLESTEROL AND LIPID METABOLISM IN POULTRY	11,744
	RO1	AM09874-02	DUNN E WAYNE M STUDIES ON VITAMIN A METABOLISM	10,796
	GO1	LM00281-01	FOSTER LUTHER H MEDICAL LIBRARY RESOURCE SUPPORT	3,865
	TO2	NH10552-02	HARVEY LILLIAN H UNDERGRADUATE PSYCHIATRIC NURSING	22,318
	RO1	NS06480-02	RAJE K G ENERGY METABOLISM OF BRAIN	22,281
	RO1	NS06422-01A1	SETTLER SHERIDAN H PHOTOCOAGULATION OF THE CILIARY BODY	26,402
	RO1	RH00403-03	SHAW DON H IMMUNOGENETIC STUDY OF RADIATION BONE MARROW THERAPY	29,256
	RO1	AT04025-06	WATSON BERNARD B MECHANISMS OF INFECTION AND IMMUNITY IN LISTERIOSIS	31,666
	RO1	AT04025-06S1	WATSON BERNARD B MECHANISMS OF PATHOGENICITY AND IMMUNITY IN LISTERIOSIS	3,060
			FISCAL YEAR TOTAL	279,568
0101000001100110000	RO1	CA08187-04	48 ADAMS EUGENE W STUDIES ON VENEREAL TUMOR	38,815
	RO1	FD00284-01	BISKAS PROSANTO K THE DEGRADATION PRODUCTS OF HERBICIDES	11,127
	RO1	HL08253-05	BOWIE WALTER C MOVEMENT OF THE MITRAL VALVE	58,481
	RO1	CC00263-02S1	BROWN RUSSELL W PESTICIDES IN MAMMALIAN CELL SYSTEMS	1,247
	RO1	ES00323-03	BROWN RUSSELL W PESTICIDES IN MAMMALIAN CELL SYSTEMS	21,754
	RO1	AM08364-04	CHUNG RONALD A CHOLESTEROL AND LIPID METABOLISM	19,456
	RO1	AM09874-03	DUNN E WAYNE M VITAMIN A STUDIES AND GENETIC IMPLICATIONS	17,501
	GO1	LM00281-02	FOSTER LUTHER H MEDICAL LIBRARY RESOURCE SUPPORT	3,220
	TO2	NH10552-03	HARVEY LILLIAN H UNDERGRADUATE PSYCHIATRIC NURSING	22,318
	RO1	NS06422-02	SETTLER SHERIDAN H PHOTOCOAGULATION OF THE CILIARY BODY	4,733
	RO1	AT04025-07	WATSON BERNARD B MECHANISMS OF PATHOGENICITY AND IMMUNITY IN LISTERIOSIS	34,813
	SO1	RR05872-01	WILLIAMS T S GENERAL RESEARCH SUPPORT GRANT	39,611
			FISCAL YEAR TOTAL	273,076
0101000001100110000	RO1	CA08187-05	49 ADAMS EUGENE W STUDIES IN VENEREAL TUMOR	27,487
	RO1	HL08253-06	BOWIE WALTER C MOVEMENT OF THE MITRAL VALVE	53,064
	RO1	ES00323-04	BROWN RUSSELL W PESTICIDES IN MAMMALIAN CELL SYSTEMS	26,986
	RO1	AM08364-05	CHUNG RONALD A CHOLESTEROL AND LIPID METABOLISM	13,444
	RO1	AT08844-01	DANE ALBERT W ENDOTOXIC-LIKE PROPERTIES OF LISTERIA MONOCYTOGENES	26,899
	RO1	AM09874-04	DUNN E WAYNE M VITAMIN A STUDIES AND GENETIC IMPLICATIONS	16,938
	GO1	LM00281-03	FOSTER LUTHER H MEDICAL LIBRARY RESOURCE SUPPORT	2,383
	TO2	NH10552-04	HARVEY LILLIAN H UNDERGRADUATE PSYCHIATRIC NURSING	22,318

SOURCE: MICROFICHE HISTORY TAPES: IRS PROGRAM DBF.4737
 * TITLES ARE NOT AVAILABLE PRIOR TO 1962

PAGE

3

02-28-95
PHS SUPPORT TO USKEGEE UNIVERSITY FOR FISCAL YEARS 1970-72

GRANT NUMBER	FY	PRINCIPAL INVESTIGATOR	TITLE	\$ AWARDED
69	69	RACU K	ENERGY METABOLISM OF BRAIN	40,656
69	69	SETTLER SHERIDAN	PHOTODUPLICATION OF THE CILIARY BODY	11,957
69	69	WATSON BERNARD	MECHANISMS OF PATHOGENICITY AND IMMUNITY IN LISTERIOSIS	28,322
69	69	WILLIAMS T	GENERAL RESEARCH SUPPORT GRANT	31,689
			FISCAL YEAR TOTAL	302,563
70	70	AGAMS EUGENE	STUDIES ON VENTRAL TUMOR	26,344
70	70	BONIE WALTER	MOVEMENT OF THE MITRAL VALVE	53,012
70	70	CHUNG RONALD	PESTICIDES IN MAMMALIAN CELL SYSTEMS	27,227
70	70	FOSTER LUTHER	MEDICAL LIBRARY RESOURCE SUPPORT	1,787
70	70	HARVEY LILLIAN	UNDERGRADUATE PSYCHIATRIC NURSING	19,269
70	70	NELSON WESLEY	FATE OF HARMFUL METALS IN SOIL AND WATER SYSTEMS	21,350
70	70	RACU K	ENERGY METABOLISM OF BRAIN	23,707
70	70	SETTLER SHERIDAN	PHOTODUPLICATION OF THE CILIARY BODY	1,896
70	70	WILLIAMS T	GENERAL RESEARCH SUPPORT GRANT	36,877
			FISCAL YEAR TOTAL	208,469
71	71	BONIE WALTER	MOVEMENT OF THE MITRAL VALVE	21,656
71	71	CHUNG RONALD	PESTICIDES IN MAMMALIAN CELL SYSTEMS	30,317
71	71	CHUNG AS MERRIAN	PROJECT GRANT FOR IMPROVEMENT IN NURSE TRAINING	139,436
71	71	FOSTER LUTHER	MEDICAL LIBRARY RESOURCE SUPPORT	1,191
71	71	HARVEY LILLIAN	UNDERGRADUATE PSYCHIATRIC NURSING	22,318
71	71	HARVEY LILLIAN	NURSE TRAINEESHIPS - LONG TERM	21,767
71	71	NELSON WESLEY	FATE OF HARMFUL METALS IN SOIL AND WATER SYSTEMS	17,935
71	71	PROTHRO JOHNNIE	SPECIAL PURPOSE - PUBLIC HEALTH TRAINEESHIPS	12,615
71	71	PROTHRO JOHNNIE	ALLIED HEALTH TRAINEESHIPS	33,000
71	71	RACU K	ENERGY METABOLISM OF BRAIN	27,307
71	71	SETTLER SHERIDAN	PHOTODUPLICATION OF THE CILIARY BODY	25,474
71	71	WATSON BERNARD	MECHANISMS OF PATHOGENICITY AND IMMUNITY IN LISTERIOSIS	21,108
71	71	WILLIAMS T	GENERAL RESEARCH SUPPORT GRANT	67,785
71	71	WILLIAMS T	HEALTH PROFESSIONS EDUC INP PROG - SPECIAL PROJECTS	542,629
71	71	WILLIAMS T	GENERAL RESEARCH SUPPORT GRANT	21,905
			FISCAL YEAR TOTAL	1,007,443
72	72	BCWIE W	HEALTH PROFESSIONS SCHOOLS WHICH ARE IN FINANCIAL DISTRESS	385,518
72	72	BCWIE W	HEALTH PROFESSIONS SPECIAL PROJECT GRANT PROGRAM	105,160
72	72	BCWIE W	HEALTH PROFESSIONS SPECIAL PROJECT GRANT PROGRAM	104,930
72	72	BCWIE W	MOVEMENT OF THE MITRAL VALVE	107,267
72	72	CHUNG AS MERRIAN	CURRIC IMPR RENEDIATION FOR HI RISK STUDIES-REV COMM HLT	95,910
72	72	HARVEY LILLIAN	UNDERGRADUATE PSYCHIATRIC NURSING	22,318
72	72	HARVEY LILLIAN	NURSING CAPITATION GRANT PROGRAM	48,068
72	72	HARVEY LILLIAN	HEALTH CAREERS OPPORTUNITY PROGRAM	152,912
72	72	PROTHRO JOHNNIE	SPECIAL PURPOSE TRAINEESHIP GRANT	42,663
72	72	PROTHRO JOHNNIE	SPECIAL PURPOSE - PUBLIC HEALTH TRAINEESHIP	7,115
72	72	PROTHRO JOHNNIE	ALLIED HEALTH PROFESSIONS ADVANCED TRAINEESHIP GRANT	33,000
72	72	PROTHRO JOHNNIE	ALLIED HEALTH ADVANCED TRAINEESHIP-DIET	28,258
72	72	PROTHRO JOHNNIE	ALLIED HEALTH SPE IMPROV-DIETITIAN	82,668
72	72	RACU K	ENERGY METABOLISM OF BRAIN	10,630

SOURCE: MICROFICHE HISTORY TAPES; IRS PROGRAM CME.N787
* TITLES ARE NOT AVAILABLE PRIOR TO 1962

02-73 95
PHS SUPPORT TO HUSKOGG UNIVERSITY FOR FISCAL YEARS 1960-73

PAGE

GRANT NUMBER	FY	PRINCIPAL INVESTIGATOR	TITLE	\$ AWARDED	
11 NJDC100-0	72	RICHARDSON	ELIZABETH	PROFESSIONAL NURSE TRAINEESHIP PROGRAM - LONG TERM	10,884
11 NJDC100-1051		RICHARDSON	ELIZABETH	PROFESSIONAL NURSE TRAINEESHIP PROGRAM - LONG TERM	9,439
01 ATC0844-03		STODOL	IRAZA	ENDOTOXIN-LIKE PROPERTIES OF LISTERIA MONOCYTOGENES	24,148
01 ATC025-10		WATSON	BERNARD	MECHANISMS OF PATHOGENICITY & IMMUNITY IN LISTERIOSIS	33,611
03 PE0053A-03		MILLARS		HEALTH PROFESSIONS CAPITATION GRANT PROGRAM	186,092
01 ER0572-05		WILLIAMS		GENERAL RESEARCH SUPPORT GRANT	26,105
FISCAL YEAR TOTAL				1,715,996	
03 PE0053A-04	73	EDWIE	W	HEALTH PROFESSIONS CAPITATION GRANT PROGRAM	95,163
04 PE0504-01		EDWIE	W	GRANTS TO ASSIST HLTH PROFS SCHOOLS - FINANCIAL DISTRESS	297,642
08 PE0504-02		EDWIE	W	HEALTH PROFESSIONS SPECIAL PROJECT GRANT PROGRAM	75,210
08 PE0504-02		EDWIE	W	HEALTH PROFESSIONS SPECIAL PROJECT GRANT PROGRAM	324,941
1 PE05572-06		EDWIE	W	GENERAL RESEARCH SUPPORT GRANT	13,188
1 HL03259-02		EDWIE	WALTER	MOVEMENT OF THE MITRAL VALVE	86,284
8 NB00100-02		BARTON	MCDONALD	HEALTH CAREERS OPPORTUNITY PROGRAM	153,312
4 NB00117-02		BARTON	HUFF	NURSING CAPITATION GRANT PROGRAM	58,941
1 AH00461-02		CHUNG	RONALD	ALLIED HEALTH APE IMPROVEMENT PROGRAM	32,497
0 NH00420-04		DOUGLASS	MCKEAN	CURRICULUM REMEDIATION FOR HI RISK STUDENTS-REV COMM HLTH	123,744
2 NH00550-08		EDWIE	WILLIAM	PSYCHIATRIC NURSING - UNDERGRADUATE	9,401
5 RK03971-01		BERKSON		MULTIDISCIPLINARY BIOMEDICAL RSCH & RSCH TRAINING PROGRA	171,173
3 AF01127-01		WADSWORTH	CECILE	ALLIED HEALTH TRAINING INSTITUTE	55,213
1 AEC0844-0381		STODOL	IRAZA	ENDOTOXIN-LIKE PROPERTIES OF LISTERIA MONOCYTOGENES	2,145
1 AEC0844-04		STODOL	IRAZA	ENDOTOXIN-LIKE PROPERTIES OF LISTERIA MONOCYTOGENES	35,319
1 AEC025-		WATSON	BERNARD	MECHANISMS OF PATHOGENICITY & IMMUNITY IN LISTERIOSIS	41,926
FISCAL YEAR TOTAL				1,586,196	
GRAND TOTAL				6,922,581	

SOURCE: MICROFICHE HISTORY TAPES; IRS PROGRAM CBF.N737
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NEWS

AMERICAN MEDICAL ASSOCIATION

FEBRUARY 20, 1995

Abortion issue clouds nomination

By Wayne Hearn
AMNEWS STAFF

When President Clinton named Henry W. Foster Jr., MD, to be his new surgeon general, many predicted the 61-year-old obstetrician-gynecologist would breeze through the Senate confirmation process.

Unlike his predecessor Joycelyn Elders, MD, whose outspokenness created controversies that led to her forced resignation last December, Dr. Foster has earned a reputation as a consensus builder skilled in the art of compromise.

Ironically, however, his nomination quickly fell captive to the social issue that most defies efforts at consensus and compromise: abortion. At press time, the appointment was in doubt.

Hopes for a smooth confirmation collapsed two days after the Feb. 2 nomination. Dr. Foster, a longtime teacher, clinician and administrator at Meharry Medical College in Nashville, Tenn., acknowledged he had performed "fewer than a dozen" abortions during his three decades of practice. He said most were medically necessary, or had occurred in cases of rape or incest.

The revelation forced the White House to admit it had erred in reporting that Dr. Foster had performed only a single, medically necessary abortion.

Republican lawmakers immediately distanced themselves from the appointment as anti-abortion forces stepped up

their attack. Even before the controversy over Dr. Foster's medical practice, anti-abortion groups had opposed his nomination because of his ties to the Planned Parenthood Federation, a national organization of abortion providers and advocates. Dr. Foster served on Planned Parenthood's board of directors from 1975 to 1981 and supported its Campaign to Keep Abortions

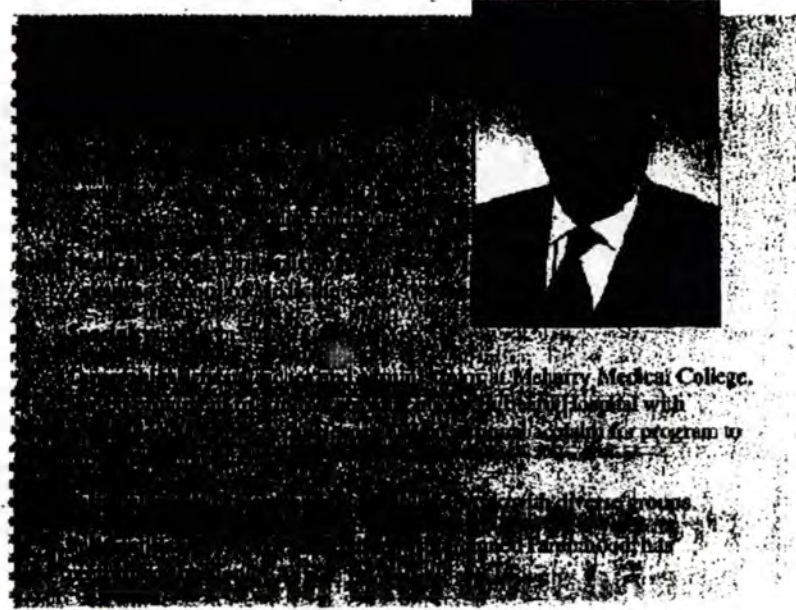
Safe and Legal in 1989. He also has been active in the mid-Tennessee chapter.

His appointment quickly became the focus of a pitched battle between the abortion-rights and

anti-abortion camps. Depending on which side is talking, Dr. Foster is either an abortion-rights zealot who would use the surgeon general's office to promote abortion or birth control, or the latest victim in an anti-abortion strategy to stigmatize and intimidate doctors who perform a legal procedure.

Anti-abortion forces also claimed that their own checks suggest Dr. Foster has performed more than a dozen abortions, a charge he denied. President Clinton responded that he would stand behind the appointment "if the facts are as I understand them to be."

"Condemning Dr. Foster simply because he has provided health care to women in crisis is tantamount to branding him with a 'scarlet letter'—a tactic designed to ostracize, isolate and demonize doctors who perform a legal medical service," said Kate



Job loss won't silence Dr. Elders. Page 20

Michelman, president of the National Abortion and Reproductive Rights Action League. NARAL called for an "emergency mobilization" of the abortion-rights community to campaign for his confirmation.

Douglas Johnson, legislative director for the National Right to Life Committee, the nation's largest anti-abortion organization, countered: "With more

than 700,000 physicians to choose from, the president reaches out and picks one who is a zealous advocate of a [pre-abortion] policy agenda. We're conveying to the senators our position that this is an unfortunate nomination."

The AMA, which endorsed Dr. Foster's nomination immediately after it was announced, remained supportive after the controversy erupted. "We still believe that Dr. Foster has demonstrated his commitment to the public health. See **SURGEON GENERAL**, page 11

John
Here's
what
AMA has done
so far on SG
issue

Surgeon general

Continued from page 3

ed a track record as a distinguished physician and one who cares about public health," said AMA Executive Vice President James S. Todd, MD. "The fact that he has done legally sanctioned operations [abortion] is something for Congress to decide in terms of whether that affects his overall qualifications."

Said AMA President Robert E. McAtee, MD, "His attributes remain. He's a good educator and a good spokesman and communicator. [The abortion question] is not something we identify as detracting from his qualifications."

William C. Andrews, MD, president of the American College of Obstetricians and Gynecologists, said he was "very distressed" that the abortion flap threatened the appointment of a "superb candidate."

"I'm very sorry politics has gotten in the way here," he said. "All of this flak can make qualified people less willing to perform government service. There's a certain amount of abuse in the process."

Dr. Andrews also said it's unfair to his specialty if surgeon general appointees are judged by whether they've performed abortions.

He estimates that 50% to 75% of practicing ob-gyns of Dr. Foster's generation have performed abortions, simply because in the years immediately after abortion was legalized in 1973, most procedures were done in hospitals by staff physicians. Today, fewer physicians perform more abortions due to the trend toward high-volume abortion clinics.

If confirmed, Dr. Foster would be the 17th surgeon general and the first ob-gyn to serve in that position.

Dr. Andrews noted another irony in that Dr. Foster has been nationally recognized for his work in adolescent pregnancy prevention, which by definition reduces the demand for abortions.

In 1987, Dr. Foster established the successful "I have a Future" program in four Nashville public-housing projects. Its goal is to reduce teen pregnancy rates by enhancing adolescents' self-image and promoting positive life-

options.

The program advocates the use of contraceptives for teens who are sexually active. In 1991, then President George Bush recognized the program as a "Daily Point of Light" in his campaign to reward exemplary community-service efforts.

In announcing the nomination, President Clinton urged Dr. Foster "to use what he's learned to help America attack the epidemic of teen pregnancies and unmarried pregnancies."

But medicine's support for Dr. Foster is not unanimous.

"It's almost as if he spokesman for Planned Parenthood would be the surgeon general, and I'm not too happy about it," said Pamela E. Smith, MD, vice president of the American Assn. of Pro-Life Obstetricians and Gynecologists, a special-interest group of about 1,000 ob-gyns who oppose abortion.

"The sad fact that he has performed abortions and has links to the nation's largest abortion provider [Planned Parenthood] are factors that should be taken into consideration in evaluating his nomination."

Dr. Foster could not be reached for comment. A spokesman for the Dept. of Health and Human Services said the physician would not grant interviews until after the confirmation hearings.

Led hospital merger talks

Lost amid the abortion clamor are the other qualifications that Dr. Foster's supporters say make him an excellent choice for surgeon general. Perhaps his strongest asset, in contrast to Dr. Elders' confrontational style, is his low-key, deliberate approach to difficult assignments.

He demonstrated his skills frequently over the past five years as Nashville leaders hammered out the details of a controversial plan to merge Meharry Medical College's Hubbard Hospital with the city's Metro General Hospital. The process was rife with potential pitfalls relating to turf and racism — Meharry is a mostly black medical school — but insiders say Dr. Foster's leadership was instrumental in keeping discussions on the right road.

Dean of the medical school during most of the merger talks, Dr. Foster and then Meharry President David Satcher, MD, PhD, were the schools' chief negotiators.

"His style works very well in the political process — not because he's a backslider or overactive trying to do politicking, but because he's very sincere and tries to work things through," said Nashville Mayor Philip N. Burdette.

"He was straightforward and honest about what Meharry could and couldn't do, and people had confidence that he was telling the truth. He was a big factor in getting the merger passed," Bredesen said.

Nat T. Winston, MD, former chair of the Metro General Hospital board, agreed Dr. Foster is "a consummate politician in the best sense of the term."

He's a level-headed, fair-minded person who was very instrumental behind the scenes during the merger.

Dr. Foster's biggest challenge was to meet the deadline set by the city for Meharry to recruit the additional 56 full-time physicians and 18 residents needed to staff the merged facilities, a task some cynics deemed impossible. He beat the deadline by six weeks.

"He inspired a lot of trust from people when he did that, because many thought it couldn't be done," said Dr. Satcher, now director of the U.S. Centers for Disease Control and Prevention.

After Dr. Satcher took the CDC job in 1993, Dr. Foster served as acting college president until July 1994, when he left on a one-year fellowship to the Assn. of Academic Health Centers in Washington, D.C.

"Each surgeon general defines the position differently," said Dr. Satcher. "and I think Dr. Foster will define it to fit himself, and I'm confident that will be good for America."

Confirmation hearings will not begin before mid-March, according to a spokesman for Republican Sen. Nancy Landon Kassebaum of Kansas, chair of the Senate Labor and Human Resources Committee.

That allows plenty of time for the abortion controversy to escalate or abate, depending on how successful the opposing camps are in marshaling their political forces.

Meanwhile, House Republicans, led by Speaker Newt Gingrich of Georgia and Commerce Committee Chair Thomas J. Bliley of Virginia, are ex-

pected to renew their call to combine the offices of surgeon general and assistant secretary of health. The positions were separated in the early 1980s. A spokesman for Kassebaum said he was unaware if the measure had any support in the Senate.

Immediately after Dr. Foster's appointment, but before the abortion controversy broke, Drew B. Altman, PhD, president of The Henry J. Kaiser Family Foundation in Menlo Park, Calif., made a comment that turned out to be prophetic.

"I think Dr. Foster is less likely to be a lightning rod than Joycelyn Elders was, because of his style," said Dr. Altman. "But I expect he'll take some heat on the abortion question. There is an issue more dangerous than the abortion issue."

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Abortion politics overshadow fight against teen pregnancy

By Wayne Hearn
AMNEWS STAFF

NASHVILLE, Tenn. — There is no small amount of irony in the controversy that has enveloped the nomination of Henry W. Foster Jr., MD, for the post of U.S. surgeon general.

Here is an obstetrician-gynecologist who garnered national acclaim for his efforts to prevent adolescent pregnancies and eliminate the need for abortions. Yet he is on the political hot seat for having also performed 39 legal abortions over the course of a 30-year medical career.

"It's distressing to see how politics has turned the whole thing around," said ob-gyn Harold O. Bernard, MD, associate dean of graduate medical education at Nashville's Meharry Medical College, where Dr. Foster worked as a teacher and administrator for 21 years.

"As we all should know, the effort to reduce unplanned teen-age pregnancies can only serve to decrease the

number of potential abortions. This should be self-evident, as we honestly and carefully examine Dr. Foster's record in its entirety."

It's certainly evident to Dr. Foster, who — under the watchful eye of the Clinton administration — has been trying carefully to rebuild his image since the first week of February, when he acknowledged he had performed abortions.

The controversy began when the White House wrongly reported at the outset that Dr. Foster had performed only one abortion, then escalated when he delayed in providing a more accurate estimate. Senate confirmation hearings on the appointment likely will begin in mid- to late-March.

"It's ironic that my work fighting teen pregnancy has been overshadowed by my opponents' talk about abortion,"

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Dr. Foster wrote in an opinion piece in the *Washington Post* on Feb. 14. "I do believe in the right of a woman to choose [abortion]. But my life's work has been dedicated to making sure that young people don't have to face the choice of having abortions."

Indeed, in 1988 Dr. Foster tackled one of the nation's most vexing and complex problems when, as chairman of Meharry's ob-gyn. department, he established "I Have a Future," a teen pregnancy prevention program, in two low-income Nashville public housing projects.

Teen pregnancy adversely affects a spectrum of socioeconomic and public

health concerns, including adolescent prenatal, postnatal and pediatric health; abortion; contraception; poverty; education; unemployment and welfare.

More than 500,000 U.S. teen-agers give birth each year, one-half of all teens who become pregnant. While teen pregnancy is a problem that affects adolescents of all economic backgrounds, it takes its greatest toll on the disadvantaged. Cultural differences and gaps in health education are among the factors making low-income teen-agers more likely than others to become pregnant and to carry those pregnancies to term.

Poor when they give birth, these teens are more likely to remain poor than are women who delay childbirth. They are less likely to continue their education and more likely to enter the

welfare system and remain there for a long time. That makes them and their children more susceptible to the range of health problems that disproportionately affect disadvantaged populations.

Each year, 350,000 pregnant teens opt for abortion, accounting for 23% of all U.S. abortions, according to the Alan Guttmacher Institute, which researches reproductive health issues. Teens from middle- and upper-income families are more likely than low-income teens to terminate pregnancies, the institute says. Overall, however, the abortion rate among sexually active teen-age women dropped from a high of 95 per 1,000 women in 1980 to 72 per 1,000 in 1990, in part because teens became more knowledgeable about contraception.

Each year, about 140,000 teen-age

pregnancies end in miscarriage.

Alternatives to sex

Dr. Foster's *I Have a Future* program is at the cutting edge of teen pregnancy prevention efforts. It reflects a growing consensus that contraception education for sexually active teens must be combined with efforts to motivate those who are not yet sexually active to remain abstinent until they become more mature.

The strategy involves offering realistic alternatives to sex, instruction in how to recognize and resist peer pressure, self-image enhancement and encouragement to set long-term life goals.

"The idea of abstinence has gotten a lot more attention over the years,"

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said Jennifer J. Frost, DrPH, senior research associate at the Guttmacher Institute. "It's about convincing kids — especially the very young adolescents — that delaying sex can be the norm, that you don't have to have sex to fit in."

Explained Judith MacPherson Pratt, MPH, who directs a statewide abstinence program in California: "You have to catch them when they're young enough, before they're sexually active, so you can build on that positive norm. You want to make it OK to be assertive about not being sexually active."

California's ENABL program — Education Now And Babies Later —

has reached 200,000 youths, age 12-14, in 28 communities, since 1991. The state had 70,000 teen births in 1993, the most in the nation, according to Gov. Pete Wilson's office. In 1992, teen births cost the state more than \$370 million in welfare and health insurance costs.

An evaluation of ENABL is due out later this year. Pratt anticipates it will show that youngsters who went through the program are less active sexually than those in control groups not exposed to the program. That was the case in an Atlanta study. There, eighth graders in one of the nation's most established abstinence programs were three to four times less likely to be sexually active than members of a control group.

"The idea of postponing sexual ac-

tivity is, in some ways, just buying time, but it helps kids get over the psychosocial hump until they can more clearly see the potential impact of sexual activity on their futures," said Marion Howard, PhD, clinical services director for teen services at Grady Memorial Hospital in Atlanta. Grady began its Postponing Sexual Involvement program in 1985 with support from Emory University School of Medicine. The program is now in 16 Atlanta public schools.

Meharry's *I Have a Future* program is much more modest in size — it has reached about 850 students in two housing projects — but it's more comprehensive than most abstinence programs. It covers a wider age group, 10 years old and up, though most enrollees are 14 to 19 years old. It offers a

broader array of services and activities, including tutoring, life-options counseling, field trips and training in interpersonal skills and entrepreneurship.

"The idea is to widen their horizons, expose them to things they wouldn't normally be exposed to," said Director Lorraine Williams Greene, PhD. She describes the philosophy as "a heavy case-management approach."

Dr. Greene and her staff of 20 are assisted by Meharry medical students and scores of volunteers from the African-American community who serve as role models and tutors.

Dr. Greene concedes that the program's "holistic nature" complicates the evaluation process, but said that preliminary results are encouraging. For example, over a 30-month period, only one pregnancy was reported among program participants, compared with 59 pregnancies at two comparison sites. In 1994, 15 of the 24 high school graduates in the program were accepted for admission to colleges or vocational programs, which Dr. Greene termed "remarkable" for the community.

Role of contraceptives

Some conservative groups have criticized the program because, though ab-

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promoting abstinence: to prevent a pregnancy that can cripple an adolescent's future. The goal, said Dr. Greene, is to instill in adolescents the notion that "having babies is not an option now, because I have so many plans and things I want to do with my life."

Dr. Frost of the Guttmacher Institute added that programs promoting both abstinence and contraception do not send conflicting messages to adolescents. "We have studies to show that adolescents are perfectly capable of assimilating that kind of mixed message. And there are no studies to show that exposure to contraception encourages

kids who aren't sexually active to become so."

The Family Research Council disagrees. "There is research showing that a program that delivers a nondirected message — like merely including abstinence as a multiple choice along with condom use and birth-control pills — will fail," said spokeswoman Kristin Hamrick. "It doesn't help young people make the healthiest choice."

From a medical standpoint, Meharry's I Have a Future reflects the growing awareness that certain health problems are inextricably linked to social concerns. It's "a shining example of the medical-social approach to health care," said Meharry President John E. Maupin, DDS. "A purely medical approach has only been partially successful, especially in underserved communities, because there are a host of other factors that must be considered."

"This involves taking community resources, whatever they may be, and linking them to appropriate medical delivery services," Dr. Maupin said. "The outcomes become solid health outcomes, but they are also solid social outcomes. When we better understand this medical-social relationship and how it applies to the delivery of health care, we'll see better health outcomes

Teen pregnancy and abortion

• Women younger than 20 account for 23% of all U.S. abortions.

• 35% of all adolescent pregnancies end in abortion; 53% of unintended adolescent pregnancies end in abortion.

• White teen-agers with unintended pregnancies choose abortion compared with about 50% of blacks and Hispanics.

• 75% of pregnant teen-agers from low-income families choose abortion, compared with about 60% of low-income teens.

• Abortion is chosen by 60% of pregnant girls younger than 18 whose partners are that age or younger, compared with 33% of teen-agers whose partners are at least 19.

Source: Alan Guttmacher Institute

stinence is stressed, it promotes the use of contraceptives for youths who are sexually active.

"While it's a very noble goal to reduce teen pregnancies, [I Have a Future] approaches it in a way that is very different than we would approach it," said Gracie Hsu, MHS, policy analyst for the Family Research Council, a conservative group in Washington, D.C., that opposes Dr. Foster's nomination.

"It's not OK for young people to use contraceptives if they are not married, just because one segment of society may condone it," Hsu said. "We have the responsibility to give young people the most healthy message, which is abstinence."

Dr. Greene said the contraceptive component of the program simply reflects the reality of the community, where many youths become sexually active before they ever encounter I Have a Future. "It would be irresponsible of us to not teach those who are active that they are responsible for the health of themselves and their partners these days of STDs and AIDS. You have to understand that there is a community context here."

But the main reason for teaching contraception is the same reason for See **TEEN PREGNANCY**, facing page

in the long run."

Nashville youths in the program say they already see both the long-term and short-term benefits of controlling their sexual activity.

Gary Hicks, 18, a senior at nearby Pearl-Cohn High School, where most of the I Have A Future participants attend, said his three years in the program have helped him deal with pressures stemming from his popularity as a football player.

"Girls are always coming up and saying they want to have your baby and stuff like that, so that you'll stay with them," said Hicks, who plans to major in mechanical engineering at Tennessee State University next fall. "I've learned that it's cool to be abstinent. You don't have to have sex."

Classmate Tonya Rutledge, 17, said the program has helped her avoid the plight of many of her friends, who she said are either pregnant or mothers.

"They hate it. They can't do anything," said Rutledge, who plans a career as a cosmetologist. "If I hadn't gotten in the program, I'd probably be pregnant, too."

