

# Merger with OU Will Benefit Med Center

The following is the text of a statement issued by Dr. Cecil L. Wittson, dean of the College of Medicine, regarding the merger of the University of Omaha with the University of Nebraska.

A merger of the University of Omaha with the University of Nebraska is certain to strengthen the education and service programs of the University of Nebraska Medical Center.

I can foresee a variety of opportunities, mutually beneficial not only to the University of Omaha and the Medical Center, but to the communities each institution serves.

Academic medicine requires a number of basic scientists, such as anatomists, biochemists and physiologists, whose training requires courses not offered at the Medical Center, such as language and physical chemistry. These students must leave the campus and the city for at least a part of their training.

That is one area in which a close relationship with the University of Omaha could benefit the Medical Center.

Certain courses such as biology and chemistry lend themselves to a pooling of faculty and laboratories, thus avoiding duplication and capitalizing on the special capabilities of each institution.

Our clinical faculty and programs offer resources which I am sure could assist educational, social and behavioral science programs at the University of Omaha, and could be assisted in turn. Combined student health services certainly present an attractive economy.

I can visualize a joint approach to urban health problems, developed by the faculties of both campuses, as a positive force to the community.

But the most important opportunity offered by a close relationship between the two campuses would be the development of cooperative programs in the education and training of allied health personnel.

There is a great and growing demand for these people, a demand created by the complexities of modern medicine.

These technical and professional personnel require both basic education and clinical training. Their training lends itself ideally to a cooperative program of an undergraduate university and a graduate medical school.

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We need medical technologists, surgical technicians, physical therapists, medical record librarians, nursing home administrators, radiological technologists, child care specialists, nutritionists, dietitians, physicians' office assistants, medical electronic data processors – to mention a few.

We need them, but, most often, they are not there. There are too few of them to go around. We must train more of these allied health personnel as fast, as efficiently and as effectively as possible.

Already the pattern is set in our School of Nursing collegiate degree program, where students take their first year of study at an undergraduate college or university – many at the University of Omaha.

Finally, throughout the nation medical schools are re-evaluating curriculum in the light of changing scientific and social techniques and knowledge. Reflecting also on the continuing shortage of physicians, I cannot help but see, at least as a possibility, the development of an accelerated program for the education and training of doctors, if the merger of the University of Omaha with the University of Nebraska is achieved.