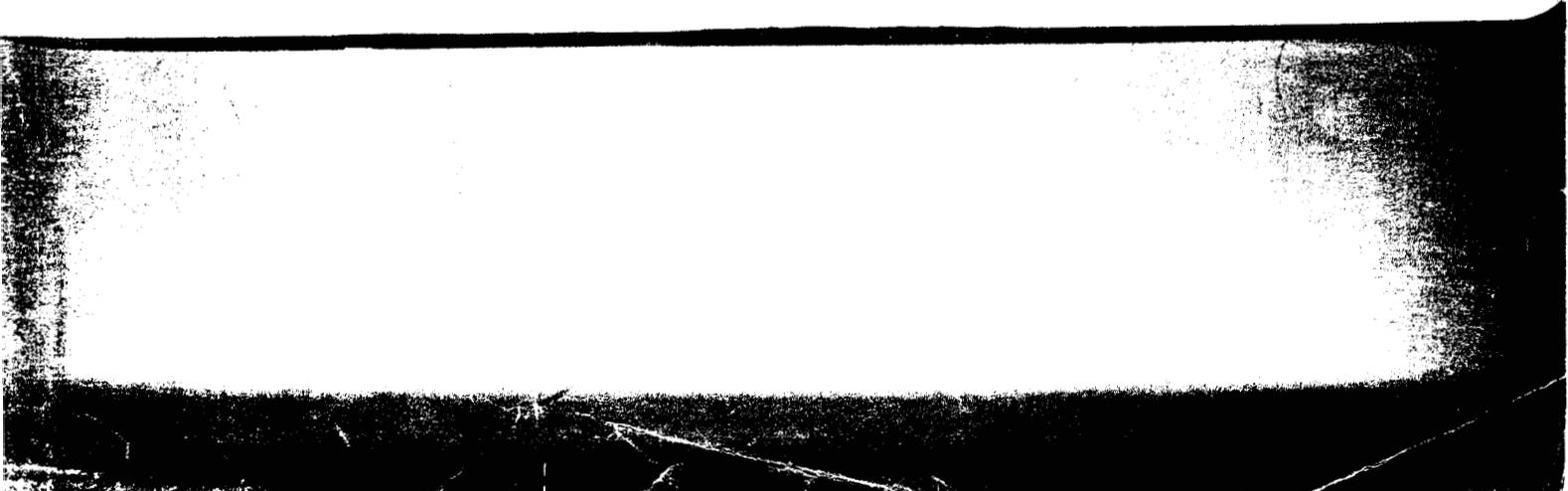


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FINAL REPORT OF
SUBCOMMITTEE ON MEDICAL RESEARCH

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REPORT
OF THE
SUBCOMMITTEE ON MEDICAL RESEARCH

DECLASSIFIED
Authority 217025
By *JK* NARA Date 7/15/04

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OFFICE OF THE SECRETARY OF DEFENSE
WASHINGTON

COMMITTEE ON MEDICAL AND HOSPITAL SERVICES OF THE ARMED FORCES

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To: The Secretary of Defense

Subject: Medical Research of the Armed Forces

Reference: (a) Memorandum from Secretary Forrestal to Dr. Paul R. Hawley, dated 1 January 1948, Subject: "Committee on Medical and Hospital Services of the Armed Forces."

Enclosure: (1) (HW) Report of Subcommittee on Medical Research of the Armed Forces.

1. By the terms of reference given in Reference (a) you ask that among other things the Committee give attention to the problem of:

"Coordination or consolidation of the medical research programs of the medical services of the Armed Forces and the maximum joint use of research facilities. This should include consideration of the questions of whether there should be a completely joint research program or whether, irrespective of the wisdom of establishing a single Armed Forces medical and hospital service, a common research program should be undertaken by one service on behalf of all Services."

2. In consonance with paragraph 4 of Reference (a), the Committee appointed a Subcommittee on Medical Research of the Armed Forces to assist the Committee in conducting its study of this subject. The report of that Subcommittee is submitted herewith as Enclosure (1).

3. In its consideration of this subject the Committee has taken into account the functions, duties and responsibilities of the Research and Development Board as set forth in Sec. 214 of the National Security Act of 1947. Note has also been taken by the Committee of the establishment by the Research and Development Board of a Committee on the Medical Sciences to assist the Board in the conduct of its functions in that field. Each of the three Departments has two medical officers as representatives in the membership of that recently organized Committee, which is further composed of two civilian members and a civilian chairman. The six medical officers on that Committee are individuals most familiar with the medical research programs and activities of their respective Departments, and constitute a participating membership which is satisfactory to the Surgeons General and to the Air Surgeon. The charter of that Committee, which was concurred in by the Surgeons General and the Air Surgeon, contains terms of reference which have an important and direct bearing on the recommendations of the Committee on Medical and

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Hospital Services of the Armed Forces. The aforementioned charter includes the following obligations, quoted in part only (see Annex C of Enclosure (1) for the full text):

"Section b: 'Analyze and evaluate . . . information in order to:

- '(1) Determine the major goals and problems in the field of medical and allied sciences and direct appropriate and constant emphasis upon them;
- '(2) Assess the adequacy of plans . . .
- '(3) Determine the presence of unjustifiable duplication . . .
- '(4) Determine the presence of serious gaps which exist in the programs;
- '(5) Assess the adequacy of facilities, personnel and equipment . . .
- '(6) Appraise the degree of coordination . . .'

"Section d:

- '(1) Prepare not less frequently than once a year an integrated plan
- (2) Allocate and, when desirable, reallocate responsibility among the military departments for research . . .
- '(3) Specify means whereby maximum advantage may be taken of critical resources and new advances, solution of problems may be speeded, undesirable duplication, waste or neglect may be avoided, and liaison, cooperation and direct dealing among agencies may be furthered;
- '(4) Present to the Board . . . recommendations for expenditures . . .'

4. It is thus seen that the National Military Establishment now has, within the organizational structure of the legally established Research and Development Board, the appropriate mechanism for effecting coordination, avoiding

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undesirable duplications, and providing broad guidance in the field of Medical Research in the Armed Forces.

5. The Committee on Medical and Hospital Services of the Armed Forces is in accord with the report of its Subcommittee on Medical Research. The Committee believes that implementation of the recommendations contained therein would not conflict with the functions of the Research and Development Board or with the terms of reference given by the Board to its Committee on the Medical Sciences, which review and make determinations on these matters at the level of the Office of the Secretary of Defense. On the contrary, the Committee believes that effectuation of these recommendations will further the commendable objectives of the Research and Development Board in the field of the Medical Sciences as outlined in paragraph 3 above, will service to complement the work of that Board, and will facilitate the origination, development and pursuit, within the level of the Departments, of appropriate and coordinated Medical Research projects and undertakings which will subsequently be subject to scrutiny and review by the Research and Development Board and its Committee on Medical Sciences. The aforementioned recommendations are:

(A) That the present management-control of the separate medical research activities maintained by the three Services be not disturbed.

(B) That the Chiefs of Medical Research Divisions of the three Departments meet at regular intervals, on call of the senior Chief, and not less frequently than once a month, to:

(1) Discuss with one another all new research project proposals received since the previous meeting, in order to

(a) In the case of projects for accomplishment in service facilities, determine

- i. Which service facility is best equipped to undertake the project, and
- ii. What assistance or cooperation, either by personnel or research tools should be furnished by facilities of the other armed forces, but
- iii. The right of any of the three research chiefs to undertake a project independently shall not be designed by the above reviews.

(b) In the case of projects for accomplishment by contract in civilian institutions, decide which projects should be undertaken in joint sponsorship and support.

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(C) That where joint support of research projects is agreed upon, the service which is primarily interested, or which is the initial sponsor of a particular project, will cause the contract to be negotiated through its regularly designated channels, and will bill the contributing services for their agreed portion of the cost, on a Standard Form 1080 to effect reimbursement. The contracting agency will then also act as the legal agent in this particular project, will keep records as to the obligation and expenditure of said project funds, and will be responsible for all reports.

(D) That the Research and Development Board of the National Military Establishment be asked to study contract methods and procedures in the Medical Services of the Armed Forces with a view toward promoting:

- (1) Uniformity,
- (2) Standardization of overhead charges, and
- (3) Extension of period of availability of appropriated funds.

(E) That, giving practical consideration to the limitations imposed by command and administrative aspects and responsibilities, particularly in the fields of bacteriological and radiological warfare, all research in the fields of medicine or medical allied sciences should be conducted under the technical supervision of the Surgeon General (or Air Surgeon) concerned.

(F) That the novel, unique or unusual research facilities of one Service be utilized by all of the Services, when desirable, after appropriate and mutually satisfactory arrangements are effected.

(G) That greater consideration be given to the pooling of research resources into jointly conducted projects where common and mutual concern exists and where the specialized nature of facilities or personnel suggest this action.

(H) That medical material development be undertaken as a jointly controlled, staffed, and financed activity, centered in an Armed Forces Engineering Development Laboratory (Annex D).

6. In connection with recommendation (H) above, attention is invited to the fact that, as more fully discussed in Annex D of Enclosure 1, its approval will result in reorganization and redesignation of the Engineering Development Division of the Army-Navy Medical Procurement Office (ANMPO), together with its Engineering Laboratory and Shop which is located at Fort Totten, New York, as the "Armed Forces Medical Materiel Engineering and Development Laboratory." Further, that it will, through the medium of the Surgeons General and the Air Surgeon and a governing board having appropriate representation from each of the three medical Services, place that reorganized and redesignated agency which has to do with development in the field of Medical Materiel, more appropriately in closer contact with and more directly under the policy guidance of the Research and Development Board than by continuing

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its present relationship as a subsidiary of the Army-Navy Medical Procurement Office.

7. After the Secretary of Defense has obtained such concurrence and/or comments from the Research and Development Board, the three Departments and/or such other elements of the National Military Establishment as he may deem necessary or desirable, approval of the recommendations as set forth in paragraph 5 above is unanimously recommended.

8. This special interim report constitutes an increment of the Committee's report to you on its overall assignment.

PAUL R. HAWLEY, M. D.
Chairman, Committee on Medical and
Hospital Services of the Armed Forces

RAYMOND W. BLISS
Major General, MC, USA
The Surgeon General

CLIFFORD A. SWANSON
Rear Admiral (MC), U.S. N.

J. T. BOONE
Rear Admiral (MC), U.S. Navy
Executive Secretary

MALCOLM C. GROW
Major General, MC, USA
The Air Surgeon