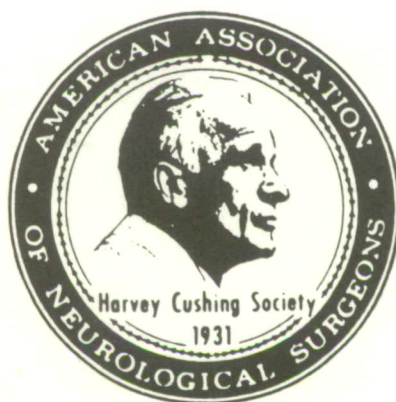


**SUMMARY**  
**NEUROSURGICAL MANPOWER MONITORING COMMITTEE**  
**1976 REPORT**



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INTRODUCTION

In fulfillment of a contract with NINDS (#72-2308), the American Association of Neurological Surgeons through a committee appointed for that purpose studied the national manpower needs for neurosurgical specialists over a period of some 20 months and after receiving the committee's report transmitted it to the National Institutes of Health. In this 1975 report there was described much data which the committee had gathered - mainly by questionnaires - together with analyses and projections having to do with the number of neurosurgeons in the United States, their pattern of distribution and certain details about neurological surgery as currently practiced. Insights into the recruitment and training of would be specialists in this field as well as academic, clinical and other interests of neurosurgeons were obtained. Information relative to factors influencing neurological surgeons' choice of a location for practice was developed. From these data it was thought possible to make certain tentative assumptions for future manpower needs for neurosurgical care.

At the time of receipt of transmission of the 1975 report of the neurosurgical Manpower Commission the membership of the AANS expressed considerable concern relative to the implications of this report and urged a wider discussion of the problem with an effort to provide every neurosurgeon in the U.S. the opportunity to be heard. Following the annual 1975 meeting, the Executive Committee of the AANS established the Manpower Monitoring Committee consisting of two neurosurgeons, one academician and one from the practice segment, from each of the nine federal census regions in the United States. The original Manpower Committee, expanded to four men, was reappointed to serve as an Executive Committee for the group resulting in the current 22-man Manpower Monitoring Committee. This committee was charged with gathering more information of regional importance, assessing the effect and impact of the 1975 report and submitting a revised and extended analysis to the 1976 Meeting of the AANS. The committee was further instructed to present the issues raised by the 1975 report at every level of organized neurosurgery including