



University of North Dakota
UND Scholarly Commons

UND Departmental Histories

Elwyn B. Robinson Department of Special
Collections

1983

Obstetrics and Gynecology

Paul D. Bruns

University of North Dakota

Follow this and additional works at: <https://commons.und.edu/departmental-histories>

 Part of the [Obstetrics and Gynecology Commons](#)

Recommended Citation

Bruns, Paul D., "Obstetrics and Gynecology" (1983). *UND Departmental Histories*. 20.
<https://commons.und.edu/departmental-histories/20>

This Book is brought to you for free and open access by the Elwyn B. Robinson Department of Special Collections at UND Scholarly Commons. It has been accepted for inclusion in UND Departmental Histories by an authorized administrator of UND Scholarly Commons. For more information, please contact zeinebyousif@library.und.edu.

DEPARTMENTAL HISTORIES

PUBLISHED ON THE OCCASION OF THE CENTENNIAL OF
THE UNIVERSITY OF NORTH DAKOTA, GRAND FORKS

A historical black and white photograph of a large, multi-story brick building, likely a university building. The building has a prominent central tower with a dome and a smaller tower on the right side. A group of people is gathered in front of the building, and there are horse-drawn carriages visible. The sky is filled with large, dramatic clouds.

OBSTETRICS AND GYNECOLOGY

By Paul D. Bruns

HISTORY OF THE DEPARTMENT OF
OBSTETRICS AND GYNECOLOGY
UNIVERSITY OF NORTH DAKOTA

by Paul D. Bruns

There are three doctors to whom the origin and development of the Department of Obstetrics and Gynecology can be traced: Ralph Leigh, Wallace Nelson, and Preston Dilts, Jr.

Dr. Leigh was born on October 13, 1898, seven years before the opening of the University of North Dakota School of Medicine. After attending the two year medical program at UND, he transferred to the University of Minnesota for his clinical training. He received his M.D. degree after a year's internship at Saint Paul Community Hospital. He then completed two years of surgical training at Kings County Hospital in Brooklyn, N.Y., in 1926. It is appropriate to detail this physician's background because he became the first teacher of Obstetrics and Gynecology at the University of North Dakota after he returned to his home state. During the depression years of the early 1930's, he established a private practice in Grand Forks and developed the first course in Ob/Gyn for the sophomore medical students by delivering a one hour lecture weekly during the second semester. He maintained his (C.M.E.) "continuing medical education" by observing and following two renowned surgeons of his time; namely, W. H. Witherstine and Will Mayo, Sr. University salaries in those years were probably leaner than they are now. His pay amounted to \$300 per year in 1934, but he augmented this to some degree by making approximately \$1000 per month from his surgical practice. He raised a distinguished family and remained active academically until shortly before his death on June 20, 1970.

Dr. Wallace Nelson, a full-time pathologist and Associate Dean for Student Affairs, in 1967 organized and formalized the lectures to the sophomore students by bringing in eighteen community physicians to discuss various aspects of history taking, physical examination, and demonstration of pelvic examination and mensuration on plastic models in the course, then taught as "Physical Diagnosis". Dr. Nelson continues to be active academically by teaching gynecological pathology to the Ob/Gyn residents.

In 1972, legislative approval was given for expansion of the two year basic science program to a four year M.D. degree granting University. Thus, instead of the third year students continuing their education at the University of Minnesota and the Mayo Clinic, both third year and fourth year students will be taught in community hospitals and clinics throughout North Dakota, principally in the four major population centers of the state; namely, Bismarck, Fargo, Grand Forks, and Minot. To implement this expansion, the establishment of clinical departments of the Medical School in the primary care areas as well as the specialties was required.

Dr. Preston V. Dilts, Jr., became the first chairman and professor of the Department in 1974. Under his leadership, the first residency review of the hospitals to be used for education of students and residents was completed. The review committee's report indicated that: 1) The Grand Forks Air Force

Base Hospital offered an excellent clinical experience in ambulatory care, general obstetrics, and operative gynecology. 2) The United Hospital, Grand Forks should be the base hospital for the residency program because the full-time faculty would be seeing private patients and would be using this hospital. 3) The Dakota Clinic Hospital at Fargo which is located 75 miles south of Grand Forks was only a 150 bed hospital and had limited potential for resident training, and 4) St. Luke's Hospital, Fargo, had excellent potential to become a valuable part of the residency. Approval for two residents at each level of training in a four year program was granted. Shortly after Dr. Dilts recruited three residents and one faculty member, he was offered a position as Chairman and Professor at the University of Tennessee and left the Department in 1975. Dr. Michael Yannoni, a Reproductive Endocrinologist, from the University of Iowa was appointed to the Chairmanship in 1976, but he too resigned shortly thereafter in 1978.

Today, the Department of Obstetrics and Gynecology is under the direction of Dr. Robert P. Carter, who has organized an innovative educational and training program for medical students and residents. He is implementing this program by the recruitment of new faculty, both general obstetricians and gynecologists as well as those specially trained in Perinatology, Maternal-Fetal Medicine, Reproductive Endocrinology and Gynecologic Oncology. As is well known, the University Hospital of North Dakota is a "hospital without walls", which means it utilizes the community hospitals, clinics, and physicians in private practice as its clinical faculty to teach both residents and medical students. Equally well known, is the raison d'etre for the University of North Dakota Medical School's Educational Program; namely, that residents and students receiving clinical training in a given region will be inclined to return to that region to practice medicine. An Assistant Dean of the Medical School has been located at each of the four Area Health Education Centers (AHEC's) in the state and the Department of Obstetrics and Gynecology plans to appoint a senior faculty member to each of the major cities of Bismarck, Fargo, and Grand Forks.

Presently, the residency training program is located in three affiliated hospitals and three clinical facilities. The Grand Forks Air Force Base (GFAFB) Hospital and Clinics provides a combined obstetrical and gynecological experience for the first year and senior residents. The resident physicians are given the responsibility of total patient care under supervision of the full-time faculty of the UND Department of Ob/Gyn, and they have a two month rotation through medicine and surgery with an elective in anesthesia. A newly developed in-patient program is now in existence at the United Hospital in Grand Forks. The education and training of residents is carried out by two full-time and five clinical faculty members. There are usually two Ob/Gyn residents and one family practice resident assigned at this hospital. The Dakota Hospital and Clinic located in Fargo, provides both an in-patient and out-patient population for three Ob/Gyn residents. The residents are under the direct supervision of the clinical faculty in conjunction with two full-time faculty members who visit the clinic weekly.

The Fort Totten Indian Health Service offers a weekly ambulatory care experience in management of high-risk obstetrics and complex gynecology. Patients needing hospitalization are referred to United Hospital in Grand Forks or Mercy Hospital in Devils Lake.

The Fort Yates Ob/Gyn program has been in operation since December 1, 1981. This facility includes a 24 bed hospital and delivers approximately 140 patients per year. High-risk Ob/Gyn patients are referred to the two hospitals in Bismarck. As yet, there is no operating room, nor equipment, and there is an inadequate number of nurses to care for high-risk mothers or give pre and post operative care to complicated gynecological patients. At present, a full-time UND faculty member is assigned to this facility and an Ob/Gyn resident assigned to the St. Alexius Hospital and the Bismarck Hospital in Bismarck makes a weekly visit to the Fort Yates P.H.S. Hospital to see the high-risk Ob/Gyn patients.