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Catholic Physicians' Guild

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President's Page

I am indeed honored to serve as your president during this term. I know the responsibilities entailed and I will do my utmost to discharge the duties of this office to the best of my ability.

During the past ten years I have been pleased to observe many functions and activities individual Guilds have developed, and I am aware that the success of any Federation is measured by the interest at the local level.

I have frequently been asked how some Guilds are more effective than others, and would like to list some suggestions that are profitable:

1. Where a Guild has formed an executive committee of its officers, moderator, and committee chairmen who meet monthly or at least quarterly, the organization has vitality.

2. In instances where the executive committee of a local Guild handles most all of the planning of programs, activities thrive.

3. The guidance of a specific constitution and by-laws prepared by a Guild itself is effective.

4. Representation at all Executive Board meetings of the National Federation pays dividends.

5. The establishment of a central office for a Guild with a permanent executive secretary is very important. Such an office can efficiently operate to keep the membership roster current, maintain an effective line of communication between the Guild and the National Federation office in St. Louis, report all officer changes after each election, in addition to advising of current mailing list, changes of address to mail THE LINACRE QUARTERLY properly, among other good reasons.

6. Where the local Guild president assigns responsibility for activities to committee chairmen and checks on progress, a vital organization develops.

7. The Guild that has a varied number of programs structured on apostolic needs of the area, involving religious activity, a mission program, a family life program, a health care program for religious and clergy, or medical education, is important to itself and the community in which it is located.

8. Where an attempt is made to reach all Catholic doctors in a given diocese either to join a Guild or become an associate member of the National organization, there is community spirit in any projects.

These are but a few observations. I hope that you might consider these suggestions in relationship to your own Guild so that more effective and apostolic organizations of this nature will exist in every diocese in the country.

I look forward to meeting Guild delegates at our Executive Board meetings to be held in San Francisco, June 24 and in New Orleans, November 12. The Federation, with the cooperation of the Catholic Hospital Association, will sponsor a Symposium on Medical Education and Research in the Community Hospital in New Orleans, November 13 and 14. The two-day meeting will be in conjunction with the Executive Board sessions scheduled for the 12th. We hope for a large attendance.

Clement P. Cunningham, M.D.

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