A Celebration of AAPM&R’s 75th Anniversary

Physicians Adding Quality to Life® for 75 years and counting
A Celebration of the American Academy of Physical Medicine and Rehabilitation’s 75th Anniversary

The American Academy of Physical Medicine and Rehabilitation, your Academy, is extremely proud of all that we have accomplished since our founding by a small group of visionary leaders 75 years ago. This timeline represents a portion of the history and heritage we share and places major milestones in the context of national and world events. It reflects many of the struggles and triumphs of our medical specialty to establish its proper place within the profession and to contribute to the health and quality of life of our patients through education, research and advocacy. As you will see as the pages unfold, we built a strong foundation, gained momentum and achieved some notable accomplishments. Our future is bright. As AAPM&R members, we must understand the past so that our clinical practice continues to pose the important questions and our research finds solutions that benefit our patients. This will require active participation in current and future initiatives, while we remain true to our core values and our mission.

Our Vision: To transform the focus of health care to value function

Our Mission: To serve its member physicians by advancing the specialty of physical medicine and rehabilitation, promoting excellence in physiatric practice, and advocating on public policy issues related to persons with disabling conditions.

This is our Diamond Anniversary and our Jubilee. It is the occasion to celebrate and reflect on the significance of the diamond as evoked by a great writer. The meaning behind the symbol might well be applied to our history as we reflect back and move forward.

“We might as well face the truth that to researchers of the future, poking about among the ruins of time, we shall all be tiny glitters. But then, so are diamonds.”

—James Thurber, American author and cartoonist

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What Happened in the Nation?

1890s–1920s

The socio-political environment created by the Progressive Era (1890s–1920s) enhances possibilities for both physical and rehabilitation medicine. The Progressive Movement highly values science and the professions, especially medicine. Reformers after World War I focus on creating rehabilitation services for wounded veterans and workers’ compensation programs.

Development of the Progressive Movement:
Growing awareness of the problems caused by large corporations and large cities such as slums, injured workers and a belief that the government had a role in addressing them

Flexner report on medical education
World War I begins
World War I ends

Workers’ compensation programs develop
in Wisconsin, Oregon, California, North Dakota, and New Jersey

American Medical Association calls for the development of Workers’ Compensation programs

The first Vocational Rehabilitation Act is signed into law
Franklin Delano Roosevelt is diagnosed with polio

Military Rehabilitation Hospitals are developed by Fred Albee, MD; Frank Granger, MD; Harry Mock, MD; and John Coulter, MD.

New York City establishes Public Baths at the urging of Simon Baruch, MD, an early hydrotherapy practitioner.

The Institute of Crippled and Disabled Men sponsors an international conference on rehabilitation leading to the establishment of the first international rehabilitation program
George Deaver, MD, completes his service in World War I, having established rehabilitation programs first in Egypt that were expanded to other countries throughout Europe

The American College of Radiology and Physiotherapy (later renamed the American Congress of Rehabilitation Medicine in 1967) is established

The Great Depression begins with the Stock Market Crash

1890
1900
1910
1914
1917
1918
1918-1919
1919
1920
1921
1923
1926
1927
1929

1900–1920s

There is increased interest in the scientific use of physical agents, primarily to treat acute illnesses. Military rehabilitation programs develop and the first civilian inpatient rehabilitation hospital is established in New York City.

1920s

The Progressive Era continues into the 1920s. Franklin Roosevelt purchases and develops the Warm Springs Foundation which provides treatment and peer interaction for patients with polio. Many of the rehabilitation techniques and technologies developed there (manual muscle testing, orthoses, hand controls for automobiles and other adaptive equipment) become useful in the future treatment of patients with spinal cord injury and other disabling conditions. The early beginnings of the independent living movement can probably also be traced to Warm Springs.

Physical medicine continues to develop through national professional organizations and becomes established in a few academic medical centers. Unfortunately, the lessons learned from the establishment of military rehabilitation programs does not advance the field or lead to major civilian program development.
1930s
The decade is marked by the election of a progressive president, Franklin Delano Roosevelt, the Great Depression, and the country’s eventual entry into World War II, with an end to the economic depression and more advances for the medical specialty of PM&R.

Sulfa drugs are developed in the late 30s. Krusen and other early pioneers lay the foundation for the establishment of physical medicine as a medical specialty. George Deaver and Howard Rusk do the same for rehabilitation medicine. These pioneers also establish the organization that will become the American Academy of Physical Medicine and Rehabilitation.
1940s
This decade is marked by the consequences of yet another world war, and the need for PM&R becomes even more obvious than after the first world war. The field can now advance further with funding for clinical and research programs.

- The passage of legislation, and Krusen publishes on physical medicine, comprehensive discrimination, the American Society of Physical Medicine.

- Sir Ludwig Guttmann, a neurosurgeon, begins treating patients at Stoke Mandeville Spinal Injuries Unit in England, making sports a part of the rehabilitation programs for patients with spinal cord injuries.

- Rusk proposes rehabilitation centers in the Army Air Force hospitals and is appointed to develop them.

- Financier Bernard Baruch establishes the Barach Committee, which recommends more PM&R training and research programs; 10 departments are established and 57 physiatrists are trained. Rusk proposes rehabilitation centers in the Army Air Force hospitals and is appointed to develop them.

- The first mass production of penicillin is used to treat Allied troops.

- President Truman invites Rusk to the Potsdam Conference where he meets with General Omar Bradley to discuss the reorganization of the VA Hospital System. Rusk and Krusen consult with Paul Magnuson and establish rehabilitation services in the VA Hospital systems.

- Congress passes Public Resolution 176 establishing an annual “National Hire the Physically Handicapped Week” implemented through a Presidential Proclamation by Truman later that year.

- AMA establishes the Section on Physical Medicine and Rehabilitation

- Robert Bennett establishes the Department of Physical Medicine at Emory University. The American Society of Physical Therapy Physicians is renamed The American Society of Physical Medicine and the limit of 100 members is removed.

- Howard Rusk publishes seminal article in JAMA: “Abuse of Rest in the Treatment of Disease” and his first rehabilitation program for disabled airmen opens at the U.S. Army Air Force Convalescent Center in Pawling, New York. With assistance from Baruch, Rusk convinces President Roosevelt to order that further military rehabilitation programs are developed.

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1950s

The Korean War again highlights the need for rehabilitation services. Howard Rusk continues to be an advocate for rehabilitation medicine in both the Truman and Eisenhower administrations. At his recommendation Mary Switzer is appointed Director of Vocational Rehabilitation. She promotes funding for returning patients to work and increases funding for rehabilitation facilities, training programs, and research and emphasizes independent living as a quality of life issue. The Salk Vaccine is developed.

Howard Rusk is appointed Chair of the Health Resources Advisory Committee of the National Security Resources Board which recommends employing people with disabilities to assist at home in the war effort, replacing those in military service. This is adopted and implemented through the efforts of Mary Switzer, Director of the Office of Vocational Rehabilitation and a major supporter of rehabilitation programs and PM&R.

Social Security Amendments establish a federal-state program to aid permanently and totally disabled persons.

Korean War Begins

1950

The number of polio cases reaches almost 58,000

The American Board of Physical Medicine is renamed the ABPM&R at the urging of Howard Rusk and facilitated by the diplomacy of Frank Krusen. Later that year the American Society of Physical Medicine becomes the American Society of Physical Medicine & Rehabilitation.

Krusen publishes Physical Medicine and Rehabilitation for the Clinician.

1951

Howard Rusk is "grandfathered" as a diplomate by ABPM&R.

1952

The Residency Review Committee meets for the first time.

1954

Rusk leads the effort to establish the World Rehabilitation Fund

Vocational Rehabilitation Act expands funding for research and removes any limit on appropriations to states and guaranteed matching funds. The year 1954 is declared "Rehabilitation Year"

Salk vaccine is tested against polio

PM&R residency training funds are added to the Vocational Rehabilitation Act

1955

The American Society of PM&R is renamed the American Academy of PM&R

The first US Patent is issued for a hydraulic limb system

Social Security Disability Amendment is passed and provides disability insurance for disabled workers ages 50-64 and rehabilitation services are added to the program.

1956

The dues for membership in AAPM&R are raised for the first time from $5 to $10 per year.

Essay questions are removed from the ABPM&R written board examination.

1957

AAPM&R begins offering continuing medical education (CME) credit for educational sessions.

1958

The first US Patent is issued for a hydraulic limb system

Through the urging of Rusk and the diplomacy of Krusen the specialty broadened and the name changes to physical medicine and rehabilitation. Research in modalities and the use of lightweight plastics in orthoses advance the field. There is increasing recognition of the specialty and its leaders by national and international organizations.

1950s
1960s
The turbulent decade of the 1960s is marked by major national and international conflicts and tragedy, but also by scientific and technological advances, and landmark civil rights and health care legislation.

Federally subsidized health care is provided to people with disabilities and elderly Americans covered by the Social Security program. The definition of disability under the Social Security Disability Insurance program changes from "of long continued and indefinite duration" to "expected to last for not less than 12 months." There is funding for cancer, heart disease, and stroke. Vocational rehabilitation amendments authorize construction of rehabilitation centers, expansion of vocational rehabilitation programs, and create the National Commission on Architectural Barriers to Rehabilitation of the Handicapped.

Medicare and Medicaid are established and Vocational Rehabilitation Amendments are passed, expanding programs and construction of rehabilitation centers.

The Paralympic Games are recognized by the International Olympic Committee. The oral contraceptive pill is approved by the FDA.

The 1960s brings PM&R into the national spotlight, as rehabilitation is recognized as a model for other health care programs, and important for treatment when prevention and cure are unsuccessful. The field expands its ability to influence health policy and gains more influence in academic medicine.
The United States pulls out of Vietnam, Vice President Agnew and later President Nixon resign. Medical care is considered a right, not a privilege. The Independent Living Movement starts in Berkeley, California. Roe v Wade is upheld by the Supreme Court.

### 1970s
- **1970**
  - AAPM&R establishes the Krusen Lifetime Achievement Award and Frank Krusen is the first awardee.
- **1971**
  - AAPM&R administers the first self-assessment examinations.
- **1972**
  - Attorney Richard Verville begins providing services as the AAPM&R and ACRM representative in Washington, DC.
- **1973**
  - The AMA House of Delegates approves a resolution stating that electromyography was a clinical extension of the physician’s examination.
- **1974**
  - President Nixon signs the Rehabilitation Act and the HMO Act into law.
- **1975**
  - President Nixon resigns, amid scandal.
- **1976**
  - The AAPM&R produces the Syllabus, followed by the first Self-Assessment Examination.
- **1977**
  - Robert Bennett receives the Physician-of-the-Year Award from the President’s Committee for the Employment of the Handicapped.
- **1978**
  - National Institute of Handicap Research (later called National Institute on Disability and Rehabilitation Research) is founded. Dr Margaret Giannini is first director.
  - AAPM&R membership reaches the 1000 mark.

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Significant exercise physiology research is conducted during this decade about physiological benefits of exercise.

Graduate Medical Education National Advisory Committee reports a shortage of PM&R specialists, stimulating growth in the specialty.

International Year of Disabled Persons celebrations include ceremonies before the United Nations General Assembly. Governments world-wide are asked to promote the acceptance of people with disabilities into mainstream society with “full participation and equality”.


Rehabilitation Research is stated to be part of NIH mission.

The Physiatrist begins circulation to 2000 members of AAPM&R.

Support for development of a uniform data set grows, and the Functional Independence Measure (FIM) is widely used for rehabilitation program evaluation.

Graduate Medical Education National Advisory Committee reports a shortage of PM&R specialists, stimulating growth in the specialty.

The National Institute on Disability and Rehabilitation Research is transferred into the Department of Education, separating it from the Department of Health and Human Services (HHS).

The National Institute on Disability and Rehabilitation Research is moved to the Department of Education under the auspices of Office of Special Education. Rehabilitation research is stated to be a component of NIH research. Support for universal use of the Uniform Data Set, forerunner of the Functional Independence Measure (FIM)

Health Care Financing Administration, the precursor to CMS, establishes 60-day rehabilitation benefit without co-pay.

Technology-Related Assistance for Individuals with Disabilities Act is passed.

The Archives of PM&R publishes the “Gold Issue” in celebration of 50th Anniversary of AAPM&R.

ABPMR votes to issue only 10-year certificates beginning in 1993.

The theme of the 1987 Annual Assembly honoring the AAPM&R’s 50th Anniversary is “Access-Ability”.

AAPM&R membership triples in 10 years and reaches 3000 members.

1980s
The Cold War ends. The Berlin Wall comes down. Chernobyl nuclear disaster occurs.

The residents' physician council holds its first meeting at the AAPM&R Annual Assembly.

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The ABPM&R reports that the number of board-certified physiatrist has doubled in the previous decade and stands at 3454.

The Americans with Disabilities Act, the most sweeping disability rights legislation in US history, becomes the law. It mandates that local, state and federal governments and programs are accessible, that businesses make “reasonable accommodations” for disabled workers, and that public buildings and other areas of public life make “reasonable modifications” to ensure access.

The Institute of Medicine publishes Disability in America: Toward a National Agenda for Prevention.

The United Nations establishes December 3 as International Day of Disabled Persons.

The American Association of People with Disabilities is founded.

The UN General Assembly unanimously adopts the Standard Rules on the Equalization of Opportunities for Persons with Disabilities.

The Agency for Health Care Policy and Research publishes a clinical practice guideline on Post-Stroke Rehabilitation.

The Congressional Accountability Act requires all offices in the legislative branch to make their public services, programs, activities, and places of public accommodation accessible to members of the public who have disabilities, and establishes that an employee of Congress cannot be discriminated against in personnel actions because of a disability.

The Health Insurance Portability and Accountability Act (HIPAA) is passed.

TBI Act is passed and authorizes agencies of the US Department of Health and Human Services to conduct studies and establish innovative programs with respect to TBI.

The Academy and the American Congress enter into a separation agreement but the Physiatric Association of Spine, Sports and Occupational Rehabilitation is established as an organization within the Academy. As Frank Krusen said in a 1949, “It would be illogical for either physical medicine or rehabilitation to go its separate way.”
A decade of change and progress for AAPM&R

The 2000s were marked by significant changes for AAPM&R, including a move from downtown Chicago to Rosemont, changes in the structure of governance, the establishment of a foundation, the launch of many online resources for members, and the publication of the new official journal, *PM&R*. This decade also saw major international events that had a significant impact on the world, including terrorist attacks, wars, natural disasters, and economic downturns.

The World Health Assembly endorses the WHO’s International Classification of Functioning, Disability, and Health (ICF)

The CMS Inpatient Rehabilitation Facilities Prospective Payment System (PPS) becomes effective

The VA creates 4 Polytrauma Rehabilitation Centers

AAPM&R is a founding member of the Disability and Rehabilitation Research Coalition with the goal of elevating the NCMRR within NIH to independent status, either as a free-standing NIH Center or as an Institute, and to enhance disability and rehabilitation research across a number of federal agencies.

Neuromuscular Medicine is approved as a subspecialty by ABMS

Hospice and palliative medicine are recognized as a subspecialty by 10 medical boards including AAPM&R

Sports Medicine and Hospice and Palliative Medicine are approved as subspecialties by ABMS

The Institute of Medicine publishes *The Future of Disability in America*

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The Americans with Disabilities Act Amendments Act becomes law, and it broadens the scope of who is considered disabled under the law.

The TBI Act is reauthorized

The PASSOR Legacy Award and Lectureship is established to recognize an individual who in mid-career has advanced musculoskeletal physiatry through clinical care, education, service or scholarship

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Academy members begin receiving *AAPM&R Connection*, a biweekly e-newsletter.

AAPM&R begins publishing *PM&R*, “the purple journal”

Merriam-Webster announces that the word “physiatry” will be added to the 11th edition, along with 99 other new words. The word is defined as a synonym for “physical medicine and rehabilitation”.

AAPM&R introduces the Member Council model and Community Networks and restructures the Board of Governors

AAPM&R relocates from downtown Chicago to Rosemont, Illinois

AAPM&R asks the AMA to support the inclusion of “patient function” and “improvement of function” as key outcomes of health care reform, and 10 other organizations are co-sponsors.

AAPM&R impacts health care reform legislation through the inclusion of “rehabilitation and habilitation services” as categories in the basic benefits package

Richard Verville authors the first major history of the field, *War, Politics, and Philanthropy: The History of Rehabilitation Medicine*, published by University Press of America
2010s
The federal government enacts landmark health care legislation and the Supreme Court upholds the legislation. The Supreme Court rules the Defense of Marriage Act unconstitutional, and legally-married same-sex couples can receive Social Security, veterans’ benefits, health insurance and retirement savings. The Arab Spring brings turmoil to the Middle East. Mass shootings create tragedies across the country, including Tucson, Denver, Newtown, and Boston. Natural disasters affect every region of the US and economic uncertainty continues.

Patient Protection and Affordable Care Act is signed into law and includes provisions to expanding coverage, lower costs, and improve the health care system.

CDC announces formation of Disability and Health Work Group to advance the health of people with disabilities to focus on incorporating disability status into CDC surveys, showcasing best practices, and ensuring relevant issues for people with disabilities are reflected in CDC programs and policies.

HHS establishes the Center of Excellence in Research on Disability Services, Care Coordination, and Integration within the Office of Disability.

AAPM&R sponsors an oral history project—Playback/PM&R

AAPM&R introduces PhyzForum, an online peer-networking tool

PM&R Knowledge Now is indexed with the National Library of Medicine (Index Medicus)

The Academy launches PM&R Knowledge Now, an online resource for members

Brain injury medicine is recognized as a subspecialty by the ABMS. ABPM&R co-sponsors the proposal with the American Board of Psychiatry and Neurology.

New ADA rules are enacted and expand accessibility requirements for recreational facilities such as swimming pools, golf courses, exercise clubs, and boating facilities. They set standards for the use of wheelchairs and other mobility devices, and service animals.

The WHO releases the World Report on Disability

The National Institute of Child Health and Human Development announces the creation of a Blue Ribbon Panel, with three Academy members participating: John Chae, MD (Co-Chair), Naomi Lynn Gerber, MD, and Walter R. Frontera, MD, PhD

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AAPM&R works with the Center for Medicare Advocacy to win the settlement in the Jimmo vs. Sebelius lawsuit and end the practice of requiring that patients are likely to improve (“the improvement standard”) before Medicare will pay for therapy or skilled nursing services. Under the terms of the settlement, Medicare is required to rewrite its provisions and policy manual

The Board of Governors, the Academy staff and volunteers increase the wealth of resources for members in their practices and for maintenance of certification. And the decade is only beginning...
MedStar National Rehabilitation Network

Congratulations to the American Academy of Physical Medicine on 75 Years of Fostering Excellence in Rehabilitation Medicine

MedStarNRH.org

Knowledge and Compassion
Focused on You

RUSK REHABILITATION

Congratulations to the American Academy of Physical Medicine and Rehabilitation on this remarkable milestone achievement. Rusk is proud to share in the long and illustrious history of PM&R with an organization that has done so much for our field.

Rusk is #1 in NY and top 10 in the country in U.S. News & World Report’s first “Best Hospitals” ratings

Rusk celebrates its 25th consecutive year as #1 in NY and top 10 in the country

Institute of Physical Medicine & Rehabilitation founded by Howard & Rusk, in affiliation with NYU College of Medicine

1934

1989

2012

2013

65 Years of Getting Better

Rusk completes a expansion to new, state-of-the-art facilities in multiple locations throughout NYU Langone Medical Center

NYULMC.ORG/RUSK

Since 1979 Cadwell has supported PM&R physicians.

Congratulations to AAPM&R on 75 years serving this important profession.

www.cadwell.com

Kaiser Permanente congratulates the AAPM&R on their 75th Anniversary!

At Kaiser Permanente, we applaud the ongoing commitment the American Academy of Physical Medicine and Rehabilitation has to enhancing the quality of life of patients with physical impairments or disabilities. Similarly, Kaiser Permanente has a rich 69-year tradition of providing quality medical care to members throughout the country. Through our leadership in the use of advanced technology, our creation of innovative solutions and our influence on health policy and reform efforts, we are shaping the future of healthcare in the nation.

We encourage you to stop by our booth at the AAPM&R Job Fair on Wednesday, October 2, 2013 from 4pm-8pm so you can share your story and learn more about how Physicians with Kaiser Permanente continue to transform the specialty. Or visit our Website: http://physiciancareers.kp.org/rcal.

The Permanente Medical Group, Inc.
1920 Harrison Street, 7th Floor
Oakland, CA 94612
(800) 773-4812

The Permanente Medical Group, Inc.
Sharing a Founder and a Commitment to Physical Medicine and Rehabilitation

Dr Frank Krusen
American Board of Physical Medicine and Rehabilitation

American Academy of Physical Medicine and Rehabilitation

Congratulations to the AAPM&R on 75 years of dedicated service to its members and the field of PM&R

Mayo Clinic
Rehabilitation is to be a master word in medicine
— W. J. Mayo M.D., M.S.S., CO-FOUNDER, MAYO CLINIC

Congratulation to the AAPM&R on Celebrating 75 Years

Mayo Clinic is honored to serve The American Academy of Physical Medicine & Rehabilitation

Kurtis M. Hoppe, M.D.
President-Elect AAPM&R

Johns Hopkins Physical Medicine and Rehabilitation
Congratulates AAPM&R on its 75th Anniversary

Johns Hopkins proudly supports and congratulates AAPM&R on 75 successful years of serving physical medicine & rehabilitation physicians and their patients. Together, Johns Hopkins and AAPM&R are taking physiatry to the forefront of patient care.

DISCOVER WHAT’S POSSIBLE.

hopkinsmedicine.org/pmr

Saluting a 75-year commitment to physical medicine and rehabilitation.

UPMC is proud to congratulate AAPM&R on 75 years of supporting physicians and advancing the specialty of physical medicine and rehabilitation. We share your goal of moving the specialty forward through our ongoing commitment to research, training, and clinical care.

UPMC Rehabilitation Institute

Affiliated with the University of Pittsburgh School of Medicine, UPMC is ranked among the nation’s best hospitals by U.S. News & World Report.
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Georgia Warm Springs Foundation
Kaiser Permanente Heritage Resources
Ken Stein, photographer
LBJ Presidential Library
National Institutes of Health
National Library of Medicine
The Mayo Clinic
The Paralympics
Rusk Institute/New York University
The State Historical Society of Missouri
Temple University
Texas Orthopedics, Sports, and Rehabilitation Associates
Tompkins-McCaw Library/Virginia Commonwealth University
University of Missouri-Columbia

The Department of Physical Medicine and Rehabilitation at Sinai Hospital of Baltimore congratulates
Leon Reinstein, M.D., for being awarded the 2013 Frank H. Krusen, M.D., Lifetime Achievement Award
from the American Academy of Physical Medicine and Rehabilitation and thanks him for his many years of service.

In 2005, we changed rehabilitation forever.

We invented ZeroG®
This advanced overground gait and balance training system has provided patients the opportunity to safely practice stairs, walking over smooth surfaces, sit to stand, getting off the ground, and other therapeutic activities.

In 2008, the first patient used ZeroG in therapy.
In 2010, we introduced ZeroG-Lite and ZeroG-Passive.
Over the years, thousands of patients have used the ZeroG technology in therapy.
At Aretech, we continue to develop advanced rehabilitation technologies through research and innovation. We look forward to sharing new technologies with the Academy.

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Congratulations
to the Academy
on 75 years!