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Jerome M. Schneck M.D. a

a St. Vincent’s Hospital and Medical Center of New York, USA


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SPECIAL ARTICLE

A History of the Founding of the American Board of Medical Hypnosis

JEROME M. SCHNECK
St. Vincent's Hospital and Medical Center of New York

The American Board of Medical Hypnosis was organized under the auspices of The Society for Clinical and Experimental Hypnosis in 1958. The major steps in the development of the Board from 1958 to 1960, the Statement of Policy, and the Report of Officers for 1959-1960 are described.

In 1958 the American Board of Clinical Hypnosis was organized under the auspices of The Society for Clinical and Experimental Hypnosis. It was intended that this Board serve as a coordinating unit for specialty boards in medicine, psychology, and dentistry. The basic purpose was, as in the case of boards in other scientific and clinical areas, to certify individuals with backgrounds qualifying them to function within established standards and to whom persons requiring assistance for problems might apply, knowing that appropriate background, training or experience had been met.

Because of my previous association with The Society for Clinical and Experimental Hypnosis as founder (1949) and first president (1949-56) and because of a continuing close working relationship with my successor, Dr. Bernard B. Raginsky, I was invited to organize and head up the American Board of Medical Hypnosis. I, in turn, requested that Dr. Raginsky serve as Secretary-Treasurer, and my wife, Shirley, (who was Executive Secretary of the Society for Clinical and Experimental Hypnosis), volunteered to cope with the myriad of secretarial duties. With the "staff" intact — I and my wife in New York City and Dr. Raginsky in Montreal — notices about the Board were sent to various medical and scientific journals and Dr. Raginsky and I began to review the applicants for diplomate status.

For the most part, the standards for diplomate status of the American Board of Medical Hypnosis are similar to those required by the American Medical Specialty Boards affiliated with the American Medical Association. Additional requirements, as well as exceptions, are specifically related to the field of hypnosis. These details are described in the following excerpts from the Statement of Policy for the American Board of Medical Hypnosis, which was submitted to The Society for Clinical and Experimental Hypnosis in October, 1958.

The American Board of Medical Hypnosis was established in 1958. It is sponsored by The Soci-
ety for Clinical and Experimental Hypnosis and is affiliated with the Institute for Research in Hypnosis, Inc.

This Board shall be developed, insofar as possible, along the lines of other recognized American Medical Specialty Boards, with allowance for differences in training measures and related technical considerations. The Council on Medical Education and Hospitals of the American Medical Association and the Advisory Board of Medical Specialties will be called upon for advice and guidance.

The purpose of the Board is to certify trained or experienced physicians in medical hypnosis with consideration for their basic training in the several medical specialties and areas of practice of which medical hypnosis shall constitute one aspect. Certification shall be based on examinations as deemed appropriate and necessary by the Board, in addition to training and experience.

The structure of the Board, its method of operation, and its examinations or other requirements shall be subject to modification during its growth in its determination to maintain the highest ideals and standards of the medical profession to distinguish between trained and untrained practitioners.

Physicians certified by the Board shall have status as Diplomates. Proper mention of such status shall be confined to situations deemed acceptable and ethical, in accordance with traditions established by other American Medical Specialty Boards.

Diplomates of the Board shall be expected to abide by this Policy Statement and its modifications, and by any other regulations set by the Board.

Diplomates shall be divided into three groups: 

*Group A* shall consist of physicians certified soon after the establishment of the Board. Such certification shall be on the basis of recognized and accepted experience in medical hypnosis, plus existing certification by another recognized American Medical Specialty Board, or certification as a Specialist by the Royal College of Physicians and Surgeons of Canada.

*Group B* shall consist of physicians with acceptable documented experience in medical hypnosis for a period of seven years. Such experience shall be acceptable without examination only until December 31st, 1959. Diplomate status in another recognized American Medical Specialty Board is not prerequisite.

*Group C* shall consist of physicians certified on successful completion of examinations and presentations of credentials acceptable to the Board. Such credentials shall include Diplomate status in another recognized American Medical Specialty Board.

*General Practitioners* — A general physician may become a Diplomate by supplying seven years of documented experience with medical hypnosis, and in addition he must be an Active Member of the American Academy of General Practice.

After December 31st, 1959, all applicants in all categories must take examinations.

This Policy Statement may be amended by the Board, with additions and alterations. Such amendments shall be numerically appended hereto and Diplomates shall be expected to abide by them.

Amendments

1. Diplomates are expected to practice medical hypnosis as part of their over-all practice of medicine, in accordance with their basic specialty training for which they have been certified by other American Medical Specialty Boards.

2. Diplomates are required to refrain from demonstrating hypnotic techniques to non-professional audiences.

3. The Board shall have a President and a Secretary-Treasurer. Duties of the latter may be divided, if necessary, between two officers, a Secretary and Treasurer. The aforementioned officers may be assisted by a Vice-President and additional officers, if deemed necessary. A varying number of Board members-at-large may be appointed by the officers and they shall be known as Directors of the Board.

4. Officers of the Board shall hold such office only if they are already Full Members or Fellows of The Society for Clinical and Experimental Hypnosis.

5. Directors of the Board may be appointed only if they are Full Members or Fellows of The Society for Clinical and Experimental Hypnosis, unless they are selected by special arrangement with the American Medical Association without having had prior experience in the practice of medical hypnosis.

The American Board of Medical Hypnosis would be atypical of many other medical specialty boards in that it would not require a background of training through hospital residencies. This was not considered an obstacle in that other organizations, such as the American Board of Nutrition and the American Board of Legal Medicine, had achieved appropriate status while also being atypical.

Various officers of the American Medi-
cal Association who were contacted at this time concerning the establishment of the Board were very cooperative and helpful. A Board in any specialty does not become affiliated with the American Medical Association simply because such a field of medical practice exists. A Board must be fully organized before action can be taken by the appropriate representatives of the American Medical Association.

Shortly after the Statement of Policy was submitted, a representative of the Psychology Board asked for permission to use it as a guide in the setting up of that Board, and I believe a representative of the Dentistry Board made a similar request. Thus, formulations of standards were essentially in agreement, following the pattern set by the Statement of Policy of the American Board of Medical Hypnosis.

Not surprisingly, the establishment of the American Board of Medical Hypnosis met with some opposition. Allegations were made that the Board was formed by private individuals and that hypnosis, by implication, was to be considered a specialty in itself. Although we felt that the Statement of Policy, which had also been sent to officials of the American Medical Association, adequately answered these and other questions of intent and procedure, I specifically addressed these issues in the correspondence section of The Journal of the American Medical Association (Schneck, 1959).

By March, 1960, the following individuals had been appointed Directors of the American Board of Medical Hypnosis: Drs. Albert M. Betcher, Jacob H. Conn, Arthur Shapiro, Abraham Weinberg, Howard W. Marcus (liaison with the American Board of Dental Hypnosis), and M. Erik Wright (liaison with the American Board of Examiners in Psychological Hypnosis).

The Directors decided that it was advisable to extend opportunities for certification, without examination, beyond the December 31, 1959, deadline. This was noted in the "Report of Officers for 1959–1960," which was prepared in August for presentation at the Fall meeting of The Society for Clinical and Experimental Hypnosis. This report also noted:

One of the tasks of the new officers of the Board will be to decide on issues relating to examinations and to make arrangements for them.

Having established the basic structure and functioning of this Board we submitted our resignations to take effect from June 1st, 1960. There were no appointments of immediate successors so we have continued to serve in our regular capacities pending replacement at the Fall Meeting of The Society for Clinical and Experimental Hypnosis.

On July 3rd, 1959, there were thirty-two certified diplomates. Since then we have experienced considerable growth and more widespread recognition and acceptance.

As of today (1960) 103 physicians have been certified since the formation of this Board. A breakdown as to specialties is as follows:

- General Practice: 27
- General Practice (Surgery): 1
- Psychiatry: 12
- Psychiatry and Neurology: 12
- Obstetrics and Gynecology: 12
- Internal Medicine: 8
- Anesthesiology: 6
- Surgery: 5
- Otolaryngology: 2
- Pediatrics: 2
- Endocrinology: 2
- Dermatology and Syphilology: 2
- Dermatology: 1
- Dental Medicine: 1
- Physical Medicine: 1
- Physical Medicine and Rehabilitation: 1
- Allergy: 1
- Plastic Surgery: 1
- Radiology: 1
- Urology: 1
- Preventive Medicine: 1
- Traumatic Surgery: 1
- Proctology: 1

Only 102 diplomates are listed because of one resignation.

Our tenure as founding officers had extended well beyond that originally intended...
because of the reluctance of some potential candidates to take on additional commitments or, in some cases, a reluctance to be so closely identified with a new organization and all of its accompanying “growing pains.” In any case, it was finally possible to bring our tenure to a close, and Dr. Ragnisky and I relinquished our positions in the Fall of 1960 when the annual meeting of The Society for Clinical and Experimental Hypnosis was held.

REFERENCES