

*IN MEMORIAM*  
*MICHAEL POZEN*



*MICHAEL POZEN, M.D., Sc.D.*

Born April 4, 1945 Died June 4, 1981

Boston, Massachusetts

## *In Memoriam*

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April 4, 1945—June 4, 1981

The relatively young scientific field of health services research, whose practitioners are still struggling to establish legitimacy within the vast domain of health care, owes much to Michael Pozen. Indeed, Michael must be counted as one of the founders of this new speciality in that his brief but incredibly productive career began as the field of health services research took form and emerged as a distinct career speciality. His very significant contributions to health care can be assessed from two perspectives.

The most visible perspective upon Michael Pozen's professional work can be obtained from a review of his research as reported in his published articles and presented papers. Michael clearly established himself as a creative and resourceful scholar and researcher who had a particular interest in improving the design and delivery of emergency medical services as well as the clinical aspects of emergency medical care. Through his research he has increased our understanding of the effectiveness of various prehospital and hospital-based treatment techniques for cardiac emergencies, of approaches to training emergency care personnel and of the design and management of prehospital and hospital-based emergency care systems.

While Michael Pozen's published research and scholarly lectures have left a notable imprint upon the field of health services research, perhaps his most significant contribution has come from less tangible personal qualities. That is, Michael set standards for health care

research which were exemplary in several areas. His formal education to the doctoral level in both Medicine and Public Health left him unusually well prepared intellectually to address the fundamental and complex methodological and policy issues with which the emerging speciality of health services research is still struggling. In a field which by its nature requires interdisciplinary effort, Michael had achieved through his formal education the basic knowledge required to effectively direct, communicate and collaborate with professionals from a wide range of medical, behavioral and engineering/management backgrounds. The conceptual framework which he imposed upon his work was amazing in its scope and depth and as he interacted with those of us who were involved in health care research, he communicated by example several important values. One of these values was the absolute necessity of carefully integrating health care system components through conscious design. He illustrated this principle through his work in building and evaluating a comprehensive system for treating cardiac patients. The system he designed spanned the prehospital, hospital and after-care phases of treatment and rehabilitation and encompassed what was then known about the behavioral, clinical and organizational aspects of cardiac patient care.

A second value which Michael communicated to his colleagues, through constant example, was a quality which might be called creative enthusiasm in constantly searching for techniques and approaches to deal with complex methodological and policy issues. He seemed never to back away from a research problem because it was too methodologically complex or too large; rather he was attracted to issues and problems when they were difficult and thus he helped to define the domain of the possible for health services research.

Michael Pozen's brilliance, enthusiasm and leadership qualities have left their mark upon those of us who knew him. More importantly, he can no doubt take credit for significantly shaping a new health speciality which shows great promise for improving health care.

*Edmund M. Ricci*  
*Pittsburgh, USA*  
*January, 1983*