Barnes Approaches United Fund Goal As Campaign Ends

The 1971 United Fund Drive is drawing to a close and returns to date indicate a highly-successful effort. At The Bulletin deadline, contributions reached $51,834 which is 92.5 per cent of this year's United Fund quota of $56,000. Last year Barnes Hospital raised $55,356.

Thomas C. Winston, associate director and this year's United Fund chairman at the hospital, said that although the solicitation efforts peaked in mid-October, several hospital sections were still in the process of tallying returns and making last-minute solicitations.

"These late contributions should enable us to successfully reach the goal as we have done in each of the past three years," Winston said.

On October 26, with returns still coming in, nursing service, the division with the most employees, has turned in $17,000 or 75 per cent of its goal of $23,272.

The first departments to reach their division goals were personnel, purchasing, stores, forms control, print shop, methods, data processing, cashier's office, under the direction of John L. Warmbrodt, deputy director. Mr. Warmbrodt's section surpassed the quota on October 6. On October 12, Controller Robert McAuliffe's departments of budgeting, general accounting, internal audit, cost-accounting, patients' accounts and fund office passed the goal.

Other departments that were among the first to reach their quotas were those under the supervision of Robert E. Frank, director; Joseph Greco, associate director, and Dillon Trulove, assistant director.

Seattle Medical Professor to Present William H. Olmsted Lecture at Barnes

Dr. Robert H. Williams, professor of medicine and head of the division of endocrinology and metabolism at the University of Washington School of Medicine, Seattle, Washington, will be the lecturer at the seventh annual William H. Olmsted-Barnes Hospital lecture at 8 p.m. on Wednesday, November 11, in Clopton Auditorium.

The subject of Dr. Williams' talk will be "Some Future Major Guides in Medicine." A graduate of Johns Hopkins medical school, he interned at Boston City Hospital. Later he was a resident fellow in endocrinology at Massachusetts General Hospital. Dr. Williams was also an instructor in the department of medicine at Harvard from 1940-48.

The annual Olmsted-Barnes lectures were founded in honor of Dr. William H. Olmsted, who is an assistant physician emeritus on the Barnes staff, by his former students. Dr. Olmsted, who has practiced medicine for 50 years in St. Louis, was the first to direct a series of lectures at Barnes on the use of insulin in the treatment of diabetes in 1923.

Hospital to Receive $3 Million Bequest From Peters' Estate

Barnes Hospital will ultimately receive more than $3 million, based on the present market value of securities from the estate of the late Oliver F. Peters, 81, a retired vice president of the old International Shoe Company, who died May 25 at Barnes Hospital where he had been a patient for two weeks. He had been treated several times at the hospital in recent years.

According to Mr. Peters' will, the bequest slated for Barnes Hospital is to remain intact in a trust fund until five years after the death of his sister, Mrs. Ella Peters Lauman, 89, who survives.

Mr. Peters' will states that Barnes Hospital should use most of the bequest to erect new buildings or wings as memorials to Mr. Peters' parents, Mr. and Mrs. Henry W. Peters.

The late Henry W. Peters was president of the Peters Shoe Co., from its formation until it merged with the Roberts, Johnson & Rand Shoe Co. to form International Shoe Co. in 1911. The company is now Interco Inc.

Mr. Peters was a vice president of the firm from 1931 to 1962 and a director from 1928 until his retirement in 1965.
'Watch-Woman', Added to Safety, Security Force at Barnes

Miss Catherine Florence, 22, is one of the first "watch-women" ever employed by the Barnes Hospital safety and security department. She began her new duties here in mid-September. Pro and con "women's liberation," almost everyone who knows her will agree that Miss Florence is quite capable of handling herself in almost any situation that involves physical violence.

Miss Florence is knowledgeable and proficient in the self-defense tactics of jujitsu, karate and severta, a form of French feet-fighting, that can render a would-be assailant helpless in the blink of an eye. Miss Florence's interest in law enforcement stems from the fact that her father was once the warden at the Missouri State Penitentiary at Jefferson City and her brother trains narcotics agents for the Department of Justice.

Miss Florence said, "Until a few years ago law enforcement was strictly a man's world, but today there are many opportunities, especially in advanced criminology and working with juveniles, if women have the necessary education and qualifications.

"Women who plan to enter this field should have twice the amount of education to compensate for their lack of physical strength. In law enforcement a woman's emotions are put to a stern test, especially in homicide cases."

Miss Florence plans to work toward completion of a bachelor of science degree in criminology by attending night school at the University of Missouri at Normandy.

Part of her education—learning the tricks of self-defense—did not come easy for the 5' 8" brunette who weighs 125 lbs. She suffered a broken finger and collar-bone in a self-defense course that was held at one of the area's junior colleges. "It was composed primarily of policemen, although it was open to college students. I was the only woman to 'survive' both semesters," said Miss Florence, who, on several occasions, employed judo to flip a 6' 5" classmate to the mat during practice sessions.

"It is simply a matter of timing and balance. I feel I can cope effectively with a man wielding a club or knife, but I'm not about to try to overpower a man with a gun—that's a different matter," she said.

Dressed in a uniform or plain clothes, Miss Florence will perform many of the same duties that are handled by everyone on the hospital's safety and security force, such as patrolling, taking finger-prints and identification photographs.

No special provisions have been made for her just because she's a woman. And that's the way Miss Florence wants it.

New Barnes Physician Served as Urologist on Moon Trip

High on today's list of best-selling paperbacks is a science-fiction spine-tingler, The Andromeda Strain, written by Michael Crichton. The book outlines how an unmanned research satellite, on an outer-space flight, returns to earth mysteriously and lethally contaminated with an unknown, rare micro-organism that threatens to destroy a foreign nature.

It's similar to a patient who is bed-ridden for many weeks. The lack of any gravitational force affects the calcium supply and could increase the chances for the formation of kidney stones, especially on flights lasting 180 days to a year."

Another area of urological research that interests Dr. Bucy is need to successfully develop a bladder-pace-maker for paralyzed patients whose nerves are damaged. The bladder pace-maker is similar to the cardiac pace-maker in that a battery-powered stimulator is implanted in the patient's bladder, and, at the desired interval, every two to four hours, the patient can push a button and trigger the mechanism, which, in turn stimulates the bladder into performing its normal function.

"Until now, we have not been successful— the bladder pace-maker works well over short periods of time, but it needs refinement to be suitable for lasting effectiveness. I hope to be able to continue research in this area," Dr. Bucy said.

Dr. Bucy came to Barnes at the invitation of Dr. Saul Boyarsky, who also came here in July as the new urologic surgeon in chief, in charge of the urology division. Dr. Bucy said, "Dr. Boyarsky and I have similar interests, particularly in the long-range establishment of a rehabilitation center for victims of spinal cord injuries or paraplegics. Many times these patients survive the primary injury, but during their convalescence, they contact urinary or kidney illnesses which may eventually lead to their demise."

Dr. Bucy is organizing and training nurses at Barnes in urological concepts and techniques so that eventually a specialized team of nurses would evolve with a greater knowledge of urinary problems.
Barnes Hospital is one of Several Institutions Participating In Disaster Radio-Communications Network in St. Louis Area

Implementation of a hospital disaster radio network, involving Barnes and all hospitals in the St. Louis area, in addition to three hospitals in nearby Illinois, St. Charles and Quincy should be completed within a few weeks, according to a spokesman for the company that is installing the electronic communication equipment.

The St. Louis and St. Louis County Medical Societies urged an investigation of the need of a vast radio system to replace or supplement existing telephone communications in 1968 by the Disaster Planning Committee of the St. Louis Metropolitan Hospital Association. Need for this was illustrated by a communication breakdown that occurred shortly after the 1967 tornado that struck St. Louis, injuring 150 persons. Telephone lines were downed, and switchboards became overloaded.

Seeking to prevent a recurrence of a communication breakdown during future disasters, the planning committee recommended that a radio communication should be installed. The radio system is designed to provide coordinated communication from the disaster site and between affected hospitals.

Two Barnes surgeons, Drs. Allen Klippel and Marshall Conrad, have also been instrumental in helping the program gain support. The men are co-chairmen of a joint committee of the two St. Louis medical societies which seek ways to improve the emergency care of persons injured in disasters.

Speaking on the communication breakdown that occurred in the aftermath of the 1967 tornado, Dr. Conrad said: “There were a number of reasons why the system failed. Seeking to prevent a recurrence of a communication breakdown during future disasters, the planning committee recommended that a radio communication should be installed. The radio system is designed to provide coordinated communication from the disaster site and between affected hospitals.

Barnes Director Named to Post of Regional Medical Program

Robert E. Frank, director of Barnes Hospital, was named chairman of the Advisory Council for Missouri Regional Medical Program at a recent meeting in Columbia. Mr. Frank was elected by the council after Nathan J. Stark, chairman since 1966, completed his term of office.

Dr. Walter Tillman, a Springfield anesthesiologist, will continue to serve as vice chairman.

Members of the 12-member MoRMP Advisory Council are appointed by the governor for three-year terms. The council establishes policy for the planning and operation of MoRMP and reviews individual projects to ascertain that they support the MoRMP goal of speeding the delivery of modern medical technology to the bedside of heart, cancer and stroke patients in Missouri.

Mr. Frank is currently a member of the Board of Trustees for Blue Cross Hospital Service, and assistant professor in Hospital Administration at Washington University, St. Louis. He is vice president of the Metropolitan Hospital Association, St. Louis, and chairman of the Bi-State RMP Committee on Health Care Delivery. He holds an M.A. degree in Hospital Administration from St. Louis University.

Mr. Frank has been a member of the MoRMP Advisory Council since 1967.

Barnes assistant surgeons, Dr. Marshall Conrad, left, and Dr. Allen Klippel, have actively supported efforts to establish the disaster communications radio network that is being established throughout the metropolitan area.

First, there was no centralization of information. No one knew the total number of injured, where these people were located, or the extent of their injuries.

“Secondly, almost all of the injured were taken to the nearest hospital without giving that institution any advance notice. As a result of the understandable oversight, the hospital’s emergency room was not adequately prepared to treat the many emergency patients that were brought in at one time. The disaster plan functioned well in spite of no communication between the site of the disaster and the affected hospital.

Funeral Rites Held For Two Employes

Two Barnes Hospital employees, Kenneth Anderson, 50, a custodian, and Mrs. Florence Ferguson, 64, a chief technician in central service, in charge of the wash room, died recently as patients in the hospital.

Mr. Anderson died at 10:40 p.m. October 22 in the emergency room, of apparent multiple injuries sustained earlier when he was struck by a car while he was trying to catch a bus on Euclid Avenue. An inquest was scheduled to determine the exact cause of death. Mr. Anderson had just completed his work shift at Barnes when the accident occurred. He had been employed at Barnes Hospital for about two years.

The other employee, Mrs. Florence Ferguson, died suddenly, at 3 a.m. October 22 in the coronary care unit. She reportedly became ill while at work and was given emergency treatment at 3 p.m. October 21 at the hospital. Mrs. Anderson was then admitted to the coronary care unit where she died. She had been employed at Barnes Hospital for eight years.

To make matters worse, one hospital’s telephone switchboard became jammed with the great influx of calls and all vital communications were virtually halted.

“The sad part of the situation was that another hospital was located only a mile away, and only five victims were taken there.

Robert E. Frank, director of Barnes Hospital and newly-elected chairman of the Advisory Council for the Missouri Regional Medical Program, center, accepts a token gavel from Nathan Stark, who completed a four-year term as the council’s chairman, left, during a recent meeting in Columbia. At right is Arthur Rikli, MoRMP coordinator.
The patient was brought to the Barnes emergency room by the police, suffering from hallucinations. He was moody and belligerent, and admitted to Renard for intensive treatment. The cause of his problem? Glue-sniffing. Fortunately, this boy later was able to rejoin his family, with no permanent brain damage. He was lucky. He was only 15 years old. Drug abuse has become an ever-increasing problem throughout the U.S. Many Barnes staff members are especially aware of the increasing dangers; they see the results of drug use in the patients brought to the hospital for treatment.

Dr. Goodwin discusses marijuana: "Generally speaking, the drug affects consecutive thinking or a person's ability to carry thought patterns to a conclusion. The drug also mildly affects co-ordination and a person's short-term memory."

Drug Abuse...

"Drug abuse cannot be compared to alcohol abuse because, at present, it is unknown what proportion of the drug users in our society would abuse drugs, for example, marijuana, if they were legalized. Of those who use alcohol in the United States, perhaps 5 to 10 per cent abuse alcohol to the extent of having serious problems from doing so," said Barnes psychiatrist Dr. Donald W. Goodwin, who with other hospital psychiatrists, is in the process of studying the effects of marijuana, which includes experiments with animals. Dr. Goodwin said, "The reasons behind the drug problems are complex and varied, depending upon each individual. Drugs are thought to be a symbol of revolt or anti-traditional, anti-establishment; drugs, like alcohol, simply make some people feel better; drugs relieve social and mental pressures; drugs are a source of temporary relief from psychiatric problems; drugs are used to supposedly enhance a person's self-image — drugs are said to be taken by 'the beautiful people' of our society, like those individuals depicted by many of our cinema and stage theatrical presentations."

Miss Patricia Dillow, a nurse on 2418, has treated many drug patients. She says that "rejection" is the reason why many of these patients turn to drugs. "Drug patients tell us that their families have rejected them or that pressure to attain certain goals have caused them to seek relief with drugs. One patient who had injected 'speed,' (methedrine) went into hallucinations on our medical floor, throwing objects and yelling: 'Look at the pretty boats.'"

Restraining and transporting the drug abuser, who is undergoing treatment in the hospital, is one of the tasks performed by the orderlies. Pictured are chief orderly Ezell Mallet and orderly Larry Houston, demonstrating how they have handled drug addicts who come through the emergency room. Posed as an addict is a Barnes employee.

Barbituates...

"Barbituates, sleeping pills, phenobarbital, aspirin, even insulin, are the most common drugs that people take who are attempting suicide. Once a patient who has taken an overdose of drugs is admitted to the medical floor for treatment, his blood pressure may be dangerously high or low. Upon awakening from his initial coma, he may experience tremors or he may be combative and need restraining. The 'true addict' will scream for a 'fix.' Drug patients usually require the full-time attention of at least one medically-trained person." Mrs. Norma McWilliams, 20, a telephone operator in dispatch, knows first-hand what drugs can do because, while working as a dispatch messenger, she once helped transport a 15-year-old girl, who was unconscious on a stretcher, to floor 9100 for treatment. Mrs. McWilliams said, "The girl had taken an overdose of pills. Attempts were made to pump the patient's stomach. I felt sorry for the girl and her family. After seeing the harmful effects of drugs, I know that I would never try them."

Mrs. Jacquelyn Sowell is a head nurse on 6 Renard where acute cases of drug abuse are treated. Usually most patients spend only one week in the acute section and then are transferred to other floors in Renard, depending upon their condition. Mrs. Sowell noted that one drug abuser has not responded to prolonged treatment and after three months he showed no real improvement. "He took LSD on August 31 but his movements are still retarded; he is suspicious of people; and he becomes disoriented to the point that he cannot recognize members of the medical staff." Mrs. Sowell, who has been a nurse for 4½ years, said that there seems to be a greater influx of younger drug abusers during recent months.
Marijuana...

"Marijuana is being investigated like all other drugs that are released to the market for public consumption. It is conceivable that marijuana may someday be a legal drug. Doctors prescribed it until about 30-40 years ago," said Dr. Goodwin, during a recent discussion on drugs. "Some of the conclusions reached by investigators are: strong marijuana definitely produces acute psychotic reactions in some individuals which resemble the confusional-hallucinatory states produced by LSD and a variety of other so-called hallucinogens; and, secondly, most people who use marijuana regularly, also use a variety of other drugs. All researchers are faced with similar problems, trying to measure the effects of a single dose, the chemical changes that occur in the drug user and continuing drug use over an extended period of time. Virtually all of the counties that have the longest and most extensive experience with marijuana have made it illegal, while there are many physicians in the U.S. and Canada who are seeking to have it legalized. Oddly enough, these two countries have had extensive experience with such drugs for only a short time. Physicians and officials in the Middle East and other countries take a less casual view toward marijuana than Americans. For example, Nigeria has made it a death penalty for marijuana users. This came as the result of the recent Biafran revolt — the Nigerians believed the Biafrans were using marijuana to produce aggressive feelings. Most of the experience in the U.S. and Canada with marijuana has involved the use of very mild grades of marijuana, as compared to those countries, such as India or Morocco where the drug has been used for centuries.

Grass...

"Marijuana becomes 'grass' in literal sense, as it ages. It may lose from 50-80 per cent of its chemical potency in a year's time." Categorizing the behavioral effects of certain drugs that are associated with the drug problem, Dr. Goodwin has given these brief summations: "Generally-speaking, marijuana affects consecutive thinking or a person's ability to carry thought-patterns to a conclusion. The drug also mildly affects co-ordination and a person's short-term memory. Recent animal studies indicate that chemical compounds from marijuana remain in the body for several days which suggests the drug could be harmful if used over an extended period of time. Smoking marijuana, as a rule, does not have a harmful effect on a person's job performance. However, there have been instances, reported by researchers elsewhere, where individuals have smoked marijuana and suffered severe panic reactions. Marijuana is generally believed to have a calming, soothing effect on an individual, reducing aggression. This is not invariably true. In some instances, marijuana produces hostile, aggressive reactions in animals. The active chemical compounds in marijuana are, in themselves, known to produce psychosis, confusion and delusions like LSD. In some individuals, strong marijuana has produced a temporary psychotic state where a person is not fully responsible for his actions. Certainly, this is a period of drug experimentation, especially in young people in high school.

Heroin...

"Heroin, it appears, has not yet reached the middle-class or upper-class economic strata to a major extent. It is still found primarily in the urban black communities. Preparing for a drug trip—this is called "main-lining" because the drug abuser injects drugs directly into one of the veins in his arm. A tourniquet is applied to momentarily stop blood circulation while the injection is made.

LSD produces a temporary state of craziness; distorts sensory perception; produces extreme mental states, euphoria and depression. Except for heroin, speed (methedrine) is probably the most dangerous and unpredictable drug. It is injected by vein and it is capable of producing an intense state of euphoria. Very addictive. Often causes severe paranoid feelings. Cocaine and mescaline produce similar effects as speed, although usually milder — about the same results that individuals get from chewing cacao leaves."
bulletin

barnes

published by
barnes hospital bulletin

constance c. barton, director
john manley, associate editor

Dr. John Manley, Associate Editor

barnes hospital bulletin

st. louis, mo.

vol. xxiv. no. 10

june 1971

contribution to barnes tribute fund

in memory of:

Dr. Glover Copher; Mr. and Mrs. Allen Marshall; Mr. and Mrs. John Olin, Mr. William H. Bixby, Jr., Mr. and Mrs. Robert E. Frank, Mrs. Patricia Tilley, Mrs. Paul Starch, Barnes Hospital Maintenance Department; Mrs. Elzey Roberts, Stupp Bros. Bridge and Iron Co. Education, Phyllis Margaret Calhoun, Donald L. Barnes family, Mr. and Mrs. Sam Sachs, Mrs. Loyce B. Rutherford, Mrs. Julia R. King, Barnes and Allied Hospitals Society, Barnes Hospital Board of Trustees and Administration, Mr. Edgar F. Peters, Dr. Maurice Longway Jr., Charlotte, John and Hildegard Schwartz, Mr. and Mrs. Jackaylor, Mr. and Mrs. R. J. Richardson, Mr. and Mrs. Norman Handel, Mr. and Mrs. Michael L. Hanley, Mrs. Helen K. Baer, Dr. and Mrs. R. Wesley Mellow, Dr. and Mrs. Justin Corrondnier, Charlotte E. Miller, Dr. and Mrs. G. D. Royston, Mr. and Mrs. Donald E. Waldemier, Mr. John Keppler Jr., Dr. August A. Busch Jr., Mr. and Mrs. Spencer T. Olin, Mrs. William S. Bedal, Charlotte Meyer, Mr. and Mrs. Alvin Ufford, Mr. and Mrs. Edward Senturia, Dr. and Mrs. John E. Hobbis, Mrs. W. Gillespie Moore, Anne Maxwell Stupp, Mr. William O. Dewitt, Mr. and Mrs. Richard Baumbott, Mrs. Belle Cramer, Mr. Orway W. Rash III, Dr. and Mrs. Henry Schwartz, Mr. and Mrs. Herbert Wiegand, Dr. Heinz E. Haffner, Mrs. James E. Duffy III, Dr. Joseph C. Edwards, Mr. and Mrs. William G. Moore Jr., Dr. D. K. Rose, Margaret Palmer, Mr. and Mrs. James Medart, Dr. and Mrs. Clinton W. Lane.

dr. cecil m. charles; barnes and allied hospitals society.

Dr. William F. Joest, Mr. and Mrs. Frank B. Shobe, Fannie Sue Wood, Dr. Maurice J. Lonsuay Jr., Mrs. Kenneth C. Baker, Dr. and Mrs. William D. Perry, Edna Czezen, Barnes Hospital Board of Trustees and Administration, Mrs. Diehl Montgomery, Mrs. Mathel Haegel, Mr. and Mrs. Robert E. Frank, Mrs. Marie Thies, Dr. and Mrs. Robert Bartlett, Mr. and Mrs. Mallory Cassidy, Mr. Thomas N. Tucker, Mr. and Mrs. Edward L. Kuhiman, Dr. and Mrs. Ross Sommers, Mr. Milton Kuskin, Mr. and Mrs. Robert Frazer, M. A. Wimmer Carr, Mr. and Mrs. Edwin J. Spiegel Jr., Mrs. Patricia Tilley, Mr. and Mrs. Hallowell Davis, Mr. and Mrs. Charles D. Long, Mr. and Mrs. Robert N. Arthur, Mr. John Neppel Jr., Mr. and Mrs. D. Sherriffs, Mr. Nicholas P. Veeder, Dolores, Carl and Lucille Bumiller, Elinor Key, Mr. and Mrs. Edward Senturia, Mr. Forrest Hemker, Mr. and Mrs. W. Alfred Haynes, Mr. D. C. Elsasser, Mr. and Mrs. James Barck, Mr. and Mrs. William Wenzel, Dr. and Mrs. Fred Reynolds, Dr. and Mrs. John E. Hobbis, Mr. and Mrs. Calvin Smith, Dr. and Mrs. Allen H. Jahmann, Mrs. Sam Robbins, Mr. and Mrs. Ward Patterson Jr., Mr. and Mrs. Arnold Schwab, Mr. R. L. Savage, Miss Carol Wilson DePew, Mrs. and Mrs. Harry E. Bolle, Mr. and Mrs. Frank Vigus, Mr. and Mrs. Edmund Burgard, Dr. A. F. Montgomery, Mr. and Mrs. William Wischmeyer, Dr. and Mrs. James C. Sisk, Miss Evelyn Stanger, Mr. Walter Wurduck, Mr. and Mrs. William Harrell, Dr. and Mrs. T. E. Sanders, Mrs. Harry Castles, Mr. and Mrs. Charles Spaulding, Dr. and Mrs. Justin Corrondnier, Dr. and Mrs. E. B. Alvis, Mr. and Mrs. Philip Craig, Dr. and Mrs. Robert Mueller, Mr. Joe Innakai, Mr. and Mrs. Edwin Fraser, Mrs. Alvis, Alvis and Kayes, Dr. and Mrs. Henry Schwartz, Mr. and Mrs. Edward Vigus, Dr. Heinz E. Haffner, Mr. and Mrs. Sidney Weber, Mr. and Mrs. John Reinhart Jr., Mrs. Sally Gottlieb, Mr. L. Rogers Jr., Dr. Joseph C. Edwards, Dr. and Mrs. Gordon Newton, Mr. Howard Hess, Mrs. J. M. Alvey, Mrs. Lindell Gordon Jr., Dr. and Mrs. Clinton Lane, Dr. and Mrs. Earl E. Shepard.
National Health Institute Names Barnes Pathologist To Study Research Grants

Dr. Joe Wheeler Grisham, assistant pathologist at Barnes Hospital, has been appointed chairman of the Pathology A Study Section, Division of Research Grants of the National Institutes of Health, for a three-year term.

As chairman of the Pathology A Study Section, one of 46 initial research grant review groups, Dr. Grisham will preside over the study section’s meetings and act as principal scientific advisor to the study section’s executive secretary.

The Pathology A Study Section reviews applications for grants-in-aid relating to studies on pathology, pathobiology, biochemistry of disease and immunopathology. The study section is also responsible for analyzing the status of research in its field to determine areas in which research should be stimulated, expanded, or curtailed.

Dr. Grisham is a specialist in tissue culture, kinetics of cell proliferation, hepatic ribosome formation, electron microscopy, cell fractionation, audioradiography and isotope techniques.

He also directs a research program at Barnes Hospital to study liver disease, a program that was started in 1967 with a grant from the John A. Hartford Foundation, Inc., of New York City. The Foundation renewed the grant, last July, to continue the study for another three years.

In a special laboratory, Dr. Grisham and other physicians subject human liver tissue to agents which cause liver disease in man, such as hepatitis and cirrhosis.

Health Care Experiment Explained At Barnes & Allied Society Meeting

The fall meeting of Barnes and Allied Hospitals Society was held October 15, with the featured talk an explanation of the medical care group experiment now being conducted by Dr. Gerald Perkoff and a group of associated physicians.

“The Medical Care Group is an experiment in pre-payment for health care, somewhere in between the ‘fee for service’ concept and full prepayment,” Dr. Perkoff said. He explained that each of the 300 families receiving care from the group (a total of 1278 persons) have a regular hospital insurance plan. For an additional fee, paid either by their employer or jointly by employer and employee, each family also receives the services of the medical care group, which includes all their ambulatory health care.

On the staff of the group are internists, pediatricians, and obstetricians, with other doctors available on a consulting service. The group pays fees for consulting physicians, when they are referred by the group’s doctors.

Families participating in the plan are from three St. Louis firms—Monsanto, General Motors (hourly workers) and Metropolitan Life Insurance Company. The families signed up to become part of the plan, then were divided into those offered the ambulatory services, and a similar size control group who kept their basic hospital plan. All families in both groups were offered a medical exam at the beginning of the experiment.

Among the services offered families in the plan are office visits at the medical care group offices, night, weekend, home calls by group physicians, hospital visits, preventive checkups, and a number of other functions which make up basic medical care.

Dr. Perkoff said that results are not yet known, but records are being kept and findings will show if this type of payment plan is useful in the practice of medicine. “This is clearly an experiment,” he said.

Following this, a report was made by Barnes director Robert E. Frank, who told the doctors that the Barnes Hospital Board of Trustees is considering erecting a multi-story parking structure on the corner of Kingshighway and Audubon. Tentative plans for the structure include five levels of parking, and, possibly, two levels of office suites if a sufficient demand for this type of facility exists, Mr. Frank said.

He asked members of the Society who have an interest in obtaining space in such a facility to contact him.

2 Nursing Students Play 'Seedy' Joke

"Everyone has heard about bringing the teacher an apple, but a 110-pound water-melon IS RIDICULOUS!"—This is what Miss Barbara Bradshaw, assistant director of nursing education, shown at the left in the photo above, is thinking of the seedy "gift" that was placed in front of her office door by two students of the Barnes Hospital School of Nursing, Miss Debbie Dalton, center, and Miss Linda Heitman.

Once the two students decided to play the prank on Miss Bradshaw, they then obtained permission from officials at the School’s residence hall. It took Miss Heitman’s father and two other men to haul the melon, which had been grown at Advance, Missouri, into the residence hall.

The melon was pushed in front of Miss Bradshaw’s door and left overnight. The next morning, Miss Bradshaw found the melon with a note attached with a syringe. The note read: "Congratulations to the new assistant director!" The melon was a goodwill gesture by the two students, in recognition of Miss Bradshaw’s appointment as assistant director of nursing education at the School of Nursing.
Catholic Seminarians in 14-Week Orientation
At Barnes Hospital in Class-Room Sessions, Tours

Stirring a kettle of soup which will be served to hospital patients and employees, are Mrs. Margaret Mayo, assistant head cook in the kitchen at Barnes, and one of the Catholic seminarians who recently toured the medical center. The kettle holds 60 gallons.

The Rev. Robert Krawinkel, Catholic chaplain at Barnes sponsored a welcome orientation and tour for 25 second-year theologians from Kenrick Seminary. The seminarians are participating in Kenrick’s Apostolic Works Program which insures every student who is studying for the diocesan priesthood, training in vital areas of pastoral work.

The seminarians, under the supervision of Father Krawinkel, are spending two hours a week for 14 consecutive weeks at Barnes in classroom-type sessions dealing with some aspect of the priest-hospital relationship, visiting patients and taking part in discussion groups to review visiting experiences.

Classroom sessions will include talks by the Rev. Krawinkel and the Rev. John Glassey, Protestant chaplain at Barnes; Joan Hubetz, director of the School of Nursing; and Donna Granda, instructor at the School, will speak on “Patients’ Expectations of Visiting Priests” and George Dixon, director of social work, will discuss “The Priest and the Social Worker.”

Nursing School Plans to Shorten Curriculum

The Barnes Hospital School of Nursing may shorten the length of time that is normally required to complete the course of study to a nursing certificate from 33 months to only 25 months, according to an announcement made by Miss Joan Hubetz, director of the School of Nursing. The move is being made after much consideration and analysis of trends in nursing education and the need for more nurses to provide improved health care.

“Other schools of nursing have ‘streamlined’ their programs to two years, and we believe that we can improve our curriculum while shortening the length of the course,” Miss Hubetz said.

She noted that the shift to a shortened curriculum would probably necessitate the establishment of an in-service training program which would develop the manual skills of the students and the new graduates.

“We want to make it clear that we are not sacrificing quality or lowering our standards but rather changing the emphasis in certain areas of study. A curriculum committee is deciding the new standards and where the training emphasis should be. The new program should be formulated by December of this year,” Miss Hubetz said.