October is United Fund Campaign Month at Barnes

Barnes Hospital will begin its annual United Fund campaign this month with the showing of a film illustrating the United Fund’s many roles in the community. The film “Blues for Joey,” will be shown several times on October 9 and 10 in the new East Pavilion auditorium. A United Fund representative will be on hand for each showing.

This year Barnes’ goal is to raise $61,200. “Thanks to the generosity of our employees, Barnes has achieved its Fair Share goal for the past five years. We hope to maintain that performance this year,” says Dr. C. O. Vermillion, associate director for hospital services and general chairman of this year’s campaign.

The over-all goal for greater St. Louis is $13,750,000, a small increase over 1971’s goal, especially considering that the agency helps support over 100 health, welfare and child-serving agencies. And every year one out of every four persons in the area utilizes one or more United Fund supported agencies.

Each employee will receive an orange pledge card from their immediate supervisor at the beginning of the drive here. Last year 93 per cent of the hospital’s employees donated to the campaign, raising a total of some $58,000. Those who pledge their Fair Share (for most employees one hour’s pay per month for one year) will receive a lapel pin.

The co-chairmen of this year’s drive are Joyce Brueggeman and Gloria Metzger, associate directors of nursing. Other hospital personnel serving as division leaders are Robert Frank, John Warmbrodt, Joseph Greco, Susan Hackman, Robert McAuliffe, Jay Purvis, Dillon Trulove, Dr. Vermillion and Thomas Winston.

Campaign progress will be posted by division on a graph in the main dining room of the employee cafeteria.

Raymond Rowland Elected WUMC Board Chairman

Raymond E. Rowland, chairman of Barnes Hospital’s Board of Trustees, was elected chairman of the Washington University Medical Center’s board of directors on September 12. Mr. Rowland succeeds Edward R. Greensfelder, who held the position for three years.

The announcement of Mr. Rowland’s election to the post was made by Medical Center board president Dr. Samuel B. Guze, Barnes associate psychiatrist, following the annual meeting of the Medical Center directors.

Dr. Guze, who is also vice chancellor of medical affairs for Washington University, summarized the accomplishments of the Medical Center, which is composed of the hospitals and clinics in the Barnes group, plus the Central Institute for the Deaf, Children’s Hospital and Jewish Hospital.

During 1971 nearly 60,000 persons were admitted for treatment in Medical Center facilities. In addition, there were more than 200,000 clinic and emergency room visits made—or 33 per cent of the total clinic visits made in St. Louis and St. Louis county.

“Even more striking is the fact that more than half of all new patients seeking medical care in the area came to one of our institutions,” Dr. Guze said.

Workmen Return--East Pavilion To Open Soon

Work on the new East Pavilion has begun again after a halt in construction of more than a month, the result of an area-wide strike by iron workers. Several floors of the building already are completed, with the exception of a few minor details. The installation of escalators and elevators, also delayed by an earlier strike, is proceeding rapidly. It is anticipated that patients currently housed in Maternity Hospital will be moving into the new building sometime later this month—barring any further delay, of course. The building should be fully occupied by mid-winter.
United Fund: They Hope . . . You Help

Dear Employe:

More than a half-million people in the St. Louis area are hoping you help them this year as in the past by contributing your fair share to the United Fund Campaign, which is being conducted this month at Barnes. The goal for the Greater St. Louis United Fund this year is $13,750,000 and of that it is hoped we at Barnes can raise $61,200.

I am confident we can attain this goal because of the way Barnes employees have responded to the UF appeal so generously in the past. Speaking in millions or even thousands of dollars, however, does not bring the reality of the Fund home to most of us so I would like to break that down a bit into terms with which we are all more familiar. And therefore perhaps into goals we will feel we can more easily achieve.

For instance, a fair share gift of only 38¢ a week (less than the cost of one package of cigarettes) would provide three full days of home-type care for an elderly person. For only 25¢ a week two sessions of speech therapy for a child with speech impairment can be provided. This is what the United Fund is all about — it is not about the millions of dollars but rather the few cents or few dollars given by people like each of us that helps give them hope.

ROBERT E. FRANK
Director of Barnes Hospital

New director of volunteers Katie Beyer (left) gets some tips on her new job from retiring director Dorothy Kelly. Mrs. Kelly is leaving after 10½ years in the position.

Mrs. Katie Beyer New Director Of Volunteers

Mrs. Katie Beyer has joined the Barnes Hospital staff as the new director of volunteers. Mrs. Beyer, who officially took over the position on October 1, was formerly a resident of Topeka, Kansas, where she was active in the Stormont-Vail Hospital’s auxiliary.

Mrs. Beyer has been involved in volunteer work for more than 20 years and has specialized in hospital activities for the past decade.

Mrs. Beyer replaces Dorothy Kelly, who is retiring as volunteer director. “It has been a most rewarding and interesting 10½ years,” says Mrs. Kelly, who was Barnes’ first salaried volunteer director.

“I’ve witnessed the growth of the Auxiliary and the hospital and I leave with a feeling of accomplishment about what has been achieved here,” she says.
Computer, Telephone Join To Speed Processing of Electrocardiograms

Data from dozens of pre-operative and scheduled routine electrocardiograms are now being analyzed daily with the help of a computer located hundreds of miles away—under a new procedure begun here in mid-July. The system, which utilizes special ECG recording units and a telephone/computer link, greatly reduces the amount of time required to interpret the bulk of Barnes’ ECGs, says Jay Purvis, assistant director.

“The system has accelerated processing of the ECG reports tremendously. Now, almost without exception, reports are back in patients’ charts by the next day, and, often, on the same day they are taken,” says Dr. Edward Massie, Barnes associate physician, director of the heart station. This compares with significant delays encountered with the manual system.

After arriving here, the interpretation is reviewed by a cardiologist who may accept or reject the computer’s analysis. Although the computer will be correct most of the time, border-line or extremely complex cases may fall outside the bounds of its capabilities.

“Virtually everyone is highly impressed with the accuracy of the system.”

I would say that virtually everyone is highly impressed with the accuracy of the system thus far. But it is still important that the computer’s interpretation be reviewed by our cardiologists who can utilize the additional clinical information available here,” Dr. Massie stated.

The final ECG interpretation, plus a copy of the patient’s tracing, is then entered into the patient’s chart. The small, one-page format of the computerized interpretation (compared to 10 or 12 feet of ECG tracings generated by other methods) also makes the handling and storage of the record more convenient.

The battery powered ECG recorders are operated at the patient’s bedside by specially-trained technicians from the heart station. The system is being used only for pre-operative and other routinely scheduled ECGs.

“We are now able to better utilize our technicians for specialized tests.”

Mr. Purvis emphasizes. Single-channel ECG recorders are still being used in applications, such as the emergency room, that they are best suited for. Dr. Massie.

The new system has produced other benefits, according to Dr. Massie. “Automation of the heart station means that we are now able to better utilize our technicians to perform other, more specialized medical procedures, such as phonocardiograms and treadmill stress tests,” he says. But the most important aspect of the system is the speed with which essential information is made available to physicians, enabling them to provide the best care for their patients.
The United Fund helps people who can't help themselves... children, the elderly, adolescents on drugs...

Perhaps you think you won't need the United Fund. Well, wait a minute. Ever have a child in your family with a hearing or speech defect? Are any of the youngsters you know and love adopted? Ever have a neighbor with marital problems? Or know a teenager in trouble with drugs or an unwanted pregnancy?

These are the kinds of problems which United Fund agencies tackle. If you're fortunate enough not to have people close to you needing this kind of help, remember that there are youth-serving agencies for just plain healthy, happy kids—the Girl Scouts, Boy Scouts, YMCA and YWCA—where they can grow, and share, and learn the things that will make our world a better place.

Barnes is a United Fund agency. The money allocated here is used to help cover the cost of operating the clinics, where bills are determined on the basis of ability to pay. Funds at Barnes also are used to cover the bills of inpatients who are unable to pay.

It's good to be able to make one gift to cover all these agencies, knowing that each has been carefully scrutinized by the United Fund to make sure they use their contributions wisely.

When you are asked to give this month, mark your card "Fair Share." All year you'll feel better about yourself, because you gave of yourself.

UNITED FUND

Putting it all Together

Your gift this year is more important than ever before because the same inflation that has hit you also has hit the agencies served by the United Fund, while at the same time there has been an increased demand for services. Without greater Fair Share support, some agencies may be forced to run individual fund-raising campaigns. The United Fund is the most equitable way you can help. With the United Fund your gift can be divided into convenient installments. Why not stretch your budget just a little when, by doing so, you stretch a helping hand out to your neighbors.

The future looked bright last year for a 35-year-old father and his family, which included three young children. Things were going well and he had a promising career as an experimental technician. Then a freak lab explosion left him partially deaf and blind and his world threatened to crash down upon him. Through your gift to the United Fund last year you helped to rebuild his world. After vocational counseling and testing to explore new occupational avenues, this young father was referred to a training program that helped him qualify for a self-supporting job. He can again care for his family. This year's pledge can help rebuild another life—and make your life more meaningful.

Ask yourself what you would do. Suppose you were faced with a crisis such as that recently experienced by a carpenter and his wife who were shocked to find their infant son did not respond to a teddy-bear's bell. These parents immediately took their child to a United Fund clinic where a diagnosis of 95% hearing loss was made. The United Fund then provided classes in communication skills for both the baby and his parents, and will continue to offer special education programs to prepare the child to enter a school for normal children.
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Your fair share gift of 38¢ a week means four days' transportation to and from a treatment center for a child with multiple handicaps.

48¢ a week provides a full day's residential care, education and treatment for an emotionally disturbed child.

60¢ a week will mean two house calls to a bedridden patient by a visiting nurse.

88¢ a week will give five full days of rehabilitative training to an adult severely handicapped by cerebral palsy.

$1.05 a week will place a disabled, needy man in a suitable job.

$1.25 a week means an inner-city child who has no other chance to get out of the ghetto can spend 19½ days at a summer residential camp.

$1.45 a week will provide a week's domiciliary care for an elderly lady.

$1.75 a week will provide three months of physical therapy for an aged man recuperating from a stroke, heart attack or major surgery.

Information-referral Service
241-7520
You will receive immediate help in determining which United Fund agency is best equipped to supply the services needed by you or your family.
Fr. Walsh Is New Volunteer Chaplain

Fr. Lawrence B. Walsh, C.M., Ph.D., has become a volunteer associate chaplain for Barnes Hospital and will assist Fr. Robert Krawinkel, the Catholic chaplain assigned to the hospital by the Archdiocese of St. Louis.

Fr. Walsh has been associated with Cardinal Glennon College since 1939 and is currently professor of science. In addition to his seminary studies, he has degrees in chemistry and biology and received his doctorate from St. Louis University in 1948 with a major in pathology and a minor in biochemistry.

He is the author of several papers on cancer research and on the metabolism of bile acids as well as a book on mathematics for liberal arts students. He is a member of Sigma Xi, the Math Association of America, the Biological Association of America and the American Chemistry Association.

One of the first visits Fr. Walsh made at Barnes was to one of his former students, Fr. Norbert Ernst, who was recuperating from a knee operation for a torn cartilage. Fr. Ernst, who is associate pastor at St. Angela Merici Church in Florissant, was an assistant chaplain at Barnes from June, 1971 - May 1972, during his last year of school.

Dr. White’s Poetry Published

The poems of Dr. Park J. White, emeritus assistant pediatrician, have been collected and published in a book titled “Verse—and Verse.”

Dr. White has been associated with Barnes and Children’s Hospitals and Washington University since 1921.

Dr. White, 81, began writing humorous verse while still in medical school and the habit continued through his career. His verse has been published in a score of medicine-related publications through the years. Typical of Dr. White’s penchant for the pun is a blurb on the dust jacket which calls “Verse—and Verse” the relaxative doctors recommend.

Barnes Honored For Help In Blood Program

Mrs. Del McNamara, Red Cross blood program field representative, presented a certificate of appreciation to Jay Purvis, Barnes assistant director, in a brief ceremony held last month during the Red Cross bloodmobile’s visit here.

Mr. Purvis accepted the award on behalf of all Barnes employees who have participated in the blood donor program. Since its inception in October 1970, there have been six visits of the bloodmobile here during which almost 900 productive units of blood have been donated by Barnes employees.

Mrs. McNamara pointed out that although people speak of “giving blood to the Red Cross” in reality they are giving it to themselves and their neighbors because it is distributed to area hospitals at the rate of 500 units a day.

Anyone participating in the donor program is covered for all blood used by the donor and his household as well as parents and parents-in-law and grandparents and grandparents-in-law anywhere in the United States for a period of one year.

Chief Payroll Clerk Brooks Gattemeier Retires

Brooks Gattemeier, Barnes’ chief payroll clerk, was honored with a retirement party attended by his family, friends and co-workers on August 3. Mr. Gattemeier, who came to Barnes in September, 1953, officially retired on September 16. Mr. Gattemeier was presented with several going-away gifts—which he is shown opening with the help of his grandchildren—and a certificate honoring him for his years of service here.
Dr. Stein Named New Ortho Surgeon-in-Chief

Dr. Arthur H. Stein Jr., Barnes assistant surgeon, will succeed Dr. Fred C. Reynolds as Orthopedic Surgeon-in-Chief and director of the division of orthopedic surgery of the Washington University medical school, effective October 1. Dr. Reynolds will continue his practice and will remain on the medical school's faculty.

Dr. Stein received his M.D. from Washington University in 1948 and served his internship and residency (in orthopedic surgery) at Barnes Hospital. He was appointed to the medical school faculty as an instructor in orthopedic surgery in 1956. In 1958, and again in 1961, he was promoted to assistant and associate professor, respectively. Dr. Stein entered private practice in 1964 and was appointed to the clinical (part-time) faculty. He now returns to the medical school's full-time faculty.

In 1968-69, Dr. Stein served as president of the Barnes and Allied Hospitals Society. He has also been a member of the publications committee of the American Academy of Orthopedic Surgeons. Dr. Stein has written for several medical publications, and, with Dr. Reynolds, authored a chapter on their specialty for "Surgery: Principles and Practice."

- Anniversaries -

(Continued from Page 2)

Virginia Yeager Central Service
Aide
Sylvia Rajnoha Dietary
Administrative Dietician,
Clinical Instructor
Lillie Bemon Housekeeping
medical assistant
Annie Clementm Nursing Service
Senior Nurse Assistant
Audrey Cooper Nursing Service
Nurse Assistant

Dr. Arthur Stein visits one of his patients, Mrs. Louise Oldham of Centralia, Illinois. RN Joan Davvy is in the background.

Ultrasone Scanner "Sees" Pre-Natal Infants

A St. Louis couples' delight over the prospect of their first baby turned to concern, then to distress, as the young wife began to experience such severe symptoms of miscarriage that tubal pregnancy or even a tumor were feared. Because the pregnancy was in an early stage, just a week or two after the missed period, routine tests would normally fail to show exactly what was taking place inside her abdomen.

However, the use of a new technique—the ultrasonic scan—now available to Barnes physicians and their patients, revealed clearly that the gestational sac was safely attached to the uterus. The couple was assured that the bleeding was likely of a functional type that would soon stop. Their baby-to-be was not in any danger.

The ultrasonic scanner provides physicians in the field of obstetrics and gynecology with the extra vision they have long been seeking. While x-rays offer some assistance, their limitations and the danger of chromosomal damage restrict their use.

Thanks to the generosity of an anonymous donor who wished to honor Dr. Willard Allen, the hospital's former Obstetrician and Gynecologist-in-Chief, Barnes has such a device. It is the only one of its kind within a 250-mile radius of St. Louis.

The ultrasonic scanner operates on the same basic principle as naval sonar, but is much more highly refined. It is coupled with a computer that transforms the sound wave echoes into a black and white image which, to the trained observer, is as revealing as an actual peek inside the abdomen.

The procedure is quite simple for the patient. The area being examined is scanned with the ultrasound beam—usually five longitudinal and five transverse scans are done. A cross-sectional image of the tissues that the ultrasound beam "sees" is then formed on the oscilloscope and can be photographed. Each procedure takes only 10 to 15 minutes for the patient.

According to Dr. Jacques Sauvage, who works with the machine, its application in obstetrics and gynecology is almost unlimited. In contrast to x-rays, the only other way of visualizing the uterus and other female organs, the ultrasonic scan presents no danger to the mother or unborn baby and can therefore be repeated as many times as necessary at any time during pregnancy.

In addition, it shows soft organs and can even differentiate between masses such as cysts or myomas. Because of this it can show the gestational sac as early as the fifth week of pregnancy.

It can also demonstrate the structure and location of the placenta. This is of particular help in cases of placenta previa, where the placenta is near or over the cervix. In such cases manual examination can result in hemorrhage, but the scanner can show the problem precisely and can pinpoint safely when the fetus is large enough to survive an early cesarean delivery.

It allows for accurate measurement of the fetal head in event of breech presentation or suspected abnormality such as anencephaly, microencephaly or hydrocephaly. In the first two instances, the baby is severely deformed and has no chance of survival after birth, therefore early detection with the ultrasonic machine allows for termination of pregnancy. In cases of hydrocephalus (water on the brain) the severity and the chance of survival for the baby can be ascertained.

This ability to accurately measure the fetal skull and gestation time is also helpful in the management of pregnancies in women with complications such as diabetes and Rh problems. When the uterus is enlarged far more than ordinarily expected, the machine can show if the cause is a multiple pregnancy or an abnormality or a serious complication that should be treated. Early detection of molar pregnancies, ectopic pregnancies and fetal death are also possible.

In gynecology, the machine can be used to detect and differentiate between benign ovarian cysts, malignant tumors, and uterine fibroids as well as to identify inflammatory disease.

Dr. Sauvage does the ultrasonic scanning as a diagnostic aid at the request of a resident or private physician. This is usually when the baby is not growing properly, when there is uterine bleeding or when a question exists as to whether the pregnancy is normal or molar, and frequently when multiple pregnancies are suspected. (Differentiation between identical and nonidentical twins is easily made.)

Dr. Sauvage predicted the ultrasonic scan, because it is both inexpensive and safe, will become a routine part of every pregnant woman's prenatal care in the not-too-distant future.
Auxiliary To Hold Annual Workshop

The Barnes Hospital Auxiliary will hold its sixth annual workshop on Thursday, October 26, at Kirkwood United Methodist Church, 201 West Adams. The program, which will last from 9:30 a.m. until 2:00 p.m., will include guest speakers in the morning and workshops in the afternoon.

Dr. Walter F. Ballinger, Barnes Surgeon-in-Chief, will address the group on the role of Barnes volunteers as seen by the medical staff. Barnes chaplain Robert Davis will also address the auxilians on their role as members of the total health care team.

After lunch the group will be divided up to attend workshops, including question and answer periods, concerning the various areas served by the auxilians.

August Gifts To Hospital Tribute Fund

Following is a list of honorees (names in bold-face) and contributors to the Barnes Hospital Tribute Fund during August, 1972.

In Memory of:
Walter Darlington
Mr. and Mrs. Robert Dahlin
Emma A. Prott
Mrs. Elda Simpson
Mr. and Mrs. W. D. Simpson
Stuart H. Smith
Mary Francis Gleson
Shari Jean Croupen
Audrey and Stanley Kolker

Mrs. Marie Metzger
Becky and the Beckwith Family

Mrs. Grace Porter
Mr. and Mrs. Fred Tilley
Bob and Joyce Rutherford
Alice Marshall
Joseph T. Greco
Anna Katzman
Mr. and Mrs. Ben Roman Jr.

Mrs. Vivian Clark
Pat Berryman

Mrs. Loretta Baldas
Pat Berryman
The Tower Restaurant Personnel

Mrs. Hermine Trailes
Mrs. Alice Marshall
Mrs. Patricia Tilley
Mrs. Joyce B. Rutherford
Mrs. Gen George

Barnes Hospital Administration
Barnes Hospital Auxiliary
Mrs. Audrey Kolker

Mrs. Anna M. Willbrand
Mrs. Dorothy Kelly
Barnes Nearby New Shop
Mrs. Beulah E. Hill
John and Winifred Wolff
Esther M. Thym
Mr. and Mrs. Alexander Jones
Mr. and Mrs. Floyd W. Wilcox
Mr. and Mrs. I. W. Kurtz Jr.
Mr. and Mrs. John B. McBride
Betsey and John Reinhart
Mrs. Galen E. Adams

Mrs. B. W. Tremayne
L. Hardin Lindsey
Dorothy and Harold Hansen
Mr. and Mrs. J. M. Pierce
Mrs. James Messer Jr.

Mr. and Mrs. R. A. Davis
Mr. and Mrs. A. W. Willett Jr.
Mr. R. L. Rogers
Mrs. Wm. H. Gray
Peter Hauptmann Co.
Phoebe Ann and Myron Dorn
Jean and Ray Droste
Nancy and Jim Erfinger
Cap and Lynn Willbrand

Carl V. Moore, M.D.
Mr. and Mrs. Darwin Portman
The Jos. J. Reilly Family
Mr. and Mrs. John L. Davidson Jr.
Hallowell and Florence E. Davis

Mrs. Harold E. Thayer
Richmond C. Coburn
Mr. and Mrs. John L. Davidson Jr.

Mrs. H. Albert Young
Mr. and Mrs. John L. Davidson Jr.

Grace Gupton Vogt
Mary and Paul Gleson

In Honor of:
Mr. Orrin J. Johnson
Mr. Tom Zinzer

Barnes Hospital Staff
Opal Glandt

Volunteers (Barnes)
Mrs. Annabelle E. Houston
Anonymous

In Appreciation of:
Wonderful care given to Mrs. Emma Prott
Helene Krummack