1200 Renovation is completed, underground garage on schedule

Renovation of the former 1200 ward area to house ever-expanding medical records, one of three major projects which have been underway at Barnes Hospital, has been completed and medical records is now centralized in Rand Johnson building along the main hospital corridor.

Two other projects, construction of the 1200-space underground garage and the demolition of the number four building, are on schedule and the garage is scheduled for completion in mid-September, according to Tom Winston, associate director.

Moving of more than 100,000 medical records, each containing the medical history and record of treatment of a patient, were moved to the renovated area on the south side of the corridor in early July and all transferring of materials was completed later in the month. Medical records previously had been located in separate areas in the old Barnes building and in Barnard Hospital.

The nursing office also has been located to a remodeled area on the north side of the corridor, directly across from the Rand Johnson elevators. The new office provides space for the centralizing of nursing services offices, an area for nursing orderlies and a classroom. The area was occupied in April.

A new lounge for doctors, replacing one in the former Barnes building, also is completed and is located near medical records to enable physicians to have quick access to records of their patients. The entire corridor, from Queeny Tower to the Barnard Corridor has been re-carpeted.

Mr. Winston said that the underground garage is scheduled to be open by mid-September and that relandscaping the park should be completed by December, weather permitting. All parking areas in the garage are underground and are connected by understreet walkways to the East Pavilion. Another subsurface walkway will connect the garage to the West Pavilion when that building is constructed.

The land above the garage will be completely landscaped with more than 120 trees, bushes and grass. In addition, the hospital is constructing six tennis courts, areas for other athletic activities, a children's playground, walkways and a comfort station on the surface. "Relandscaping will provide a valuable asset to St. Louis residents, employees, patients and visitors to the medical center," Mr. Winston said.

Mr. Winston said that the new garage will have extensive security measures including hospital security guards. An extensive closed circuit television system is being considered for the building which is comprised of three levels below surface. The garage was built following extensive review and approval of the St. Louis Board of Aldermen and Mayor John Poelker.

Demolition of the number four building is nearing completion and construction of an $8 million service facility, to be built in the same area, will begin later this year. Completion is scheduled for 1977 and the building is to be named for the late Mr. and Mrs. Henry W. Peters, Barnes benefactors.

The building will provide new and expanded facilities for the Barnes diagnostic laboratories, data processing, social work, dietetic nursing, doctors' and administrative offices.

Students graduate from School of Nursing

Eighty-two Barnes School of Nursing students participated in graduation exercises August 2, at the school's 19th commencement. Maureen Byrnes of the education division of Barnes nursing service gave the graduation address in St. Louis Cathedral to the graduates, their families and friends.

Ms. Byrnes spoke of the challenges facing nursing today and urged the graduates to make a commitment to improve nursing practice.

Barbara Bradshaw, director of the school, welcomed those attending the ceremonies and congratulated the students who recently completed the 24-month curriculum. Miss Bradshaw presented Barnes pins to the graduates, approximately half of whom will join the hospital's nursing service.

Hospital President Robert E. Frank presented diplomas to the 76 women and six men. He said the school is a primary source of Barnes nurses and welcomed those joining the Barnes staff as new employees of the hospital.

The class was presented by assistant director of the School of Nursing, Charlotte Spengel.
James McDaniel, Gray Summit; Gerri Neubauer, Jennifer Filla, William Poepsel, Joyce Spaun
Ste. Genevieve; Nancy Henderson, Jackson; horst, Lynn Tobben, Washington; Victoria Heil,
Fine, President of the Barnes School of Nursing School of Nursing . . .

Also Patricia Conley, Kirkland Air Force Base,
Ann Hartzog, Murphysboro; Catherine Isom,
Brady, Mattoon; Susan Ehlers, Donna Miller,
mes, Collinsville; Carol Pfaff, Alton; Cindy
Hasenstab, Jo Ann Jenkins, Belleville; Elaine Her-
City; Theresa Friess, Scott Air Force Base; Mary
Skrobul and Rita Westermann, Shipman.

Students participating in the ceremonies were:
Tremayne, president of the Barnes Auxiliary, presented two Auxiliary awards to outstanding
Tremayne holds the Ph.D. degree from the Uni-
school's faculty council. She has auth-
summer. 
Dr. Ternberg, Barnes pediatric surgeon-in-chief,
was praised at the luncheon for her pioneering
efforts in the field of pediatric surgery and as a
woman surgeon. She was the first woman surgi-
cal resident at Barnes, the first female surgeon on
medical resident. She was the first female surgi-
clinic pharmacy as a pharmacy aide. She retired
in 1971, at age 75, but returned to volunteer her
services in the pharmacy until about a year ago,
working one day each week.

When the aide left, Miss Math was asked to take the job. She was reluctant but
"they asked me to give it a try, so I did. After I
knew what I was doing, I liked it a lot," she said
in a 1972 interview.

Junior volunteers
invited to game

Baseball and hotdogs will be the bill of fare Aug.
22 when Barnes Junior Volunteers are honored for their contributions to the hospital. The Barnes
Auxiliary will sponsor the combination awards presentation and baseball game in cooperation with the St. Louis Cardinals.

Mrs. Doris Smith, chairman of the junior volun-
teer program, announced that junior volunteers and their parents have been invited to Busch Sta-
dium for the 6 p.m. awards presentation to the approximately 200 teenage volunteers who have served in many areas of the hospital throughout the summer.

Talks will be presented about some areas where junior volunteers have worked and a hospital ad-
ministrator will extend the hospital's apprecia-
tion. The Auxiliary is also providing a free hot
dog and soda to the guests. The Cardinals will
play the Atlanta Braves.

New Doctors’ Lounge Open

A new doctor’s lounge in Rand Johnson replaces smaller lounge near employe cafeteria.
Dietetic patient education program planned

Few of us stop to think about it, but changing life-long eating habits is just about impossible. We associate our likes and dislikes with our earliest family experiences—eating is a very personal thing.

When illness causes these long-cherished habits to be changed, many people are emotionally upset. They fear that one of the basic pleasures in their life will be destroyed. To learn a whole new way of cooking and eating takes time and experimentation. No one can, in five or ten minutes, convince a person that such changes must be made; and no one can change his eating habits by reading a group of mimeographed lists of foods to avoid.

This is a problem which confronts hospital dietitians daily. To help resolve it, plans are being made to develop a dietetic patient education program.

The new program includes a revised diet manual, providing new and more interesting material on nutrition to patients, offering new nutrition classes and an increased effort to arrange follow-up care by means of referrals to dietitians in and out of the hospital.

The new diet manual, which should be available by late summer, is being developed with the assistance of Barnes physicians, and has been updated in terms of the kinds of diets people need. It utilized the latest research into metabolism and nutritional requirements.

The department has received a small grant from Mead Johnson Co. to fund a patient education library of nutrition-oriented books and materials. The grant will allow the hospital to offer cookbooks for sale to the public. However, the hospital will not make any money on the cookbooks, Kathy McClusky, director of educational and clinical dietetics, explained. "This project is being implemented solely to benefit patients who we think will find the books useful in preparing foods for their special dietary problems."

The kind of instruction patients receive in the hospital is very important. Patients need attractive and thorough written material adapted to their individual lifestyles and eating habits. "We are taking advantage of new, colorful nutrition guides which we hope will hold the person's interest," Mrs. McClusky said. The department is also developing some of its own material.

Another major thrust of the new program will be increased follow-up after discharge. Especially in the area of eating habits, patients think of many questions when they return home. The educational facilities of the nutrition clinic will be used for follow-up, as well as better utilization of referrals to outside agencies.

There are also in-service education classes planned for clinical dietitians to increase their teaching skills. "Instead of having a dietitian talk to patients, they want to talk with patients," Mrs. McClusky said. "We are emphasizing an educationally oriented approach, adjusting each diet to the individual's eating habits. We'll try to accommodate the patient as much as possible, and keeping his favorite foods is important!"

Nutritional counseling involves compiling a history of the person's eating habits and having the patient keep a record of what he eats. "By keeping records, the patients, too, are more aware of what they are eating and they learn nutrition more rapidly," Mrs. McClusky said. Additional sessions with a dietitian are helpful in aiding the patient in quest of the goal of eating proper foods. Julie Scheel, teaching dietitian, is planning to offer nutrition classes for in-patients in the future.

The problem is that most people, especially in the hospital, are "experts" when it comes to food. "Unfortunately," Mrs. McClusky adds, "We often need to change beliefs as well as habits, and to do this requires a whole educational system, not just a 30-minute talk when the patient is being discharged."

School of Nursing changes curriculum

Curriculum revisions resulting from a nationwide change in dates on which state nurse license tests are given have been announced by Barbara Bradshaw, director of the Barnes Hospital School of Nursing. Effective with the class entering the school this fall, the school will operate on a 29-month curriculum program.

Previously, state examinations for persons seeking their registered nurse (R.N.) license were given as many as four times each year in Missouri. Recently, the Council of State Boards of the American Nurses Association voted to require states to give the examination only twice during the year, in February and July.

"Under the 24-month curriculum, our students would have had to wait six months after completion of school before they could take the State Board exams and this would be unfair to them," Miss Bradshaw said.

"The usual "weigh-in" in the nutrition clinic is conducted by Donna LaRock, left, head nutritionist in the clinic, and Margaret Dam, a dietetic intern.

Curriculum changes will involve expanding on existing elements in the current program and will include approximately 12 more weeks of clinical experience for the students. In addition, students will enjoy more vacation breaks. "When we changed to the 24-month program in 1972 from the 33-month program, we found that we became more efficient in our teaching approaches and, although the 24-month program was intense, it worked well.

"If the decision by the Council of State Boards had not been made, the program would have remained with the 24-months," Miss Bradshaw said. "We looked at other alternatives but felt that the 29-month curriculum was our best option at this time. The major advantage will be in the increased amount of experience for the students."

Miss Bradshaw said that all students entering the school this fall have been contacted regarding the change and that the response has been positive.

Program begins to increase number of donor organs

A pilot program at Barnes Hospital and Washington University School of Medicine is aimed at increasing the number of potential donors of human organs for transplantation and to reduce the time span between organ procurement and transplantation.

Dr. Charles Anderson, Barnes surgeon, is coordinating the implementation of "Lifeline" which will utilize Barnes’ computer facilities to compile a listing of persons who indicate that some or all of their organs can be used for transplantation. A base group for the listing will be drawn from persons from the medical center complex and Washington University.

Currently, one of the major problems involved in organ donation and procurement is the amount of time required following a donor’s death until the organ can be transplanted. "Our biggest problem now, outside of getting enough donors, is the amount of time to get consent papers signed, type the various tissues and then search our waiting lists for the best possible match," Dr. Anderson said.

"With the aid of the Lifeline program and the computer facilities, we will be able to do part of this work after a person decides to be an organ donor. The time we save through this and through the computer assistance is precious time. It may make the difference between a successful and rejected transplant."

Lifeline is a two-year program of recruitment and education which, Dr. Anderson hopes, will spread into a nationwide network. Dr. Edward Etheredge, a surgeon and authority on transplantation immunology has recently joined the Barnes staff to head the program.

Names of donors willing to make heart, kidney, eyes, skin, pancreas or other organs available at the time of death will be fed into the computer. Also, selected donors will undergo tests to provide blood and tissue types and other information required before a transplant can take place. This may decrease the chance of rejection by the recipient and saves time. "A kidney for example," Dr. Anderson said, "must be taken within one hour after death. For other organs, the time may be longer or even shorter."

Nurse specialists will be trained as part of the Lifeline program. They will be alert to the continuing problem of obtaining sufficient organs for transplant, will work with families at the time of an impending death, will notify physicians about the donor’s wishes and will facilitate hospital procedures.

"Lifeline is an effort to solve our biggest problem, a sufficient number of cadaver donors. The scales are unbalanced with many more patients needing transplantation on the waiting list and a relatively small number of donors on the other," Dr. Anderson said.

Hospital happenings

John Keppel Jr., manager of patient accounts, has been elected first vice president of the International Society of Certified Consumer Credit Executives. Election came during the organization’s 14th annual meeting, held in Portland, Ore. Keppel is president of district seven of the association.

Lloyd Peck, superintendent in plant engineering, received his 30-year pin at the recent service awards dinner held at the Chase-Park Plaza.
Evaluation: An Endless

Barnes continues evaluating procedures in patient care

"The customer is always right" is the governing law of business and the recent interest in consumer rights and consumer legislation has affected all areas of commerce, even hospitals. Barnes Hospital has been at the forefront of providing concentrated and effective care to its patients, of attempting to provide patients with information designed to make their hospitalization easier and attempting to evaluate the quality of care which patients receive.

The Barnes patient is a customer, purchasing the facilities where medical care is provided by a doctor, aided by nursing personnel and a multitude of other workers. And the patient wants to know what will be happening to him.

Barnes attempts to provide patients with needed information. On admission, patients receive a brochure, "Information for Patients," which details hospital procedures and explains to the patient what he or she may expect during their hospitalization. Another information program, initiated by operating room nursing personnel, is a preoperative and post-operative visiting program to familiarize surgical patients with what to expect prior to, during and following surgical procedures.

The hospital also has distributed information on the "Patients' Bill of Rights," drawn up by the American Hospital Association (AHA) in an effort to acquaint both patients and medical personnel with attitudes and procedures the AHA believes are basic in management of the care of each hospital patient.

Susan Kingston, associate director of the hospital and director of the nursing service, said that the hospital always has the interest of the patient as its primary concern. "Our obligation is to the patient," she said. "We are charged with the responsibility of providing services to carry out the physicians' plan and give the patient the type of care which will return them to health."

For several years the nursing service has performed bedside audits in an effort of self-evaluation of the quality of nursing care. The audits are reviewed by nurse administrators and changes made to correct any deficiencies which may be found.

Barnes also has a long-standing policy of distributing a questionnaire to patients, asking them to candidly evaluate the care and service which they received during hospitalization. Those responding may elect not to sign the questionnaires, which are sent on a random basis. Recently questionnaires have been sent periodically to the last 1,000 patients discharged. They are returned by mail.

The results have been gratifying, indicating that most patients are pleased with their hospitalization and pointing out areas which the patients feel could be improved.
... most patients are pleased with their hospitalization ...

Returns show that 97 per cent of the patients felt they were courteously received by the admitting office and more than 90 per cent said their admission was efficiently handled. Approximately 94 per cent said their room was clean and in good repair.

Eighty-three per cent of the returns indicated patients were pleased with the food they were served. The figure is generally considered acceptable because a large number of patients have little or no appetite while they are ill and hospitalized.

**Effort**

(Individualized tastes are difficult to please where an average of more than 3,000 patient meals are served daily.)

In general, considering care provided by medical personnel and services by other hospital employees, 95.9 per cent of those responding to the questionnaire felt they had received good care at Barnes Hospital.

Some of the typical reactions of patients who were pleased with their hospitalization included, "I couldn't say anything but something good about the services at Barnes Hospital!" "... nursing staff and floor personnel ... everything and everybody was 'super,' " "The head nurse, very special ... went out of her way to help and made the stay much easier. She demonstrates concern and is very responsive to the patient's needs." The number of good comments about the hospital greatly outweighed the negative comments.

Still there were complaints and it is the complaints which have hospital staff hard at work to correct. One item of complaint which currently is under review is in the area of patient rest. Questionnaire returns indicate that 28 per cent of the patients experienced something which disturbed their rest.

The committee is reviewing current practices with an eye to recommendations which would encourage most tests and procedures be done during normal waking hours. "Of course we are not going to change procedures which are necessary to the appropriate patient care," Mrs. Kingston said, "but there appear to be some areas where a relatively minor change in procedure might make a lot of difference to our patients."

Cards have been placed in rooms asking patients not to use the television later than 10:30 unless both patients wish to watch. A reminder of the limit on smoking is published regularly in a news capsule which patients receive with their lunch each day.

Another area of minor complaint, not particularly related to rest, was the feeling by approximately 3 per cent of those responding to the questionnaire, that telephone service could be improved. In December, the existing PBX switchboard will be eliminated and patient phones converted to the Centrex system now in use for non-patient phones. The change is expected to mean fewer busy signals and other improvements in telephone service to patients.

Many comments made, either positive or negative, concerned hospital personnel. It is the work of the admitting officer, the nurse, the housekeeper, the dietician, the patient accounts worker—of all employees—that makes Barnes a good hospital. It is hard work, coupled with a smiling attitude, which results in comments such as, "If I should have to be hospitalized at Barnes again, I would go with confidence."
Ceremonies held to dedicate window

The large stained-glass window along the corridor in Barnard Hospital has been dedicated to a long-time member of that hospital's board of directors. The window was dedicated July 22 to Mrs. Thomas M. Sayman, a member of the board from 1949 until her death in 1974.

Participating in ceremonies unveiling a plaque beside the window were Mrs. Sayman's daughter, Lady Dojean Smithers, and Ethan A. H. Shepley, Jr., president of the Barnard board of directors. Also participating were Lady Smithers' husband, Sir Peter Smithers; their daughter, Amelia; and Mrs. Sayman's long-time secretary, Mrs. Lottie Noonan. The Smithers live in Switzerland.

The window, created by Emil Frei, a St. Louis artist, was installed when Barnard Hospital was built in 1954. The window was originally backlit by sunlight and now has quartz lighting. The Barnes cafeteria is located on the east side of the window.

Mrs. Sayman was active in many civic activities and was a member of the Advertising Women's Club of St. Louis which has made numerous contributions to the hospital. Barnard is governed by a board of directors and contracts with Barnes Hospital for management. The hospital is located between Wohl Hospital and the former Barnes Hospital building.

Intern views chaplain training as beneficial

The chaplain intern program is viewed as very beneficial by Paul Abernathy, one of six interns who are completing the 10-week training program Aug. 8.

"The intern program has been very helpful because it causes us to be introspective, to examine ourselves, about our roles to see if we are meeting the needs of the patients," Mr. Abernathy said.

David Wyatt, Barnes chaplain supervisor, said that in the program students at area seminaries spend about one-half of their time with patients and the other half in education seminars or meetings. "The purpose of the program is to engulf the interns in human relationships so they can move toward thinking of themselves as pastors," Mr. Wyatt said. "The emphasis is on how a person functions as a pastor to someone in need."

The interns are Mr. Abernathy, General Theological Seminary; Donald Matthies and Donald Scherling, Seminex; and Kenneth Reiter, David Biebening, Thomas Zoelzer, Eden Seminary.

All patient visits are supervised by Mr. Wyatt and meetings are held to discuss the visits and the student's reaction to each. In addition, professionals from throughout the medical center are invited to speak to the interns to further the intern's knowledge of medicine and patient problems.

"I think it is important that a chaplain know about the diseases which afflict persons," Pastor Wyatt said. "It helps to know something about the diagnosis when we visit a patient."

The interns talked with medical personnel, spent time in operating room areas and talked extensively with nursing personnel.

"We learned a lot about medicine from the nurses on the various floors," Mr. Abernathy said. "And I learned a lot about myself. I wasn't too enthusiastic when we began the intern program, but I am now. I think it should be available to every seminary student. It's quite an experience."

Tribute Fund

The following is a list of honorees (names in boldface) and contributors to the Barnes Hospital Tribute Fund from June 20 to July 22, 1975.

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IN CONTINUING MEMORY OF:

Mrs. William S. Bedal

IN HONOR OF:

Dr. William Landau's Father
Carlynn H. Wohl
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The following is a list of recent contributors to the Patient Care Fund of Barnes Hospital:

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Associate Editor

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Memorial Endowment Fund

The following is a list of recent contributors to the Memorial Endowment Fund at Barnes Hospital:

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Doctor's notes

Dr. William H. Daughaday, Barnes physician, has received the Fred Conrad Koch Medal, the high honor from the Endocrine Society. Dr. Daughaday, who also received an honorarium of $3,500, is the first St. Louisan to receive the award since Nobel Prize winners Carl F. and Gerty T. Cori in 1947.

Dr. Joseph Ogura, Barnes otolaryngologist-in-chief, is serving as president-elect of the American Laryngological, Rhinological and Otological Society, Inc. (the Triological Society). He will become president in 1976 and preside over the annual meeting in Boston in 1977. Recently, Dr. Ogura completed a term as president of the American Laryngological Association.

Dr. H. Mitchell Perry, Barnes physician and director of the hypertension division at Washington University School of Medicine, spoke on “Vasodilators in Hypertension” at a meeting in Indianapolis, Ind., on high blood pressure.

Nurse students receive scholarships

School of Nursing students Margaret Shelley of St. John and Ann Imboden of Bellefontaine Neighbors, first year students, received $300 scholarship checks sent by school director Barbara Bradshaw, left, and

Barnes employs urged to give blood

A large number of Barnes employees are expected to donate blood Sept. 2 as part of the Barnes blood donor program. The Red Cross Bloodmobile will be at Barnes for two shifts, and will be in operation from 10 a.m. to 8 p.m.

The purpose of the longer hours for the next bloodmobile is to provide additional opportunities for Barnes employees to donate blood toward the hospital's goal of 677 units. A total of 63 units of blood were donated June 30 to bring this year's total to 277.

Bill Davis, coordinator of the blood program at Barnes, said that 89 persons presented themselves for blood donation including 25 first-time donors. He said 25 persons were deferred. Reasons for deferrals include low iron count in the potential donor's blood, low weight (less than 110 pounds), too soon after ear piercing (must wait six months), and where the potential donor is currently taking antibiotics for infection.

The Sept. 2 Bloodmobile will be held in Room 228 in the Nurses' residence and employees wishing to donate blood can make arrangements through their supervisor. Reaching the goal will assure Barnes employees of blood for themselves and their immediate families.

Indiana hospital selects former Barnes resident

Harvey M. Yorke, who completed his residency in health administration at Barnes Hospital in 1972 has been named an assistant director of Deaconess Hospital in Evansville, Ind.

Mr. Yorke had previously been assistant administrator at Mercy Hospital in Denver, Col., and is a member of the American College of Hospital Administrators. He holds a master's degree in health administration from Washington University School of Medicine.

Mr. Yorke and his wife have one son and are expecting a second child.

Leon Cecil, admission director. The scholarships were donated by the St. Louis County chapter of Zonta International.
Hospital food costs were much lower in 1919

The year was 1919. That was when Barnes Hospital served a total of 143,796 meals, including "patients, officers, nurses, employes and guests."

For the sake of comparison, in 1974 there were 1,984,393 meals served here. The 1919 figures are part of a "subsistence supply" report which Mrs. Doris Canada, director of dietetics, recently located in her files.

The old document contained many other interesting statistics, which may explain why everyone has a nostalgic story about how much grandmother's hospital stay cost when she had her appendix out in the roaring 20's. (Or the other standard cost story: How much it cost for mother's hospitalization when you were born.)

The 1919 report drew one final conclusion: It cost 46 cents a day to feed one patient, employe or nurse at Barnes that year.

Walter Schatz, purchasing agent, provided a few recent cost figures to help put the 1919 groceries in perspective. The cost for bacon and ham in 1919 was 33 cents a pound. This year's average cost for bacon is $1.29. (Barnes has spent a total of $21,406 to date this year on bacon alone.) Beef was 19 cents a pound 56 years ago; today it averages $1.53.

Sugar cost ten cents a pound in 1919, and Mr. Schatz is pleased that it is now down to 22.4 cents a pound. It was 59 cents a pound earlier this spring. One interesting sidelight is that the price of eggs in 1919 was 48 cents a dozen, the same price Barnes now pays. Potatoes, however, were a little over a penny a pound then, now they cost 13 cents a pound.

Chicken was a real luxury item in 1919, it cost $.29 a pound, a third again as much as beef and twice as much as fish. (Until recently it was possible to purchase chicken at that cost because modern poultry husbandry has made possible more efficient production of chickens and other fowl.)

"It would be great if we could get food at that cost," said Walter Schatz. But who would want their salary to be back at the 1919 scale?

Doctors' notes

Dr. David Goldring, Barnes pediatrician, has been elected to a seven-year term as secretary-treasurer of the American Pediatrics Society which works for advancement and study of children and their diseases and promotes pediatric education and research.

Dr. Lewis Thomas, Jr., Barnes anesthesiologist, has been named director of the Biomedical Computer Laboratory at Washington University School of Medicine. Dr. Thomas is a graduate of the school and has been a member of the Barnes staff since 1962. He was involved in the development of the advanced computer system for patient monitoring in the cardiothoracic intensive care unit at Barnes.