Auxiliaries to hear malpractice discussion

A panel discussion on "Malpractice—Its Cost and Effect" will be a featured part of the annual luncheon meeting of the Barnes Hospital Auxiliary April 29 at the University Club at Brentwood Blvd. The meeting will begin at 11:15 a.m. with lunch scheduled for noon.

Panel participants will be Dr. Richard Bradley, Barnes surgeon and past president of the St. Louis Medical Society; Robert McAuliffe, vice president of Barnes; and Wilburn Duncan, a St. Louis attorney.

In addition to the panel discussion, scheduled activities include election of officers for 1976-77 and a slide presentation "Volunteering at Barnes," produced by the hospital's communications department. The meeting is being coordinated by Mrs. Burton Wenneker and Mrs. John Bachman.

Nursing service sponsors seminar on law and nurses

A panel discussion featuring Barnes personnel was a highlight of a day-long conference March 3 on "Law and Nurses." The conference was sponsored by the education division of the hospital's nursing service.

Approximately 150 persons attended the conference and asked panel members questions relating to legal issues of the day. Ninety of the participants were from outside the St. Louis area.

Panel members were Maureen Byrnes, associate director for quality assurance; Susan Kingston, director of nursing; Jay Purvis, associate director for professional services; and Patricia Nagel, general counsel for Deaconess Hospital.

Rusty Moore, assistant director of nursing, gave the welcome for the conference coordinated by Mary O'Brien, an instructor in the education division. Members of the planning committee were La Frances Cockrell, associate director of nursing; Don Hawf, a psychiatric staff nurse; Beth Schmid, R.N.; Ruth Snyder, an instructor in the education division; and Judy Taylor, staff nurse in the operating rooms.

Objectives of the conference were to review basic legal concepts in the health care professions; to provide information on current legal decisions and implications affecting decision making; and to allow the participants to question legal and hospital representatives. A major part of the discussion centered around the newly enacted Nurse Practice Act in the state.

Physician registry is operational

An electronic physician registry, designed to enable messages to be delivered to physicians more accurately and more quickly, was put into operation at Barnes March 22.

The registry, utilizing a new name board and other telephone and switching equipment in the telecommunications office, is expected to facilitate the locating of doctors and also cut down on use of the hospital's paging system. Physicians entering the hospital now dial into the system using an access code and a personal digital code. This enables the doctor to "sign in" and receive any messages.

Both attending staff and house staff doctors have been assigned personal codes which are used in the system. The numbers have been published in a directory distributed to physicians, administrative and nursing personnel. In addition, wallet-sized cards, carrying instructions and the individual code numbers, have been distributed to physicians.

The physician reverses the procedure when leaving, calling the access code and personal number and one additional number to inform the registry he is out. At this point the system will inform the physician of any additional messages.

The system is enabling physicians to get messages more frequently and more accurately than was possible with the old system. Paging operators had been handling approximately 1500 pages each day.

"We are very pleased with the response from physicians to the new system," said George Voyles, director of telecommunications. "Of course with any new system there are a few problems we had to work out but now we believe that most everyone is pleased with the registry operation."

ARCH approves plan for West Pavilion

The board of directors of the Alliance for Regional Community Health (ARCH) has given approval to Barnes Hospital plans to construct a patient care facility to be known as the West Pavilion.

The ARCH action came following approval from two of the organization's committees. Approval also must be obtained from the Office of Comprehensive Health Planning of the State of Missouri before work can begin. West Pavilion plans include inpatient beds but the hospital's approved bed number of approximately 1200 will not be increased.

In addition to patient care floors, the facility is expected to contain doctors offices, operating room facilities, administrative offices, some radiology services and facilities for other support departments.

Construction could begin by late summer on the building which will be connected to the existing East Pavilion completed in 1972. The West Pavilion will be constructed in front of the Rand Johnson building. A covered walkway will extend from the west edge of the new structure to Queeny Tower.
New director named for hospital pharmacy

Wallace "Scotty" Slater, a pioneer in developing the unit-dose system of medication distribution, has been named director of the hospital pharmacy according to an announcement by Barnes President Robert E. Frank. He succeeds Mrs. Florence Mueller who retired late last year.

Mr. Slater has authored many articles for professional journals and has participated in several nationwide seminars on unit packaging of pharmacy services at Charles F. Kettering Memorial Hospital in Kettering, Ohio. He also has served in hospital pharmacies in Memphis, Tenn.; Madison, Tenn.; Fort Hood, Tex.; and Hialeah, Fla.

Mr. Slater holds a B.S. degree from Samford University in Birmingham, Ala., and has done post-graduate work at the University of Tennessee—Memphis.

Mr. Slater has authored many articles for professional journals and has participated in several nationwide seminars on unit packaging of pharmaceuticals and unit dose drug distribution systems. He also has been active in professional organizations and served on numerous committees and councils of the American Society of Hospital Pharmacists. He is a member of the American Society of Hospital Pharmacists, the American Pharmaceutical Association and past president of the Ohio Society of Hospital Pharmacists.

Mr. Slater and his wife, Thelma, have one daughter, Linda.

Veteran groundkeeper retires from staff

Elvis Tyson, a groundkeeper at Barnes for almost 16 years, retired March 19. He was presented with a Certificate of Appreciation by hospital President Robert E. Frank.

Mr. Tyson, a native of Southeast Missouri, was employed at Barnes May 23, 1960, and was a groundkeeper during his entire employment. "I love being outside and working with flowers and lawns," Mr. Tyson said. "I have really enjoyed being a Barnes employee."

Born on a farm near Doniphan, Mo., Mr. Tyson worked for several years in the "small arms" factory in St. Louis until the plant was closed. He and his wife plan to travel during his retirement, visiting relatives and friends. He also has a garden at his home and plans to keep busy there during the warm weather.

Dr. Guze authors book on criminality

Dr. Samuel Guze, Barnes' psychiatrist-in-chief and vice chancellor for medical affairs at Washington University, is the author of Criminality and Psychiatric Disorders published recently by Oxford University Press.

Dr. Guze studied 223 men and 66 women, all convicted of felonies, in an effort to determine if potential criminals can be identified and, if so, whether or not criminality can be prevented. The study was begun in 1959.

Ophthalmologist is honored

Dr. Morton Smith, Barnes' ophthalmologist, was honored by Washington University during recent Founders Day ceremonies held at the Chase-Park Plaza. Dr. Smith was among five university faculty members honored for exhibiting intellectual imagination and commitment to teaching. NBC News correspondent David Brinkley spoke during the ceremonies.

Seminar held on atherosclerosis

Three Barnes doctors spoke during a two-day seminar in late March on the subject of atherosclerosis. The seminar was sponsored by the medical center's Lipid Research Center.

Speakers and topics included: Dr. Phillip Majerus, "The Role of Anti-Platelet Drugs"; Dr. Joseph Witztum, "The Diagnosis and Treatment of Hyperlipoproteinemia"; and Dr. Jon Cooksey, "The Role of Exercise in Coronary Prevention and Coronary Rehabilitation."
School of Nursing adds audio-visual aids

An audio-visual learning laboratory, utilizing narrated slide presentations, filmstrips and video-tape, has been added to the facilities of Barnes School of Nursing.

Barbara Bradshaw, director of the school, said that the new learning aids are part of the school’s emphasis on individual learning and provide greater flexibility in covering curriculum topics. “This is the first year we have been able to work this type of learning into our curriculum and it is fitting in well with our study plans,” said Miss Bradshaw.

Located next to library facilities, the audio-visual laboratory has been in use since last fall and is composed of 17 individual study carrels each fitted with audio-visual aids and earphones for sound control. Students may utilize slide projectors, film strip projectors, audio-tape cassettes and videotape cassettes which are played on television receivers. Money to fund the center came through a federal grant.

Approximately 90 percent of the laboratory’s 80 programs have been obtained from commercial firms which produce materials for nursing education. However, the remaining ten percent has been produced by instructors in the school and this percentage is expected to increase.

Maxine Scheibe, coordinator of instructional resources at the school, said that facilities and equipment have been acquired to prepare videotape and slide programs. Instructors will be involved in preparing programs tailored to Barnes. Mrs. Scheibe and Sandra Lindquist, an instructor, work with the faculty in preparing the programs. “We feel the new facilities can contribute to increased student learning because they can use the laboratory when they want, when it will work into their schedule,” Mrs. Scheibe said.

“One of the real values in this system is that it doesn’t tie up every student at the same time,” Mrs. Scheibe said. “We recognize that students learn better when they are working at their own pace, whatever that may be. The new laboratory can help provide better correlation between classroom and clinical experience. ‘What we are now trying to do is prepare more of our own programs, tailored specifically for the needs of our program,’ said Mrs. Scheibe.

The lessons available include such topics as the administering of medications, basic measurements, respiratory care, maternal care, psychiatry and the care of the newborn.

The laboratory actually serves as an extension of the school’s library. Rosemary Buhr, who holds a master’s degree in library science, has been librarian since October, 1972. Mrs. Buhr and Mrs. Scheibe have responsibility for organizing the laboratory.

“Under Mrs. Buhr’s direction, I feel the library is the finest nursing library in the area and that the addition of the audio-visual laboratory represents expansion in the quality and variety of learning resources available to students,” Miss Bradshaw said.

The school has a total of 190 students on first and second year levels. Approximately one-half of the graduates of the school join the staff of the nursing service at Barnes Hospital.

Researcher gives lecture

Dr. Richard McDermott, an immunologist and gastroenterologist at Walter Reed Army Institute of Research, presented a lecture on “The Isolation and Functional Characterization of Human Lymphocyte Sub-Populations” March 17 at Barnes. The lecture was sponsored by the gastroenterology division.

Maureen Byrnes named acting nursing director; succeeds Sue Kingston

Maureen Byrnes, associate director of nursing for quality assurance, has been named acting director of the Barnes nursing service according to an announcement by Barnes President Robert E. Frank. She succeeds Susan Kingston, vice-president of Barnes and director of nursing, who is moving with her family to Memphis, Tenn.

Miss Byrnes, a staff member at Barnes since 1973, will assume her new duties in April.

A native of St. Louis, Miss Byrnes holds the B.S. degree in nursing from Marillac College and the M.S. degree in nursing from the University of Colorado. She currently is enrolled in a Ph.D. program in health organizations at St. Louis University.

She was a nurse practitioner at Charity Hospital in New Orleans, La., prior to joining the Barnes staff in 1973 as an instructor in the School of Nursing. She was named assistant director of nursing and director of the education division of the nursing service in 1974 and was named associate director for quality assurance in 1975.

Mrs. Kingston, director of nursing since 1971, resigned the position to accompany her husband who has been transferred to Memphis. Mrs. Kingston had joined the nursing staff at Barnes in 1959 and had served as a staff nurse, head nurse, nurse supervisor, assistant director of nursing and associate director of nursing.

In making the announcement Mr. Frank said, “We regret that Barnes is losing Mrs. Kingston; she will be missed and our best wishes go with her. However, I am sure that Miss Byrnes will capably provide effective leadership in this most important area.”
Have you ever had that feeling, perhaps when you were younger, that you were going to choke on a piece of food? If you have, you probably remember a moment of panic and your mother’s words echoing in your ear, “Now chew your food carefully.”

People do choke on their food. Each year approximately 4,000 deaths are attributed to food asphyxiation, choking on food. If food is left in the air passages, it can lead to serious medical problems, including respiratory distress, choking, and even death.

Quick action is necessary to save the life of the choking victim. Death can occur when the person has been without oxygen for anywhere from three to six minutes and brain damage can occur in even less time.

Dr. C. Ronald Stephen, anesthesiologist-in-chief at Barnes, says that aid can be administered in several ways. “The important thing is to act as quickly as possible,” Dr. Stephen said. “If someone is eating and suddenly falls over, ask the person if they can speak. If they can, they are not choking. If not, the rescuer can assume the victim is choking and should try to extract the food from the throat by using the fingers. This is effective if the food is lodged above the larynx.”

Dr. Stephen cautions that when someone is choking, it may be difficult or even dangerous to try to remove the food with the fingers. “Many people advocate using a spoon or stick to hold the mouth open while the fingers are probing for the food. Just as with a drowning person, the victim may try to fight off the person trying to help.”

Choking has been diagnosed as a “cafe coronary”

Many states, including California, Rhode Island and Massachusetts, have enacted laws requiring restaurants to have devices to extract food from the throat of choking diners. The most common is a pair of tweezer-type forceps which are slid down the tongue to the obstruction. Another is an extractor which relies on creation of a vacuum to allow the food to be expelled.

Dr. Stephen said that while the plastic tweezers could be effective in some cases, they may be misused by untrained personnel, damaging the larynx or even pushing the food deeper into the windpipe.

One highly publicized way of removing food is the “Heimlich Maneuver.” Dr. Henry J. Heimlich, of Cincinnati’s Jewish Hospital, developed the technique which utilizes residual air in the lungs to force the food from the windpipe. (See accompanying illustrations and instructions.)
The Heimlich Maneuver

```
A St. Louis newspaper recently reported the case of a woman choking on food at a suburban restaurant. A waiter at the restaurant, who had been taught the Heimlich technique, successfully removed an obstructing particle of food. The waiter discounted any heroics saying that once he knew how to perform the maneuver, the rest was simple.

Dr. Stephen says the Heimlich technique makes sense. "The important thing to remember is that some action must be taken immediately or the choking person will likely die. You don't have time to call an ambulance or get the person to a hospital," he said.

"There is a potential danger of injuring internal organs if the maneuver is performed with too much force or by someone not properly trained in the technique. However, when the alternative is almost certain death, the chance must be taken."

A pioneering study ten years ago by Dr. Roger Haugen of Holy Cross Hospital in Fort Lauderdale, Fla., indicated that dinner-table deaths usually are caused by choking on large pieces of meat, not, as was commonly supposed, by heart attacks. Dr. Haugen's study indicates that perhaps 90 percent of the deaths "could have been avoided by immediate, on-the-scene removal of the obstructing piece of meat."

Life-saving methods themselves may be dangerous

Dr. Haugen attributed the cause of choking to poorly chewed food sometimes caused by ill-fitting dentures and also to, in some cases, the influence of alcohol.

Dr. Stephen said that a more traditional method can be used when a child chokes on food. "The best method is to grab the child, turn him upside down and strike him vigorously between the shoulder blades. The blow will cause air to be expelled and this technique has the added advantage of using gravity."

Some additional help may be necessary after the food has been dislodged. If the victim is not breathing, artificial respiration should begin immediately and continue until the person is breathing on his own. If the food is dislodged soon after the victim chokes, most persons will return to normal breathing without artificial respiration.

```
With the victim lying on his back, kneel astride the hips facing him.

With one hand on top of the other, place the heel of your bottom hand on the abdomen slightly above his navel and below the rib cage.

Press forcefully into the abdomen with a quick upward thrust, repeating if necessary.

Demonstrating the Heimlich Maneuver are Lena Thompson and LaMont Estes of respiratory therapy.

With the victim standing or sitting, stand behind and wrap your arms around the waist.

Make a fist with one hand and grab it with the other.

Place your fist above the navel, below the rib cage and press it forcefully into the abdomen with a quick upward thrust. Repeat if necessary.

Demonstrating the Heimlich Maneuver has been praised by some medical experts and questioned by others. Research is still being conducted to determine whether or not it should be included among routine first-aid training courses. Dr. Heimlich cites numerous letters he has received from persons who say the technique has been successfully used to either save their life or that of others.
```
Urology division concentrating on patient care, research

The new director of the medical center's division of urology has his sights set on making the department one of the nation's leaders in the treatment of patients with urologic disorders and in the research to prevent the disorders before they occur.

Dr. William Fair, urologic surgeon-in-chief at Barnes, joined the staff last summer. He had been with the urology division at Stanford University for 11 years and is carrying through here with much of the research that was begun in California.

"We have a lot of potential here," Dr. Fair said. "We have excellent staff people to provide the needed patient care whether it be in the hospital or as an outpatient. And we are developing a strong staff of interns and residents who also will be involved in patient care and research."

Recent changes in the division have included the renovation of facilities, located on the second floor of Wohl Hospital. The remodeling is designed to provide more patient care areas, laboratory space and research units.

Currently nine urology residents are serving with staff physicians caring for outpatients in the clinics and hospitalized patients. The new laboratory facilities enable urology personnel to provide outpatients with urinalysis, bacteriology analysis and x-ray facilities including fluoroscopy and cine studies, motion picture-type x-rays.

Dr. Fair said the changes have enabled the department to meet the needs of increasing numbers of patients, including those formerly seen in a urology clinic at Children's Hospital. (The clinic has been moved to Wohl Hospital.) "Of course the patient is our primary concern and we hope that our research will enable physicians here and elsewhere to more fully understand the complicated urology problems."

An estimated five to ten percent of all hospital admissions are for urologic disorders. "We overlap a great deal with other medical and surgical specialties," Dr. Fair said.

Dr. Fair has a main research interest in urinary tract infections which are eight and ten times more common in women than men and it is estimated that 25 percent of all women have a history of urinary tract infection at some time, the second most often diagnosed type of infection, exceeded only by the common cold. Urinary tract infections can lead to problems involving the kidney and can result in serious complications.

Cancer of the prostate in males is being explored by the Barnes urology division through a grant from the National Institutes of Health. A report on the study was recently made. The prostate is a major source of problems, especially when men reach later years, and research in treatment of benign hypertrophy is currently underway.

Prostatic cancer is the second leading cause of death due to cancer, ranking only behind lung cancer and slightly ahead of cancer of the colon.

"If a man lives long enough, he will ultimately develop prostatic cancer but the important thing to remember is that most men die with it, not of it," said Dr. Fair. "It would be extremely important to determine why some prostatic cancers spread rapidly while others grow very slowly, if at all." He and his associates in the urology division department are attempting to develop a urine test which would indicate the presence of prostate cancer.

Dr. Fair serves on the Scientific Advisory Board of the National Kidney Foundation.

Work continues on new number four building

Workmen continue work on a new service building to replace the former number four building. The building, to be completed next year, will be named in honor of the late Mr. and Mrs. Henry W. Peters, hospital benefactors.

Audrey Douglas

Savings bond awarded for poster winner

A poster urging employees to concentrate on safety has won a $25 U.S. Savings Bond for its creator, Audrey Douglas, a unit clerk on the third floor of Renard Hospital. The bond was presented by hospital President Robert E. Frank during a luncheon meeting in Queeny Tower.

Mrs. Douglas' poster won over four other entries in the annual safety poster competition sponsored by the safety committee of the Barnes nursing service. The winning poster was designed as a puzzle and carried the message "Carelessness may be hazardous to your life; employe safety."

"I was on vacation when I was called and asked to come to the meeting," Mrs. Douglas said. "I am just shocked. I didn't think there was any way I would win."

Other contestants were Violet Moore, RN, 10100; Georgia Grier, receptionist, 5 Wohl Clinic; Joan Karvinen, officer of the day, nursing office; and Evelyn Ivey, unit clerk, 10200.
Tribute Fund

The following is a list of honorees (names in boldface) and contributors to the Barnes Hospital Tribute Fund from Feb. 23 to Mar. 23, 1976.

IN MEMORY OF:
Mr. F. M. O'Brien
Mr. and Mrs. L. L. Watson
Albert F. Bender
Mrs. Jerome A. Combs
Ernest E. Earley
Mr. and Mrs. Roy Murphy
Mr. and Mrs. K. Bauridl
Mr. and Mrs. L. Schilling
Mr. and Mrs. Joe Horne mann
Mr. and Mrs. Al Horne mann
Mr. and Mrs. Forrest Moschner
Mr. and Mrs. Robert Borgers
Mr. and Mrs. Carl Emerling
Mr. Ted Crece lius
Mr. Fred Bender
Miss Terry Mueller
Mr. and Mrs. Gene Mueller
Louis Marconi
Felix Corradini
Mrs. Lurline Holland
Mrs. William M. James
Dr. John Rendleman
Mr. and Mrs. Spencer Allen
John K. Fischel
Mr. and Mrs. Charles E. Claggett
Mrs. Fred W. Gardner
Mr. and Mrs. Charles E. Claggett
Lillian Sheldon
Mr. and Mrs. Charles E. Claggett
Mrs. Bessie Henderson Lashly
Mr. C. D. DePew, Jr.

IN HONOR OF:
Chapel Flower Fund
Mary M. Hildreth
Recovery of Mrs. Henry G. Schwartz
Mrs. William S. Bedal
Recovery of Mrs. Barbara Taylor
Mr. and Mrs. Arnold Schwab
Dorothy C. Hess (Cancer Research)
Mr. and Mrs. Malcolm Klearman

Shaffer Lecture presented
Dr. Efraim Racker, New York biochemist, presented the 19th annual Shaffer Lecture March 11. He spoke on "Ion Transport in Normal and Tumor Cells." Dr. Racker is Albert Einstein Professor of biochemistry, molecular and cell biology at Cornell University in Ithaca, N.Y.

Locks and keys pose special problems for security, maintenance

Lloyd Peek and Richard Mansfield won't pick a lock. But the chances are they have keys to unlock many problems.

Mr. Peek of plant engineering and Capt. Mansfield of security have major responsibilities for all maintenance and security problems for doors and cabinets throughout the hospital. "No we probably won't be able to pick a lock for someone who has been locked out of an office or room, but we will have a key in security that will fit the lock," said Mr. Peek.

The problem is not a small one. While most individuals have maybe a dozen keys in a pocket or purse, the total number of locks and keys needed in the hospital is overwhelming. The new service building, now under construction, will have 296 separate doors which will accept certain keys. Mr. Peek sets up keying systems containing various degrees of coded entry.

"When you multiply the quantity of doors, locks and keys in the new building by the total number of floors and doors in the complex, it gets pretty tough. On top of that, we have several different types of locks and keys in use and when older ones wear out, we have to replace them with new models, creating a real jigsaw pattern," Mr. Peek said.

He added that a current problem is the unavailability of replacement hardware. "For a while we were unable to get replacement cylinders to fit locks on medication closets. We have had to develop a new system to take care of this because such close supervision is required. This sort of problem really keeps us hopping."

Other problems faced by maintenance personnel include a limited availability of blanks, necessary to make new keys; older desks and cabinets seldom have keys to fit desk locks; and the increasing costs of hardware. Complete lock hardware for a door now will cost up to $75 and a lock cylinder has risen in cost to up to $6.50 per cylinder.

Some newer parts of the hospital utilize locks which permit new keys to be made "by the numbers" instead of using an older key as a pattern. "If someone loses a key from this system, all we have to do is look up the number and we are able to cut a new key," said Mr. Peek.

Security also has problems with locks and keys. When someone locks himself out of a room or office, or when they lose a key, security responds. Capt. Mansfield said that security officers have access to master keys and are able to unlock doors within minutes. "When a key has been lost, security's work only begins when the door is unlocked. If a key is lost, we must determine whether or not a change in locks is necessary for that area, determine who has access, and what equipment or materials are kept there."

The security department screens requests for keys and changing lock cylinders. This is done to make sure that new locks are needed and that any keys are issued to the proper hospital personnel. "This procedure makes some persons angry with us because it takes time," Capt. Mansfield said, "but it is necessary if we are to have the proper control over our facilities."

Many keys are reported lost each year and many keys are turned into the lost-and-found collection box in security. If keys turned in can be identified, they are returned. Most, however, have no markings to facilitate identification. "We ask, and it is hospital policy, that all lost keys be reported," Capt. Mansfield said.

"We don't scold an employee for reporting a lost key; employees help us do a better job in making sure that the hospital continues to be a safe place for patients to be treated and for employees to work."
Recent graduates of the Barnes School of Nurse Anesthesia are, front row, from left, Lesley Puricelli, Gloria Reese, Evelyn McEvoy, Mildred Van Noy, Jan Loesing and Louise Grove, instructor in the school. Back row, from left, Rex Waggoner, Perry Wells, Glenn Cook, Walter McDonald, Douglas Cheatham and Mike Brown.

Perkoff elected Fellow

Dr. Gerald Perkoff, Barnes physician, has been selected as a Fellow at the Center for Advanced Study in the Behavioral Sciences at Stanford University in California. The appointment is for a ten-month period beginning Sept. 1.

Two join medical staff

The President's office reports the following doctors on staff: Dr. Thomas Pavlovic, assistant physician, effective Feb. 1; and Dr. Aly Razek, assistant radiologist, effective May 1, 1976.

Epilepsy meeting held

Dr. Sidney Goldring, neurologic surgeon-in-chief at Barnes, was a featured speaker at a two-day conference, "Current Concepts of Epilepsy: The Child and the Adult," held recently at St. Louis University.